

Report on an announced inspection of

HMP Isle of Wight

4–15 October 2010

by HM Chief Inspector of Prisons

Crown copyright 2011

Printed and published by:
Her Majesty's Inspectorate of Prisons
1st Floor, Ashley House
Monck Street
London SW1P 2BQ
England

Contents

Introduction	5
Fact page	7
Healthy prison summary	9
1 Arrival in custody	
<hr/>	
Courts, escorts and transfers	23
First days in custody	24
2 Environment and relationships	
<hr/>	
Residential units	29
Staff-prisoner relationships	32
Personal officers	33
3 Duty of care	
<hr/>	
Bullying and violence reduction	35
Self-harm and suicide	40
Applications and complaints	44
Legal rights	46
Faith and religious activity	47
Substance use	48
4 Diversity	
<hr/>	
Diversity	53
Race equality	55
Religion	56
Foreign nationals	56
Disability and older prisoners	59
Sexual orientation	62
5 Health services	
<hr/>	
General	63
Clinical governance	64
Primary care	66
Pharmacy	69
Dentistry	71
Inpatient care	73
Secondary care	75
Mental health	76

6	Activities	
	Learning and skills and work activities	79
	Physical education and health promotion	85
	Time out of cell	86
7	Good order	
	Security and rules	89
	Discipline	92
	Incentives and earned privileges	98
8	Services	
	Catering	101
	Prison shop	103
9	Resettlement	
	Strategic management of resettlement	105
	Offender management and planning	106
	Resettlement pathways	110
10	Recommendations, housekeeping points and good practice	119

Appendices

I	Inspection team	138
II	Prison population profile	139
III	Summary of prisoner questionnaires and interviews	
	(a) Parkhurst	146
	(b) Albany	163
	(c) Camp Hill	182

Introduction

In 2009, largely in the search for efficiencies, the Prison Service ambitiously clustered the three Isle of Wight prisons under a single governor. Each site is a significant challenge in its own right and each has been criticised by us previously: Parkhurst is a category B prison with a chequered history, also holding a few local remand prisoners; Albany is a category B prison holding mainly sex offenders; and Camp Hill is a category C training prison. So amalgamating such disparate prisons was fraught with risk, not least that managers would be distracted by the upheaval from delivering the fundamental improvements that we have frequently called for in the past. It is to the considerable credit of the senior management team that this full announced inspection found at least some progress.

Prisoners reported improvements in safety at both Parkhurst and Albany but a deterioration at Camp Hill, where illegal drugs appeared endemic and, in consequence, too many prisoners sought sanctuary in the segregation unit. Conversely, both Parkhurst and Albany had taken steps to reduce their disproportionate use of segregation. Parkhurst had also safely integrated its regime, mixing vulnerable and ordinary prisoners. Overall, suicide and self-harm prevention issues were generally well managed. Use of force across the prison remained high, not all of it apparently justified, and we were particularly concerned by a number of examples of inappropriate use of special accommodation.

Accommodation was generally satisfactory, with the glaring exception of Albany's poorly functioning automatic night sanitation arrangements, which remained unacceptable and degrading. There had been considerable management efforts to improve staff prisoner relationships, with notable progress at Parkhurst, but the quality of personal officer schemes remained variable. The management of diversity issues also varied markedly. Faith services were good. Primary health care was in need of urgent improvement but mental health services were good.

Time out of cell and levels of purposeful activity varied. Overall, there was not enough education, training and work to keep prisoners purposefully occupied, too many prisoners were unemployed and not enough focus was placed on vocational qualifications. It was particularly unsatisfactory that we found a quarter of prisoners locked in their cells during the core day at Camp Hill, despite its avowed training role. Moreover, the quality of learning and skills at Camp Hill was inadequate, although better at Parkhurst and good at Albany. Access to library facilities varied, but PE had improved with clustering.

Resettlement and offender management remained underdeveloped across the prison, despite some excellent offending behaviour programmes, especially at Albany. The management of public protection issues was generally good, but work with indeterminate sentenced prisoners varied and was particularly underdeveloped at Camp Hill. There were some good, basic reintegration services but there was considerable scope for further improvement, particularly to develop arrangements to maintain contact with families and friends.

HMP Isle of Wight is, in many ways, the sum of its three disparate parts: Parkhurst, Albany and Camp Hill prisons. However, the single senior management team has worked hard to combat the many frailties and unique – and sometimes negative – cultures of the three sites, and has had some success. Thus Parkhurst, which was the subject of coruscating previous criticism from the Inspectorate, has demonstrated considerable improvements in terms of safety and decency. There has also been some improvement at Albany. By contrast, Camp Hill appears to have slipped off the management's radar and has deteriorated significantly in terms of both safety and its core training function.

This inconsistent progress exemplifies the challenges facing HMP Isle of Wight: it is now a huge prison, with a large number of inherited weaknesses. Some of these have been addressed but many more remain. Moreover, on the final day of the inspection the prison's governor, who had been with the cluster since its inception, announced his resignation to join the private sector. This has left an enormous prison with a huge, unfinished agenda for change facing a difficult economic future under new leadership. The National Offender Management Service will need to ensure that HMP Isle of Wight and its managers are well supported if the progress we found, albeit inconsistent, is to be sustained and the many remaining issues addressed.

Nick Hardwick
HM Chief Inspector of Prisons

January 2011

Fact page

Task of the establishment

HMP Isle of Wight is a category B male training prison.

Parkhurst: holds category B prisoners and a small number of unconvicted adult male prisoners awaiting trial at courts on the Isle of Wight.

Albany: holds category B prisoners.

Camp Hill: holds category C prisoners within the establishment.

Prison status

Publicly-owned

Region

South East

Number held

Parkhurst: 522

Albany: 568

Camp Hill: 581

Certified normal accommodation

Parkhurst: 475

Albany: 567

Camp Hill: 521

Operational capacity

Parkhurst: 536

Albany: 567

Camp Hill: 595

Date of last full inspection

Parkhurst: 8–12 December 2008

Albany: 12–16 November 2007

Camp Hill: 9–13 February 2009

Brief history

HMP Isle of Wight was opened April 2009; it was formed by the clustering of three former establishments (HMP Albany, HMP Camp Hill and HMP Parkhurst).

Parkhurst: Originally a military hospital, Parkhurst became a prison in 1863 holding young male prisoners. Temporarily a female prison, it returned to holding male prisoners. In 1968 it became one of the first dispersal prisons for maximum security prisoners. Later it was designated a category B training prison. In 2010 it integrated its population and now holds vulnerable prisoners/sex offenders and ordinary prisoners in mixed units.

Albany: Occupies the site of a former military barracks on the outskirts of Newport, Isle of Wight, and was designed and built as a category C training prison in the early 1960s. Security was subsequently upgraded, and from 1970 to 1992 Albany was part of the dispersal system. It then changed to its present role as a category B training prison with an integrated population of vulnerable/sex offenders and mainstream prisoners.

Camp Hill: Was built in 1912 using prisoner labour from HMP Parkhurst. Additional accommodation was built in 1972 and 2003, and the prison has completed a refurbishment programme of residential units.

Short description of residential units

Parkhurst: Eight residential units, seven of which are Victorian-style galleried units and the eighth a small former health care unit. There is also a recently refurbished segregation and reintegration unit in a former special secure unit.

Albany: Five original residential accommodation units (A to E wings), identical in design and located off one main corridor. Each wing contains four floors, each with three spurs of eight cells. The first floor had only two spurs of prisoner living accommodation (with a total of 16 cells), as the third spur was for staff offices. A modern unit (F and G wings) opened in May 2003 and housed up to 80 prisoners. During 2010 a new health care facility opened, replacing the former unit in Parkhurst.

Camp Hill: Nine residential units, ranging from Victorian-style galleried units to single-corridor buildings. St Patrick's and St David's wings are, respectively, the first night centre and foreign national wing, St Andrew's wing holds prisoners who are less able to cope, and St Stephen's wing is a non-cell unit that holds enhanced status prisoners.

Escort contractors

G4S

Reliance

Health service commissioner and providers

NHS Isle of Wight

Learning and skills providers

The Manchester College

Tribal

Healthy prison summary

Introduction

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:

Safety	prisoners, even the most vulnerable, are held safely
Respect	prisoners are treated with respect for their human dignity
Purposeful activity	prisoners are able, and expected, to engage in activity that is likely to benefit them
Resettlement	prisoners are prepared for their release into the community and 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

HP3 Safety at Parkhurst had been greatly improved since our last visit. At Albany we observed important improvements but progress at Camp Hill was less evident. The

management of prisoners' early days was good in Albany and satisfactory in Camp Hill but first night and induction arrangements in Parkhurst required improvement. Prisoners generally felt safe, although in our survey¹ more negative perceptions were reported, particularly from prisoners of a minority background. Levels of violence were not excessive in any site, and the integration of prisoners at Parkhurst had been well managed. The Phoenix unit provided good support for prisoners with vulnerabilities. A significant number of prisoners at Camp Hill had sought protection and there was a lack of focus on identified risks. Self-harm procedures were generally satisfactory. There had been an encouraging reduction in the size of segregation units. Use of force was not excessive but the application of force and use of special accommodation was not always justified. We were concerned at serious drug use in Camp Hill. Outcomes for prisoners against this healthy prison test were assessed as reasonably good at Parkhurst and Albany but not sufficiently good at Camp Hill.

- HP4 Some prisoners experienced long journeys without toilet breaks, although refreshments were provided. Prisoners told us, and staff confirmed, that they had only been informed they were being sent to the Isle of Wight on the day of transfer. Prisoners reported that escort vans were clean but uncomfortable. Prisoners received no safety briefing on evacuation from secure vehicles during the ferry crossing despite raising concerns with escort staff.
- HP5 Reception facilities in all sites were welcoming and clean, with adequately equipped holding rooms. Prisoners said that reception staff were courteous and made them feel at ease upon arrival, and were well assisted by prisoner orderlies. Prisoners arriving and leaving Camp Hill on transfer were inappropriately strip-searched at the front desk. Prisoners were strip-searched even on supervised inter-site transfers, which was disproportionate. Cell sharing risk assessment interviews took place at the front desk in both Parkhurst and Camp Hill, and there was no discrete area for the reception health screening at Albany.
- HP6 First night processes commenced in reception at all three sites and continued on the induction wings. Records of first night interviews and inductions examined at Parkhurst and Camp Hill were incomplete. First night cells in Albany and Camp Hill were well maintained and very well equipped. The cells for new prisoners on F wing in Parkhurst were in a poor state of repair and dirty. The personal issue of a new mattress to arrivals at Albany was welcome.
- HP7 Induction processes differed across the three sites with only Albany being able to evidence that all new arrivals had completed induction before transfer to other wings. All three sites had well-equipped classrooms for induction, and prisoner representatives and orderlies were usefully engaged in the delivery of sessions. The first night/induction unit at Parkhurst doubled as a remand wing and was also used to

¹ **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.)

hold prisoners post-segregation pending onward transfer. Both issues undermined the delivery of induction. One prisoner had been held inappropriately post-segregation on F wing since May 2010. There were no management checks of induction processes at Parkhurst.

- HP8 There was a detailed user-friendly violence reduction strategy, applied across all sites, which had well-attended monthly safer custody meetings, including prisoner representatives. Violence reduction coordinators collated comprehensive monitoring data that allowed for the identification of trends. There was a three-stage violence reduction monitoring scheme for identified bullies, but staff training was limited and there were shortcomings in the application of the procedure. There were no formal interventions beyond monitoring to challenge persistent bullies or support victims.
- HP9 Prisoners at Parkhurst told us repeatedly that they felt safety had improved. Safer custody meetings focused on key issues, including maintaining the successful integration of vulnerable prisoners. Reported violent incidents had increased, partly due to improved monitoring. At Albany, many prisoners said they had been victimised by staff and prisoners. Minority groups had particularly negative perceptions of safety. The reported level of physical violence at Albany was low but bullying for prescribed medication was a concern. Prisoner representatives and violence reduction orderlies were used positively and actively. At Camp Hill, prisoners surveyed reported feeling safer than at the previous inspection, although the work of safer custody and security was not sufficiently cohesive. Trends in violence reduction data were monitored but minutes of safer custody meetings did not indicate robust scrutiny. Prisoners suggested that incidents at Camp Hill took place without staff's knowledge, and some said they would deal with bullying and intimidation themselves rather than report it to staff. Some victims of bullying felt unsupported.
- HP10 The integration of vulnerable and general population prisoners at Parkhurst had been well planned and managed. The Phoenix unit provided a safe and caring environment. Vulnerable prisoners had been integrated at Albany for some time with no evident problems. At Camp Hill, many prisoners continued to request protection in their own interests, and there appeared to be no clear strategy for understanding and responding to the reasons for these requests. Vulnerable prisoners who required additional support had been located on St Andrew's wing but its role lacked clarity and we were troubled that prisoners on open bullying monitoring logs were located there.
- HP11 Governance structures for the prevention of suicide and self-harm were well established but the prison's policy document needed to focus more on prisoner care. Safer custody meetings were attended by prisoner Listeners and minutes showed a good analysis of issues. Assessment, care in custody and teamwork (ACCT) self-harm monitoring files had been standardised across the three sites and included good information guides for staff. There was a family and friends reporting telephone line at each site, but response times were very poor. Case reviews across the prison explored issues but health care staff attendance was limited.
- HP12 At Parkhurst, access to Listeners was reasonable, but there were only four of them and those we spoke to said they felt undervalued, particularly by night staff. Documentation was generally completed to a good standard and prisoners at Parkhurst indicated that staff supported them. At Albany, ACCT documentation was generally good. Prisoners in crisis were given good support from staff and there were sufficient Listeners, who contributed to first night procedures. There was a suitable

crisis suite on E wing but it was not an overnight facility and was fitted inappropriately with CCTV. ACCT documentation was of mixed quality at Camp Hill. A Listener in reception saw all new arrivals, and Listeners generally felt supported by staff. The site had a Listener crisis suite, safer cell and a care and intervention suite but they were rarely used. Since the last inspection there had been three deaths in custody at Parkhurst, 11 at Albany and three at Camp Hill; all but four appeared to have been due to natural causes. Appropriate action plans had been drawn up following the completion of investigations.

- HP13 Security was not overly restrictive on the three sites, although there was excessive use of handcuffs on escorts and in the grounds of Albany. There were some restrictive practices in the application of closed visits in Camp Hill. Risk assessment for access to activity in Parkhurst and Camp Hill needed to improve and be expedited. Security information across all three sites was well managed. Weaknesses in perimeter security at Camp Hill had not been addressed since our last inspection, and neither had identified concerns over safety in particular areas during morning free flow. There were separate security committee meetings at each site but staff from safer custody did not attend, although violence reduction and self-harm issues were discussed. There was a more strategic monthly meeting of security managers from all three sites, but these were not minuted.
- HP14 There had been progress in reducing the number of prisoners segregated across the prison and the observation unit at Albany had been closed. However, some of this reduction had been achieved by housing increased numbers of cleaners in units which left them with an inappropriate regime and was not a satisfactory long term solution. Segregation units were properly administered and multidisciplinary reviews carried out on time. Targets were basic and did not always address the reasons for segregation. There was no formal reintegration policy in any unit although prisoners were reintroduced to normal location. We were not, however, assured of the status and management of prisoners 'segregated' on normal wings at Camp Hill. Some delays in communicating the results of security and safer custody investigations resulted in a few prisoners being held in segregation longer than might have been necessary.
- HP15 The regime in all the segregation units was limited, although prisoners could go to religious services and offending behaviour programmes off the units. Prisoners had to apply for showers, telephone calls and exercise, and in Parkhurst had to choose between exercise and a shower at weekends. Exercise yards were austere and one yard at Parkhurst was flooded. The use of the dirty protest cell in Albany for those not on dirty protests should cease. Staff-prisoner relationships across the three units were respectful and staff knew the prisoners in their care, although this was not always reflected in written records.
- HP16 Adjudications were sound although standardisation meetings and analysis were underdeveloped. Adjudication records at Camp Hill were unsatisfactory and often did not show that there had been a full investigation into the circumstances. There was no evidence of enquiries into suspected bullying and no assurance that safer custody issues were followed up.
- HP17 Use of force had reduced at Albany since our last inspection, slightly increased at Parkhurst and was about the same at Camp Hill. There was some evidence of use of de-escalation across the sites but there were also examples where we were not assured force was necessary and/or properly recorded. Planned use of force was

rarely videoed and the videos we viewed were poor quality. One incident evidenced an excessive use of force with provocative language towards the prisoner. Use and quality of special accommodation across all three sites was a concern and required immediate review. Examples included use of special cells for prisoners who were self-harming, decisions to locate overnight being made in the afternoon, and one man who was left naked in the cell.

HP18 The integrated drug treatment system (IDTS) went live in Camp Hill on 15 September 2010 and was on target to go live in Albany in November and in Parkhurst in December. There were already very good levels of integration between clinical and psychosocial services. In Parkhurst, the random mandatory drug testing (MDT) rate had reduced slightly since our last inspection. Despite low MDT random test results in Albany, we were told prescription drugs, not routinely detected by MDT, were regularly diverted and abused. The recent Camp Hill MDT rates had varied between a concerning 16.6% and 23%. The site did not routinely consider details of confirmed MDT test results, and the extent of dangerous poly-drug use among the most chaotic users was not fully appreciated. Suspicion drug testing was poor across the prison.

Respect

HP19 The prison was generally clean but the night sanitation arrangements at Albany continued to be unacceptable. The prison council initiative was positive and there was good use of prisoner representatives. The incentives and earned privileges scheme operated consistently across the prison. Staff-prisoner relationships at Parkhurst had improved significantly. Staff at Albany were overly concerned about 'conditioning'. Relationships at Camp Hill were generally positive. The operation of the personal officer scheme varied across the sites. Food was served too early and often cold. Diversity provision varied widely across the prison; it was reasonable at Parkhurst, poor at Albany but good at Camp Hill. Provision for foreign nationals was reasonable at Camp Hill but poor at Parkhurst and Albany. The chaplaincy teams were well integrated. Complaints and applications were generally well handled across the prison but procedures to respond to confidential complaints required improvement. Primary health provision required urgent attention. Mental health provision was good. Outcomes for prisoners against this healthy prison test were not sufficiently good at Parkhurst and Albany and reasonably good at Camp Hill.

HP20 Communal areas across the three sites were generally clean and bright. Outside areas were clean and well maintained, but exercise yards at Parkhurst were austere. Despite some graffiti at Parkhurst and Camp Hill, cells were generally clean and reasonably well maintained but many across the three sites lacked curtains and where there were in-cell toilets these were often dirty and inadequately screened. The night sanitation system on A to E wings at Albany was unacceptable. Access to showers, clean kit, cleaning materials and laundry facilities across the prison was reasonably good. The screening, cleanliness and decorative state of showers across the prison were often inadequate. Provision of telephones on some wings was insufficient and many lacked privacy. The offensive display policy was over-complicated and applied inconsistently. In our survey, prisoners reported difficulty in accessing stored property.

HP21 In our survey, prisoners across the three sites responded more positively than the comparators when asked if staff treated them with respect. In Parkhurst, engagement

between staff and prisoners was respectful and prisoners were overwhelmingly positive about staff on their units and recognised an improvement. At Albany, preoccupation with 'conditioning' and the nature of prisoners' offences prevented some staff from developing friendly, respectful relationships with their prisoners. Prisoners were generally positive about respectful engagement from staff at Camp Hill. Despite strong leadership and commitment from the senior management board, the use of preferred names or titles was still resisted by some staff. Case notes across the sites demonstrated some positive engagement and knowledge of the personal circumstances of prisoners, but too often concentrated only on negative behaviour. The recent introduction of wing community meetings and the established prison council gave prisoners good opportunities for consultation.

- HP22 The published personal officer policy document described a 'line management approach' to personal officer work. This was characterised by a monthly bilateral engagement between staff and prisoner, including an IEP review. The structure was only working in Albany. Staff appeared to have a good knowledge of the prisoners for whom they were responsible but engagement in sentence planning was weak. At all three sites, prisoners spoke positively about their personal officer, and contact between staff and prisoners was good with evidence of positive interactions.
- HP23 The prison had invested considerable effort in ensuring changes in the revised incentives and earned privileges (IEP) scheme were communicated to prisoners across the three sites. In our survey, prisoners at Camp Hill were more positive about the fairness of the scheme than at Parkhurst or Albany. Staff were flexible in the operation of the scheme but there were examples, particularly at Parkhurst, where prisoners appeared to have been automatically downgraded as a result of a proven adjudication with no consideration of their previous behaviour. Prisoners on the basic level of the scheme at all three sites said they had attended review boards and were clear about the reasons for their demotion. Prisoners on basic did not have access to in-cell power, which was punitive. Pay rates were linked inappropriately to prisoners' IEP status.
- HP24 In our survey, respondents on all sites said the food was poor and the overwhelming view of prisoners was that portions were inadequate. The new kitchen was well equipped and well maintained but had no separate equipment for the preparation and cooking of halal food. A variety of diets were catered for and menus were balanced and varied, but prisoners complained that meals were served cold. Our observations suggested a need for improvements in the management of food delivered to residential units. Meals were served too early and the service period was too long. Staff supervision of some serveries was poor, and we observed non-halal utensils used inappropriately to serve halal meals. Consultation arrangements with prisoners were good. Prisoners on Parkhurst appreciated having their own cooking facilities. Contamination of food was a concern to Albany prisoners and confidence building and assurance measures needed some improvement.
- HP25 The prison operated a standard DHL-contracted shop service with goods packed at the on-site warehouse in Parkhurst. Shop deliveries were efficient and any corrections were made on the day of issue. New arrivals could wait up to 10 days to receive their first order, although reception packs were available. There were individual shop lists for each site. Consultation arrangements were in place and the prison councils reviewed the shop lists quarterly. A good range of catalogues catered for religious items, sports, hobbies and other items.

- HP26 The management of diversity varied significantly across the three sites. The diversity and race equality policy was generic to the prison but focused almost exclusively on race equality. There were separate policies for foreign nationals and disability. The monthly diversity and race equality action team (DREAT) rotated through each site with key participants attending all meetings. Camp Hill had a model that worked well, with a specific prisoner representative or champion for each strand of diversity who facilitated monthly support forums and liaised with the diversity manager. Diversity representatives had been identified for gay and bisexual prisoners, and Traveller communities, and forums were scheduled. Albany and Parkhurst had identified prisoner representatives but each undertook a generic function and there were no forums for the different strands of diversity.
- HP27 At Albany, disability work was generally well supported by a disability liaison officer, although there was limited coordination with the diversity manager. There was a similar lack of integration at Parkhurst. Camp Hill identified prisoners with disabilities through induction. Despite some improvements in the preparedness of staff to push wheelchairs, we still came across examples where hospital escorts were cancelled because some staff still did not push wheelchairs. The use of personal emergency and evacuation plan was generally good across the prison, although there were only limited links with health care for the development of integrated care plans. The introduction across the prison of older prisoners' groups, in partnership with Age UK, was a positive initiative.
- HP28 Race equality was the primary focus of both DREAT meetings and diversity representative meetings. Black and minority ethnic prisoners made up about a quarter of the population and, in our survey, were more negative about some of their experiences than white prisoners, although at Camp Hill many dimensions were better than those for white prisoners. At Albany, it was a particular concern that black and minority ethnic prisoners felt less safe and less respected by staff than white prisoners. Neither Parkhurst nor Albany had specific prisoner race forums, but Camp Hill had monthly meetings facilitated by a nominated prisoner representative. Ethnic monitoring at Parkhurst and Albany was generally within range but analysis was limited. Ethnic monitoring at Camp Hill had identified relatively few problems and there had been some limited trend analysis. At Parkhurst and Albany, the number of racist incident report forms submitted in 2010 to date was considerably lower than in previous years. Completed investigations at both sites were reasonable but delayed. At Camp Hill, 31 racial incident forms had been submitted so far in 2010 and the quality of investigations was good. All sites had external scrutiny of completed racist incident report forms
- HP29 Provision for foreign prisoners varied. Foreign prisoners at Camp Hill had been recently surveyed, although a full analysis had yet to be completed. Prisoners there could reside on a foreign nationals wing, although fewer than half chose to do so. There were identified foreign nationals liaison officers across the site and each wing also had a foreign nationals prisoner representative. Monthly forums were facilitated. Elsewhere provision was weak. The foreign national resource centre on F wing at Parkhurst was not used. Resettlement staff liaised with the UK Border Agency, who attended each site monthly. Very little information was available in languages other than English on any of the sites. Professional interpreting services were also used rarely, which was a particular concern in confidential settings.
- HP30 The prison had a committed chaplaincy team. In the last six months, all three sites had introduced faith forums with prisoner representatives from all key faith groups.

This was a positive initiative. Coordinating chaplains also attended monthly DREAT meetings. Chaplains saw all new arrivals during induction, and all three sites offered an appropriate range of faith services. However, some faith groups could only see a religious leader infrequently, although there were arrangements to use prisoner-based leadership, which generally worked well. There was a good range of faith-based activities across all three sites. Both Parkhurst and Albany had reasonable multi-faith rooms but there was no facility at Camp Hill. The chapel at Albany was in a poor state of repair.

- HP31 In our survey, prisoners in Parkhurst and Albany expressed satisfaction with application and complaints processes, although respondents at Camp Hill were dissatisfied with the timeliness of responses. Application responses were generally appropriate but we saw some, notably at Albany, that were not signed and some that were not timely. Complaints boxes on all three sites were opened by night orderly officers, which could undermine prisoners' confidence in the process. The three complaints clerks were co-located in Albany but procedures for the administration of systems differed for each site. Complaint responses across the three sites were generally timely and respectful, although not all dealt fully with the complaint, and many, particularly at Albany, were not personalised to the complainant. Many confidential access complaints were not addressed fully. Legal services at Camp Hill, provided by the law centre, responded to a wide variety of needs, but at Albany and Parkhurst services were underdeveloped.
- HP32 Health services were commissioned and provided by NHS Isle of Wight. Although the service had been 'clustered' for some time, the benefits were not evident. The health needs assessment had been recently refreshed but did not identify or focus on clinical need. Clinical governance arrangements were patchy with primary care trust policies not adapted appropriately for the prison environment. Few discipline staff knew where the resuscitation kits were or how to use them. Clinical information systems were poorly used, and clinics varied across the three sites. There were very few care plans and some were out of date and not adhered to. Treatment times clashed with regime provision.
- HP33 At Parkhurst, primary care was in a poor environment, there were few clinics and long waits for the GP. Application systems varied across the three sites and the system at Parkhurst was not confidential and had delays. The wait for the optician, even for those with diabetes, was unacceptable. In Albany the primary care environment was also poor and there was a lack of nurse-led clinics. Camp Hill had a reasonable environment and staff had a positive attitude and worked with patients to meet need; clinics were managed and most waiting lists were acceptable.
- HP34 There were many complaints about delays in provision of medications. There were long queues at treatment times and a lack of documented risk assessments for those in possession of medication. There was a high level of opiate prescribing and evidence of bullying in queues for medications, especially at Albany. Poor practice in the administration of medications was evident. Dentistry services were still developing and not well integrated with primary care. Poor management of waiting lists and notification of prisoners had led to the loss of dentistry clinical time in Parkhurst. Cancellation of hospital appointments was routine with some patients cancelled several times, some without adequate reason.
- HP35 The new inpatient unit needed to be made into a more therapeutic environment. There was no structured or therapeutic activity for inpatients and there were problems

discharging them to the main prison when their illness was resolved. Mental health care was very good with integrated provision and excellent quality of care but was insufficient for the population. There were, however, long delays for some patients who required secure NHS mental health beds.

Purposeful activity

- HP36 More than a quarter of the population at Camp Hill was locked up during the core day. Association was routinely cancelled across all sites. Not all prisoners were engaged in education, work and training. The lack of work meant that significant numbers of prisoners at Parkhurst and Albany and over a quarter of the population at Camp Hill were unemployed. The quality of work varied across the sites. Ofsted judged the quality of learning and skills provision as satisfactory at Parkhurst, good at Albany but inadequate at Camp Hill. Few vocational qualifications were available for prisoners. There was no initial assessment of literacy and numeracy at Parkhurst. The libraries were adequately stocked but access varied. Clustering had brought benefits to PE provision with good practice shared. Recreational access was reasonable but accredited learning in all three sites was underdeveloped. Outcomes for prisoners against this healthy prison test were not sufficiently good at Parkhurst, reasonably good at Albany and poor at Camp Hill.
- HP37 The core day, common to all three sites, suggested up to nine hours unlocked for an employed prisoner but just three hours for those unemployed. We observed, however, frequent regime slippage across all three sites which reduced these figures. In our survey, prisoners across the prison had negative perceptions of access to time out of cell, exercise and association. Evidence suggested that evening association, which was programmed for 75 minutes, was routinely cancelled across all three sites. Prisoners typically experienced only three one-hour evening association sessions a week, which was poor. Exercise in the open air was generally limited to 30 minutes. Comparatively few prisoners in Albany were locked up during the working day, but at Parkhurst we found 16% locked in cell and at Camp Hill over a quarter of prisoners locked up when activity was programmed.
- HP38 The management of education provision by the provider, Manchester College, was good. Consultation with prisoners in the prison councils was useful and had brought about some improvements. There was, however, insufficient monitoring of the prison's overall quality of learning and skills provision and self-assessment was not sufficiently critical. Some areas for improvement identified at previous inspections still remained. Pay was not a disincentive to engagement in learning. Learning and skills provision was found to be good at Albany, satisfactory at Parkhurst and inadequate at Camp Hill.
- HP39 Ofsted inspectors judged education as good at Albany but only satisfactory at Parkhurst and Camp Hill. The proportion of prisoners attending education at Parkhurst was, as at the last inspection, low, at 26%, but among those who did attend achievement of qualifications was generally good and the standard of learners' work satisfactory. The range of subjects remained narrow. Teaching and learning were generally satisfactory, although there was some poor planning of individual learning. The proportion of prisoners at Albany attending education was also low at 30% but achievement of qualifications was high among attendees and there was good promotion of healthy living and equality and diversity. At Camp Hill, too few prisoners

gained a qualification. Teaching at Camp Hill was generally good, lessons maintained learners' interest and planning of individual learning was better than at the other two sites, but outcomes for learners were worse. Learners' numeracy and literacy needs were supported in workshops, wings and vocational training. Initial assessment of prisoners' literacy and numeracy had ceased at Parkhurst and the labour board made allocations without knowledge of prisoners' literacy and numeracy.

- HP40 The quality and quantity of work varied across the sites and too many prisoners were unemployed. There was insufficient recognition and recording of employability skills learned through work and low participation in accredited learning. At Parkhurst, access to work was equitable and there was greater choice than before. Many work areas were now less mundane and more creative. The quality of some off-wing work at Albany was good. Albany had a successful approach to work, including accreditation for skills learned in around 50% of work areas and reasonable levels of training before commencement of work. Allocation to work was reasonable but poor recording affected the transparency of processes. There was a shortfall of just under 100 places to meet the needs of the population. At Camp Hill, there was a range of work choices on and off the wings. However, there remained too much repetitive and unchallenging contract work, and too few work skills were obtained in the workshops. Again, there was insufficient activity to meet the needs of the population, and work allocation was slow and poorly organised. Some employment areas were oversubscribed, which often led to underemployment in these areas.
- HP41 Very few vocational training courses were offered across the prison. Information technology (IT) subjects were the most successful. Construction courses were at different stages of being introduced. Food hygiene awards were not delivered as required. At Parkhurst, only 9% of prisoners engaged in vocational qualifications, although this was an improvement since our last inspection. The acquisition of skills and qualifications in information and communications technology was, however, good. In Albany, only three activity areas provided vocational qualifications meeting the needs of just 10% of prisoners. Prisoners made good progress on the newly introduced painting and decorating course, and achievement of education-based IT qualifications was high at 92%. In Camp Hill, very few prisoners accessed vocational courses, and quality was judged to be just satisfactory. Standards of work were similarly just satisfactory. Punctuality was poor in vocational training (and in education at Camp Hill) and workshops were often closed.
- HP42 The Parkhurst library was poorly located with unsatisfactory access. Camp Hill's library was too small with limited study facilities and insufficient texts to support vocational learning. In Albany the library was located next to education and about 71% of prisoners visited it weekly. Not all prisoners had sufficient time in the library, including those at Parkhurst who visited in the evenings and those at Albany, who could only go on Friday afternoons. Stock levels across the sites were generally adequate.
- HP43 The clustering had unified and focused PE activities across the three sites. The gymnasiums worked well together with good practice shared and some common process and regimes. Facilities were adequate to meet the recreational needs of prisoners and access to the three gymnasiums was equitable. Vocational qualifications in PE were not available across the prison. At Parkhurst, there was a satisfactory range of recreational programmes, but accredited programmes only recognised personal performance. Just under half the population routinely engaged in PE. At Albany, healthy living and courses aimed at less active prisoners were run

regularly and well attended. The range of recreational programmes was satisfactory and approximately 46% of the population used the gymnasium, but the availability of accredited programmes was low. At Camp Hill, there were regular and well-attended healthy living and other courses to introduce prisoners to physical activity. The range of recreational programmes was satisfactory although the availability of accredited programmes was again low. About three-quarters of Camp Hill prisoners took part in the gym and sports activity.

Resettlement

- HP44 The resettlement strategy was comprehensive but not yet underpinned by a needs analysis, despite good data collection. The governance of reducing reoffending did not focus enough on resettlement or include external service providers. Offender management arrangements were inadequate in their contact with prisoners and quality of assessments and plans. Public protection arrangements were reasonable but coordination with offender management needed improvement. The management of lifers at Camp Hill was underdeveloped. New arrivals had good assessment of their resettlement needs on induction but delivery of services was not always monitored. Pre-discharge assessments were not coordinated or comprehensive. Pathway provision was good for accommodation, finance, debt and benefit and substance misuse (other than alcohol). Support into education, training or work on release was insufficient at Parkhurst and at Camp Hill. Arrangements at Albany for the health pathway were poor. There was an insufficient focus on contact with children and families, particularly in view of the prison's location. The management of the accredited programmes in the prison was good. Outcomes for prisoners against this healthy prison test were not sufficiently good at all three sites.
- HP45 A comprehensive resettlement strategy addressed the seven resettlement pathways, although it was not coordinated with broader regional strategies. Lead managers for each pathway were identified and an action plan was part of the strategy identifying proposed developments. The prison collected good quality data on prisoner resettlement needs from induction and offender management which would have been fundamental to an effective prisoner needs assessment, currently the principal omission in its strategy. The governance arrangements described in the resettlement strategy were not operating but there was a reducing reoffending committee, although this did not include representation from external or partner organisations.
- HP46 Offender management was organised through a separately managed unit on each site. Caseloads for each team were high but most offender assessment system (OASys) assessments and reviews were up to date. Most prisoners had an offender supervisor. In our survey, a comparatively high proportion of prisoners said that they had a sentence plan, and in our file analysis we found assessments and plans for the majority of cases. There was little evidence that prisoners were involved in the development of their plan. The quality of assessments of risk of harm and sentence plans were poor. Contact between offender supervisors and prisoners was not regular or structured, and prisoners reported difficulties in making contact. In Parkhurst, this was partially mitigated by a weekly drop-in surgery. We were told that assessments and targets for prisoners out of scope for formal offender management were handed over to personal officers, but in practice this was not happening. In Camp Hill, there had been an increase in the number of release on temporary licence applications granted for resettlement purposes, but they were still few. Many categorisation

reviews were overdue and prisoner engagement in the process was limited, although the observation, classification and allocation department was successful in moving most prisoners promptly.

- HP47 Public protection arrangements were generally good and centrally organised. Prisoners who presented a risk to the public were identified on arrival, and review meetings shared concerns about prisoners. However, communication between public protection and offender management was not always effective, and public protection concerns raised in the prison were not always incorporated into offender management risk assessments – a serious failing in the view of some of the risks posed.
- HP48 Both Parkhurst and Albany housed large numbers of indeterminate-sentenced prisoners with fewer at Camp Hill. Indeterminate-sentenced prisoners were managed through the offender management units at each site. Staff at Parkhurst and Albany were experienced in working with indeterminate-sentenced prisoners. Camp Hill had only taken indeterminate-sentenced prisoners in the last six months but there had been insufficient preparation before their arrival. Staff were not experienced in dealing with such prisoners and had received minimal training. Indeterminate-sentenced prisoners in Camp Hill were mixed with prisoners serving short sentences, which was unsettling, and there was no provision for consultation or facilities such as town visits.
- HP49 There was good assessment of resettlement needs for new arrivals on all three sites during induction with referrals made, but ongoing case management and coordination of interventions were tenuous.
- HP50 Good housing support was offered across the three sites. At Parkhurst and Albany, resettlement officers provided a comprehensive service to prisoners not in scope for offender management. At Camp Hill, a dedicated team of probation service officers provided this service. Housing needs were identified on arrival or through self referral or pre-discharge checks. Most prisoners released from Parkhurst and Albany had their accommodation arranged in approved premises by offender managers. At Camp Hill, relatively few prisoners were discharged with no address. Those dealt with by the prison either refused to engage or were difficult to place.
- HP51 The range of information for prisoners on employment and further training was satisfactory in Albany but insufficient in Camp Hill and Parkhurst. There was no pre-release course on any site, and vocational training across the three sites was limited. Prisoners at Parkhurst received individual careers information and advice. At Albany, access to external agencies, such as Jobcentre Plus and Citizens Advice, was facilitated. Careers information and advice support (CIAS) was limited and the different resettlement elements were not yet coordinated. Camp Hill had insufficient resettlement provision in employment, training and education. There were inadequate links with employers and prisoners were not supported in developing their job-seeking skills.
- HP52 Assistance to prisoners in accessing health services on release varied between the three sites. In Parkhurst, prisoners were given verbal information about accessing GP services but no service was provided in Albany. In Camp Hill, prisoners received a comprehensive service at a pre-release clinic. There were effective links between offender management and the mental health team to make timely arrangements with appropriate external community mental health teams to ensure continuity of mental

health care. There were reasonable links with palliative care services and, at Albany, a nurse-led support group for prisoners with life-limiting conditions.

- HP53 There were responsive services to support prisoners with finance, benefit and debt problems. Services across all sites included budgeting and money management courses, Jobcentre Plus, Citizens Advice and, at Camp Hill, the law centre. All sites ran the UNLOCK money management course, involving peer tutors, although the bank account opening feature was currently suspended at Camp Hill.
- HP54 The counselling, assessment, referral, advice and throughcare (CARAT) team offered an appropriate level of service across the three sites. Work with IDTS nurses was developing, particularly on the delivery of the psychosocial group work programme. However, the CARAT team's work at Camp Hill had become very difficult recently as prisoners often did not attend groups or turned up to one-to-one sessions under the influence of substances. Despite the difficulties of releasing many prisoners to the mainland, there was effective communication and good working relationships between the prison's drug services and community resettlement agencies. Work with alcohol users was limited to alcohol awareness delivered through the education department. The prison addressing substance related offending (P-ASRO) drug programme was run at Camp Hill and Albany with a course due to start at Parkhurst in the near future.
- HP55 Visits at all three sites met only minimum requirements and, with the exception of a weekly bus from London, there were few concessions to the difficulties that faced visitors in travelling long distances to the island. Visits could be booked by telephone, email and on site, although many visitors were not aware of all the options and staff were not active in promoting them. The visits halls at Parkhurst and Albany had been improved but the facility at Camp Hill remained poor. Visitors had limited waiting facilities. Visitors and prisoners at all three sites criticised the entry to visits. We observed long delays in entry and search procedures with some visits starting nearly an hour past the entry time. This was particularly bad at Camp Hill where visitors spent a long time waiting in cramped conditions. There were regular family visits at all three sites, but only for enhanced prisoners. Storybook Dads was a new initiative, although it was temporarily suspended at Camp Hill. There was a three-week family learning course at Camp Hill but other services in support of the children and families pathway were limited.
- HP56 The prison provided four well-managed accredited programmes to address offending behaviour, although some prisoners requiring sex offender programmes were not assessed before their arrival at Albany and were not suitable for the programmes available, delaying their progression. There were no non-accredited interventions. The prison had developed a strategy for dealing with the significant number of prisoners who maintained their innocence. Although there had been useful staff awareness training, not all staff were confident in dealing with prisoners' questions or discussing programme issues. Prisoners on all three sites told us that they got support from other prisoners. Albany had introduced a formal mentoring system employing graduates of the sex offender treatment programme.

Main recommendations

- HP57 Prisoners at Parkhurst and Camp Hill should consistently complete all aspects of the induction programme.

- HP58 The use of special accommodation across the prison should be reviewed immediately, and more effective governance arrangements put in place.
- HP59 There should be effective security measures, including robust, timely and sufficiently staffed target drug testing, to reduce the supply of drugs, especially at Camp Hill.
- HP60 Prisoners should be able to access toilet facilities 24 hours a day.
- HP61 The role of diversity managers at each site should be clarified to ensure that each strand of diversity is covered appropriately and sufficiently, and with necessary links to senior managers and the diversity and race equality action team.
- HP62 Prisoners across all three sites should have timely access to health services that are patient focused and meet their individual needs.
- HP63 There should be an increase in the accredited vocational training available across the three sites.
- HP64 At Parkhurst and Albany, wings should not be closed during any part of the core day, and evening association should not be cancelled.
- HP65 The reducing reoffending resettlement strategic plan should be informed by an up-to-date needs analysis which reflects the needs of all categories of prisoners in the population and pays adequate attention to diversity needs.
- HP66 A plan to improve the quality of offender management assessment and planning should be implemented.
- HP67 Provision under the children and families pathway, especially visits, should enable and encourage prisoners to maintain contact and relationships with family and friends and maximise the time they can spend with them.

Section 1: Arrival in custody

Courts, escorts and transfers

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 seldom offered comfort breaks during long journeys to the prison. The vehicles we observed were clean but prisoners expressed safety concerns about travelling on the ferry to the island.
- 1.2 In our survey, fewer prisoners than the comparator said that the frequency of toilet breaks on journeys was good or very good. This view was supported by prisoners in our focus groups, who said that they had not been offered any breaks and only absorbent toilet bags on request. Prisoners reported being treated well by escort staff and interactions we observed at all sites were respectful and friendly. Prisoners told us that the vehicles were uncomfortable. Drinks and sandwich lunches had been provided on all vehicles we observed arriving. All vehicles we saw were clean, with no graffiti.
- 1.3 Following the integration of the Parkhurst site, the number of new receptions had fallen to a consistent level of around five each week at Parkhurst and Albany and 20 a week at Camp Hill. Parkhurst had a small remand function and therefore had a regular court commitment, which was prioritised. Albany and Camp Hill had occasional discharges to court, which were prioritised each day.
- 1.4 Due to the necessity to book places on ferries, late court arrivals were rare and were reported to be never later than 7pm, as late mainland court escorts were usually diverted to HMP Winchester.
- 1.5 There was a video link facility at Parkhurst for court hearings, and Albany and Camp Hill for offender management purposes.
- 1.6 Prisoners in our groups and those we saw arriving at all three sites expressed concerns about procedures in the event of an emergency while travelling on the ferries, particularly as they were required to remain on the escort van during the journey. We discussed this with escorting staff, who told us that prisoners were given no specific instructions, other than that the skylight hatches would be opened for them in the event of an emergency.
- 1.7 There was no information about the prison available in local courts and some of the prisoners we spoke to arriving at the Parkhurst site told us that they had only been informed of being transferred on the day of transfer.
- 1.8 Escorts between sites were managed under a local risk-assessment process but prisoners were still strip-searched on arrival at the new site and property was rechecked and sealed and new identity cards issued. Prisoners arriving at Parkhurst were handcuffed from cellular vehicles for the two metre walk into reception.

- 1.9 Disembarkation from cellular vehicles was conducted immediately after all transfer documentation had been checked. Contractor escort vehicles routinely delivered prisoners to all three sites in sequence, starting with Camp Hill, then arriving at Parkhurst and finally Albany, and this created a long waiting period for prisoners going to Albany. It was unusual for escorts to arrive over lunchtimes because of the need to be booked on to ferries but effective liaison between the escort contractor and the prison ensured that on the rare occasions when this happened, the reception was staffed accordingly.

Recommendations

- 1.10 Prisoners should receive a safety briefing before embarkation on to ferries.
- 1.11 Prisoners should receive 24 hours' notice of planned transfers.
- 1.12 Prisoners should not be routinely strip-searched on arrival at sites on an internal transfer if they have already been strip-searched at the sending site.
- 1.13 Prisoners should not be routinely handcuffed when embarking or disembarking escort vehicles at the Parkhurst site.
- 1.14 Prisoners should be held in cellular vehicles for the minimum period possible.

First days in custody

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.

- 1.15 Reception areas were clean and well decorated, with televisions in all waiting rooms. Staff-prisoner interactions were polite and respectful. Initial interviews were not always conducted in private and prisoners could expect long waits to collect property. Some strip-searching was conducted in an inappropriate area. The first night and induction processes differed across the three sites and in most cases it was impossible to confirm completion of either process.

Reception

- 1.16 Each of the three reception areas was clean and well decorated. The initial holding rooms all contained working televisions, magazines and a wide range of notices. None of the prisoners we observed experienced long waits to be interviewed and processed. All sites had prisoner orderlies in attendance to offer drinks to newly arriving prisoners. Staff-prisoner interactions were polite. Key interviews were conducted in private at Albany but at Camp Hill and Parkhurst they took place at the front desk.
- 1.17 Health services staff attended each reception to see new prisoners and returns from courts. There were consultation rooms at Parkhurst and Camp Hill but only a low screen provided any privacy at Albany and the consultation took place in the sight and hearing of staff and orderlies.

- 1.18 Camp Hill and Albany arrivals were met by a Listener and at Parkhurst the reception orderly was due to undergo a refresher course to re-qualify as a Listener following a gap in this role. The reception orderlies played a key role in explaining prison processes to prisoners and putting them at ease. A DVD of the Albany site was available to explain its layout and facilities but at the time of the inspection the player was not working. Information was available in a range of languages at all sites, including on the availability of an interpreting service.
- 1.19 Strip-searching was conducted in a discrete area in Albany and Parkhurst but at Camp Hill, prisoners arriving or departing on transfer were searched at the front desk, with a curtain pulled across the entrance to provide some privacy. There was a discrete area available but this was only used for court and hospital escorts. Each site had a body orifice security scanner (BOSS) installed and although this was regularly used at Albany and Parkhurst, it remained unused at Camp Hill as it had not been risk assessed, despite having been in place (we were told) for over two years.
- 1.20 None of the reception areas had provision to offer telephone calls, and showers were not offered owing to the ease of access on the first night centres. Telephone calls, when provided, were not made in private and at Parkhurst the call was made by a member of staff. All prisoners we observed arriving were offered a smokers' or non-smokers' pack, the cost of which was deducted from their spending account once the electronic transfer of records had been completed or, if they had insufficient funds, it was recovered at 50p a week.
- 1.21 Albany and Parkhurst operated integrated regimes for vulnerable and mainstream prisoners, with systems to inform prisoners of this before their arrival. There was a compact available for signing at Parkhurst but this was out of date and referred to the questionnaire used before the integration of the site. Camp Hill was not integrated and any new arrivals requesting protection were interviewed by the duty manager before being located on to the wings or other accommodation.

Recommendations

- 1.22 First night health screening and cell sharing risk assessment interviews should be conducted in private.
- 1.23 Prisoners should not be strip-searched in front of the booking-in desk at Camp Hill.
- 1.24 Prisoners should be able to make a free telephone call in private on the day of reception.

Housekeeping points

- 1.25 The DVD player in Albany reception should be repaired and the initiative expanded to the other sites.
- 1.26 The integration compact at Parkhurst should be updated.
- 1.27 The BOSS chair at Camp Hill should be brought into use expeditiously.

First night

- 1.28 First night and induction processes differed between the sites. All involved prisoner orderlies in the initial stage and a range of documentation and booklets were filled in as the prisoner was interviewed during the process. Only Albany had an effective method of tracking this process and could offer any assurance that first night screening was completed. At Camp Hill, we checked 50 first night dossiers and over 40% of recordings of first night interviews were incomplete. Most of these had been on Monday nights, when the unit was routinely locked up during the association period. At Parkhurst, almost all of the records were incomplete and despite assurances that these were recorded on the computer system, a check of 10 records showed only one such recording (see recommendation 1.41).
- 1.29 At Parkhurst, F wing was identified as the first night and induction wing. Cells were dirty and in poor repair, with broken toilet units, draughty, ill-fitting windows and crumbling walls. There was graffiti on the walls and doors of the prepared new arrival cells and they were not fit for habitation. There was no method of identifying new arrivals to staff.
- 1.30 At Albany, A wing was the designated first night centre. The wing was clean. New arrivals were not allocated specific first night cells and it was not clear to staff who new prisoners were. As soon as a cell was vacated, it was systematically cleaned and prepared for the next arrival. Each arriving prisoner was provided with a brand new, personal-issue mattress.
- 1.31 St Patrick's wing was the first night centre at Camp Hill and first night accommodation was excellent, with clean and well equipped cells. There was a wide range of information about most areas of the site, and a reading book and a letter, envelope and pen were provided. Cells were clearly marked as first night cells and landing cleaners/orderlies ensured their good condition. Prisoners we spoke to on St Patrick's and other wings were positive about their experience of arrival at Camp Hill.

Recommendations

- 1.32 The cells on F wing at Parkhurst should be clearly designated, refurbished and made fit for their purpose.
- 1.33 The location of new prisoners should be clearly indicated in wing offices.

Good practice

- 1.34 *Each arriving prisoner on Albany was provided with a new personal-issue mattress.*

Induction

- 1.35 Induction at all three sites was scheduled to start on the Monday after reception and took place in well-presented and equipped induction classrooms. They all covered key areas but some sessions were short, leaving some prisoners locked up for long periods of the day.
- 1.36 At Camp Hill and Parkhurst, resettlement staff met prisoners on the day after reception to complete initial screening and add early targets to the sentence plans. At Albany, the resettlement interview was conducted after induction had been completed.

- 1.37 At Parkhurst, with the exception of a short well-planned period when the site was being integrated, it was impossible to ascertain which prisoners, if any, had completed induction (see main recommendation HP57). Records were poor and incomplete and despite a facility for management checks of individual records, no records had been countersigned. Prisoners were listed as having completed induction with no evidential records. F wing was primarily a remand wing and the number of remand prisoner spaces dictated the length of stay for new prisoners. F wing was also used to hold prisoners post-segregation, pending onward transfer. One such prisoner had been held since May 2010. Both of these issues affected the ability to focus on effective induction procedures. Prisoners were often moved off the unit to all areas of the site, with no system to ensure that they attended the unit for induction sessions. No education assessments had been conducted at Parkhurst for some time because the provider had refused to attend unless an officer was provided, and the only consistently completed element of the process was the resettlement interview and the early days presentation by the induction orderly.
- 1.38 We observed newly received prisoners starting their induction at Albany. There were records of induction completion in every case we examined at the site. A comprehensive dossier was compiled and then passed on to the resettlement coordinator, who conducted a resettlement interview and then informed the labour allocation clerk that the prisoner was available for work. When induction was interrupted for any reason, the process was suspended until the prisoner was able to resume it.
- 1.39 At Camp Hill, induction started on the Monday after reception and was delivered over one week. If scheduled sessions had to be cancelled, there were no arrangements to ensure prisoners completed the full programme before moving off the unit. We checked the induction records for the previous 50 weeks and found that only 28% of prisoners completed induction before moving off the unit (see main recommendation HP57).

Recommendations

- 1.40 Induction programmes should actively engage prisoners during the core day.
- 1.41 First night and induction recording should be standardised across the prison and there should be effective tracking and quality assurance arrangements to ensure all risk assessments and induction modules are completed.

Section 2: Environment and relationships

Residential units

Expected outcomes:

Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions.

2.1 Conditions in most residential units were reasonably good. Despite some graffiti, cells were generally clean but toilets were scaled and some had inadequate screening. Cells on A-E wings at Albany lacked integral sanitation, which was unacceptable. Shower facilities were variable but mostly lacked privacy and were often in a poor decorative state. Arrangements for consultation through the prison council and wing community meetings were good.

Accommodation and facilities

- 2.2 Accommodation was provided in 24 residential units of varying styles and sizes holding up to 1,698 prisoners across the three sites of the prison (see fact page). Communal areas were generally bright and clean and outside areas were pleasant and well maintained, but exercise yards at Parkhurst were austere. Cells were of a reasonable size, generally clean and well maintained, except for some on F wing at Parkhurst (see paragraph 1.29). There was graffiti in some cells at Parkhurst and Camp Hill. Many cells across the prison lacked curtains and were draughty and cold. In-cell toilets were often inadequately screened, scaled and dirty. At Parkhurst and Camp Hill, some double cells intended for single occupancy were cramped, lacked lockable cupboards, had insufficient furniture and poorly positioned television brackets. However all cells on Albany and St Stephen's wing of Camp Hill had privacy locks with individual keys for occupants.
- 2.3 The computerised sanitation system on A-E wings at Albany, 'nightsan', only operated at night and was unsatisfactory. It allowed only one prisoner at a time on each landing out of his cell for a permitted nine minutes. When he returned, he had to enter a code into the system in his cell, which registered his return, locked his cell and allowed the next prisoner to leave his cell. Prisoners could have three such periods a night and those who stayed out of their cells beyond this time could be restricted from using the system. Arrangements for prisoners locked up during the day to access toilets were poor. Prisoners repeatedly told us that if they requested to be unlocked during the day to use the toilet they were threatened with warnings under the incentives and earned privileges (IEP) scheme. A lidded bucket was provided to use as a toilet if there were breakdowns or delays with the system, which was degrading and unacceptable. (see main recommendation HP60). The lack of hand washing facilities in these cells was unsanitary. The cells on F and G wings had en suite showers and toilets, which were more appropriate.
- 2.4 There were association areas on each wing that were generally reasonably well equipped but were often too small, noisy and busy. The situation was compounded on Camp Hill where cells were locked during association (except on St Stephen's), which effectively denied in-cell association and association for those who did not wish to remain unlocked for the whole period or for whom the association environment was too noisy or boisterous.

- 2.5 Up-to-date notices were displayed throughout the prison. The offensive displays policy was overcomplicated and was applied inconsistently.
- 2.6 In-cell emergency call bells were working and responded to quickly in all accommodation, although prisoners on St Stephen's wing at Camp Hill could leave their cells to raise the alarm or leave the unit in the event of an emergency. Responses to emergency call bells on A-E wings at Albany could have been impeded if a prisoner were using the night sanitation system. Camp Hill had a rigorous management checking system to ensure that emergency bells were responded to within five minutes, but the system at Parkhurst was less robust and there was no system at Albany. Although responses to our survey were better than the comparator at Parkhurst and Albany, prisoners repeatedly told us that they had little confidence that cell bells would be responded to within five minutes.
- 2.7 Mail was distributed to wings once it had been opened and any monitoring completed. Despite apparent effective processes, many prisoners complained of delays in sending and receiving mail. In our survey, 49% of respondents at Parkhurst and 44 % at Albany said they had problems sending or receiving mail, against the comparator of 39%. However, the response at Camp Hill was better at 31% against the comparator of 38%.
- 2.8 In our survey, only 25% of respondents from Camp Hill said they had good access to telephones, against the comparator of 21%. The ratio of telephones to prisoners varied across residential units and often fell below our expectation of one to 20 prisoners. Telephones were often poorly positioned outside showers or association areas. Although some were in booths, others had a hood or nothing and little or no privacy. Prisoners across the three sites told us that they often experienced significant delays in getting new numbers added to their telephone accounts. While we were told there was no backlog with processing these requests, prisoner perception of this service remained poor.

Recommendations

- 2.9 Single cells should only be used to accommodate one prisoner.
- 2.10 Cells housing two prisoners should be adequately equipped, and all cells should have lockable cabinets, curtains and effective screening for in-cell toilets, and be fitted with privacy locks.
- 2.11 Prisoners who are required to use a bucket for a toilet should be provided with a hand sanitiser.
- 2.12 The offensive displays policy should be reviewed, simplified and communicated to all staff and prisoners.
- 2.13 Prisoners at Camp Hill should be allowed access to their cells during association.
- 2.14 Emergency cell call bells should be responded to within five minutes across the prison.
- 2.15 All telephones should be sufficiently screened for privacy.

Housekeeping points

- 2.16 In-cell toilets should be de-scaled.

- 2.17 Graffiti should be removed from cells.
- 2.18 Television shelves in double cells should be repositioned so that prisoners can see the television screen in safety.
- 2.19 Mail should be delivered to prisoners as soon as it is received on to the residential unit.
- 2.20 Delays in adding new telephone numbers to prisoners' accounts should be investigated and rectified.

Clothing and possessions

- 2.21 Prisoners could wear their own clothes but this had only recently been introduced for those on the standard level at Camp Hill. As a result, at the time of the inspection there were 82 outstanding applications at Camp Hill from prisoners wishing to access clothes from their stored property, and over 60 general applications dating back to August 2010. In our survey, 23% of respondents at Camp Hill and 25% at Albany said that it was difficult to access stored property, against the comparators of 30% and 32% respectively. Prisoners could not have any items of property sent in to them, except for those subject to deportation.

Recommendations

- 2.22 Prisoners should be able to access their property from reception within a week of making an application.
- 2.23 Prisoners should be able to have items of property sent in.

Hygiene

- 2.24 Shower facilities across the prison were generally poor. There was insufficient privacy screening and many were shabby or dirty. Albany had only six shower heads on A-E wings which was insufficient for the size of the population.
- 2.25 In our survey, responses on access to daily showers were worse than the comparators (90% at Parkhurst and Albany against 99%, and 84% at Camp Hill against 94%). Prisoners could take showers during a short domestic period in the morning and association, but the insufficient number of showers and cancellation of association gave us limited assurance that all prisoners could access showers daily.
- 2.26 By contrast, prisoners said their access to cleaning materials, clean clothes and clean sheets was better than at comparator prisons and access to personal toiletries was good. Launderettes on each residential unit could be accessed weekly but were often insufficient for the number of prisoners and there were restrictions on the amount of laundry.

Recommendations

- 2.27 Showers should be clean and refurbished where necessary and offer privacy, and there should be sufficient numbers to meet the daily need of prisoners on each wing.

2.28 There should be sufficient wing laundry equipment to meet the need of the population.

Staff-prisoner relationships

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.

2.29 There was strong leadership from the senior management board to improve staff-prisoner relationships. There had been some notable improvements in the way that staff interacted with prisoners, particularly at Parkhurst. Despite this, we observed some distant relationships and a reluctance from some staff to interact with prisoners in a friendly, professional and respectful way.

2.30 In our survey, respondents on all three sites were more positive than the comparators when asked if staff treated them with respect (81% against 74% at Parkhurst, 82% against 74% at Albany and 86% against 74% at Camp Hill). We observed some positive engagement and interaction between staff and prisoners, but also saw staff spending too much time in offices during association.

2.31 There was strong leadership from the senior management board and commitment to improving staff-prisoner relationships, which had been effective in making some necessary improvements. Despite this, some middle managers and staff had an inconsistent and questionable approach – in particular, a continued reluctance from many staff to address prisoners by anything other than their surnames.

2.32 General interaction we observed between staff and prisoners at Parkhurst had improved and was particularly good on A wing and the Phoenix unit. Most prisoners told us of relationships with staff that were respectful and much improved. The introduction of the cell watch scheme (similar to neighbourhood watch) and the music studio on A wing were positive examples of how staff had been enabled to improve the environment for those in their care.

2.33 At Albany, we were concerned that some staff had a disproportionate preoccupation with being manipulated or 'conditioned' by prisoners because of the nature of their offences, and that this inhibited them from developing friendly, professional and respectful relationships with them. It was also notable that in our survey, 35% of respondents at Albany said that they had been victimised by staff against the comparator of 29%.

2.34 Prisoners at Camp Hill were generally complimentary about respectful relationships with staff.

2.35 P-Nomis (Prison Service IT) case notes demonstrated some positive staff engagement and knowledge of personal circumstances but still too often concentrated on negative behaviour.

2.36 There was a well-developed prison council at each site that was well supported by the senior management board and increasingly by other staff. Regular consultation through wing community meetings had begun approximately two months previously, and there was evidence that changes had been made as a result of these forums.

Recommendation

- 2.37 Staff should address prisoners by their preferred name.

Personal officers

Expected outcomes:

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

- 2.38 There was a generic personal officer scheme and policy document across the three sites, and staff and prisoners spoke favourably of the scheme. Prisoners had an initial meeting with their allocated personal officers, who were rarely changed. The quality and frequency of case history notes and formal monthly meetings varied across the three sites, and links with offender management were limited and underdeveloped across the prison.
- 2.39 There was a comprehensive and succinct personal officer policy document, which applied at all three sites. It centred on a line management approach by prison officers to prisoners. Staff said the policy was easy to understand. An accompanying booklet gave staff a quick guide to assist in their dealings with their prisoners.
- 2.40 Staff were allocated prisoners by the senior officer on each site. Allocation was not based purely on cell location, which ensured that there was consistency of personal officers and that there were changes only when staff or prisoners moved wings. Prisoners in all three sites said that they knew who their personal officer was. Staff introduced themselves at the earliest opportunity and completed a local form with the prisoner's personal circumstances for future reference. In Parkhurst and Albany, each wing had a list of personal officer allocations, which included a named back-up officer, and cell cards displayed the name of each prisoner's personal officer. Contact between personal officers and prisoners across all three sites was good.
- 2.41 At Parkhurst, 90% of respondents to our survey, against the comparator of 84%, said that they had a personal officer and 65%, against 60%, said that their personal officer was helpful. Staff had a good understanding of their individual prisoners' issues and needs and met them regularly, although formal meetings as described in the personal officer policy document were irregular. Case notes were electronic and personal officers generally made an entry at least monthly, but they were mostly brief and perfunctory.
- 2.42 In our survey, 91% of respondents in Albany, against the comparator of 84%, said that they had a personal officer. Staff had a good understanding of their individual prisoners' needs and issues. Formal meetings between the personal officer and the prisoner took place in most cases. Case notes were electronic and personal officers made entries at least monthly. In the majority of the files we looked at entries were meaningful and showed a degree of interaction and understanding of the prisoners' needs at the time.
- 2.43 In our survey, 83% of respondents at Camp Hill site, against the comparator of 74%, said that they had a personal officer and 68%, against 62%, said that their personal officer was helpful. Cell cards were not marked with the names of personal officers, although prisoners told us they knew who their personal officer was and said that they were generally helpful with day-to-day issues. None of the prisoners we spoke to had received a formal monthly meeting as per the

policy but said that most interactions took place during time out of cell on the landings. Case history notes were electronic and we saw evidence of weekly as well as monthly entries, but they were brief and perfunctory.

- 2.44 Personal officers on all sites did not consistently attend sentence planning review meetings due to staffing levels, although some had attended programme review meetings. They completed written reports when they could not attend meetings involving their prisoners. Links with the offender management unit were underdeveloped, and staff we spoke to saw their role primarily as dealing with day-to-day issues.

Recommendations

- 2.45 Personal officers at Parkhurst and Camp Hill should meet their prisoners monthly in a formal setting, and make more meaningful entries in electronic case history notes that demonstrate interaction with the prisoner.
- 2.46 Links between personal officers and offender management units on all sites should be developed, and personal officers should attend sentence planning boards regularly.

Housekeeping point

- 2.47 Cell cards in Camp Hill should identify the name of the personal officer.

Section 3: Duty of care

Bullying and violence reduction

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 The violence reduction strategy was user-friendly and common to all three sites. There were well-attended monthly safer custody meetings at each site. The three violence reduction coordinators collated comprehensive monitoring data which allowed identification of trends. Staff training in the strategy was limited and there were shortcomings in monitoring logs at all sites. Some investigations were insufficiently detailed, daily entries in logs were too observational and reviews were perfunctory. Many prisoners told us safety at Parkhurst had greatly improved. Safer custody meetings were appropriately focused with follow-up action when problems were identified. The reported level of physical violence at Albany was low but bullying for prescribed medication was a concern. At Camp Hill there was a lack of cohesion between the work of the violence reduction coordinator and the security department. The number of violence reduction monitoring documents had increased in 2010 but some prisoners said they dealt with incidents themselves without reporting them.
- 3.2 There was a comprehensive violence reduction policy, revised in August 2010, for all three sites. The strategy included user-friendly flow charts to guide staff through violence reduction systems and procedures.
- 3.3 The director of safer custody had strategic oversight of the policy across the prison and was supported by a head of violence reduction who also covered all three sites. Each site had a violence reduction coordinator (VRC) in its safer custody office. Although the VRC was a full-time post, the senior officers in the role had additional responsibilities which affected the time they could allocate to violence reduction work.
- 3.4 A monthly safer custody meeting, covering self-harm and suicide as well as violence reduction, was held at each site and chaired by the director of safe custody. Meetings were generally well attended and included prisoner violence reduction representatives. Representatives we spoke to at all three sites said they felt able to contribute fully to meetings, but not all had been trained.
- 3.5 VRCs collated a comprehensive range of monthly monitoring data which was standardised across the three sites and circulated to all members before safer custody meetings. This data included an overview of violent incidents, requests for protection in prisoners' own interests, segregation monitoring, anti-bullying monitoring and security information. Reports enabled trends to be monitored, and there were systems to investigate and monitor unexplained injuries at all three sites.
- 3.6 Central to the violence reduction strategy was the safer prison report, which staff used to report any act of violence, aggression or antisocial behaviour. Each site maintained a central log of the number and type of safer prison reports received, which was accessible to all staff

and was also analysed by the site safer custody committee. Violence reduction representatives also used a prisoner report form to forward information to the VRC when incidents were reported to them.

- 3.7 There was a three-stage violence reduction monitoring system across the prison that was closely linked to the incentives and earned privileges (IEP) scheme. Although there was a detailed staff training package in the revised violence reduction strategy, training to date had been very limited. We identified shortcomings in safer prison reports and violence reduction monitoring logs for both perpetrators and victims in all three sites. Wing senior officers were responsible for conducting an investigation following the initiation of a safer prison report. Some investigations we saw were detailed and included a clear account of any interviews, but many did not extend beyond a description of the incident with no further explanation of the underlying causes of the behaviour or incident. Daily monitoring records across all three sites showed little engagement by staff and were too frequently limited to observations about the prisoner's adherence to wing routines and regimes. Weekly reviews of open monitoring logs by wing senior officers were perfunctory and often did not evidence engagement.
- 3.8 Although the published policy indicated that VRCs should complete a comprehensive quality assurance of open monitoring logs, in practice this did not take place at Parkhurst or Camp Hill, although VRCs did see all completed safer prison reports and all closed monitoring logs. Each VRC maintained a central electronic log of all open monitoring logs which was accessible to all staff. There were no formal interventions beyond monitoring on any site to challenge prisoners who engaged in persistent bullying or to support victims.
- 3.9 A recent violence reduction survey of prisoners in all three sites, which was due to be discussed in detail at the safer custody meetings, had had a limited response rate of just 94, but 57% of respondents said they felt safe from being hurt or injured by other prisoners.
- 3.10 In our survey at Parkhurst, 21% of respondents said they felt unsafe at the moment, which was better than the 29% response in 2008. Prisoners at Parkhurst repeatedly told us that they felt safety had improved. In our survey at the site, 29% of respondents, against the comparator of 24%, said they had been victimised by another prisoner, but only 24%, against the comparator of 29% and compared with 37% in 2008, said they had been victimised by staff.
- 3.11 The number of submitted safer prison reports in Parkhurst had increased from 328 in 2009 to 389 in 2010 to date. The number of reported assaults and fights had also increased from 25 in 2009 to 41 in 2010 to date. The number of incidents was not excessive given the nature of the population and may have reflected improved reporting procedures. Minutes of safer custody meetings showed a relevant focus on key issues, including the integration of general population and vulnerable prisoners in early 2010. As a result of information reported to the VRC, there had been a detailed investigation of problems on B wing and the prisoners identified as being involved had been relocated.
- 3.12 Although staff from the security department at the site had not consistently attended recent safer custody meetings, there had been recent measures to develop closer working between the two departments. The VRC attended a weekly meeting with security staff and residential senior officers to discuss any problems on each wing, and there was also a weekly meeting between security managers, intelligence management staff and the public protection unit to examine identified areas of concern in more detail.
- 3.13 In Parkhurst, 63 perpetrator and 40 victim violence reduction monitoring logs had been opened in the first nine months of 2009. The VRC ensured consistency in the management of those suspected of being involved in bullying or antisocial behaviour and was prepared to challenge

the decisions of wing senior officers who did not recommend formal monitoring. The VRC cited bullying for prescription medication as a significant problem in Parkhurst, and the last serious assault had taken place in the medication queue.

- 3.14 Two violence reduction orderlies had been appointed in Parkhurst in 2010. They attended safer custody meetings and visited F wing to deliver violence reduction awareness training to new arrivals. The orderlies also visited all wings regularly to check that violence reduction notice boards were up to date and to talk to staff and prisoners and collate information. The prisoners in this role were not trained but could be used to mediate between prisoners. They submitted prisoner incident report forms to the VRC as a record of work undertaken. Although the orderlies made a significant contribution to the delivery of the violence reduction strategy, we were not assured that there were sufficiently robust procedures to monitor their work.
- 3.15 The site had a safer custody telephone line which all prisoners could access free of charge and which was also promoted in the visits area, where boxes had also recently been installed to enable families to report any concerns in confidence.
- 3.16 Although Parkhurst had designated staff violence reduction liaison officers in post, they were not yet active. There were also violence reduction prisoner representatives on each wing, and there had been an initial meeting between the representatives and the VRC in the previous week.
- 3.17 In our survey, only 12% of respondents in Albany, against the comparator of 19%, said they felt unsafe at the moment. However, the proportion who said they had ever felt unsafe was worse than at the 2007 inspection and other indicators of safety, including victimisation by staff and prisoners, were worse than the comparator. Minority groups reported more negative perceptions of their safety. For example, just under half of black and minority ethnic respondents said they had been victimised by another prisoner compared with 27% of white respondents.
- 3.18 Monitoring databases maintained on Albany since March 2010 showed that 269 incidents had been reported and as a result 45 prisoners had been placed on violence reduction monitoring, including 13 victims and 32 perpetrators, four of whom had been placed on stage three. The reported level of physical violence was low with 17 fights and assaults reported in 2010 to date. Bullying for medication was a concern and cited as the cause of several reported incidents.
- 3.19 An examination of the violent incident reporting log in Albany showed that many incidents were reported directly by prisoners completing a violent incident prisoner report or reporting to violence reduction prisoner representatives, who were used actively and positively. However, we identified some inconsistencies in the outcome of safer prison investigations with not all prisoners subsequently placed on monitoring logs.
- 3.20 The VRC on Albany held a monthly meeting with representatives to discuss issues and provide support. Two full-time violence reduction representatives, referred to as orderlies, worked alongside staff in the safer custody office. A violence reduction representative met all new arrivals, who received a presentation on the operation of the scheme during their induction. All the representatives were trained and the orderlies had written a comprehensive training package for use with representatives in all three sites. The orderlies also provided a valuable administrative support service to the VRC.
- 3.21 In addition to the annual survey, which had a response rate of 63% from prisoners at Albany, a survey had recently been developed for all new prisoners on Albany at one, three and six

months after their arrival to provide information on how the prison could better support new prisoners. At the time of the inspection, the two prisoner orderlies who worked in the safer custody office were collating the data from the first cohort of new arrivals at Albany to have been surveyed.

- 3.22** Our survey findings at Camp Hill were significantly better than at the previous inspection across a range of indicators of safety. However, the number of violence reduction monitoring logs opened had increased significantly from 81 in 2009 to the 135 opened to date in 2010, 65 of which were victim monitoring logs. In addition, some prisoners said that some violent incidents went unseen and therefore unreported, and others told us they would deal with incidents themselves rather than report them to staff. At the time of the inspection, some open monitoring logs were the result of prisoners being in debt.
- 3.23** A violence reduction prisoner orderly reported to staff in the safer custody department in Camp Hill. Safer custody meetings were not consistently attended by the security department and links between the two departments were not sufficiently cohesive. The safer custody committee discussed trends in violence reduction monitoring data but minutes of meetings did not indicate robust scrutiny of data. For example, the reasons for the high number of prisoners requesting to be segregated in their own interests had not been properly investigated (see paragraph 3.40). We were also not assured that information on potential bullying identified during adjudication hearings was consistently shared with the VRC (see paragraph 7.27).
- 3.24** Wing-based safer custody liaison officers at Camp Hill were used to raise safer prison reports following an incident. We found delays in the completion of reports. For example, one log was opened on 7 September 2010 although the incident took place on 10 August. Such delays undermined the effectiveness of the violence reduction scheme.
- 3.25** Camp Hill was piloting an initiative to support victims known as Shelter – support, help, education, life skills, training, empowerment and respect. This involved a guidance document for wing senior officers with sources of support for victims of violence, bullying and antisocial behaviour. We spoke to two victims of violence who felt unsupported. One said he was unaware he was being monitored. In his monitoring log staff had recorded that ‘he looks like a frightened rabbit in car headlights’, but there was no evidence of additional support to the prisoner, who attempted to suffocate himself four days later.

Recommendations

- 3.26** All staff and prisoner violence reduction representatives should receive training in the revised violence reduction strategy.
- 3.27** There should be regular quality assurance of open violence reduction monitoring logs to ensure investigations are sufficiently thorough, and daily entries and weekly reviews should evidence engagement with prisoners.
- 3.28** There should be interventions to challenge bullying behaviour and support victims.
- 3.29** The violence reduction coordinator in Parkhurst should ensure there is formal supervision and monitoring of the work of violence reduction representatives.
- 3.30** There should be a strategy to respond to the level of bullying for prescription medication in Parkhurst and Albany.

- 3.31 Managers in Albany should explore and address the negative perceptions of safety expressed by minority groups.

Housekeeping points

- 3.32 Safer custody reports should be completed promptly at Camp Hill following an incident.
- 3.33 The violence reduction coordinator at Albany should introduce quality checks to ensure consistency of response to reported incidents and in the application of formal monitoring.
- 3.34 There should be improved links between the work of safer custody and the security department at Camp Hill and Parkhurst.

Good practice

- 3.35 *There was positive and active use of prisoner violence reduction representatives across the prison, particularly at Albany.*

Vulnerable prisoners

3.36 Vulnerable prisoners had been successfully integrated with the general population at Parkhurst. The Phoenix unit in Parkhurst provided a safe and caring environment for prisoners living there. Albany had been an integrated site for some time with no ongoing problems. At Camp Hill, a significant number of prisoners continued to request protection and there was no clear strategy to understand or respond to such requests. The role of St Andrew's wing at Camp Hill needed to be clarified.

- 3.37 In early 2010, vulnerable prisoners had been integrated with the general population in Parkhurst and a single regime was delivered across the site. Pressure to use spaces elsewhere in the prison estate meant that integration had taken place over a much shorter timescale than originally anticipated. The project was well planned and managed, with consultation with staff and prisoners. A questionnaire to all prisoners had asked whether they were prepared to integrate, and all general population prisoners who indicated they were prepared to integrate had a comprehensive individual risk assessment. As a result, some prisoners were identified as unsuitable for an integrated regime and were subsequently transferred. Most prisoners we spoke to felt integration had been successful and that safety in the site had improved (see paragraph 3.10).
- 3.38 The Phoenix unit had opened on Parkhurst in summer 2009 in the previous segregation unit. It provided a supportive and caring environment for up to 65 prisoners who met the criteria of being either over the age of 50 or had disabilities or poor coping skills and would have been vulnerable on the residential wings. The unit had good links with the psychology department and the mental health in-reach team to provide additional support for prisoners. Staff on the unit were particularly supportive and prisoners we spoke to valued the unit and felt safe there. Many chose to engage in activities off the unit, but some work was available there.
- 3.39 The Albany site had been integrated for some time and there were no ongoing problems.
- 3.40 At Camp Hill, as at the previous inspection, we were concerned about the number of prisoners who had requested protection in their own interests. Violence reduction monitoring data

indicated that although the number requesting protection had reduced from the last six months of 2009, 31 prisoners had requested protection during the first eight months of 2010. A notice had been issued to staff to provide guidance on the management of prisoners requesting protection. This included opening a violence reduction victim monitoring log, and that wing staff should endeavour to support prisoners on the wings rather than relocating them directly to the segregation unit. However, there was no evidence of an attempt to understand and respond to the reasons for the high number of requests.

- 3.41 St Andrew's wing on Camp Hill had been used to support prisoners who had experienced problems coping on other wings or those reintegrating from the segregation unit to normal location. However, there was a lack of clarity about the wing's role and we were concerned to find prisoners on open violence reduction perpetrator logs located there.

Recommendations

- 3.42 The reasons for the high number of prisoners in Camp Hill requesting protection for their own safety should be investigated, and other support systems should be developed for these prisoners.
- 3.43 The role of St Andrew's wing in Camp Hill should be clarified and consistently adhered to.

Self-harm and suicide

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.

- 3.44 The prison had started to standardise self-harm and suicide prevention procedures across the three sites and governance arrangements were good. Assessment, care in custody and teamwork (ACCT) monitoring procedures were in general good and the introduction of information guides was good practice. Completion of ACCT documentation was satisfactory but overall better in Albany. Special accommodation had been used at each site for prisoners on ACCTs.

- 3.45 Governance of self-harm and suicide prevention procedures was good with a director of safer custody, supported by a head of suicide prevention and self-harm, for the whole prison and a dedicated suicide prevention coordinator senior officer at each site. The suicide prevention coordinators were full-time roles but they also had to cover other operational duties which affected their functional role.
- 3.46 There was an overarching self-harm and suicide prevention policy generic to all three sites. The document was lengthy and focused more on standards baselines and less on care for those in crisis. There was a dedicated telephone line at each site that family and friends could use if they felt a prisoner was in crisis, although they were rarely used. We tested each line

and it took 24 hours before our call was acknowledged at Parkhurst, two days at Albany and three days at Camp Hill. There was no log kept to analyse use of this facility.

- 3.47 There was a weekly safer custody functional team meeting for the whole prison that included representatives from all three sites. Each site hosted its own monthly safer custody meeting that incorporated violence reduction and self-harm and suicide prevention. This meeting was well attended by representatives from the site, including managers, health care staff, external partners and prisoner Listeners. The meeting agenda had been standardised in July 2010 so that each site worked to the same level. The minutes showed that meetings covered analysis of patterns and trends. There had been no meeting in Parkhurst in April and August 2010.
- 3.48 Assessment, care in custody and teamwork (ACCT) self-harm monitoring files for prisoners in crisis had been standardised across the prison and incorporated good staff guides and information sheets at each stage. These included easy-to-follow flow charts, trigger warnings, activities and interventions available to staff. ACCT foundation training for permanent night staff was only 73% complete.
- 3.49 A self-harm and suicide prevention improvement action plan had recently been formulated and incorporated into a generic Isle of Wight action plan. Work within this action plan was underdeveloped and several actions had still not been addressed or addressed fully.
- 3.50 At all three sites, case reviews were timely and showed a good analysis of prisoner issues. Health care staff attendance was sporadic and prisoners we spoke to told us that they would have preferred their presence.
- 3.51 In 2010, the special accommodation in the segregation units on all three sites had been used for prisoners on open ACCTs with no prior consultation with the site suicide prevention coordinator (see also recommendation 7.45).
- 3.52 In our survey 19% of respondents of Parkhurst, against the comparator of 10%, said that they had problems feeling depressed or suicidal when they first arrived, although 27%, compared with only 22%, said that they had met a Listener or Samaritan in the first 24 hours. There was no Listener working in reception but there was one on the first night/induction wing who had an input into the process.
- 3.53 There were 11 ACCT documents open at the time of the inspection at Parkhurst and 141 had been opened during 2010, of which only 44 had been opened due to an act of self-harm. Staff understood that ACCTs were opened for prisoners in crisis as well as those who had self-harmed, and prisoners told us that staff supported them while they were on an ACCT. Seventy-seven per cent of staff had been trained in ACCT foundation and 90% of managers had received case manager training. The training for both components was ongoing.
- 3.54 In Parkhurst, ACCT documentation was generally completed to a good level although a few did not indicate important historical information in the concern and keep safe section. Observational entries showed that some interaction had taken place but in general the comments by staff were too perfunctory. Post-closure reviews had taken place and were meaningful and addressed issues with the prisoner.
- 3.55 There were four trained Listeners in Parkhurst who had a weekly meeting and met the Samaritans fortnightly. On average, they received 30 call outs a month. However, they felt that staff did not value their service, especially during the night state when they said staff were often reluctant to allow them to see a prisoner in crisis or to end a call out despite continuing prisoner need. Each wing had a dedicated Samaritans telephone for prisoners but during the

inspection two of the telephones on wings were broken and the one on C wing was locked away during the day with no staff access.

- 3.56 There was no Listener crisis suite at Parkhurst. Listeners said that during the day they used any suitable office space or the prisoner's cell. During the night state, unless the prisoner in crisis was a low risk and in a single cell, they had to see prisoners on the landings, which compromised confidentiality.
- 3.57 Since the last inspection, there had been three deaths in custody in Parkhurst, all apparently due to natural causes. Action plans had been received for two of the deaths and the site had completed an appropriate action plan based on the recommendations of the investigating officer.
- 3.58 In our survey, 23% of respondents in Albany, compared with the comparator of only 10%, said that they had problems feeling depressed or suicidal when they first arrived, although 45%, against only 39%, said that in the first 24 hours staff asked them if they needed support with problems of feeling depressed or suicidal.
- 3.59 In Albany only 17% of respondents, against the comparator of 22%, said that they met a Listener when they first arrived, although 75%, compared with only 59%, said that it was easy for them to speak to a Listener. The site had a Listener in reception and as part of the first night/induction process.
- 3.60 At Albany, there were 14 ACCT documents open at the time of the inspection and 117 had been opened during 2010, of which only 48 were due to an act of self-harm. Eighty-three per cent of staff had been trained in ACCT foundation and 81% of managers had received case manager training. The training for both components was ongoing.
- 3.61 ACCT documentation in Albany was generally completed to a good level but care maps were mixed and several we saw identified only one issue. Staff observational entries were good and showed a good degree of interaction with the prisoner. Post-closure reviews were timely and carried out with risk issues discussed. Prisoners we spoke to said that staff were very supportive of them when they were in crisis, and we observed a caring approach by staff to those on ACCTs.
- 3.62 There were 14 trained listeners in Albany and those we spoke to said that they felt fully supported. There was an appropriately furnished Listener crisis suite on E wing, which had been used 175 times during 2010. It was not an overnight facility but did have a CCTV camera that was monitored in the wing office, which was disproportionate to the confidentiality of the process. Each wing had a dedicated Samaritans telephone that was accessible to all prisoners.
- 3.63 There had been 11 deaths in custody in Albany since the last inspection, including one in the previous week. All but one were apparently due to natural causes. Eight of the deaths had been investigated and the site had formulated an action plan to address specific issues.
- 3.64 In our survey, 54% of respondents in Camp Hill, against the comparator of only 46%, said that they had been given information about support for feelings of depression or suicide on their day of arrival. A Listener worked in reception and interviewed all new arrivals in private. Prisoners told us that this had assisted them in settling quickly at the site.
- 3.65 There were three ACCT documents open in Camp Hill at the time of the inspection and 72 had been opened during 2010, of which only 24 were due to an act of self-harm. Eighty-three per

cent of staff had been trained in ACCT foundation and 86% of managers had received case manager training. The training for both components was ongoing.

- 3.66 ACCT documentation in Camp Hill was generally completed to a satisfactory level and staff observational entries showed that some interaction had taken place, but in general comments were too perfunctory. Post-closure reviews had taken place and were meaningful and addressed issues with the prisoner. In one case we saw, there had been three post-closure reviews to address the prisoner's risk issues fully.
- 3.67 There were four trained Listeners at Camp Hill and they felt fully supported. There was an appropriately furnished Listener crisis suite on St Andrew's wing that was an overnight facility and a safer cell, but both were rarely used. There was a care and intervention cell on St Patrick's wing furnished with reading material and activity items. This was a recent initiative for use as a temporary location for prisoners who needed some space.
- 3.68 There had been three deaths in custody in Camp Hill since the last inspection, all of which were self-inflicted. Two deaths had been fully investigated and the reports' recommendations had been formulated into an action plan which the site had completed.

Recommendations

- 3.69 Monthly site safer custody meetings should not be cancelled.
- 3.70 There should be an enhanced case review before any decision to place a prisoner on an open assessment, care in custody and teamwork (ACCT) form into special accommodation, which should only be used for such prisoners in exceptional circumstances.
- 3.71 There should be a Listener in reception in Parkhurst to welcome and reassure new arrivals.
- 3.72 All staff in the prison should be trained in ACCT foundation, including those who work permanent nights.
- 3.73 Health care staff should attend case reviews at all three sites.
- 3.74 Staff at Parkhurst should be given guidance on the Listener scheme and encouraged to ensure Listeners have access to prisoners in crisis during the night state.
- 3.75 Parkhurst should have a Listener suite that is available 24 hours a day.
- 3.76 Care maps in Albany should always address fully the risks for prisoners in crisis.
- 3.77 CCTV should be removed from the Listener suite in Albany.

Housekeeping points

- 3.78 All relevant information on the history of prisoners at risk or in crisis should be completed in the relevant sections of the ACCT document.
- 3.79 The self-harm and suicide prevention policy document should focus more on the care of prisoners at risk of self-harm and suicide.

- 3.80 There should be a daily check of the Samaritans telephones at Parkhurst to ensure that they are available to prisoners 24 hours a day.
- 3.81 The family and friends reporting line at each site should be checked at least twice a day and a record log kept.

Good practice

- 3.82 *The information and guidance sheets in the ACCT files at each stage of the process assisted staff in managing prisoners at risk of self-harm and suicide more effectively.*
- 3.83 *The Listener in reception at Camp Hill carried out a private interview with new arrivals which helped them to settle.*

Applications and complaints

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.

- 3.84 Application responses were generally appropriate but some replies, notably in Albany, were not signed. There was ready access to application and complaint forms in most areas. Complaint boxes were opened inappropriately by night orderly officers. Complaints were administered slightly differently for each site. Complaint responses were generally timely and respectful, although some did not provide a complete response and in Albany some were not personalised to the complainant. Many confidential access complaints were returned unanswered for administrative reasons and others were not fully addressed.
- 3.85 Triplicate general application forms were used at all three sites with separate forms for specific areas, such as labour and health care. At Camp Hill, some wings had run out of their supply of triplicate forms and used a photocopy of the first page, which meant that prisoners did not receive a receipt. There was some variation in the administration of application forms across the three sites and between wings. At Camp Hill, prisoners returned completed applications to wing offices but Albany and Parkhurst had application boxes on residential wings which were emptied daily. Generally prisoners had ready access to the range of application forms.
- 3.86 All submitted applications were logged in a book on each wing and staff we spoke to were clear that, wherever possible, they would deal with applications on the wing. Copies of application responses were filed in prisoners' wing files but were not recorded in wing log books, so it was not possible to be assured about the timeliness of replies. The prison was piloting an electronic application recording and tracking system in three wings at each site. Although it was not possible for us to assess the effectiveness of this system, it was likely to provide the prison with considerable management information about the timeliness of applications.
- 3.87 The application responses we sampled were generally appropriate but we saw some responses, particularly at Albany, which were not signed and not timely.

- 3.88 There had been 4,632 complaints received to date in 2010 – 1,621 submitted at Parkhurst, 1,607 at Camp Hill and 1,404 at Albany. In our survey, 35% of respondents at Parkhurst, against the comparator of only 28%, said complaints were dealt with fairly, and in Albany, 44% against 32% said complaints were dealt with promptly. However, only 27% of respondents at Camp Hill, against the comparator of 41%, said complaints were dealt with promptly.
- 3.89 The three complaints clerks, one designated for each site, were co-located in Albany. All complaints boxes were emptied by night orderly officers at each site. Complaints from Parkhurst and Camp Hill were placed in sealed pouches and delivered to Albany through the daily courier service. This practice was inappropriate and could undermine prisoners' confidence in the complaints system. We were told that night orderly officers ensured that areas had an adequate and complete stock of complaint forms. Generally all wings had a reasonable supply, but at Camp Hill some wings did not have envelopes for confidential complaints.
- 3.90 All submitted complaints were logged, scanned and emailed to the relevant department or individual. The complaint clerks operated slightly different systems for allocating complaints, particularly those with a racial and or bullying aspect. Parkhurst complaints that ticked these boxes were sent both to the wing personal officer and to the race equality officer (REO) or violence reduction coordinator (VRC) as appropriate, which could mean that a prisoner received two different responses to the same complaint. At Albany and Camp Hill, such complaints were usually sent directly to the REO or VRC if it was clear that there was a racial or bullying aspect or were sent to the wing for a response and copied to the respective REO or VRC.
- 3.91 Complaint responses we sampled across the three sites were generally timely and respectful, although not all dealt fully with the complaint and many, at Albany in particular, were not personalised to the complainant.
- 3.92 All three clerks maintained a database and collated monthly monitoring data of submitted complaints by area, ethnicity, number and timeliness of responses but only Albany analysed complaints by subject.
- 3.93 Complaints submitted under confidential access for all three sites were opened and administered by the head of performance rather than by the governor, although all replies were seen by the governor before they were issued. Many confidential complaint responses we sampled had been forwarded to another manager to investigate and provide a response, but the reply to the prisoner often described this action rather than provide a full and complete response to his complaint. We also saw many examples where confidential access complaints were returned to the prisoner as not being about a confidential issue and they were told to re-submit their complaint on the appropriate form.
- 3.94 The head of assurance had recently begun monthly quality assurance of a 10% sample of complaint responses, and gave written feedback to relevant managers to help improve practice.

Recommendations

- 3.95 **Complaint boxes should only be opened by staff responsible for processing complaints.**

- 3.96 The administration of complaints should be standardised to ensure they are directed to the most appropriate person or department, and complaint clerks should consistently adhere to this process.
- 3.97 All complaint replies should be addressed to the complainant.
- 3.98 There should be frequent analysis of submitted complaints by subject across the prison to enable managers to identify trends and respond accordingly.
- 3.99 Confidential complaint responses should deal with all aspects of a complaint and provide a full and complete answer.
- 3.100 Complaint forms should not be sent back to prisoners because of technicalities in procedure.

Housekeeping points

- 3.101 There should be a plentiful supply of triplicate application forms on all wings.
- 3.102 All application responses should be signed by the respondent.
- 3.103 Envelopes for confidential complaints should be readily available on all wings.

Legal rights

Expected outcomes:

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

- 3.104 Legal service officers at Albany and Parkhurst offered basic advice but had no dedicated time to carry out their responsibilities. Legal advice at Camp Hill was provided independently by the Law Centre and responded to a wide variety of needs.
- 3.105 There were nominated legal services officers on each site. None of them had facility time to carry out their duties. At Parkhurst, both nominated members of staff were based on the induction wing and picked up remand and newly arrived prisoners on an ad hoc basis. New arrivals were asked if they wished to appeal as part of the induction interview. At Albany, the legal services officer had a formal slot to see prisoners on induction but was not always freed up from other duties to complete this. At Camp Hill, legal services officers had not undertaken any work since February 2010 but their services had been taken over by the community-based Law Centre, which had been commissioned through lottery funding. Applications for legal advice were dealt with by the resettlement team who referred prisoners directly to the Law Centre, where they received a range of advice from dealing with rent arrears to family law.
- 3.106 Despite the lack of facility time for legal services staff, only three applications were outstanding and these were less than a week old. This service relied entirely on the goodwill of the staff involved and their availability. We saw one appeal at Parkhurst which had not been lodged within the time limit due to the relevant staff not being available Responses to some

applications also indicated a rushed approach, with answers at Albany referring to conversations held in corridors to reply to queries.

- 3.107 The only bail information officer was based at Parkhurst, which held remand prisoners. He was trained and made relevant referrals on the infrequent occasions when this was required. There had been no successful applications since the new bail advisory service with Stonham had been in place.
- 3.108 Prisoners who wished to pursue legal cases received limited assistance with writing and printing legal correspondence. 'Access to information' computers were available at Parkhurst only. The libraries had a range of legal reference books and the mandatory list of Prison Service Orders (see library section).
- 3.109 In our survey, prisoners at all three sites were more negative than the comparators about communicating with solicitors and attending legal visits, although visits were available at all sites at the time of our inspection. Legal visits at Parkhurst took place in private in five dedicated legal visits booths in the main visits room. Legal visits at Albany were held in two tiny booths which were in view of the visits room and of each other. At Camp Hill, legal visits took place in four private booths above the domestic visits hall. The rooms were in a reasonable condition but interviews were audible to supervising staff as the booths were not sound proofed.

Recommendation

- 3.110 The visits booths at Camp Hill should be soundproofed to ensure legal visits take place in confidence.

Faith and religious activity

Expected outcomes:

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

- 3.111 Faith and religious activity across the prison was appropriate and most prisoners could see a chaplain of their faith regularly. Limited provision of chaplains for some smaller groups was supplemented by prisoner leaders. Faith forums were a positive initiative. The physical state of the chapel at Albany was a concern.
- 3.112 Each site had its own full-time chaplain coordinator, who were members of the senior management team. Parkhurst also had a full-time Muslim chaplain and Albany and Camp Hill had sessional Muslim chaplains. Other sessional and part-time chaplains worked mostly across all three sites. Provision across all sites was generally good with religious leaders available regularly. Where religious leaders were only able to attend infrequently, alternate sessions were led by identified prisoners from within the congregation.
- 3.113 In our survey, 61% of respondents at Parkhurst, against the comparator of 52%, and 60% against 55% at Camp Hill said that their religion was respected. All prisoners were seen during induction, although not always by a leader of their own religion, and there were good arrangements in all sites to ensure an appropriate range of faith and non-faith based activities

were provided. Prisoners had to apply to attend church services by Thursday evening and were subject to security checks, which was inappropriate (see paragraph 7.5).

- 3.114 Since April 2010, the coordinating chaplain at Albany had run a faith forum with prisoner representatives from each religion represented in the establishment. The initiative was very positive and helped to ensure that faith concerns were identified at an early stage. The model was being replicated across the other two sites.
- 3.115 All three sites had their own chapel, although the one at Albany was in a poor state of repair and leaked when it rained. Both Albany and Parkhurst had dedicated multi-faith rooms. The one at Albany room was no longer big enough for the number of Muslim prisoners using it and one of the workshops was being used instead for Friday prayers. Camp Hill did not have a separate area and all services took place in the chapel with religious icons covered up where necessary. There were plans to extend the chapel and build a multi-faith area.

Recommendations

- 3.116 The chapel at Albany should be repaired to prevent leaks.
- 3.117 Camp Hill should have a multi-faith room.

Substance use

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.

- 3.118 The integrated drug treatment system was on target to go live across all three sites, and there were already very good levels of integration between clinical and psychosocial services. In Parkhurst, random mandatory drug testing (MDT) had reduced slightly since our last inspection and was not excessive. Despite low MDT random test results in Albany, we were told that prescription drugs, not routinely detected by MDT, were regularly diverted and abused. The recent Camp Hill MDT rates had varied between a concerning 16.6% and 23%. The site did not routinely consider details of confirmed MDT test results or fully appreciate the extent of dangerous poly-drug use among the most chaotic users. Suspicion drug testing across the prison was poor.

Clinical management

- 3.119 The integrated drug treatment system (IDTS) was not yet fully live, although it went live in Camp Hill on 15 September and would be live in Albany in November and Parkhurst in December.
- 3.120 One IDTS clinical team covered the three sites, comprising a lead nurse (band seven), four band six and two band five nurses. All nurses were trained to the Royal College of General Practitioners (RCGP) level 1 certificate in substance misuse treatment. The IDTS nurses and counselling, assessment, referral, advice and throughcare (CARAT) workers were co-located on all three sites. This worked well and facilitated the integration and joint working approaches

of drug services. General nurses assisted with the administration of methadone at weekends or when IDTS nurses were off sick.

- 3.121 At the time of the inspection, one GP with special interest in substance use (trained to RCGP level 2) oversaw the prescribing, with cover from other on-call GPs. First night prescribing was covered by on-call GPs, although it was rare as most patients were secondary presentations. A further two (RCGP level 2) GPs had recently been recruited to assist with substance use treatment.
- 3.122 Of the 42 prisoners across the prison on methadone, the highest dose was 60ml. IDTS staff worked with each prisoner's individual needs, although formally scheduled 13-week reviews were not yet in place. Reviews were, however, conducted according to specific needs, and there were plans were to formalise regular reviews once all other facilities were established and the IDTS was live. There were monthly multi-agency meetings between health care staff, IDTS nurses, CARATs and the mental health in-reach team which discussed individual cases. These meetings demonstrated good levels of joint, client- focused working.
- 3.123 In Parkhurst, 18 prisoners were receiving treatment, with the majority being secondary presentations from within the existing population. Seventeen were receiving methadone and one Subutex. Many of these prisoners were waiting to go on to courses, but with limited availability and slow-moving waiting lists, staff and prisoners told us that this was causing anxiety among prisoners and therefore limiting the potential for significant dose reduction.
- 3.124 In Albany just three prisoners were in the IDTS. Two were on methadone and one remand prisoner was on an alcohol detoxification in the inpatient health care unit. The unit had four beds commissioned for detoxification and stabilisation, overseen by four RCGP level 1 trained band five nurses funded by the IDTS.
- 3.125 At Camp Hill, 35 prisoners were on the IDTS, of whom 23 were on methadone, seven on Subutex, four on benzodiazepine detoxification and one on naltrexone in preparation for release. We were told that most prisoners were stabilising on their methadone doses, although we found that many were topping up with illicit drugs. The lack of communication of test results between mandatory drug testing (MDT) and the clinical team was a large contributing factor to this potentially dangerous situation (see below).
- 3.126 Prisoners with a dual diagnosis (mental health and substance misuse co-morbidity) were assessed by one of two IDTS nurses who were registered mental health nurses. Prisoners assessed as needing mental health interventions were referred to the mental health in-reach team. Close liaison between drug and mental health services was facilitated throughout treatment, in addition to such cases being discussed in the monthly multi-agency meetings. A formalised care and referral pathway was under development, overseen by the head of mental health services.

Drug testing

- 3.127 There were MDT suites, with local coordinating officers, at each of the three sites. There was no overall MDT coordinator for the prison. MDT results were reported to NOMS as an aggregate for the whole of HMP Isle of Wight. The key performance target was 8.50% with the year-to-date figure up to July 2010 reported as 8.54%.
- 3.128 In our survey, only 24% of respondents at Parkhurst said it was easy to get illegal drugs there, against the comparator of 32%. There had been only three suspicion tests on the site in the

previous six months. This might have been partly due to low quality security information reports (SIRs), but also to the restrictive requirement for security analysts to have two pieces of intelligence, regardless of quality, before issuing suspicion test requests. Most significantly, there was usually a lack of MDT staff to perform tests. Security staff appeared to be less inclined to issue suspicion test requests when they had lowered expectations that they would be completed (see also main recommendation HP59).

- 3.129** The MDT suite on Parkhurst had two holding rooms which were reasonably clean. However one was out of use as a prisoner had kicked a hole in the plasterboard wall, which had not been repaired. A traditional toilet cubicle was used for taking urine samples. The toilet bowl was dirty and the ante-room doubled as a store for mops and buckets, although they appeared not to have been used effectively for some time. The area was generally untidy and dirty and inappropriate as a forensic testing environment.
- 3.130** In our survey, only 21% of respondents in Albany said that it was easy to get illegal drugs there, against the comparator of 32%. Despite these figures and low MDT random test results, prisoners told us that several types of prescription drugs – which are not routinely detected by MDTs – were regularly diverted and abused. Prisoners mentioned the analgesics tramadol and dihydrocodeine and drugs to control epilepsy, gabapentin and pregabalin, among the most commonly misused drugs.
- 3.131** The MDT suite on Albany was clean and tidy, with a purpose-installed urinal. The holding room was an enclosed area outside the suite door, which was light and airy with a bench for prisoners. The walls displayed information posters and a colourful mural describing the dangers of heroin.
- 3.132** Although respondents to our survey at Camp Hill gave the same response as the comparator on the ease of getting drugs there, both prisoners and staff told us that the site was ‘awash with drugs’. The highest MDT rates over the three months June, July and August 2010 were 16.6%, 23% and 20% respectively, indicating very high levels of use. We were, therefore, surprised to find that, during July 2010, when MDT random tests were their highest (23%), only one suspicion test had been completed and there had been no weekend tests.
- 3.133** Wing officers on Camp Hill told us that they hesitated to submit SIRs as they had little expectation that anything would be done. MDT officers were frequently redeployed to other duties. During the three months when drug use was at its highest, only six suspicion tests were conducted with only three positive results. Drug-related SIRs were processed by security on the basis of two pieces of evidence, but this was not as rigorously applied as at Parkhurst, especially if the initial evidence was strong (see also main recommendation HP59).
- 3.134** At Camp Hill, confirmed MDT test result sheets were not shared by managers with IDTS, CARATs or security staff. The information, which was routinely sent back from the independent laboratory, was filed away in the MDT suite. As a result, few managers were focused on the significant and worrying extent of poly-drug use among the most chaotic users. While clinical and psychosocial treatment providers had a better grasp of the extent of the problems, they too were not given access to these test results and were, therefore, disadvantaged in being able to respond to the specific implications of prisoners’ poly-drug use.
- 3.135** Our examination of test results data at Camp Hill revealed that many varied combinations of drugs were used. In the nine months to September 2010, 15 tests proved positive for use of illicit drugs on top of prescribed medication where the combination had the potential to cause significant harm to health. That equated to 1.66 prisoners a month where 5% of the total population of 580 were tested a month. From this we calculated that, on average,

approximately 33 prisoners at any time, i.e. just under than 6% of the population, could have been using drugs at high risk levels.

- 3.136** We found that one prisoner at Camp Hill was being cleared for release on home detention curfew (HDC) despite having failed a random MDT. Our examination of his detailed test results revealed he had used a troubling cocktail of drugs that had the potential of causing significant harm. However, it appeared that these facts had not been taken fully into consideration as the test results data had not been disseminated to the relevant bodies. It was clear that CARAT staff were more clearly focused on the issues but their concerns had been largely ignored by senior managers. The prisoner's HDC was only cancelled due to our inspection findings.
- 3.137** There had been several significant drugs finds at Camp Hill during August and September 2010. There were plans to fund the demolition of a wall to allow better security camera visibility across a currently obscured section of the boundary wall, although this would restrict only one area used to throw drugs over the wall and was no substitute for a robust suspicion testing programme. However, we were repeatedly told by staff at all levels that, under the existing staff profiling, there would always be insufficient staff to run the robust target testing programme necessary to reduce drug use significantly (see main recommendation HP59).
- 3.138** Furthermore, the number of drug dogs for the prison was being reduced from four to two, and compact-based drug testing (CBDT) had been discontinued for all prisoners except those taking part in the prison addressing substance related offending (P-ASRO) programme. Drug strategy officers who supervised medication queues and worked as CARAT officers had been reduced from 7.5 full-time equivalents to 1.5 in the previous three months. These cuts in staffing and other resources clearly contributed to what amounted to a loss of control of drugs availability at Camp Hill.
- 3.139** The MDT suite at Camp Hill was not sufficiently clean and there was no mat for prisoners to stand on during a full strip search. The holding rooms had comfortable chairs but were very small and contained no drugs information posters or other reading material.

Recommendations

- 3.140** Prisoners testing positive under mandatory drug testing (MDT) should be consistently referred to the counselling, assessment, referral, advice and throughcare (CARAT) service, and all available test result data forwarded without delay to the health care department, CARAT team, clinical integrated drug treatment system team and release on temporary licence boards.
- 3.141** All MDT facilities should be refurbished to create an adequate testing and waiting environment.

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 policies were in place but did not cover all strands. Each of the three sites had a diversity manager, although no more than 50% of their time was dedicated to the function. The diversity and race equality team was appropriately constituted but was largely focused on race. Prisoner diversity representatives were available at all three sites but their role varied. Focus groups for different strands of diversity were not available at all sites.
- 4.2 Diversity across all three Isle of Wight sites came under the remit of the overall safer custody team. The diversity team was led by the head of diversity, who reported to the head of safer custody. A senior officer at each site undertook the role of diversity manager. The model had come to fruition in April 2010 and was seen by most managers as being in the early stages of development. It ensured reasonable links across other aspects of safer custody, violence reduction and self-harm and suicide, while enabling each site to develop services appropriate to its specific population. As the three diversity managers also undertook other tasks across their sites, no more than 50% of their time was dedicated to developing the diversity strands (see main recommendation HP61).
- 4.3 The prison had an overarching diversity and race equality policy, which was available from all diversity representatives and in the Parkhurst library. This was broadly appropriate but was oriented almost exclusively to race equality. Separate disability and foreign nationals policies were also in place but, while each outlined the objectives of the prison, there was little about how the provision was to be delivered. The supporting diversity and race equality action plan (DREAP) nominally incorporated all aspects of diversity but, again, most of the developmental objectives were centred on general aspects of diversity or race. Of the 64 identified areas in the most up-to-date DREAP, dated October 2010, only 16 were focused on other areas, 11 of which related to foreign national prisoners; there was nothing about sexual orientation and only one related to older prisoners. Nevertheless, the diversity and race equality action team (DREAT) generally sought to raise the general profile of diversity. The prison's long-term objective was to have broadly similar provision across the three sites, while recognising the unique differences at each.
- 4.4 Included in the work of the DREAT was evaluation of ethnic monitoring figures (see section on race equality) but there was no monitoring of the impact of the regime on other minority groups at the prison, such as prisoners with disabilities or foreign nationals.
- 4.5 The DREAT met monthly and alternated across the three sites. Attendance was generally good, with most attendees responsible for areas of operation across all three sites. Prisoner representatives also attended but only when the meeting was held at their site. This caused continuity problems, as in effect any representative attended every third meeting, although site-specific meetings for representatives occurred at all sites monthly.
- 4.6 The role of prisoner diversity representatives varied across the sites. At both Parkhurst and Albany, the representatives tended to have a generic function, although there were prisoners with specific responsibilities at both but no separate focus groups. Black and minority ethnic

prisoners and diversity representatives told us that they felt unsupported and often isolated. At Parkhurst, for example, two prisoner representatives attended the local diversity representatives meeting and although they were both nominally lesbian, gay, bisexual and transsexual (LGBT) representatives, they also had wider responsibility and there was little in place for LGBT prisoners. At Camp Hill, representatives had been identified for all the key areas of diversity and each was responsible for publicising their areas and for developing support mechanisms. A number had already begun coordinating monthly meetings, including for older and younger (under 25) prisoners and foreign nationals. Other focus groups were planned, including for LGBT prisoners and for Gypsy, Traveller and Roma prisoners.

- 4.7 Prisoner diversity representatives in Parkhurst had met in June 2010 for the first time since new arrangements for diversity had been put in place but had met monthly since then and begun to structure appropriate arrangements for provision across the site. Diversity representatives here and in Albany all had a job description but some told us of their frustration in getting things implemented. Race was the primary focus of diversity meetings at all sites.
- 4.8 In Camp Hill, the minutes of diversity meetings indicated that issues were consistently taken forward, addressed and followed up. Prisoners spoke highly of the diversity manager and felt that diversity generally, and race in particular, was taken seriously across the site. Due to the relatively open nature of Camp Hill, access to prisoner representatives was relatively easy and prisoners knew the representatives on their wings and who to speak to about specific diversity strands.
- 4.9 Diversity prisoner representatives saw prisoners during induction at all three sites and a reasonable range of up-to-date information about aspects of diversity was displayed on wings across the prison.
- 4.10 The prison had recently begun to develop equality impact assessments across the prison. An appropriate timetable was in place, incorporated into the DREAP and monitored at the DREAT meeting. It was anticipated that these would be completed by the end of 2010, along with any associated action plan.
- 4.11 Staff diversity training was provided regularly and incorporated into the prison's monthly training plan. At the time of the inspection, approximately 60% of all staff had completed the 'challenge it, change it' course.

Recommendations

- 4.12 Each strand of diversity should be covered by an up-to-date policy and related action plan.
- 4.13 The role of prisoner diversity representatives should be clarified to ensure a consistent approach across the prison.
- 4.14 The impact of the prison's regime on all aspects of diversity, including disability, age and religion, should be monitored.
- 4.15 Focus groups for each strand of diversity should be available at all sites.

Race equality

- 4.16 Although well established, race equality varied across the three sites. Black and minority ethnic prisoners across the prison reported negative views in our surveys, particularly in regard to safety. Ethnic monitoring across all sites was generally in range, with a few concerns having been investigated and subject to ongoing work. The quality of racist incident investigations was generally good but there were delays at both Parkhurst and Albany.
- 4.17 The percentage of black and minority ethnic prisoners was similar at each site but slightly higher at Camp Hill, at 27%. The development of race equality across the prison was reasonably well established but provision varied. In our surveys, black and minority ethnic prisoners at all three sites indicated more negative views than those of white prisoners, although at Camp Hill there were as many dimensions where black and minority ethnic prisoners reported more positive experiences. While fewer black and minority ethnic than white prisoners at Parkhurst said that they had ever felt unsafe at the prison, at Albany more black and minority ethnic prisoners said that they had felt unsafe at some point, as well as currently, and fewer said that most staff treated them with respect. More black and minority ethnic than white prisoners at Parkhurst said that they had been victimised by staff (36% against 21%) and more said that they had been intimidated by staff (36% against 19%). There was no specific forum for black and minority ethnic prisoners to explore these issues or to enable a better understanding of the concerns (see recommendation 4.15).
- 4.18 The prison had begun to develop links with the wider community to support race equality, and independent scrutiny of racist incident report forms (RIRFs) was undertaken by a representative of the Portsmouth Race Equality Network Organisation. However, there was no course or programme at the prison to challenge racist views held by prisoners.
- 4.19 Ethnic monitoring at both Parkhurst and Camp Hill identified relatively few disparities. For example, it had been noted that there had been some apparent under-representation of black and minority ethnic prisoners in most aspects of segregation use and, although an initial enquiry had been undertaken about this, further work had been identified in the DREAP.
- 4.20 Ethnic monitoring at Albany was mostly within range, although there were some concerns that, in the previous 12 months, black and minority ethnic prisoners had been consistently over-represented on the standard level and under-represented on the enhanced level of the incentives and earned privileges (IEP) scheme. Initial exploration of this by the prison suggested that black and minority ethnic prisoners were more likely than white prisoners to deny their offence or refuse to engage in sentence planning targets and thus be restricted in their ability to reach enhanced status. Further exploration was being pursued, since this pattern predated the point when IEP restrictions had been imposed on deniers or treatment refusers.

Managing racist incidents

- 4.21 Across all three sites, the number of RIRFs submitted during 2010 was lower than in the previous year but it was not clear why this was the case.
- 4.22 In Parkhurst, the total number of RIRFs submitted in 2009 had been 93 but only 37 had been submitted in the first nine months of 2010. All investigations had been undertaken by the

diversity manager to a reasonable standard, although there had been some delays in the responses.

- 4.23 In Albany, the total number of RIRFs submitted in 2009 had been 67, with only 17 submitted so far in 2010. We were told that there had been a considerable backlog of RIRFs when the current diversity manager had taken over and that much of his time initially had been taken up clearing it. There continued to be long delays in the completion of investigations; a number of recent complaints had taken over three months to complete and at the time of the inspection two investigations had been outstanding for over five months. Prisoners told us that they had little confidence in the RIRF system and we noted that a number of the complaints submitted had been sent through the general complaints system rather than as a RIRF. However, the quality of the investigations undertaken was reasonable.
- 4.24 In Camp Hill, the total number of RIRFs submitted in 2009 had been 61, with only 31 submitted in the first nine months of 2010. RIRFs were generally well managed, investigated within the agreed timescale and responses were detailed and respectful.

Recommendations

- 4.25 The prison should develop and implement a programme designed to challenge racist and discriminatory prisoner behaviour.
- 4.26 All racist complaint investigations should be completed within the agreed timescale.

Religion

- 4.27 Only the Camp Hill site had a specific prisoner representative covering religion but all three sites had faith-based forums. Diversity managers had little involvement with this strand of diversity but this area was appropriately managed by coordinating chaplains.
- 4.28 A representative of the chaplaincy consistently attended the DREAT meeting and broad issues about religion and diversity were covered in the chaplaincy policy. Only Camp Hill had a prisoner representative specifically focused on issues of religion, although all three sites had begun to develop faith forums. This model had been introduced at the Albany site in April 2010, facilitated by the coordinating chaplain. Meetings were held monthly on this site and included prisoner representatives from each of the main religions of their populations. Parkhurst and Camp Hill had recently followed this model. Diversity managers had little involvement with this strand of diversity but coordinating chaplains took forward any areas of concern, either at the specific site or via the DREAT where appropriate.
- 4.29 The coordinating chaplains on each site were part of the prison's senior management team and at the time of the inspection were undertaking an equality impact assessment about access to faith-based activity.

Foreign nationals

- 4.30 Camp Hill was the only site to have a foreign national forum and dedicated prisoner representatives. Provision was limited at the other sites, although prisoners at Parkhurst were reasonably positive about their general experience. At Albany, foreign national prisoners

expressed more negative views than British nationals. Across all sites, there was little information in languages other than English and formal interpreting and translation provision was poor.

- 4.31 The foreign national population across the prison was 256, including 33 prisoners whose nationality was not known. All three sites had about the same number of foreign nationals but their management varied across each. The management of foreign nationals technically fell within the residential function and, other than at Camp Hill, there was little or no link with diversity managers. As a consequence, provision for this group at both Parkhurst and Albany was limited.
- 4.32 All three sites had established reasonable links with the UK Border Agency (UKBA), representatives of which visited each site at least once a month, sometimes twice. At both Parkhurst and Albany, interviews with the agency were managed by a resettlement officer but, although information about applying for an appointment was circulated across the wings, this information was available only in English.
- 4.33 The amount and range of translated information was limited across all three sites. A language translation software package was available at Parkhurst but was, apparently, inaccurate and was rarely used. Professional interpreting services were also rarely used. Although staff at Camp Hill told us that they used these regularly, official records indicated that they had been used only three times in the previous six months, at Parkhurst on each occasion. Information about the use of these services had been distributed across all wings at the prison in the week before the inspection.
- 4.34 All three sites used prisoners as informal interpreters/translators but only Camp Hill had an up-to-date list of the staff and prisoners who were willing to offer this service. Prisoners acting as interpreters and translators were not paid for this service, and were used even in circumstances requiring confidentiality, such as health care interviews, adjudications and assessment, care in custody and teamwork (ACCT) reviews.
- 4.35 There was no independent immigration advice available to any foreign national prisoners, although it was anticipated that the Detention Advice Service would begin to offer support in the near future.
- 4.36 Across all three sites, foreign national prisoners were able to have a free five-minute telephone call in lieu of visits. They had to apply for this every month and there could be considerable delays in this process.
- 4.37 Foreign national prisoners arriving at Parkhurst were able to access a range of information in reception that outlined advice about the site. However, this included nothing about the prison, and the general information about the site was out of date. Foreign national prisoners at this site told us that they had been given no information in their own language. The site had an identified foreign national resource centre above F wing but, again, information held here was out of date and we were told that it was rarely used.
- 4.38 At Parkhurst, there was no foreign nationals coordinator and there were no foreign national prisoner representatives. No assessment or needs analysis had been undertaken of this group of prisoners and there was no forum in which to raise their concerns. Despite this, in our survey 92% of foreign national prisoners, against only 80% of British nationals, said that most staff treated them with respect, and 100%, against 82%, said that there was a member of staff they could turn to if they had a problem.

- 4.39 There were no prisoner foreign national representatives in Albany and no forum for such issues to be raised. Minutes of diversity representatives meetings indicated that some foreign national issues were raised but it was not clear how matters were taken forward. The diversity manager at Albany did not consider himself to have a role with foreign national prisoners.
- 4.40 In our survey at Albany, foreign national prisoners expressed far more negative views of their experience than British nationals. Although they did not express particular concerns about their safety, more felt that they were not treated with respect compared with British nationals (53% against 85%) and considerably more said that they had been victimised (73% against 30%) or intimidated (50% against 28%) by a member of staff. Foreign national prisoners surveyed also perceived themselves to be less likely to be on enhanced status and less able to access goods they needed from the prison shop. There was no mechanism for measuring the accuracy of these perceptions.
- 4.41 Camp Hill was the only site that had a dedicated foreign nationals wing. Foreign national prisoners were not forced to be located on St David's wing and at the time of the inspection fewer than half (28) were. When vacancies came up, prisoners often chose not to move, as they were reasonably settled on other wings. Nevertheless, two foreign national officers were identified on the wing and they offered support and guidance to any foreign national prisoner across the site. Foreign national prisoners on other wings were able to visit St David's wing during free flow.
- 4.42 Each wing across Camp Hill also had identified foreign national prisoner representatives, who met at least monthly with the diversity manager and/or the foreign national officers. This offered a reasonable forum and issues were regularly taken forward. All foreign national prisoners were informed when UKBA were due to attend and were able to make appointments if they wished.
- 4.43 A recent survey had been completed of all foreign national prisoners at Camp Hill, with a view to developing a needs analysis for the population, although this evaluation was yet to be completed.

Recommendations

- 4.44 The prison should compile a list of staff and prisoners prepared to act as interpreters at all sites and ensure that this information is available to all departments. Prisoners acting as interpreters and translators should be paid.
- 4.45 Professional interpreting services should be used in all confidential settings, including adjudications, assessment, care in custody and teamwork (ACCT) reviews and health care interviews.
- 4.46 All prisoners should have access to independent immigration advice.
- 4.47 Information about the regime at all sites should be available to foreign national prisoners in a language they understand.
- 4.48 All foreign national new arrivals should have their specific needs identified, and there should be support systems to meet these needs. The information obtained should be used to develop a needs analysis of foreign nationals and appropriate services to meet them.

Housekeeping point

- 4.49 Once foreign national prisoners have applied for and received a monthly free telephone call in lieu of visits, they should not have to reapply on subsequent occasions.

Disability and older prisoners

4.50 The management of disability varied across the sites and only Albany, with the largest population of prisoners with disabilities, had a dedicated disability liaison officer. There were no disability forums at any site. Prisoners on the wings at both Parkhurst and Albany spoke reasonably of their experiences there. Older prisoners were mostly based at Albany and Parkhurst. An older prisoner project delivered by Age UK was coming to an end and there were concerns about how this work would be continued, especially at Parkhurst. Older prisoners generally had a limited regime and, despite receiving low retirement pay, were still expected to pay for their television.

4.51 Disability was reasonably well managed across the sites. Prisoners were generally identified at induction and information sent to the appropriate wings at Camp Hill and Parkhurst. At Albany, information was sent to the identified disability liaison officer but this was unreliable and at the time of the inspection no information had been forwarded for almost two months. All three sites had slightly different ways of managing disability and, given the generally higher number of prisoners identified as having disabilities at Albany and Parkhurst, both had wings that, while not dedicated to disability, tended to house most such prisoners.

4.52 All sites had good systems for setting up personal emergency and evacuation plans (PEEPs), although care plans outlining the day-to-day needs of prisoners were not well developed. The prisoners at each site with a PEEP were identified daily at the morning meeting to ensure that all staff were aware of them. All prisoners with a PEEP also had an identified 'fire buddy', whose responsibility it was to help with evacuation if required. The prison had recently developed and distributed a small guidebook to all fire buddies across the prison. With the exception of Camp Hill, the disability function operated in isolation of diversity managers and there were few indications of disability clearly incorporated into the general overview of the DREAT.

4.53 Although there had been considerable improvements at Parkhurst and Albany for prisoners using wheelchairs, and some staff and some prisoners had been trained in their use, some hospital appointments had been cancelled because of staff not pushing wheelchairs (see also paragraph 5.122).

4.54 At the time of the inspection there were 21 prisoners at Parkhurst with an identified disability, all of whom had a PEEP. However, there was no wider list of prisoners with a disability who did not require a PEEP, and from our survey it seemed likely that the number of prisoners with disabilities at this site was considerably higher than this.

4.55 Wing-based disability liaison officers at this site were responsible for developing PEEPs and ensuring that any necessary adaptations were available. This site had previously had a specific disability liaison officer whose role it was to manage all prisoners with disabilities across the site. This model had changed and there was currently limited coordination. Wing-based disability officers tended to work in isolation and although they spoke to each other and shared some experiences, there was no central coordination. Despite this, in our survey 100% of respondents in Parkhurst with a disability said that they had a personal officer and 36%,

against 22% of respondents without a disability, said that staff normally spoke to them during association. However, significantly fewer said that they were on the enhanced level of the IEP scheme (56% against 69%) and 29%, against 14% of prisoners without a disability, said that they had spent a night in the segregation unit during the previous six months. There was no regime monitoring or disability prisoner forum to enable the prison to explore these views further (see recommendations 4.14 and 4.15). The prisoner diversity group at this site included a disability prisoner representative but he was based on one wing and was not able to move around the prison or facilitate prisoners with disabilities coming to him.

- 4.56 Prisoners with the most debilitating disabilities were usually located on the Phoenix unit in Parkhurst. Prisoners there spoke highly of the support they received and it was apparent that staff had a good understanding of their needs. Each also had a named 'buddy', who helped with such tasks as collecting food. The Phoenix unit had a motorised wheelchair available but it was not being used as no one had been trained in its use. Prisoners with disabilities that prevented them from working were unlocked during the day and, while those on Phoenix were offered some activities, the regime elsewhere was limited.
- 4.57 At Albany, there were 49 prisoners identified with a disability. Although spread across the site, there were more on F and G wings than elsewhere. For these prisoners, integrated sanitation was available and appropriate grab rails were in place. Elsewhere, however, the use of night sanitation was inappropriate (see main recommendation HP60).
- 4.58 The disability liaison officer at Albany also ran a British Institute of Cleaning Sciences (BICS) workshop in the mornings and an older prisoner group in the afternoon. Although she was dedicated to her role and knew most prisoners with a disability, her time was limited and some such prisoners said that they had had minimal contact with her. However, she ran weekly surgeries on F and G wings, about which prisoners were positive. The disability liaison officer had no regular contact with the diversity manager, nor did the prisoner disability representative on F and G wings who was also not included in diversity meetings.
- 4.59 Most prisoners with disabilities at Albany had identified prisoner carers (buddies) who helped with cleaning, fetching meals and movement around the prison. Some of this work was undertaken by prisoners on a voluntary basis but for others it was a more formal role, for which they were paid. There was no formal forum for this group of prisoners at this site, although some of the less older prisoners with disabilities attended the older prisoner group, run on most afternoons.
- 4.60 Camp Hill had a generally younger population than the other two sites and only 12 prisoners there were identified as having a disability. Most of these prisoners had restricted mobility, although there were none who used a wheelchair. However, our survey suggested that this number was likely to be under-representative of the actual population with disabilities.
- 4.61 Although a forum was being set up for this group of prisoners, at the time of the inspection it had not yet met, although a prisoner representative for disability had been identified. Prisoners were managed by wing staff and, where necessary, links were made with the diversity manager to support any specific issues identified. PEEPs across the site were up to date and comprehensive, although, as with the other sites, support information and care plans were limited.
- 4.62 In our survey, however, prisoners with disabilities at Camp Hill were generally negative about their experience: 43%, compared with 27% of those without disabilities, said that they had felt unsafe at some point at the prison and 28%, against 12%, said that they felt unsafe currently; 26% against 15% said that they had been victimised by staff and 33%, against only 13%, said

that they had been threatened or intimidated by staff. Prisoners with disabilities also indicated that they were more likely than those without disabilities to have force used against them. Prisoners we spoke to did not reinforce these views and it was not clear why our survey identified such concerns. The lack of monitoring across the prison of the impact of the regime on minority groups meant that it was difficult to establish the veracity of some of the concerns raised (see recommendation 4.14).

- 4.63 At the time of the inspection, there were 171 prisoners over the age of 60 across the prison, of whom 62% were at Albany, 32% at Parkhurst and 6% at Camp Hill. A further 20% (111) of Albany's population and 14% (72) of Parkhurst's were between 50 and 59. There was no specific policy about older prisoners, although aspects of the disability policy affected this group, as most of the prisoners with disabilities were also older.
- 4.64 A 12-month initiative for older prisoners (50 and over) had been delivered across the prison by Age UK (formally Age Concern). At all three sites, monthly meetings were undertaken with identified representatives to identify and take forward any areas of concern. A series of seminars was also delivered at each site by guest speakers.
- 4.65 At Albany, the disability liaison officer also ran a daily activity group for prisoners over 50 which was generally well attended and appreciated by those who attended.
- 4.66 In our older prisoner surveys at both Parkhurst and Albany, prisoners were generally positive about their experiences: 94% of respondents over 50 at Parkhurst, compared with 78% of those under 50, said that staff treated them with respect and only 12%, compared with 24%, said that they felt unsafe at the moment. At Albany, older prisoners were more equivocal about being treated with respect but only 30%, against 43% of those under 50, said that they had felt unsafe at some point at the prison.
- 4.67 The work undertaken by Age UK was due to an end in November 2010. Although Camp Hill already had an over-40s group and a diversity prisoner lead who was anticipated to take over the work, and Albany had an older prisoner group, there were no succession plans at Parkhurst.
- 4.68 Prisoners beyond the retirement age were generally unlocked during the core day but, with the exception of Albany and those on the Phoenix unit at Parkhurst, there was a limited regime. All sites ran gym activities specifically for older prisoners. Retired prisoners received only £4 a week, out of which they had to pay £1 for their television.

Recommendations

- 4.69 Information about disability identified at induction should be forwarded consistently to the disability liaison officer at Parkhurst or appropriate wings.
- 4.70 All prisoners with a disability should have an integrated care plan, along with their personal emergency and evacuation plan.
- 4.71 Hospital appointments should not be cancelled because of staff refusal to push wheelchairs, and the motorised wheelchair at Parkhurst should be used to make the transportation of prisoners easier.
- 4.72 There should be an appropriate regime of support and activity for prisoners with disabilities on all sites.

- 4.73 All prisoner buddies should be paid.
- 4.74 A range of age-appropriate, wing-based activities should be available for older prisoners no longer working.
- 4.75 Retirement pay should be the average wage across the prison.

Housekeeping point

- 4.76 All sites should keep an up-to-date log of prisoners with disabilities, including those without a personal emergency and evacuation plan.

Sexual orientation

- 4.77 The sexual orientation strand of diversity was generally underdeveloped across the prison, even though a large group of prisoners at Albany regarded themselves as gay or bisexual. Parkhurst and Camp Hill had identified prisoner leads for this area but there were no prisoner forums or focus groups. Homophobic concerns raised in 2009 had not been properly investigated.
- 4.78 The prison had no policy about sexual orientation (see recommendation 4.12). At Parkhurst, a diversity prisoner representative had a specific focus on sexual orientation issues but had not yet run any groups or developed a forum. At Albany, no work was being undertaken in this area, even though our survey revealed that 11% of respondents regarded themselves to be gay or bisexual. We were told that there had previously been support groups for gay and bisexual prisoners at both Parkhurst and Albany but they had been disbanded. Camp Hill had a prisoner representative with this specific remit, although focus groups had yet to be started.
- 4.79 In our survey at Albany, 77% of gay and bisexual prisoners said that they were on the top level of the IEP scheme (against 57% of heterosexual prisoners) and 95%, against 82%, said that there was a member of staff they could speak to if they had a problem. Despite this, 28%, compared with 2%, said that they were victimised by other prisoners because of their sexuality, and 17%, compared with 1%, said that they were victimised by staff because of their sexuality.
- 4.80 Both Parkhurst and Albany had diversity incident reporting forms to cover areas of diversity other than race. While these were rarely completed, three had been submitted in March 2009 at Albany and were related to homophobia. These complaints had not been investigated and had been closed in January 2010, as the protagonists were no longer at the prison. Such an approach undermined confidence that concerns relating to sexual orientation would be taken seriously by the prison.

Recommendation

- 4.81 Diversity incident reports should be available across the prison. When submitted, all should be investigated and managed within the same timescale as for racist incident report forms.

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 A recent health needs assessment 'refresh' had been undertaken but had not identified, or focused on, clinical need. Clinical governance arrangements were variable, with primary care trust policies not adapted appropriately for the prison environment. There were few care plans and some were out of date and not adhered to. Treatment times clashed with regime provision. In Parkhurst and Albany the primary care environments were poor. Nurse-led clinics varied across the sites, as did waiting times for the GP and other health professionals, which were long. There were numerous problems with medicines management, and dentistry services were not at full strength. There were long delays and cancellations for secondary care appointments. The inpatient unit environment had improved but lacked structured or therapeutic activity for patients. Mental health services were good but service capacity was inadequate for the needs of this complex population. There were some long delays in transferring patients to secure mental health placements.

General

- 5.2 Health services for the prison were both commissioned and provided by NHS Isle of Wight (the primary care trust (PCT)). Prison primary health services were part of the medical, diagnostics and emergency clinical directorate, while other departments were part of other directorates.
- 5.3 We were provided with a draft health needs assessment that had recently been undertaken but this did not provide clear recommendations and had been completed to fulfill prison health quality performance indicators, rather than to inform appropriate commissioning. A service level agreement between commissioners and providers was being developed but this procedure was described as a 'slow process'.
- 5.4 Primary care facilities varied across the sites. In Parkhurst, the waiting room was a cramped 'corridor' and not suitable for its role. Prisoners attending to collect their medications were forced to queue in the open air, in all weathers. Building work was being carried out in the department, so clinical rooms were in short supply. The department was cluttered and untidy and did not provide a clinical environment.
- 5.5 At Albany, recent building works had improved the department, although some of the clinical rooms still had carpet on the floor. The waiting room was reasonable, with some health promotion materials on display, but the prisoner queue extended into the main corridor at treatment times.
- 5.6 The Camp Hill health care department was bright and welcoming and the waiting room contained a variety of eye-catching displays. There were too few clinic rooms, hampering the ability of staff to provide a wide range of clinics, although they used the available facilities imaginatively. There was a covered area outside the windows, from where medications were administered. There were two hatches, with no privacy screen between them. However, at some treatment times, the queue for medications stretched out onto the courtyard.

- 5.7 None of the primary care facilities had specific cleaning schedules, despite being mentioned in the PCT infection control policy.
- 5.8 The pharmacy department was based at Parkhurst. It was cluttered and housed in a building of poor condition and decorative order. There was a new pharmacy in the new inpatient health unit at Albany, which was not used. There was a lead nurse for older people across the prison, based at Albany, However, services for this group of prisoners were not well developed and there were no specific clinics or services.
- 5.9 In our survey, only 39% of respondents across the prison rated the quality of health services as good or very good, compared with 44% at comparator prisons. Responses for Camp Hill were better than at the other two sites. Service provision was inequitable across the sites.
- 5.10 There were no specific patient forums on any site except in the inpatient unit. Health services issues were raised at prison councils, and a specific meeting was sometimes convened with health services staff. Prisoners we spoke to were sceptical that anything changed as a result of the meetings.
- 5.11 Prisoners were able to use the PCT complaints system to comment about services.

Recommendations

- 5.12 The health care department and waiting room at Parkhurst should be suitable for its role.
- 5.13 There should be comprehensive cleaning schedules in all health service areas, so that infection control requirements can be met.

Clinical governance

- 5.14 The head of health services was a registered mental health nurse and reported to the associate clinical director for the medical, diagnostics and emergency clinical directorate. He was not a member of the senior management board. There was a lead nurse/modern matron, a primary health care manager and a business and performance manager. Each site had a team of primary care nurses, with a team leader; there was also a specific inpatient unit team and a team of integrated drug treatment service (IDTS) nurses.
- 5.15 A prison strategic partnership board met bimonthly. It was chaired by the PCT director of commissioning and attended by the head of health services and the prison director of central services, who had delegated authority from the governor. There was also a monthly operational and modernisation meeting, chaired by the PCT senior commissioner, which included PCT providers and prison representatives; it incorporated the medicines and therapeutics meeting. The community mental health team (CMHT) forensic psychiatrist chaired a monthly combined clinical governance meeting, which brought together the primary care, IDTS and mental health teams and included two prisoner representatives. This meeting provided a forum to oversee the clinical governance of health services at the prison and aimed to ensure that all health services followed a common framework of clinical governance.
- 5.16 Staff had access to continuing professional development and mandatory training from the PCT, although they commented that it was often difficult to attend training because of staff shortages and the training was sometimes cancelled at short notice. There was a weekly prison clinical improvement forum which was open to all clinical staff, with visiting speakers.

Not all staff had access to clinical supervision, although some had organised their own. Pharmacy staff were not supported in ongoing training programmes suitable to their level of expertise. Not all GPs had an adequate induction to working at the prison.

- 5.17 Staff had access to clinical policies and protocols via the PCT's intranet, although there were hard copies of some policies in the primary care centre at Parkhurst which were several years out of date. Most of the policies that we reviewed did not mention the three sites and in some cases were not applicable to the custodial setting. There was no policy for the management of an outbreak of a communicable disease within the establishment, or an information sharing policy. Following a recent outbreak of norovirus at Albany, a multi-agency plan was being developed.
- 5.18 There were no clear procedures or written pharmacy-related policies for staff to adhere to. The PCT was advised of pharmacy-related incidents but there were no records in the pharmacy of how procedures had been changed following any incidents.
- 5.19 The PCT had a memorandum of understanding with the prison for the provision of automated external defibrillators (AEDs). Resuscitation equipment, including an AED, was available in each of the primary care centres and was checked daily. There was also an AED in each of the gyms and night orderly offices, although discipline staff we spoke to were not always aware of their location. Few discipline staff were trained in the use of the defibrillators and not all the health services staff were in date with their resuscitation and defibrillation training.
- 5.20 Staff were able to access the PCT's occupational therapy services. Occupational therapy staff had visited prisoners and provided helpful assistance.
- 5.21 Clinical records were maintained on SystmOne but its use varied across the sites. Care plans were poor or non-existent for those with physical health problems and we found several examples in all sites where care plans were not followed, compromising patient care. The recent health needs assessment cited under-recording of 'chronic conditions' in the prison. Some entries on SystmOne, both by nurses and doctors, were poor, although entries by mental health staff were excellent. A recent death in custody report from the Prisons and Probation Ombudsman had made reference to the need to improve the accuracy and consistency of clinical record keeping.
- 5.22 When prisoners left the establishment, their paper clinical records were archived in the inpatient health unit.

Recommendations

- 5.23 All clinical policies should be up to date, relevant and applicable to the prison setting.
- 5.24 All staff should know the location of the resuscitation equipment and defibrillators, and receive annual refresher training in their use.
- 5.25 All clinical records should be clear, accurate and comply with professional requirements.
- 5.26 Care plans should be implemented for patients with complex or specific needs and be up to date and used appropriately.

- 5.27 There should be planned training, including induction, to ensure all health care professionals and staff have appropriate skills and knowledge to meet patient needs.

Primary care

- 5.28 Primary care services across all the sites were open between 7.30am and 5.30pm each day. After that time, the nurses from the inpatient unit were only available for telephone advice, or staff contacted the local GP out-of-hours service; doctors from this service also provided GP services to the prison. Health services staff were not part of the induction process at any of the sites and health services information given to prisoners was poor. There was a daily GP clinic at all three sites. Overall, 59% of prisoners in our survey rated the quality of the service they received from the GPs to be good or very good, which was better than the 50% comparator.
- 5.29 Across the prison, applications for health care appointments were put into the box for general applications and were not confidential, and prisoners we spoke to at all three sites told us that they had no confidence in the system. Nurses encouraged prisoners to hand their application forms in to them; however, at Parkhurst only prisoners on medications or with an existing appointment could access the health care department. We posted applications into boxes on the wings at Parkhurst and Albany, and only one of the forms reached the department within 24 hours; the form submitted at Albany failed to arrive within the two weeks of the inspection.
- 5.30 When prisoners were transferred between the sites, their clinical record was closed and then reopened, but if they were on a waiting list for any clinics they were not transferred to the relevant list at their new location, despite the fact that it was still within the prison.
- 5.31 None of the sites had a published primary care timetable; nurse-led clinics were organised on an ad hoc basis, when staffing levels and clinic space allowed. There were inconsistencies between the sites in the clinics offered and in some cases there was no correlation between the prevalence of clinical conditions and the services provided. For example, data on SystemOne indicated that there were over 100 prisoners at Albany with high blood pressure. The primary care department there did not have a blood pressure check clinic, unlike both of the other sites, and only 36 patients were on a waiting list for a hypertension clinic appointment, some of whom had been waiting over six months. Neither Albany nor Camp Hill had a nurse-led service for those with coronary heart disease, even though SystemOne indicated that 59 prisoners at Albany had a diagnosis of coronary heart disease. At Parkhurst, there were 18 with the same diagnosis but none was waiting to be seen at the clinic. We were unable to ascertain whether this was because they had all been seen or because they had not been allocated to the clinic list.
- 5.32 The optician visited each site once a month but there were long waits for appointments. At Parkhurst, there were 58 prisoners on the waiting list, including some with diabetes. The longest wait at the time of the inspection was eight months. In addition, patients had already been allocated to the monthly clinics for the remainder of 2010, so in reality the wait was likely to be a year. The wait at Albany was at least eight months and at Camp Hill it was five months.
- 5.33 Most visiting health professionals provided sessions in all three sites. For example, the nurse consultant for sexual health provided a monthly clinic at both Parkhurst and Albany and a weekly clinic at Camp Hill. She accepted referrals from clinical staff, counselling, assessment, referral, advice and throughcare (CARAT) team and self-referrals. The service replicated that provided to the wider community and included chlamydia screening and the care of men with HIV.

- 5.34 Prisoners could request barrier protection and lubricants from health services staff at all three sites but it was not clear how they were informed of this service. The items were then ordered from the pharmacy, so prisoners had to wait for the items.
- 5.35 Smoking cessation services were provided by PE staff in all three sites, and prisoners could be referred to the GP for alternative nicotine replacement therapy if patches were unsuitable. However, not all clinical staff were aware of the service provided by the PE departments. The PE departments also ran a range of healthy living courses and health promotion activities.
- 5.36 At all three sites, prisoners were used as interpreters for others who were not able to converse easily in English. There seemed to be no use of telephone interpreting services (see recommendation 4.45).
- 5.37 None of the departments had dedicated discipline staff, so officers did not always know how to assist the nursing staff in ensuring that prisoners arrived for their appointments in a timely manner.
- 5.38 Staffing vacancies at Parkhurst affected patient care. New arrivals were seen for a first night assessment by a health care assistant and then called for a secondary health assessment within the next few days, although prisoners did not always attend. The health care room in reception was functional but bare.
- 5.39 At the time of the inspection, the next available appointment for a GP in Parkhurst was five days later. Prisoners were collected from their wings or work location by escort staff but often had no idea why they were being asked to attend the department. We spoke to several men in the waiting room who thought they had been called to see the GP, although their appointment was with another health professional.
- 5.40 We were not confident that staff at this site were using the SystemOne waiting lists appropriately. For example, we found patients on the asthma clinic list with notes to suggest that they required ear syringing and abscess incision/drainage. We also found that clinics were booked in advance, with no reference to how long the patients had been on the waiting list, so there was no complete audit trail.
- 5.41 Parkhurst had a weekly hepatitis B vaccination clinic but meningitis C vaccinations were not offered. Staff commented that they could be given if requested but we saw no evidence that this was made clear to prisoners. Health promotion services were limited. One of the nurses ran a well-man clinic for which prisoners could apply.
- 5.42 New arrivals at Albany they were seen in reception by a nurse, who shared a room with the senior officer. If this room was in use, the new arrival was seen in a screened-off area in the main foyer, which did not provide any confidentiality. Prisoners were given an out-of-date information leaflet which had been photocopied so many times that it was difficult to read; it was available only in English. There was no SystemOne terminal in the reception area.
- 5.43 Recent building works in the department at Albany had had a detrimental effect on the delivery of patient care. Nurse-led clinics had been suspended for some time. We found several patients with lifelong conditions who had not been seen; some had care plans that were considerably out of date, while others had no care plans (see recommendation 5.26). The layout of the department did not afford patient confidentiality; prisoners in the waiting room could easily hear nursing staff discussing other patients in their small office area.

- 5.44 Following receipt of an application, prisoners were sent an appointment to attend any clinic appointment; as such appointment notices often failed to arrive, staff had started to deliver them direct to the wings themselves. Waits for the GP were reasonable; in our survey of that site, 41%, against the 35% comparator, said that it was easy to see the doctor. There was no health promotion activity.
- 5.45 There were two or three nurses on duty every day in Camp Hill. New arrivals were seen in the health care department for an assessment, which usually combined the initial and secondary health assessment. Prisoners were given a leaflet about health services, which was available only in English and poorly presented.
- 5.46 Prisoners in Camp Hill were encouraged to give application forms directly to health services staff. Staff booked appointments for prisoners on SystmOne and printed off appointment slips that were sent through the internal mail system to prisoners. Staff and patients told us that slips often arrived so late that prisoners missed their appointments. Nurses tried to see prisoners as soon as possible after they had handed in their application. Prisoners were given individual appointment times; if necessary, they could be seen on the same or next day but some waited up to a week to be seen.
- 5.47 Nurse-led clinics in Camp Hill for prisoners with lifelong conditions were provided when staff and clinical rooms were available. Nurses each took a lead in a particular condition, such as diabetes, weight management and respiratory conditions, and followed evidence-based practice guidelines. Staff provided a weekly hepatitis B clinic; at the time of the inspection, staff were working from two different recording systems for those waiting for a course of hepatitis B vaccinations, so it was difficult to determine how many prisoners were waiting to be seen. Other clinics, such as weight management, were not listed on SystmOne.
- 5.48 Nursing staff at Camp Hill had a proactive attitude; on one day during the inspection, they managed to run four nurse-led clinics in one morning, by judicious use of clinic space, as well as a GP clinic and a dental therapist session.
- 5.49 Staff at this site clearly knew their patients, and there was a good rapport between nurses, prisoners and discipline staff. They followed up prisoners who failed to attend their appointments and altered appointments to fit in with prisoners' other commitments, such as visits, when possible. Prisoners in our groups at Camp Hill rated health services as one of the positive aspects of the establishment.

Recommendations

- 5.50 Prisoners should have access to responsive health services at all times.
- 5.51 SystmOne should be reorganised to register prisoners as being at HMP Isle of Wight, rather than separate sites, so that contemporaneous clinical records can be maintained and waiting list information is not lost when prisoners transfer between sites.
- 5.52 Health care staff should contribute to the induction programme at all three sites.
- 5.53 Prisoners should not wait excessive periods for any health services appointments.
- 5.54 All staff should be familiar with SystmOne; it should be available and used to facilitate health services and patient care, and provide comprehensive clinical audit data.

- 5.55 Prisoners with lifelong conditions should be seen in line with evidence-based practice.

Housekeeping points

- 5.56 Prisoners should receive accurate, easy-to-read information about health services during their induction, including a primary care timetable, in a language they understand.
- 5.57 The applications system for health services should be confidential, timely and suitable for use, depending on the regime of the site.
- 5.58 Prisoners should be able to obtain barrier protection.

Pharmacy

- 5.59 Pharmacy services across the prison were provided by an in-house pharmacy but there were no pharmacist-led clinics. There were few regular visits to the treatment rooms; prescription items ordered by the health care units were supplied the following day. A porter took medication to the treatment rooms three times a day, at specified times. There were three treatment times for primary care patients, but on all three sites the times clashed with the regime. For example, at Parkhurst, at the weekends, prisoners on medications had to choose between collecting their medications or going to chapel, and at Albany the opportunity for outdoor exercise was at the same time as the morning treatment round, and prisoners could be in the queue for over 30 minutes, thus missing exercise (see recommendation 6.71).
- 5.60 There was no evidence that heat-sensitive products had been stored in appropriate conditions on all sites; some staff were unaware that the thermometer should be reset after daily recording of temperatures, or what action to take if the temperatures recorded were outside the 2–8°C range. On the inpatient unit, there were two medicines trolleys, one of which was metal and attached to the wall but the other was wooden and not attached to the fabric of the building. The latter trolley contained a loose foil of ibuprofen. All other medication was stored appropriately.
- 5.61 None of the treatment queues that we observed were supervised effectively by discipline staff, and prisoners told us about bullying incidents that had occurred in the treatment queues. Treatment hatches at all three sites provided little opportunity for confidentiality although this was being addressed at Albany with the provision of wooden hoods around the hatches.
- 5.62 In-possession risk assessments were not in place; some nursing staff believed that the GPs did them but they were not documented and appeared to be done on an ad hoc basis. There was a draft policy for in-possession medication but it had not passed all the PCT scrutiny committees required; it needed major revision and implementation would require a change in culture at the prison. There was a general lack of written policies and procedures.
- 5.63 There did not appear to be evidence-based prescribing, and there was no prison formulary in place. The prescribing of tramadol, pregabalin and gabapentin (all powerful analgesics) appeared to be high, with over 10% of the population being prescribed at least one of these for pain. Dihydrocodeine and diazepam prescribing also appeared to be high, and we saw a prescription for 56 co-codamol 8/500 'two to be taken when required for headache' and given in-possession, which was inappropriate. All these medicines have the potential to be abused and patients in possession of them could be liable to bullying. At Albany it was reported that five patients had been observed to 'palm' their see-to-take tramadol the previous week and were subject to adjudications.

- 5.64 Prescriptions were computer generated on SystmOne, then printed and signed by the doctor, who usually indicated on the prescription whether the medicine should be supplied for daily, three daily, weekly or monthly in-possession use but often failed to note whether the medication was to be taken continuously or in a short course. Pregabalin was sometimes prescribed as one see-to-take dose, with the second in-possession, packed and labelled appropriately, but others were prescribed as twice a day, not in possession, with the second dose given to the patient unpacked and unlabelled by the nursing staff. The segregation units had no access to SystmOne, so it was necessary for patients located there to mark the medication as administered.
- 5.65 Many patients' medications were dispensed in venalink packs, but the system was used inconsistently and patients were sometimes confused about what and when they should take a medicine. At Parkhurst, we noted several examples of medication that should have been an observed administration, including night sedation, given to patients to take later. At Albany, nurses took medicines out of original packaging to give to patients to take later, which constituted secondary dispensing.
- 5.66 There appeared to be little communication between the health services and pharmacy teams. At Albany, we witnessed a delivery of four boxes of prescription medicines at 4.10pm, when treatment time started at 4.15pm, so there was no time to unpack and book-in the items before patients requested them. A number of prisoners told us that they had regular gaps in their supply of medication; the pharmacist dispensed medication every seven days but, because of the lack of communication between nursing and pharmacy staff, patients often had to wait for supplies.
- 5.67 Administrations of medications were recorded on SystmOne but the reasons for any lack of administration were not noted. In Parkhurst and Camp Hill, prisoners were asked to sign for any weekly or monthly in-possession medications but at Albany this was not the case; we were told that this was to reduce the risk of infection between prisoners and nursing staff when using the same pen.
- 5.68 A limited list of medication was available to prisoners, such as 16 paracetamol or 16 ibuprofen tablets and Gaviscon, following the receipt of an application. These supplies were appropriately recorded. There were some patient group directions, which widened the range of medications that could be given without the need to see the doctor.
- 5.69 Controlled drugs, including those for IDTS, were obtained from the pharmacy on a named-patient basis. Records in the pharmacy were maintained using an electronic controlled drug register, and on the three sites using paper record books. The balances we checked were correct.

Recommendations

- 5.70 Prisoners should have access to a pharmacist.
- 5.71 Treatment queues should be supervised adequately by discipline staff, to reduce the potential for bullying or the passing of medications.
- 5.72 A step-wise approach to pain management, such as the World Health Organization analgesic ladder, should be used, modified for the prison environment, to reduce opiate usage.

- 5.73 Secondary dispensing should stop.
- 5.74 The timing of medication rounds and medicine delivery to the treatment rooms should be revised to ensure that patients get their medications without gaps or delays.
- 5.75 The nurse should observe each administration of medication where it has been deemed unsuitable for the prisoner to hold it in possession.

Housekeeping points

- 5.76 Maximum and minimum temperatures should be recorded daily for the drug refrigerators in treatment rooms and pharmacy, to ensure that heat-sensitive items are stored within the 2–8°C range. Corrective action should be taken where necessary and should be monitored by pharmacy staff.
- 5.77 The medicines trolleys in the inpatient health unit should be attached to the fabric of the building.
- 5.78 Full and complete records of administration of medicines should be made. This should include records of all occasions where the patient has refused medication or failed to attend, and issues relating to drug compliance should be followed up where appropriate.
- 5.79 Prescribing data should be used to demonstrate and promote effective medicines management and prescribing should be based on evidence.
- 5.80 There should be appropriate policies covering all areas of pharmacy provision.
- 5.81 The in-possession risk assessments of each drug and patient should be documented and any the reasons for the determination recorded.

Dentistry

- 5.82 The PCT was contracted to provide 10 dental sessions a week across the prison, with input from a dental therapist, hygienist, dental surgery assistants (DSAs) and dentists as required. However, at the time of the inspection there was only a locum dentist in place for one day a week, with occasional sessions provided by dentists at the PCT community dental services. This was supplemented by a regular triage clinic run by a qualified DSA. Group oral health education took place seven days a year, with 45 attendees at a recent event. The PCT provided out-of-hours and annual leave dental cover. There had been no oral health needs assessment.
- 5.83 At all sites, prisoners made written applications to see the dentist which were then prioritised by dental staff. Emergencies were given appointments as soon as possible and normal treatment requests were given a triage appointment to determine urgency.
- 5.84 The management of dental appointments was disorganised. The dental team was transferring from SystmOne to the Kodak R4 dental practice management system. The waiting list information on the two systems did not agree. The waiting lists included those waiting for a first triage appointment and those waiting for treatment.
- 5.85 At Parkhurst, there were 94 on the waiting list, the longest wait being three and a half months. At Albany, there were 62 on the waiting list, the longest wait being two and a half months.

There had been problems achieving the required sessions because of the building/decoration work and the surgery had been closed between June and August 2010. Sessions had also been lost owing to sickness and the eventual loss of the dentist. At Camp Hill, the waiting list was 119, with the longest wait being two months.

- 5.86 There was variance in failure to attend rate across the sites, the worst being at Camp Hill, where 68 (24.3%) had failed to attend in the previous three months. There had been no proper analysis of the reasons for failure to attend appointments but evidence from complaints indicated that there may have been failures in the delivery of appointment slips. There had also been some local difficulties with prisoner movements at Parkhurst, and surgery time was often lost waiting for patients to arrive in 'batches', frequently an hour after the start of the session.
- 5.87 There was poorly organised communication between the dental and the health care teams, with no regular structured meetings.
- 5.88 Dental facilities and clinical equipment were generally appropriate and in good condition, apart from a new wall-mounted intra-oral X-ray unit at the Albany site which had not been critically tested since its installation in February 2010 and could not be used. The responsibilities for equipment maintenance were not clearly set out and were the subject of dispute between staff. Surgery inspections had not been carried out for about three years.
- 5.89 Standard infection control procedures were in place and carefully followed. Domestic cleaning arrangements for the three surgeries were inconsistent. At Albany, debris was clearly visible on the floor. Waste collection, including hazardous waste, was also variable and the clinical waste bins at Albany were full and unusable.
- 5.90 There was considerable variation between the three surgeries. At Parkhurst, the floor surface was in good condition and clean but was deeply stained and unsightly. The compressor was extremely noisy and not appropriate for a clinical environment. At Albany, the surgery was hot, cramped and poorly ventilated. The surgery was undergoing building work. A new suspended ceiling with lighting units had been fitted but the lighting was not fully operational. At Camp Hill, the surgery was satisfactory.
- 5.91 Both paper and electronic dental records were appropriately annotated and stored. There was no consistent reporting of soft tissue examination for all patients or detailed reporting of all radiographic findings.

Recommendations

- 5.92 There should be an oral health needs assessment.
- 5.93 There should be regular and appropriate maintenance of dental equipment, with clear demarcation of which staff are responsible.
- 5.94 Annual surgery inspections should be scheduled as a matter of urgency.
- 5.95 Clinical waste control measures should be put in place and adhered to in all three dental surgeries.

Housekeeping points

- 5.96 There should be regular, properly structured meetings between the dental and health care teams.
- 5.97 Commissioning of the wall-mounted X-ray unit at Albany should be completed.

Inpatient care

- 5.98 There was an 18-bedded, purpose-built inpatient unit, with 12 beds commissioned and staffed by the PCT. The unit served all sites and was part of the operational capacity but not on the certified normal accommodation. The unit was clean and light and a considerable improvement on the previous facility at the Parkhurst site. There were residual temperature control problems in some non-clinical areas. There were spacious bedrooms with integral sanitation but there was no screening for the windows. The two dedicated palliative care rooms had a shared shower area, although the privacy screen was inadequate. There was no evidence of health promotion literature.
- 5.99 There were good facilities for dining out, which were used regularly, and satisfactory association facilities, including a television, pool table, table tennis, computer games, a small library and a telephone. There was a cancer support group, run by one of the nurses, and a regular yoga class. There was no therapeutic activity or links with education for mental health or longer-term patients. There were two gardens, one provided from the King's Fund, but this was not in use, pending a risk assessment (see also paragraph 9.58).
- 5.100 Staffing usually comprised three registered nurses and one health care support worker during the day, with two discipline officers drawn from either residential wings or security but not dedicated to the unit. At night, there were two registered nurses and one discipline officer.
- 5.101 There was a formal admission policy, which clearly identified clinical needs-based criteria, but nurses were sometimes put under pressure to admit inappropriately from the wings, particularly in the evenings and at weekends. Staff had to give 48 hours notice of patients ready to return to the Parkhurst and Camp Hill sites.
- 5.102 In the previous year there had been 182 admissions. One patient had stayed 203 days, while over 20 patients had stayed in excess of 30 days. A large number of the long stays had been for chronic medical problems or serious mental health issues. During the inspection, there were two patients on the unit, who were medically ready for return to the wings but had ongoing social care needs.
- 5.103 The GPs visited the unit three times a week but only half an hour was allotted for each visit, which was inadequate to review patients. The forensic psychiatrist made one scheduled visit a week to review patients with mental health problems.
- 5.104 Prisoners were usually able to spend most of the core day unlocked. There was free association between prisoners, depending on individual risk assessment. There was a memorandum of understanding between the PCT and the prison, in relation to access to patients outside the core day, based on individual risk assessment. Nurses said that generally they were able to access patients as needed, including at night, although there had been problems gaining access at night to patients on intravenous fluids who required attention.

- 5.105 During the inspection, two prisoners were being barrier nursed and were escorted individually to the main unit garden for exercise by the two discipline officers; this meant that the rest of the prisoners were locked up during this time.
- 5.106 We saw one patient returning by taxi to the unit from a hospital admission for a hip replacement; he was handcuffed via a closet chain and accompanied by three officers but was having difficulty walking with crutches from the vehicle area to the unit, despite vehicle access adjacent to the unit. During the inspection, a patient with complex palliative care needs was transferred from HMP Bristol to the unit without a proper clinical handover from the transferring prison. We were told that poor handover information following hospital admissions was common.
- 5.107 Clinical care was generally satisfactory and patients told us that nurses responded to their needs appropriately and sensitively. One patient, who required a high seated chair, had a basic low plastic chair, so had to sit on his bed. We were aware of one patient returning from hospital who had not received medication for pain in time.
- 5.108 There were a small number of registered mental health nurses but the particular needs of mental health patients were not always met appropriately due to the lack of therapeutic support.
- 5.109 Medication administration charts required nurses to administer against a printed prescription from SystmOne with individual items highlighted, which was unsafe. There was some use of care plans. Recognised clinical tools, such as the modified early warning system for deterioration, the malnutrition universal screening tool, tissue viability assessment and falls risk assessment, were used. The modern matron led monthly audits for key clinical issues and there were links with the infection control specialist nurses at St Mary's Hospital.
- 5.110 An NHS cleaner worked in the unit daily during the working week, and the unit was clean and tidy. However, we saw a patient in one room which was dirty, with an unfinished meal next to a used bedpan on the floor by the bed. There were no cleaning schedules and the monthly supervision from the NHS Trust was irregular. The cleaner also assisted prisoners with mobility difficulties. There were also two prison orderlies who attended daily.

Recommendations

- 5.111 There should be active health promotion advice and literature for inpatients.
- 5.112 The inpatient unit should have links with the education department to enable patients to benefit from therapeutic activity.
- 5.113 There should be greater focus on inpatients with mental health needs, to ensure that they have appropriate care.
- 5.114 Medication charts on the inpatient unit should enable safe administration and recording that complies with professional guidance.

Housekeeping points

- 5.115 Temperature control for some of the non-clinical inpatient unit rooms should be improved.
- 5.116 Screening of inpatient bedroom windows and shower areas should be improved.

- 5.117 The King's Fund garden should be available for use by prisoners.
- 5.118 Inpatients with mobility difficulties leaving and returning to the unit should be given appropriate support.
- 5.119 Inpatient unit cleaning schedules should be introduced.

Secondary care

- 5.120 A centralised appointment system had been in operation since August 2010. For routine referrals, it could take up to three weeks between the GP making the referral and the letter sent to the hospital. This appeared to be due to a cumbersome health care process and delays in the prison mail system. Urgent appointments, such as those linked to cancer targets, were expedited and the referral letter was faxed on the day of the GP appointment, and usually an appointment was telephoned back to the prison on the same day.
- 5.121 Prisoners were sent a letter telling them the week of their appointment, which enabled them to remind officers. Escorts were arranged centrally, although there were variations between sites. Parkhurst and Albany had a limit of two escorts in the morning and two in the afternoon, although we were told that Parkhurst often did not manage to meet its commitment. Camp Hill had a limit of one escort in the morning and one in the afternoon and at limited times, between 9 am and 11am and 2pm and 3 pm, respectively. Due to the quotas and time restrictions, health services administration staff had to reschedule a large number of appointments. Where necessary, these were screened and prioritised by the nursing staff. Urgent referrals presented particular difficulties, which meant that routine appointments could be rescheduled several times to accommodate quotas and urgent appointments.
- 5.122 In the previous year, there had been 212 cancellations at Parkhurst, 383 at Albany and 79 at Camp Hill. Between July and September 2010, an average 40% of the 427 external appointments booked had been cancelled at least once. An average of 57% of all cancellations during this period had been due to the NHS; this included the hospital cancelling and/or the prison being given short notice of the appointment or the patient not being seen owing to late arrival. An analysis of 15 appointments cancelled between August and September 2010, due to the prison not taking the prisoner out, showed some inappropriate reasons, including not being able to locate a governor to sign a patient out of the gate, late unlock, Camp Hill staff saying they would not take prisoner out as it was too late, Parkhurst staff being called to a staff meeting and staff refusing to push a wheelchair (see recommendation 4.71).
- 5.123 We were told by operational staff that the staff allocation for bed watches was separate to those for secondary appointments; however, health services staff told us that bed watches had affected elective appointments. In August 2010, there had been nine bed watches for all sites, which was typical of the monthly number.

Recommendations

- 5.124 External routine referrals should be expedited, to ensure that patients' appointments are not unnecessarily delayed.
- 5.125 There should be equity of access for external health appointments across the three sites.

- 5.126 The prison should ensure that there are no unnecessary delays or obstacles to prisoners attending hospital appointments.

Mental health

- 5.127 Mental health services were provided by the Isle of Wight PCT and were well organised and responsive to prisoners' needs across the sites. There was no reference in the refreshed health needs analysis to current mental health needs at the prison, apart from results of the Care Quality Commission prison census in 2009. The service capacity was inadequate to meet the needs of this population.
- 5.128 In our survey across the prison, of respondents who expressed emotional well-being/mental health needs, 20% said that they were receiving help from the mental health in-reach team and 4% had access to counselling services, both of which were worse than the comparators of 31% and 12% respectively.
- 5.129 There was a service lead, who was directly responsible to the Mental Health and Learning Disabilities Directorate and had a service-related relationship with the head of health care at the prison. There were four community psychiatric nurses and two primary care practitioners in post, one of whom had started just before the inspection. There were two further primary care practitioner posts appointed but awaiting security clearance. There was a service level agreement for a 0.5 whole-time-equivalent consultant forensic psychiatrist from Hampshire Partnership Trust, which translated into one clinical session per site per week plus one review session for the inpatient unit; there were also visiting speciality training grade sessions. In addition, there were two prison-funded consultant sessions a week for assessments/reports for prisoners serving indeterminate sentences for public protection.
- 5.130 There was a comprehensive training needs analysis linked to mandatory training and service needs, which was reflected in contemporaneous individual training records. All mental health staff accessed clinical supervision outside the team. One member of the team provided clinical supervision for some of the inpatient nursing staff.
- 5.131 Mental health services were in the early stages of a fully integrated model, with primary care as the service gatekeeper. Primary mental health services were new, with a small caseload of nine patients (five had been seen and four were waiting for assessment), but some encouraging signs of appropriate interventions were evident. Referrals were accepted from all prison staff but there were no self-referrals. Newly referred patients were seen for urgent mental health assessment within a maximum of 72 hours, and could be seen on the same day. Routine referrals were seen within a maximum of eight weeks. Patients were usually followed up between fortnightly and monthly but could be seen weekly when there were acute needs.
- 5.132 During the inspection, there were 145 prisoners on the mental health caseload, which represented approximately 9% of the population, with little variation across the sites. All caseloads included some 'virtual' cases – prisoners placed at secure hospitals but due to return to the prison. Wherever possible, the team tried to visit placements for prisoners returning under Section 117 of the Mental Health Act 1983, which imposes a duty to provide aftercare services for certain categories of mentally disordered patients who have ceased to be detained and leave hospital or prison.
- 5.133 We saw some high-quality interactions between all the mental health practitioners and their patients, with thoughtful and responsive care for some complex patients. There was good engagement with patients and care plans were discussed and active. Prisoners on the mental

health caseload across all the sites told us that they valued the support and interventions provided by mental health staff. Staff often struggled to find suitable space in which to see patients.

- 5.134 Clinical record keeping was good, with detailed entries in both SystmOne and care programme approach (CPA) paper records. There were detailed CPA records maintained and appropriate use of specialist tools, such as the wellness, recovery action plan and health of the nation outcome measure for people with severe mental illness. Most specialist mental health medication was prescribed by the psychiatrist or the mental health nurse prescriber.
- 5.135 Wherever possible, mental health staff attended assessment, care in custody and teamwork (ACCT) reviews relating to their patients but they sometimes received insufficient notice to attend. We observed one ACCT review involving a community psychiatric nurse, where there was appropriate and proportionate attention to risk, sustained engagement with the client, clear review and coordinated follow-up plans.
- 5.136 The team had links with the prison training department and had provided monthly mental health awareness training to staff since October 2009. Frontline staff, including segregation staff, were prioritised for this, and 14% of all frontline staff had received training in the previous 12 months.
- 5.137 In the previous year, there had been 22 first assessments under the MHA, with little variation between sites. All of these first assessments had been completed within 14 days, and usually by the contracted forensic psychiatrist. All 22 patients had been assessed as requiring a secure mental health bed. In the previous year, 20 patients had been transferred under the MHA, the longest wait for placement being 48 weeks, with three placed within a month.

Recommendations

- 5.138 There should be a mental health needs analysis to inform service provision and ensure equity across the sites.
- 5.139 A counselling service and support tools, such as cognitive behavioural therapy, should be provided to support prisoners with low-level primary mental health needs.
- 5.140 There should be suitable space for mental health consultations.
- 5.141 Mental health training should be expanded to ensure wider coverage of frontline staff.
- 5.142 Assessments and transfers to secure placements under the Mental Health Act should be expedited to ensure that seriously ill patients are not delayed inappropriately.

Good practice

- 5.143 *The nurse prescriber role provided wider coverage of specialist prescribing for mental health patients.*

Section 6: Activities

Learning and skills and work activities

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 leadership and management of learning and skills were satisfactory. The prison had a clear strategy and there had been a responsive, teamwork attitude throughout the prison's clustering process. However, the quality improvement arrangements to monitor and evaluate provision were underdeveloped. The learning and skills provision was satisfactory overall. It was good in Albany and satisfactory in Parkhurst but inadequate in Camp Hill. Not enough prisoners participated in learning and skills and the range of education, work and vocational training did not meet their needs. In Camp Hill, new arrivals experienced delays in joining activities and could only access certain activities on a first come basis. Too much employment did not develop useful employability skills, and the prison did not recognise and record the development of any other employability skills acquired by prisoners. Learners developed good skills in many workshops in Albany and Parkhurst. Achievement of education qualifications was high in Albany and Parkhurst but only satisfactory in Camp Hill. Attendance in education had improved in Parkhurst and was now good. Punctuality was good in Parkhurst but poor in Camp Hill. The quality of teaching and learning in education classes was good in Albany and Camp Hill and satisfactory in Parkhurst. Planning of individual learning was better in Camp Hill than in the other two sites. Learners received particularly good support with their additional learning needs in Albany. The libraries did not meet the needs of all prisoners.

Leadership and management

- 6.2 The leadership and management of the learning and skills provision were satisfactory overall. The prison had a very clear vision and strategy for learning and skills that focused adequately on the priorities to improve the provision. The learning and skills department had shown strong commitment and teamwork in supporting the many changes involved in the clustering process. Recent changes in Parkhurst had improved the quantity and quality of work and vocational training.
- 6.3 The operational management of the education provision was good overall. There were regular and effective meetings between the education managers and the prison in which best practice had begun to be shared to improve education. Parkhurst had good internal and external partnerships that had enhanced the range of the provision, benefiting prisoners and local communities. The recent introduction of prison councils had already been successful in Albany where it had influenced improvements in the education courses.
- 6.4 The promotion of equality and opportunity was satisfactory. Manchester College had a clear understanding of achievement across different groups of learners. The promotion of equality and diversity in the lessons was adequate. The recently integrated regime in Parkhurst had

improved and offered more equitable access to activities by all prisoners. Pay was not a disincentive for those attending education.

- 6.5 The college's quality assurance processes were adequate to evaluate its provision. However, the prison had not fully developed its own quality improvement arrangements to monitor the quality of all the activities. It did not make sufficiently good use of the data and information available across the three sites to ensure more efficient and effective initial assessment of prisoners' learning needs. The prison had not yet fully addressed many of the areas identified for improvement in the last inspections of Parkhurst and Camp Hill. The prison had written its first self-assessment of the learning and skills provision since the clustering. However, this had not included all the parties involved in the delivery of activities, and it was not critical enough in highlighting the current key strengths and areas for improvement.

Recommendations

- 6.6 The prison should further develop the quality improvement arrangements to ensure it can monitor and evaluate the effectiveness of all purposeful activities.
- 6.7 The prison should improve the sharing and use of data and information to improve the efficiency of its initial assessment and inform allocation to learning and activities.
- 6.8 The learning and skills department should ensure that the self-assessment process is sufficiently critical and includes all purposeful activities delivered in the prison.

Induction

- 6.9 Induction to learning and skills activities was provided on all three sites by prison staff. It covered an adequate range of information on work activities, education, gym and equality and diversity aspects, but some new arrivals at Camp Hill waited too long to start their induction. Careers information and advice support (CIAS) was delivered by Tribal on an individual basis. Initial assessment of prisoners' literacy and numeracy took place at only two sites and had recently ceased at Parkhurst due to the lack of classrooms. Prison orderlies and representatives provided a positive range of information to new arrivals.
- 6.10 In Parkhurst, some new arrivals were allocated to activities without knowledge of their literacy and numeracy abilities, and staff did not use computerised information effectively in allocations or activity areas (see recommendation 6.7). Albany had well-developed plans to deliver the introductory health and safety and basic food hygiene courses to all new arrivals. In Camp Hill, much of the reading and written information was inaccessible to prisoners given that 88% of them had reading levels at level 1 or below.

Work

- 6.11 The quality and quantity of work available at the three sites varied. Overall, there were insufficient work places to employ the whole prison population. Across the prison, only approximately 55% of the population were employed in work on or off the wings (751 prisoners employed, 251 unemployed). In Parkhurst, 62% were employed (320 employed, 84 unemployed) In Albany, 50% of the prisoner population (251 employed, 93 unemployed) were involved in work activities, and in Camp Hill, 53% were employed (180 prisoners employed, 74 unemployed). Albany had a successful approach to work. Approximately, half the work areas offered accreditation for skills learned and prisoners received training before they commenced

work. The rest of the population were engaged in learning or vocational training or were unfit or retired.

- 6.12 The initial process to allocate prisoners to work was fair in Albany and had become more equitable in Parkhurst. However, the process in Albany was not transparent or well recorded. In Camp Hill, slow security clearances had led to delays of up to three months in some prisoners accessing work or education. The site operated an oversubscription policy for work to take account of legitimate absences, but only the first prisoners to arrive at the workplace were allocated to work.
- 6.13 In Parkhurst and Albany, prisoners developed very good practical skills to commercial standards. The design and print workshop produced high quality printed work while the two woodwork shops made cell furniture for the Prison Service. A range of prison clothing was manufactured to a high standard in the tailoring workshop. In the charity workshop, prisoners produced very detailed items. Around 30 prisoners in Albany were involved in making very high quality tapestries in their cells. In Parkhurst, prisoners developed specialist skills in horticulture, concrete products, pottery and music. Recent developments at this site meant that many work activities were no longer mundane and repetitive. However, the basic food hygiene training had lapsed for prisoners working on serveries, which did not conform to requirements. In Camp Hill, work consisted of contract manufacturing in textiles, recycling and gardens. Much of the work was repetitive and unchallenging and prisoners developed insufficient work skills. At Camp Hill, prisoners' literacy and numeracy skills were not systematically developed in the workshops. On this site, several prisoners worked in the workshops without appropriate personal protective clothing.
- 6.14 Across the three sites there was insufficient recognition and recording of employability skills acquired through work. This disadvantaged prisoners in preparing them for successful progression on to other prisons and resettlement on release.

Recommendations

- 6.15 The prison should increase the number of prisoners participating in purposeful activities.
- 6.16 Prisoners in Camp Hill should not suffer delays in accessing work and education activities.
- 6.17 The prison should broaden the range of work activities at Albany and Camp Hill.
- 6.18 The recognition and recording of prisoners' employability skills acquired during their work in the prison should be improved.

Vocational training

- 6.19 Very few vocational accredited qualifications were offered across the prison. Participation in vocational training was low across the three sites, with an average of just over 8% of the population taking part – 9% at Parkhurst, 10% at Albany and 7% in Camp Hill (see main recommendation HP63). Information technology courses were the most successful. The prison was planning to introduce construction courses across the three sites.
- 6.20 In Parkhurst, learners gained good commercial skills in information and communications technology (ICT), such as desktop publishing and computer animation. These workshops were

managed by the prison and achievement of qualifications was good. The prison had plans for the introduction of a multi-skills workshop for bricklaying, plumbing and plastering training to be incorporated into the dry landscaping and building works in the grounds.

- 6.21 In Albany, there was good progression by those qualifying as cleaners into wing cleaning jobs. Prisoners had made good progress on the painting and decorating course, and achievement of education-based IT qualifications was high at 92%. Other qualifications had been recently introduced but it was too early to judge their success.
- 6.22 In Camp Hill, there were only 38 accredited employability training places. The Manchester College was responsible for this provision, which included construction craft programmes in brickwork, painting and decorating. The prison delivered other vocational courses, such as industrial cleaning and fork lift truck driving. Food hygiene courses were not delivered. Courses were at a very basic, introductory level and very few prisoners attended the industrial cleaning courses above level 2. Training equipment was mostly adequately maintained, although several machines in the bricks workshop were awaiting repair. The quality of the vocational training was just satisfactory, as were the standards of work displayed by learners. Links between initial assessment and individual learning plans were poor and rarely linked to the prisoner's sentence plan. Although attendance at the workshops was satisfactory, prisoners' punctuality was poor. Workshops were often closed because staff were unavailable.

Housekeeping point

- 6.23 Machinery in the bricks workshop in Camp Hill should be well maintained and repaired.

Education

- 6.24 The Manchester College was the main provider of education. The education provision was good at Albany but only satisfactory at Parkhurst and Camp Hill. Prisoners' participation in education was low at only 26% (132 prisoners) in Parkhurst, 30% (176 prisoners) in Albany and just 17% (99 prisoners) in Camp Hill. Although daily attendance at classes was satisfactory overall and had increased in Parkhurst, punctuality was poor in many sessions at Camp Hill while it was good in Parkhurst.
- 6.25 A high proportion of learners achieved their qualification in Parkhurst and Albany in all education and personal and social development areas, but at Camp Hill this was only satisfactory. Here, dependency awareness and English for speakers of other languages (ESOL) courses had good achievement rates but literacy and numeracy achievements were low. In Albany, the education department offered an effective monthly enrichment programme that gave prisoners information on healthy living, and some elements also raised learners' understanding of equality and diversity.
- 6.26 In Parkhurst the quality of teaching and learning was satisfactory overall with some good features. Education learning resources were over-reliant on paper-based materials and had insufficient contextualisation for adult learners. The quality of teaching and learning were good in Albany and Camp Hill. In Albany, teaching and learning in the education department were good in most lessons with some outstanding aspects. Lessons were lively with varied activities. Learners clearly enjoyed their learning and made at least satisfactory progress. However, more use could have been made of technology in Albany and Parkhurst to enhance lessons.

- 6.27 In Albany, support for learners with dyslexia, dyscalculia and dyspraxia was particularly good with several tutors qualified in these specialist areas. In Camp Hill, prisoners' literacy and numeracy development needs were supported well by outreach staff across workshops, wings and vocational training. At the time of inspection, 47 learners were receiving support in Camp Hill and 23 in Parkhurst, where support was satisfactory.
- 6.28 In Parkhurst, there was insufficient planning and prioritising to support individual prisoners' learning adequately and target setting was weak. In Albany, learning goals for individual learning were sometimes not detailed enough and often focused on gaining a qualification rather than acquiring skills and knowledge. In Camp Hill, however, individual learning plans were better used to plan qualification achievement targets. Planning of individual learning was better in Camp Hill than it was in the other two sites.
- 6.29 The range of education courses was narrow and there were very few programmes above level 2. In Parkhurst, in particular, opportunities to attend education were inflexible and did not allow sufficient variety across the curriculum. Distance learning and Open University courses were available across the three sites, although some of the facilities to support this in Albany were limited. In Parkhurst and Camp Hill, the take-up of distance learning and Open University courses was low. In Parkhurst, in particular, the number of learners enrolled on these courses had decreased since the last inspection in 2008.

Recommendations

- 6.30 The prison should increase the range of the education provision and the accredited learning above level 2 across the three sites.
- 6.31 The education department should increase the use of information learning technologies to stimulate and vary the lessons in Albany and Parkhurst.
- 6.32 The quality of target setting and recording of learners' progress attending lessons in Parkhurst should be improved.

Library

- 6.33 The library staff were employed by the Isle of Wight Library Service. There was a library on each site with a library coordinator and two to three library and information assistants. The staff, who were not qualified librarians, were well supported by full- and part-time orderlies. Orderlies had a good opportunity to work towards a level 1 library and information skills qualification. There was, however, some uncertainty about who in the prison was responsible for managing the qualification and line managing the libraries.
- 6.34 The Parkhurst library was still in an inappropriate location to meet the needs of prisoners with mobility restrictions and all users had to be escorted there by officers. A member of the library staff still had to escort library orderlies to and from the wings in the evenings, which reduced the opening times substantially and affected prisoner access. There was no ramp access for wheelchair users or toilet facilities for people with disabilities.
- 6.35 Although the Albany library was well situated, next to the education centre, its interior was in a poor condition. The roof leaked and there were buckets on the floor to catch rainwater, which were unsightly and dangerous. The decor was poor and the temperature could not be controlled. The large classroom next to the library was an excellent, well-used resource for

library inductions, reading groups and other library-related meetings. Over 70% of the population visited the library every week.

- 6.36 The Camp Hill library was too small for prisoners' use and, unlike the Albany library, there was no adjacent study room. This had resulted in the suspension of the very popular Storybook Dads provision as there was nowhere to make the recordings.
- 6.37 Library opening times varied but were generally satisfactory. While many prisoners had sufficient time in which to return or renew their books and to select new ones, some did not. These included prisoners at Parkhurst who visited the library in the evenings and those at Albany who could only go on Friday afternoons. The time for studying legal texts and Prison Service Orders (PSOs) and for Open University research was often too short, although photocopies of required legal documents and PSOs could be supplied, usually at a charge.
- 6.38 The libraries were well stocked and professionally run. Each had a broad range of popular fiction and non-fiction as well as foreign language books, audio books, easy-reading and rapid-reading books, music CDs, DVDs, audio books and language courses. However, the needs of all prisoners were not met. There were too few suitable texts for Storybook Dads and insufficient art books in Parkhurst library. Vocational texts in Camp Hill were limited. The range of newspapers and periodicals in each library was good, as were up-to-date law books and PSOs. There was satisfactory use of the Isle of Wight inter-library loan system but the British inter-library loan system was not used. Library use had increased significantly since the introduction of DVDs in early 2010. Loss of library items was low.

Recommendations

- 6.39 The library at Parkhurst should be relocated to a more suitable site and wheelchair users and those prisoners with limited mobility should be able to access it.
- 6.40 There should be a dedicated library officer at Parkhurst to facilitate prisoner movement and to improve the security, particularly in the evening.
- 6.41 The leaking roof in the library at Albany should be repaired, the interior painted and the temperature made controllable to improve the environment for library users and staff.
- 6.42 The library at Camp Hill should be enlarged and include at least one adjacent room for related activities, such as the preparation of Storybook Dad CDs.
- 6.43 The opening hours for, and stock in, each library should be continually reviewed and the needs of all prisoners should be met.
- 6.44 All prisoners should have access to a library for a suitable length of time and none should be disadvantaged because of attendance at education, vocational training and work or for any other reason.

Housekeeping point

- 6.45 Responsibilities in the prison for managing the level 1 library and information skills qualification and for line managing the libraries should be clarified.

Physical education and health promotion

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.

- 6.46 The clustering had unified and focused PE activities across the three sites. The gymnasiums had started to work well together, good practice had been effectively shared across the three sites and many common practices and regimes adopted. Physical education facilities were adequate to meet the recreational needs of prisoners but staff resources operated at capacity with little flexibility to account for leave or illness. Access to the three gymnasiums was equitable. Gymnasium orderlies were allocated effectively to support prison staff, especially in Camp Hill and Albany. There were no vocational qualifications in PE to support employment on release.
- 6.47 Induction to PE was effective and encouraged all prisoners to use the facility. There were good links with the health care department, which provided clear concise information about each prisoner's medical status to use the gymnasium. All prisoners had to complete a health and safety induction before using the facilities.
- 6.48 There was a good range of activities to meet the needs of all prisoners, including walking to health, over-50s programmes, weight loss, smoking cessation and rehabilitation from injury. In Parkhurst and Albany there were regular, well-attended healthy living courses to introduce prisoners to physical activity. Staff encouraged prisoners to take part in recreational PE, and there was effective promotion of activities in the residential wings and the gymnasium.
- 6.49 Changes to the PE programme had improved prisoners' access to the gymnasiums and all prisoners could use them at least twice a week. Weekend and evening access operated fairly on a wing-based rolling programme in Parkhurst and Camp Hill and as an open access programme in Albany. In Parkhurst and Albany, approximately 46% of the population accessed the gymnasium and sport activities and the figure was even higher for Camp Hill, where 75% of the population used the PE facilities.
- 6.50 PE facilities were limited in Parkhurst but were good everywhere else, including multi-sport, weight training and cardiovascular areas. Some cardiovascular equipment in Parkhurst and Camp Hill was out of action and awaiting repair. In Albany, prisoners benefited from a small sports hall, outside running track and an asphalt area. In Camp Hill, building work to extend the much-needed cardiovascular and modular weight training areas was still outstanding. In Parkhurst, exercise facilities on A and F wing were managed by prisoners or wing staff and these were outside the control of PE staff.
- 6.51 Waiting lists for specific sessions were short and well managed. The range of courses was narrow and limited to basic personal skills that had little vocational relevance. In Parkhurst and Camp Hill, accredited courses were skills or information focused. These sites also had programmes to improve understanding of diet, nutrition and healthy lifestyles but these were very narrow and at a basic level. There were no accredited instructor qualifications and gymnasium orderlies had no opportunity to gain accreditation for their work. Parkhurst needed

to develop the links with the education department. In Camp Hill, there were no links with outside sports' leagues or external community groups.

- 6.52 Prisoners received their sports kit at their first PE session, although many wore their own clothing. Showers in the main sports areas were of good standard, but those near the cardiovascular and weight training areas in Albany were very poor. Prisoners had good access to drinking water. Accidents in the gymnasium were minimal, with few prisoner injuries. Appropriate records of incidents were maintained and well managed.

Recommendations

- 6.53 The outstanding building work to provide larger cardiovascular and modular weight training areas in Camp Hill should be completed.
- 6.54 The range of PE courses should be extended and have a vocational relevance.
- 6.55 There should be accredited PE instructor qualifications to enable gymnasium orderlies to gain an accreditation for their work.
- 6.56 The condition of the showers in the cardiovascular and weight training areas in Albany should be improved.

Housekeeping point

- 6.57 The cardiovascular equipment in Parkhurst and Camp Hill should be repaired.

Time out of cell

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.

- 6.58 The core day was standardised across the three sites and allowed good time out of cell for an employed prisoner, although regime slippage had reduced this to the disadvantage of prisoners. Association periods were short and often started late and finished early, giving less than an hour, and association was cancelled too often. At Parkhurst and Albany, wings were routinely closed during the morning and afternoon periods, and exercise across all three sites was limited to 30 minutes.
- 6.59 The core day had been standardised at each of the three sites, which had the same unlock and lock-up times. The core day, which was published on each residential wing, allowed for an employed prisoner to be out of their cell for nine hours and an unemployed prisoner for three hours. However, we observed regime slippage during unlock and lock-up throughout the day across all three sites which reduced the time out of cell available.
- 6.60 In our survey, only 8% of respondents in Parkhurst, against the comparator of 17%, said that on average they spent 10 or more hours out of their cell on weekdays. The number of prisoners locked up during our roll checks was consistent at 16.5%. Wings were routinely locked down during the core day, with 49 wing closures in the morning and 77 in the afternoon

between January and September 2010 (see main recommendation HP64). Although the Phoenix unit unlocked all prisoners during the core day, it had been closed 18 times in the morning and afternoon period during the first nine months of 2010.

- 6.61 At Albany, in our survey only 11% of respondents, against the comparator of 17%, said that on average they spent 10 or more hours out of their cell on weekdays. The number of prisoners locked up during our roll checks was approximately 9%. Wings were routinely locked down during the core day, with 57 wing closures in the morning and 125 in the afternoon between January and September 2010 (see main recommendation HP64). Prisoners with mobility difficulties and those who had reached retirement age were unlocked during the core day and allowed to associate with others.
- 6.62 At Camp Hill, in our survey only 6% of respondents, against the comparator of 15%, said that on average they spent 10 or more hours out of their cell on weekdays. The number of prisoners locked up during our roll checks was 22% in the morning and 31% in the afternoon. St Stephen's wing was unlocked from 8am till 11pm and prisoners were able to lock themselves away at night unattended by staff.
- 6.63 Association was scheduled to take place from 6pm to 7.15 pm across all three sites, but with regime slippage this often resulted in association of one hour, and in some cases less. At all three sites, staff supervision of out of cell activities and association was satisfactory and ensured that prisoners were safe.
- 6.64 At Parkhurst, in our survey 74% of respondents, against the comparator of 87%, said that on average they had association five times a week. Between January and September 2010, there had been 64 wing closures, resulting in prisoners not receiving association (see main recommendation HP64).
- 6.65 At Albany, in our survey 55% of respondents, against the comparator of 87%, said that on average they had association five times a week. Between January and September 2010, there had been 135 wing closures resulting in prisoners not receiving association. We met a prisoner who had kept detailed time out of cell records, which indicated that on many occasions during 2010, evening association had started as late as 6.10pm and finished as early as 7pm. We observed association starting late and finishing early.
- 6.66 At Camp Hill, in our survey only 42% of respondents, against the comparator of 77%, said that on average they had association five times a week. Between January and September 2010, there had been 211 wing closures resulting in prisoners not receiving association (see main recommendation HP64). Prisoners consistently told us that association started late and finished early. The site had a wing rota for evening association closure. This disadvantaged prisoners as the same wings (two an evening) had no association on the same day nearly every week. The rota was adhered to on most occasions.
- 6.67 At Parkhurst, in our survey only 39% of respondents, against the comparator of 52%, said that on average they had exercise at least three times a week. Exercise was scheduled for 30 minutes starting at 8am and took place on an exercise yard that was bare and uninviting. Exercise was usually only cancelled due to inclement weather but, given the time of day and the time restrictions, many prisoners told us that they did not take up the option.
- 6.68 At Albany, in our survey only 25% of respondents, against the comparator of 52%, said that on average they had exercise at least three times a week. Exercise was scheduled for 30 minutes starting at 8am; however, this clashed with treatment times, which meant that prisoners on medication did not receive any exercise.

- 6.69 Prisoners at Camp Hill had a better experience of exercise. In our survey, 69% of respondents, against the comparator of 51%, said that on average they had exercise at least three times a week. Exercise was rarely cancelled and took place at 8am each weekday before free flow movement to work. It took place in the grounds, which were very well kept and pleasant.

Recommendations

- 6.70 Regime slippage at all three sites should be reduced and prisoners should always receive their full association period of 75 minutes.
- 6.71 At the Parkhurst and Albany sites, exercise time should be rescheduled to one hour and at a time that would enable more prisoners to participate.

Section 7: Good order

Security and rules

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 Security was not overly restrictive for prisoner movement around the three sites. There were some restrictive practices for closed visits in Camp Hill and access to activities in Parkhurst and Camp Hill. Prisoners on closed visits were reviewed monthly but most stayed on them for three months. Prisoners returning from escorts to Albany remained handcuffed until they reached their wings. Information from staff on security information reports (SIRs) helped security staff to make connections between relevant information as well as raise staff awareness of current priorities for each site. The three separate security committees met monthly, with a more strategic monthly meeting of security managers from all sites. Security objectives were set according to the identified problems at each site, and the committees targeted individual prisoners engaged in illicit activity. There continued to be weaknesses in perimeter security at Camp Hill allowing drugs and mobile telephones to be thrown in. Some concerns over safety in particular areas of Camp Hill during morning free flow had not been addressed.

Security

- 7.2 All three sites at Isle of Wight had appropriate security measures for prisoner movement. Security intelligence received from staff of all grades and disciplines was plentiful in each site and enabled security managers to make connections between relevant information and identify and target prisoners engaged in illicit activity. The priorities for each site had been clearly identified and objectives set that were circulated to all staff.
- 7.3 Each site held its own security committee meeting with attendance from key departments. Safer custody staff rarely attended these meetings, although violence and self-harm issues were on the agenda. However, they did attend the regular security briefing meetings on each site which discussed immediate matters. There was a monthly strategic meeting between the heads of security from each site but these were not minuted so it was not possible to ascertain what was discussed and whether there was any joint monitoring.
- 7.4 The security department at Parkhurst had identified the main priorities as dealing in and bullying for prescribed medication and some minor problems with the recent integration of prisoners across the wings. There had been some action to combat the problems around medication, including supervising medication administration, sending prisoners to collect medication wing by wing and splitting up identified dealers around the wings. Security information reports (SIRs) we viewed showed that information was passed on to other departments where required. Action was taken promptly, including target searching.
- 7.5 Prisoner access to activities was restrictive at Parkhurst. A points system was used to assess prisoner risk and, although there were annual reviews of risk, information relating to illicit activity dating back up to four years could be considered when assessing a prisoner's risk for

access to different activities. To attend religious services prisoners had to apply by 5pm on the preceding Thursday so that security could carry out checks and gather security intelligence; this was excessive (see also paragraph 3.113).

- 7.6 There were no prisoners or visitors at Parkhurst under closed visits restrictions at the time of our inspection. Staff said that the policy was to place someone on closed visits only for incidents relating to visits or for more than one indication by a drug dog with other supporting information. Reviews were carried out monthly but most prisoners remained under the restrictions for three months initially.
- 7.7 The main security priorities at Albany related to public and child protection, and dealing in and bullying for prescribed medication. Action had been taken to combat the medication problems, including regular medication reviews for prisoners and additional prisoners taking medication under supervision. SIRs relating to violence were disseminated to the safer custody staff via wing managers for investigations (see section on violence reduction). There were strong links with the police intelligence officer, offender management and public protection staff to manage the intelligence relating to public and child safety issues. Intelligence had been gathered which identified contact between sex offenders in custody and in the community, associations between sex offenders in the prison and contact with children where prohibited by court order. We saw evidence in security files of swift action taken to deal with such matters.
- 7.8 We found some restrictive security practices in Albany, including the handcuffing of prisoners returning from external appointments from the sterile gate area through the grounds to the residential wings. We witnessed two prisoners walking with mobility aids who struggled to get to the wings due to this. A third who walked with an aid and had a leg brace fitted had refused to go on an escort as he was to be double cuffed. A check of his escort risk assessment confirmed this was the case. As in Parkhurst, prisoners wanting to attend services had to apply by 5pm on the preceding Thursday so that lists could be checked to ascertain associations between prisoners. Access to activities was assessed through considering security information dating back up to 12 months. All prisoners had been risk assessed for activities and reviews were carried out annually and when a prisoner's risk changed or he applied for work for which he was not considered eligible.
- 7.9 There were three prisoners in Albany subject to closed visits. All were for incidents that occurred on visits. Reviews were carried out monthly and, if no further evidence or intelligence had been recorded, the restrictions could be lifted. One visitor had been banned for carrying a blade during a visit. Prisoners were given information on how to appeal.
- 7.10 The security department at Camp Hill had identified its priorities as drugs and mobile telephones coming into the site, weapons and some bullying. While sufficient information had been received to identify these priorities, there was less evidence of action to combat them. Weaknesses in the perimeter security, where a wall blocked a CCTV camera and a second camera was out of order, had not been remedied since our last inspection of this site although action was planned (see paragraph 3.137). Security staff told us about problems affecting prisoner safety during the morning free flow. They had identified an area near the bricks workshop, colloquially known as 'muggers' alley', which remained unsupervised during this time. Prisoners told us that organised fights took place here. Intelligence suggested that prisoners made weapons in the engineering shop but these were still brought out of the shop into circulation among the prison population. There had been a concerted effort to transfer out some of the key players in the drugs scene but the results of this had yet to be seen. There had been some incidents involving prisoners going, or threatening to go, on to rooftops. Staff said that many of them were in debt and wanting to get out of Camp Hill.

- 7.11 Target searches on Camp Hill was not carried out within a reasonable time and some were outstanding from August 2010. Searches had made some significant finds, including mobile telephones, SIM cards, hooch and drugs.
- 7.12 Risk assessments of prisoners on Camp Hill took too long. Some who had arrived in May 2010 were still waiting for an assessment to be completed so they could go to work (see recommendation 6.16).
- 7.13 Regulations on closed visits at Camp Hill were overly restrictive. Of the 25 prisoners subject to these restrictions, only a few were for incidents related to visits; the rest were for possession of a mobile telephone. When a prisoner was placed on closed visits, all his visitors were subject to these restrictions, which was excessive. Prisoners were required to spend three months on closed visits unless they were prepared to give information about where they had obtained the telephone, even if other intelligence had not come to light. One prisoner had appealed against being placed on closed visits as he had been found not guilty of possession of the telephone on adjudication, but the appeal was not due to be considered until his first review date.

Rules

- 7.14 Prisoners at all three sites were informed of rules and regulations on induction and were given written compacts to confirm these. There were some restrictive practices relating to closed visits and access to activities (see above).

Recommendations

- 7.15 Safer custody staff should attend monthly security committee meetings.
- 7.16 Prisoners should not be required to apply to attend religious services.
- 7.17 Prisoners in Albany should not be handcuffed within the grounds, and those walking with mobility aids should be able to walk unrestricted with either single cuffs or closing chains outside the establishment.
- 7.18 Required outcomes from security information reports (SIRs) at Camp Hill should be completed without delay, including target searching and actions to remedy known risks to prisoners or security.
- 7.19 Closed visits restrictions at Camp Hill should only be applied where intelligence suggests illicit activity in visits, and appeals should be considered without delay.

Housekeeping points

- 7.20 The monthly meeting between heads of security departments should be minuted and ongoing trends monitored.
- 7.21 Risk assessments of prisoners at Parkhurst for access to activities should only consider up-to-date information.

Discipline

Expected outcomes:

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

Disciplinary procedures

- 7.22 Adjudication procedures were generally sound and prisoners could participate fully in hearings but some charges could have been dealt with more appropriately using the incentives and earned privileges scheme. Adjudication records at Camp Hill were poor and did not always give assurance that there had been a full enquiry into the circumstances or consideration of possible bullying. Considerably more charges were referred to the independent adjudicator at Camp Hill. There was cursory examination of adjudications at segregation monitoring meetings. There had been one adjudications standardisation meeting but no formal ongoing analysis of trends or quality assurance checks of adjudication records.
- 7.23 The adjudications we observed on all three sites took place in appropriate surroundings and prisoners were given the chance to participate fully. Consideration was given in every case for prisoners to contact legal advisers if they wished, and this was recorded and the prisoner informed when the hearing would recommence. Prisoners' fitness for adjudication was not routinely recorded. We found adjudications across all three sites that could have been dealt with more appropriately using the incentives and earned privileges (IEP) scheme, such as inappropriate use of a cell call bell. We were told that prisoners were often used to interpret in adjudication hearings, which was inappropriate (see recommendation 4.45)
- 7.24 All three sites held segregation monitoring meetings where there was a cursory check on adjudications but there had been only one adjudications standardisation meeting in 2010.
- 7.25 There had been 454 adjudications in Parkhurst in 2010 to date compared with 659 for the whole of 2009, which was a slight decrease. There was an adjudication database with detailed information about charges and outcomes of hearings. The safer custody team used this regularly for information on violence and bullying. The main charges were for threats to staff and other prisoners, possession of unauthorised articles, destroying or damaging property, and disobedience. The independent adjudicator attended monthly and heard an average of five of the more serious charges, such as drugs offences and possession of mobile telephones. Prisoners were given information about how to appeal and we saw evidence of successful appeals.
- 7.26 There had been 298 adjudications in Albany in 2010 to date compared with 455 for the whole of 2009, which was a significant decrease. Staff said that the higher number of adjudications in 2009 could be ascribed partly to multiple charges against some disruptive prisoners held in segregation then. A review of segregation (see section on segregation) had resulted in fewer prisoners being held in the unit, which had also been closed for three weeks in July 2010 during which time staff had charged fewer prisoners. The main charges were for public protection-related matters and possession of unauthorised articles, mainly medication. The records we checked showed that adjudications were carried out thoroughly. We found one instance where an adjudication was dismissed due to delays in carrying out a safer custody investigation for bullying.

- 7.27 There had been 636 adjudications in Camp Hill in 2010 to date, which was a significant increase from the 692 for the whole of 2009. The main charges were for possession of unauthorised articles, fighting and drugs. The independent adjudicator heard more adjudications on this site, with 50 charges during the first week of our inspection. Adjudication records were poor with many giving only a brief or incomplete account of the hearing. For example, one record stated 'I agree with the officer's evidence' and the charge was proved with no further investigation. We found no evidence of enquiries into possible bullying where there had been fights or property taken, and no assurance that safer custody issues were followed up.

Recommendations

- 7.28 Managers should carry out quality assurance checks of adjudication documentation and formal ongoing monitoring and analysis of statistics and trends.
- 7.29 At Albany and Camp Hill, there should be swift investigations and proper recording of safer custody matters identified during adjudications to enable the adjudication to be completed and safer custody issues to be addressed.

Housekeeping point

- 7.30 Adjudication records in Camp Hill should give a full account of the hearing and show that a full investigation has been carried out.

The use of force

7.31 The use of force varied across the three sites. Since our last inspections, it had slightly increased at Parkhurst, reduced at Albany and was about the same at Camp Hill. There was an over-reliance on handcuffs when moving prisoners to segregation, even in cases where de-escalation had been successful and the prisoner showed full compliance. Documentation was generally completed in detail. Planned use of force was not always recorded or the videos viewed by managers, and the videos were of poor quality. There was evidence of excessive use of force at Parkhurst and Albany. Use of special accommodation across all three sites gave us cause for concern, including the use of cells for prisoners who were self-harming. Use of special accommodation had increased at Camp Hill, and the cells in Albany were in a poor state. There were no quality assurance checks of use of force or special cell documentation.

- 7.32 The use of force varied across the three sites. Most use of force documentation was completed in detail giving a full account of what had happened during the incident. Planned use of force was not always recorded and the videos we viewed were of poor quality. The recordings had not been kept in accordance with keeping evidence safe. We could not ascertain which incidents had been recorded as details were not given on the labels or during the recording itself. Recordings of use of force were not reviewed by managers and monitoring of use of force in general, including use of special cells, was rudimentary with no monitoring of statistics or trends.
- 7.33 Use of special accommodation across the prison gave us cause for concern when we examined the reasons why prisoners were placed there. Documentation showed that prisoners who were self-harming were placed in special cells at Parkhurst and Camp Hill (see also recommendation 3.70).

- 7.34 Use of force had increased slightly at Parkhurst since our last report with 45 incidents in 2010 to date. Some planned use of force was recorded. One incident showed that a prisoner who was fully compliant was restrained and that staff used provocative language when dealing with him rather than de-escalating the incident. The documentation recorded that the prisoner had attacked staff but this was not the case from the recording. Checks by health care staff at the conclusion of the incident were carried out from a distance and gave no assurance that the prisoner had been fully examined for injuries.
- 7.35 Special accommodation in Parkhurst had been used four times during 2010 and records showed that one prisoner had been located in the cell while self-harming. The documentation from a second incident that occurred during the inspection recorded that staff had twice poked a broom handle through the inundation point in the door when the prisoner failed to respond to them.
- 7.36 Use of force at Albany had reduced since our last inspection. It had been used 14 times in 2010 to date compared with 34 times in the whole of 2009. The one recording that was available showed a prisoner being located in special accommodation and having his clothing cut off despite him saying he would comply and remove his clothing himself. He was finally left naked in the cell.
- 7.37 Special accommodation in Albany had been used seven times in 2009 and only once in 2010. This use had been properly authorised and documented. The special cells were in poor condition with little natural light. One cell had a swastika scratched on the wooden plinth which had been there for some weeks but was removed during the second week of our inspection.
- 7.38 In Camp Hill, use of force had increased since our last inspection with 56 incidents in 2009 and 67 in 2010 to date. Documentation we reviewed showed that there had been an increase in incidents involving prisoners on, and threatening to go on, rooftops. Those who made the threats had been escorted to the segregation unit in handcuffs. Planned use of force was not recorded in this site although some documentation stated that the incident had been recorded.
- 7.39 Use of the special cell in Camp Hill was high with 23 incidents in 2009 and 10 so far in 2010. The documentation showed that authorisation was not always in accordance with prescribed regulations. We were concerned at the use of the cell for a prisoner who was self-harming and another incident where police had requested that the prisoner be kept isolated from other prisoners. A third incident showed that a decision to leave a prisoner in special accommodation overnight was made at 4.20pm with no further review of his compliance.

Recommendations

- 7.40 Handcuffs should only be used when moving prisoners who remain violent or refractory.
- 7.41 Planned use of force should be recorded and recordings kept securely. Recordings should identify all staff and prisoners involved.
- 7.42 Managers should review use of force recordings for any lessons to be learned and for reassurance that de-escalation has been attempted and force has been used as a last resort.
- 7.43 The apparently inappropriate use of force incidents identified by the inspection team should be formally investigated.

- 7.44 Managers should check use of force and special cell documentation to identify inappropriate use and monitor trends and statistics.
- 7.45 Special accommodation should only be used for prisoners who are self-harming in exceptional circumstances and when they present a current and active danger to others.

Housekeeping point

- 7.46 Staff should be trained in the use of recording equipment.

Segregation unit

- 7.47 A recent review of segregation had resulted in a reduction of the number of cells across the prison, and prisoners being segregated in non-segregation locations in Albany and Camp Hill. The secreted items policy was unnecessarily harsh. Prisoners held in the segregation units were properly authorised and reviews carried out on time by multidisciplinary groups but targets were basic. There were some delays in communicating the results of security and safer custody investigations. The regime in all the segregation units, including for some orderlies housed there, was limited, and prisoners had to apply for showers, telephone calls and exercise. Exercise yards were austere and one yard at Parkhurst was flooded. Staff-prisoner relationships were respectful and segregation unit staff knew the prisoners in their care well, although this was not always reflected in written records. There was no formal reintegration policy. Generally, prisoners did not remain in segregation for excessive periods, although one prisoner at Parkhurst had been in segregation for 16 months.
- 7.48 There was one segregation unit policy for the prison which was detailed and provided a useful reference point. It contained some instructions specific to the individual sites. The secreted items policy appended to this was unnecessarily harsh and resulted in prisoners being held in isolation with no access to showers, telephones or exercise. Prisoners held under the policy could be placed on the escape list and staff dealing with them could be dressed in full personal protective equipment. Although the policy was aimed at retrieving weapons and mobile telephones, the primary focus was on the illicit possession of telephones. All prisoners were strip searched when located on the segregation units rather than on the basis of risk assessment.
- 7.49 There was a staff selection policy for the segregation units and some staff had received training in diversity, control and restraint, and mental health awareness.
- 7.50 A recent review of segregation units in the prison had resulted in a reduction of the number of cells available with increased numbers of prisoner cleaners being allocated to units in order to effectively 'bed block'. While we understood the motivation for this approach, it left the prisoner cleaners with a poor regime and was not a long term solution. The loss of segregation unit beds had also led to the inappropriate location of some prisoners in Albany and Camp Hill when segregation was required, and evidence that punishments of cellular confinement were remitted to allow prisoners to be segregated.
- 7.51 Prisoners held in the cells were properly authorised and reviews carried out on time by multidisciplinary groups, including mental health staff and Independent Monitoring Board (IMB) members. Targets set for prisoners were basic and did not address the reasons why they were

in segregation. Delays in segregation unit staff receiving the results of safer custody and security investigations meant that some prisoners were held in segregation longer than necessary. However, most prisoners did not remain in the units for excessive periods and many returned to normal location. There were no formal care planning procedures for those in segregation for long periods and no formal reintegration policy, although staff across all three sites made ad hoc attempts at reintegrating prisoners to residential wings.

- 7.52 The regime in all the units was limited and prisoners had to make applications for showers, telephone calls and exercise. Prisoners could attend religious services off the unit and could continue to attend offending behaviour programmes. Exercise yards were austere with no seating, and one at Parkhurst was flooded.
- 7.53 Staff-prisoner relationships in all three sites were respectful and staff displayed a good knowledge of the prisoners in their care. However, this was not always reflected in segregation unit and P-Nomis records.
- 7.54 Segregation unit monitoring meetings were held regularly at Parkhurst and Albany but there had been only one such meeting at Camp Hill.
- 7.55 The segregation unit at Parkhurst was purpose-built and had 21 segregation cells and seven cells for housing cleaners and orderlies for the unit. The unit had been renamed the segregation and reintegration unit but there were no formal policies to reflect that change. The number of prisoners working on the unit was excessive and they had access to a limited regime. They were unnecessarily exposed to incidents of use of force and disruptive prisoners as their part of the landing was merely screened off. The showers in the unit were not screened and one was out of order. All cells had in-cell sanitation and electricity, except the special cell. Prisoners could have television in their cells, according to their IEP level. They had to choose between showers and exercise at the weekends. The exercise yards were austere as they remained cladded and with netting from when the site was a special secure unit.
- 7.56 The Parkhurst unit had one special cell and a further cell for prisoners who were violent or refractory. This was essentially special accommodation as it contained only a mattress on the floor. A further cell was used as a store room. The beds in all the cells were too small for the mattresses, and the unit could be very noisy when prisoners were moving around.
- 7.57 There had been 143 prisoners held in segregation in Parkhurst in 2010 to date which was a significant increase on the 140 held in 2009. There were 14 prisoners in the unit during our inspection. Two were serving a punishment of cellular confinement, six were segregated for good order and six for their own protection. Staff reported that since the number of segregation cells had been reduced, prisoners sometimes had their cellular confinement remitted to enable other prisoners to be held in segregation. One prisoner had remained in segregation in this unit, and previously at Albany, for 16 months. He had decided to remain in prison for the rest of his life and did not engage fully with staff. He had been seen by mental health staff but there was no clear plan for his future.
- 7.58 The segregation unit in Albany had five segregation cells, one dirty protest cell and two special cells. An additional 12 cells were used to house orderlies who worked in a variety of positions across the prison. These prisoners experienced a slightly better regime than those in Parkhurst as they could leave the unit for association on the other residential wings.
- 7.59 There had been 45 prisoners held in segregation in Albany in 2010 to date, a slight reduction from 68 in 2009. There were five prisoners there during our inspection – two were serving periods of cellular confinement, two were segregated for good order and one was awaiting

adjudication. In our examination of segregation records, we found nine occasions in the previous two months when six prisoners were segregated – one being held each time in the dirty protest cell, which was inappropriate. The unit had the poorest accommodation of the prison's units; it was dark with no in-cell electricity and peeling paint in the shower.

- 7.60 The segregation unit at Camp Hill had 10 segregation cells, two special accommodation cells and two holding cells for those attending adjudications. The accommodation was generally clean and bright, although there was no in-cell electricity. There was some cardboard furniture in cells. New furniture had been ordered to replace it. Prisoners had access to education on a one-to-one basis on the unit, for which they could be paid, and gym staff provided advice on exercise in cell.
- 7.61 There had been 211 prisoners held in segregation in Camp Hill in 2010 to date, which was a slight reduction from 324 in 2009. Staff said that the majority were there for their own protection. There were nine residents during our inspection – two were serving periods of cellular confinement, two were segregated for good order and five seeking protection. We were told by staff, and found records that showed, that when the unit was full prisoners seeking protection could be segregated on other units with no governance arrangements in place. There had been no investigation into why so many prisoners at Camp Hill sought protection (see section on vulnerable prisoners).
- 7.62 The secreted items policy had been used 10 times at Camp Hill. Records showed that the time prisoners spent under the restrictions of the policy had ranged from one to eight days. Three mobile telephones and one watch had been found.

Recommendations

- 7.63 The secreted items policy should be revised to enable prisoners to access regime activities, including showers and telephones, and to remove the need for placing them on the escape list and for staff to deal with them dressed in full personal protective equipment.
- 7.64 Prisoners should only be strip-searched on location to segregation where a risk assessment deems this necessary.
- 7.65 Targets set for prisoners in segregation should be meaningful and address the reasons why they have been segregated.
- 7.66 There should be formal care planning and reintegration policies for the segregation units.
- 7.67 Prisoners in the segregation units should not have to make applications for access to showers, telephones and exercise, and the regime should be improved to include activities in association, where appropriate.
- 7.68 Segregation monitoring meetings should be held for all three segregation units.
- 7.69 The reduction in the number of segregation beds should be sustained but the number of prisoners working in the segregation unit at Parkhurst and Albany should be reviewed and their regime improved.

- 7.70 The purpose of the cell in Parkhurst used to house refractory or violent prisoners should be clearly defined and appropriate governance procedures put in place.
- 7.71 The dirty protest cell in Albany should not be used to house prisoners segregated for reasons other than a dirty protest.
- 7.72 Prisoners at Camp Hill requesting own protection should not be held in segregation on other wings.

Housekeeping point

- 7.73 Results of investigations for those held in segregation should be communicated quickly on completion to allow for a full review of the prisoner.

Incentives and earned privileges

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.

- 7.74 A common incentives and earned privileges (IEP) scheme operated across the prison and there had been considerable effort to ensure prisoners were clear about how the scheme operated. Warnings were generally appropriate and we saw examples of staff exercising flexibility in the operation of the scheme. Promotion and demotion were usually based on a pattern of behaviour but we found examples where prisoners were automatically downgraded following a single incident with no consideration of individual circumstances. Rates of prisoner pay were linked to their IEP status, which was inappropriate. Prisoners on the basic level attended review boards and were clear about the reasons for their downgrade. The basic regime did not allow prisoners to have in-cell power, which was unnecessarily punitive.
- 7.75 A single incentives and earned privileges (IEP) scheme, reviewed in March 2010, operated across all three sites. The published document gave a detailed outline of how the scheme operated, how prisoners could progress and the standards of behaviour expected. The policy was clearly linked to the violence reduction strategy. A nominated senior officer had managerial oversight of the operation of the policy at each site.
- 7.76 The scheme operated over three levels – basic, standard and enhanced. New arrivals were placed on standard unless they had earned enhanced status at a previous establishment and this had been verified, usually by induction staff or their personal officer. We saw some examples of prisoners who had had to wait a long time after their arrival to have their IEP status confirmed.
- 7.77 Promotion and demotion within the scheme were based on a monthly points system with points awarded across five areas, including behaviour on the wing, personal and cell hygiene, behaviour towards staff and other prisoners, employment and engagement with the offender assessment system (OASys). The prison had invested considerable effort in ensuring prisoners were clear about key changes to the scheme when the revised standardised policy had been rolled out. Comprehensive information booklets had been produced for prisoners

who were maintaining their innocence and not prepared to engage with identified sentence plan targets, explaining how this would affect their promotion through the IEP scheme.

- 7.78 In our survey, only 55% of respondents at Parkhurst and 47% at Albany, compared with the comparators of 61%, said they had been treated fairly under the IEP scheme. In discussion with prisoners at both sites, the main issue raised was the link between progression in the scheme and engagement with sentence planning targets. At Albany, minority groups had negative perceptions of their treatment under the IEP scheme. For example, only 27% of foreign national respondents, compared with 51% of British respondents, said they had been treated fairly in their experience of the scheme. Respondents at Camp Hill had more positive perceptions overall with 64%, against the comparator of 58%, saying they felt they were treated fairly under the scheme, although only 53% of black and minority ethnic respondents at the site compared with 66% of white felt they had been treated fairly.
- 7.79 To attain enhanced status, prisoners had to receive a monthly points score of between 14 to 15 points for three consecutive months and had to have received no adjudications or IEP warnings during this period. At the time of the inspection, 62% of prisoners at Parkhurst, 56% at Albany and 61% at Camp Hill were on the enhanced level.
- 7.80 A single serious incident, such as a proven adjudication for a failed mandatory drug test or possession of an unauthorised article, triggered an immediate IEP review but we found examples, particularly at Parkhurst, where prisoners were downgraded following an adjudication with no evidence in the review paperwork of consideration of their individual circumstances or previous patterns of behaviour. The policy also allowed the head of residence for the prison to authorise downgrading from enhanced to basic in exceptionally serious circumstances, although we found one example at Camp Hill where the decision to take such action did not appear to have been authorised at this level.
- 7.81 Monthly IEP score sheets were maintained on each residential wing, either in a central file or in personal officer files. Across the three sites, staff were not consistently recording IEP monthly scores in P-Nomis case notes and, therefore, a prisoner's IEP level was not always readily apparent. In addition to the points system, prisoners could receive verbal and written IEP warnings throughout the month. The warnings we saw were appropriate and we saw examples in P-Nomis case notes of staff and managers exercising discretion in the application of the scheme. At Albany, prisoners could receive warnings for misuse of the night sanitation system. In focus groups, some prisoners said they were not aware they had received IEP warnings until a review board had been convened.
- 7.82 The key differentials in the scheme were access to private cash and visits, with enhanced prisoners able to have up to six one-hour visits a month and family visits and access to a one-off annual parcel. Prisoners' pay rates were also linked to their IEP status, which was inappropriate. St Stephen's, the enhanced unit on Camp Hill, was not referenced in the published IEP policy, although prisoners at the site understood how to apply for a move to the unit and a waiting list was maintained.
- 7.83 At the time of the inspection, 23 prisoners in the prison were on basic level – 11 at Parkhurst, five at Albany and seven at Camp Hill. Prisoners on basic who we spoke to on all three sites said they had attended the review board and were clear about the reasons why they were demoted. Prisoners on basic did not have access to in-cell power, which was unnecessarily punitive. Although they could apply to have a chaplaincy radio in their cell, they had to purchase the batteries themselves from reduced funds. The regime for those on basic at all three sites was limited but included daily access to exercise, telephone and a shower, a weekly gym period and three association periods a week. Behaviour improvement targets were

set and considered at basic reviews. An appeal system was built into the scheme and prisoners were told of their right to appeal at review boards.

- 7.84 Monthly monitoring data were collated at each site, including the number of promotions and demotions and reviews conducted. Quality assurance arrangements were in development but were well established at Parkhurst, where the senior officer collated a detailed monthly report.

Recommendations

- 7.85 Review boards should clearly demonstrate full consideration of prisoners' individual circumstances and should evidence how this information was used to inform their outcomes.
- 7.86 Decisions to downgrade prisoners should only be authorised at the level specified in the published incentives and earned privileges (IEP) policy.
- 7.87 Prisoners should not receive differential rates of pay for the same job.
- 7.88 Prisoners on basic should be able to retain access to in-cell power.

Housekeeping points

- 7.89 Procedures to verify prisoners' enhanced status attained at a previous establishment should be improved to ensure they do not experience delays in retaining their IEP status.
- 7.90 The published IEP policy should include information about the role of St Stephen's, the enhanced unit at Camp Hill.

Section 8: Services

Catering

Expected outcomes:

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

- 8.1 There was one purpose-built kitchen for the prison. Storage, preparation and serving areas were reasonably clean but there was insufficient halal equipment in the kitchen. Breakfast packs were issued the day before they were to be eaten, meals were served too early and there were no opportunities for dining in association. Prisoners were negative about the food but we found both quality and quantity to be acceptable. Consultation arrangements were good.
- 8.2 Catering arrangements for the three sites were based in a new purpose-built kitchen in a separate building. It was well equipped, clean and well maintained and had a wind turbine and biofuel converter. However, there was insufficient separate equipment for the preparation and cooking of halal food.
- 8.3 The four-week multi-choice menu cycle was developed by nutritionists in the kitchen and ensured that menus were varied and balanced with the opportunity for five portions of fruit and/or vegetables a day. A range of specialist religious, medical and cultural diets were appropriately catered for. Menus were in English only but were colour coded to ensure that prisoners could identify the contents of meals.
- 8.4 In our survey, fewer prisoners than the comparators said that the food was good – only 24% against 36% in Parkhurst, 21% against 37% in Albany and 22% against 30% in Camp Hill. During our inspection, the overwhelming opinion from prisoners was that portions were inadequate and that food was often cold at the point of service. However, the food that we sampled was tasty and we saw reasonable portions, although towards the end of service meals were, at best, lukewarm. Food trolleys were loaded on to lorries at the kitchen at approximately 11am and 4pm for delivery to the sites. Lunch and dinner were served too early, at 11.30am and 4.30pm respectively, and the service period was often too long. It was inappropriate that breakfast packs were issued the day before they were to be eaten.
- 8.5 Prisoners at Albany periodically raised concerns that their food had been contaminated by prisoners working in the kitchen. They could direct these concerns directly to the office for environmental health but, apart from kitchen staff loading the food trolleys, the prison took no measures to offer prisoners assurance that their food had not been tampered with.
- 8.6 All servery areas had separate halal utensils and the Muslim chaplain was satisfied, through regular spot checks, that arrangements for the serving of halal meals were appropriate. Staff supervision and management of the serveries was, however, often poor. We observed non-halal utensils being used inappropriately to serve halal food, and vegan prisoners also complained about cross-contamination. We saw prisoners helping themselves, unchallenged, to food before service had commenced. Hot cabinets were switched on too late to maintain food at an appropriate temperature, and there were often delays in putting food from the trolleys into the bains-marie or hot cupboards. Temperatures of food were generally taken but

one servery had not had a temperature probe since at least August 2010. All kitchen workers were trained in food hygiene but not all servery workers were appropriately trained.

- 8.7 Servery areas were generally clean but the two areas serving A-E wings at Albany needed refurbishment and had unreliable equipment. Food comment slips had replaced comments books but they were not freely available, and the kitchen did not log or analyse them. Responses were too often curt, took no responsibility and did not address the issues raised. There were good consultation arrangements for catering with a twice-yearly survey, which had an improving return rate, and regular catering meetings.
- 8.8 Prisoners across the three sites had no opportunities for dining out of their cells, although cooking facilities were provided and well used on all residential units at Parkhurst.

Recommendations

- 8.9 The kitchen and serveries should use separate utensils and equipment for the preparation, cooking and serving of halal food.
- 8.10 Lunch should be served between 12 noon and 1.30pm and dinner should be served between 5pm and 6.30pm.
- 8.11 Breakfast packs should be issued on the morning they are to be eaten.
- 8.12 Menus should be translated into appropriate languages.
- 8.13 Residential staff should closely supervise servery areas and ensure that food is managed appropriately, including taking temperatures, once it is unloaded from the kitchen lorry.
- 8.14 Staff and managers should ensure that food for Albany prisoners is not contaminated and should be able to offer consistent assurance to prisoners.
- 8.15 All servery workers should be trained in food hygiene.
- 8.16 The area used to serve meals for A-E wings at Albany should be refurbished.
- 8.17 The kitchen should log and analyse food comment slips and respond to them in a polite manner that addresses the issues raised.
- 8.18 Prisoners should have the opportunity to dine out of cell.

Housekeeping point

- 8.19 Food comment slips should be freely available.

Prison shop

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.

- 8.20 Prisoners were mostly positive about the prison shop although they complained about the high prices. Consultative arrangements were good and were reflected in changes to the shop lists. Prisoners complained about the time it took to receive catalogue orders.
- 8.21 In our survey, responses about the range of goods stocked in the prison shop were mainly positive, with the exception of foreign national prisoners. In our groups, prisoners complained of high prices and that only minimal fruit items were available.
- 8.22 There were individual shop order lists for each site, which was in keeping with their diverse populations. The Parkhurst list included frozen food items which prisoners could cook themselves in wing ovens.
- 8.23 The shop was managed within the national DHL contract and a packing warehouse in Parkhurst made up the orders for the three sites and HMP Winchester. Shop orders were delivered on individual wings. This was well supervised and efficient with wing orderlies working alongside DHL employees. Any amendments were made on the day of delivery.
- 8.24 Due to the ordering process, it was possible for new arrivals to wait up to 10 days to receive their first orders, although additional reception packs were available in these cases.
- 8.25 A wide variety of catalogues was available to prisoners, including religious items, hobbies, clothes and music. There was no facility to have goods sent in via catalogues, and we were told that there were sometimes lengthy delays between ordering catalogue goods and collection from reception despite reasonable delivery times from suppliers. Newspapers and magazines could also be ordered through a local newsagent.
- 8.26 There were quarterly consultation arrangements for all sites, and items were added or subtracted from the lists in response to these.

Recommendations

- 8.27 Prisoners should be able to buy items from the prison shop within 24 hours of arrival.
- 8.28 Catalogue orders should be available to prisoners within 72 hours of delivery at the prison.

Section 9: Resettlement

Strategic management of resettlement

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 prison had a comprehensive reducing reoffending resettlement strategic plan addressing each resettlement pathway, but the health care pathway was weak and the plan was not explicitly linked to a regional strategy. Good information about the population was collected but it had not been used in a needs analysis to inform the prison's resettlement strategy. Governance arrangements were not as described in the strategy and did not include external providers, but resettlement issues were considered monthly by the senior management board and on each site. A limited amount of monitoring had been initiated and there plans to develop this further.
- 9.2 There was a comprehensive reducing reoffending resettlement strategic plan for 2010–11. Each pathway had been addressed and a lead manager identified who was responsible for the description of existing resettlement services and an action plan to develop services further.
- 9.3 The health care resettlement pathway was weak. It described health services in the prison but did not address issues of preparation for release or arrangements for contact with community services.
- 9.4 The plan's connection with a regional strategy was not clear. We were told that a regional strategy had been published after the prison's strategy and the director of offender management was satisfied that there were no contradictions between the two documents.
- 9.5 The prison's strategy was not based on a needs analysis although good information about the population was collected from OASys (offender assessment system) assessments, resettlement services and the population profile.
- 9.6 The strategy described governance arrangements through a resettlement strategy committee including a range of prison directors, chaired by the governor. In practice this committee did not meet but resettlement information was discussed at the full senior management board and was supplemented by monthly reducing reoffending meetings on each site, which had been held since April 2010. Membership of these meetings did not include external providers and there was no evidence that the action plan in the strategy was monitored. There were individual meetings with external providers to review service level agreements.
- 9.7 There was evidence that plans for monitoring had been discussed but this was not regularly fed into the senior management board or reducing reoffending committees. There had been an exit survey of prisoners transferred from the Parkhurst site when it changed to an integrated regime, reported in July 2010, and the responsibility for an exit survey at Albany had been decided.
- 9.8 Basic resettlement needs were assessed for all new arrivals on the three sites. The resettlement officer was only formally part of the induction programme at Albany but the team

at Camp Hill and the officer at Parkhurst received a list of all new arrivals and saw them the day after arrival, other than at weekends. They made referrals to relevant agencies or staff or dealt with issues themselves. There was no follow-up to these referrals and no formal pre-discharge boards at any of the sites, but individuals were called up around three months before release to discuss any outstanding, or new, needs. The resettlement officer at Albany was aware that a longer preparation for release was appropriate for men reaching the end of long sentences and was planning to start discussing the process at the nine-month point.

Recommendation

- 9.9 The effectiveness of resettlement services should be monitored and the information used to improve provision.

Housekeeping points

- 9.10 The health care pathway in the reducing reoffending resettlement strategic plan should focus on preparation for release and links with community services after release.
- 9.11 The reducing reoffending resettlement strategic plan should include an explicit link with the regional resettlement strategy.
- 9.12 External providers of services should be included in resettlement governance arrangements.

Offender management and planning

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.

- 9.13 There were assessments and sentence plans for the majority of, but not all, prisoners who required them. The quality of assessments and plans was variable. There was little involvement of prisoners in development of their sentence plans and insufficient contact with them to ensure targets were delivered. Categorisation was carried out with little involvement of the prisoner, and many categorisation reviews were late. Prisoner moves were centrally managed and most progressive moves were implemented promptly. Public protection processes were centrally managed and robust but there were weaknesses in the communication of public protection issues to offender management. There were no separate arrangements for the management of indeterminate-sentenced prisoners, and Camp Hill lacked preparation for their arrival. Reports to the Parole Board were not consistently delivered on time.

Sentence planning and offender management

- 9.14 Prisoners in our groups and spoken to individually had mainly negative perceptions of offender management. Most had a sentence plan, which was reflected in our survey on each site and the response overall that 79% had a sentence plan against the comparator of 68%. However, most prisoners did not feel they had been involved in the development of their plans and said

that targets had been imposed without consultation. This was reflected in the survey on each site and the overall response that only 46% of respondents, against the comparator of 59%, had been involved in the development of their plan.

- 9.15 In Parkhurst and Albany, the majority of prisoners were in scope for offender management, including life-sentenced prisoners. On these sites there were just 72 (14%) and 43 (7.6%) respectively out of scope. In Camp Hill, 407 prisoners (70%) were out of scope for offender management.
- 9.16 There were just eight prisoners at Camp Hill sentenced to less than 12 months who did not require an OASys assessment but we were told they would still be allocated to an offender supervisor. Planning for their resettlement needs was through the induction assessment but there was little evidence that offender supervisors drove the achievement of their needs. There was no management of remand prisoners at Parkhurst other than an assessment of their resettlement needs on induction.
- 9.17 There were autonomous offender management teams at each site and caseloads were high. In Parkhurst and Camp Hill, offender supervisors had caseloads of around 90 prisoners, while in Albany caseloads were lower at around 75. This level of caseloads restricted contact with prisoners mainly to meetings at the time of a review. In Parkhurst, each wing had a weekly surgery, which improved prisoners' opportunities to meet their offender supervisor.
- 9.18 The number of OASys assessments overdue or not in place was lower than in previous inspections. In Parkhurst the total was 49, Albany had 57 and Camp Hill had 88. Of these, 109 were the responsibility of community-based offender managers and 85 the responsibility of the prison.
- 9.19 Prison inspectors and the Probation Inspectorate scrutinised offender management files and found that assessments were largely in place; however the quality was variable and there was little account of diversity. Sentence planning appeared to be an administrative function. Where plans were in place there was little evidence that prisoners had been engaged in the process, and in half the plans the contribution that the prisoner had to make to achieve the objectives was not clear. There was no indication that prisoners had been given copies of their sentence plans and not all were signed. There was little evidence, particularly for prisoners who were out of scope, that there had been a meeting to produce the sentence plan.
- 9.20 Communication with prisoners appeared to be process-oriented and reactive. We saw no scheduled contacts with offender supervisors and little evidence that progress towards objectives was driven or monitored by offender supervisors or offender managers.
- 9.21 In Camp Hill, release on temporary licence (ROTL) arrangements were being developed. A few prisoners were granted day release to work in the central kitchens. Overnight releases had been agreed for 44 prisoners in the previous six months for a range of resettlement reasons, such as accommodation, employment and family ties. This was a significant improvement since the last inspection which could be improved further.
- 9.22 In the previous six months, 141 prisoners had been considered for home detention curfew (HDC) and 75 had been granted. There were efficient systems to identify prisoners to assess their suitability but many were not considered until after their eligibility date. Cases examined that were decided after their eligibility date were due to reasons outside the prison's control, such as short sentences, recent arrival at the prison and late external reports.

Recommendations

- 9.23 Every eligible prisoner should have an up-to-date OASys (offender assessment system) assessment and sentence plan.
- 9.24 Offender supervisors should contact prisoners on their caseload once a month to monitor and drive progress in achieving sentence plan targets.

Categorisation

- 9.25 Categorisation was undertaken by offender supervisors and aligned to reviews of prisoners' risk assessments. There was no opportunity for prisoners to make representations about their readiness for recategorisation, although information was taken from residential staff.
- 9.26 Reviews of categorisation were often late. Of the 103 in the previous month, 46 were late, and a further 35 due at Camp Hill had not been considered. The workload for recategorisation at Camp Hill was higher than the other two sites because of new arrivals who had not been categorised at their previous establishment and more frequent reviews due to the nature of the population.
- 9.27 The observation, classification and allocation (OCA) department was centrally managed and had good links with the offender management unit (OMU) teams. Information about the requirements for progressive and compassionate moves and about other establishments was organised in databases which helped match prisoners to potential moves.
- 9.28 The department was managing to facilitate moves for a large number of prisoners to enable their progression through their sentence. At the time of the inspection, the number of prisoners awaiting a progressive move was 33 in Parkhurst, 50 in Albany and 33 in Camp Hill. Most prisoners were moved within six months but some awaiting transfers to category B prisons for specific programmes had waited longer. In the year to date, there had been 838 prisoners transferred, of whom 28 were serving a life sentence and 46 an indeterminate sentence for public protection.

Recommendations

- 9.29 Prisoners' representations should be considered in categorisation decisions.
- 9.30 The backlog of recategorisation decisions should be eliminated.

Public protection

- 9.31 The prison held a large proportion of prisoners assessed as presenting a risk of harm to the public. Nearly 78% of the population met the criteria for multi-agency public protection arrangements (MAPPA), 41% were a risk to children and 49% were registered sex offenders.
- 9.32 The public protection policy was up to date and comprehensive. The public protection unit (PPU) was managed by probation and worked across all three sites with staff based at each.

- 9.33 There were monthly risk management meetings at the Parkhurst and Albany sites, where separate child safeguarding meetings had also been recently established. At the Camp Hill site, child safeguarding issues were discussed within the fortnightly risk management meetings, reflecting the higher turnover of prisoners. Attendance at risk management meetings was good with all appropriate prison departments and the police liaison officer represented.
- 9.34 Prisoners subject to restrictions on their contact with children were informed promptly by offender supervisors and given the means to apply for contact with named children.
- 9.35 A separate public protection file was opened on each prisoner who came to the notice of the PPU. The PPU carried out its own 'initial and interception risk assessment of offenders', which initiated public protection procedures such as notification to MAPPa or monitoring of mail and telephone calls. It was not integrated with OASys assessments and plans. We saw two examples on PPU files of significant information that had not been used to inform the risk assessment and risk management plan in OASys assessments.

Recommendation

- 9.36 **Information gathered by the public protection unit should be used to inform the risk assessment and risk management plan in OASys assessments.**

Indeterminate-sentenced prisoners

- 9.37 Parkhurst and Albany had large numbers of indeterminate-sentenced prisoners (227 or 44% and 319 or 56.3% respectively). There was a smaller population of 56 (9.6%) at Camp Hill, who had been received within the last year.
- 9.38 There were no dedicated teams for managing indeterminate-sentenced prisoners at any site and they came within offender management arrangements. Probation officers in the OMU who were MISAR (managing indeterminate sentences and risk) trained managed lifers at Albany and Camp Hill, while at Parkhurst all offender supervisors shared the caseload.
- 9.39 Indeterminate-sentenced prisoners in Parkhurst and Albany told us that their main concerns were that reviews of their sentence plans were not carried out in consultation with them and that they were frustrated at the lack of progression to other establishments.
- 9.40 In Camp Hill the small population of indeterminate-sentenced prisoners were mainly located on St Michael's and St George's wings. Prison managers had anticipated that Camp Hill would provide a location for indeterminate-sentenced prisoners from the other two sites who had been recategorised to category C, but in practice this was not available for the high number of them who were vulnerable because Camp Hill was not integrated. Indeterminate-sentenced prisoners were mixed with short-term prisoners and often had to share a cell, which many found difficult after having been housed in single cells for many years. They had all arrived at the site recently and said they had expected dedicated services but had been told they were 'guinea pigs' in a new system. Staff told us that planning and preparation for the arrival of indeterminate-sentenced prisoners had been minimal. They had been given some awareness training from Parkhurst staff but they had not been MISAR-trained.
- 9.41 There were no specific consultation groups for lifers in the prison but in Parkhurst there had been two lifer days held in the previous 12 months. This did not affect Parkhurst and Albany prisoners as much as those at Camp Hill, who were a minority in an establishment experienced in working with short-term prisoners. None of the indeterminate-sentenced

prisoners had town visits for which they were eligible and they felt this affected their chances of being recategorised for open conditions.

- 9.42 Parole reports for indeterminate-sentenced prisoners were not reliably submitted on time. In the previous six months, only 53 of the 74 reports due for submission were submitted on time (71.6%). The worst performing site was Camp Hill where just 57% of reports were submitted on time, which reflected the short time that many of the indeterminate-sentenced prisoners had been at the establishment.

Recommendations

- 9.43 Sentence planning targets for indeterminate-sentenced prisoners should be set in consultation with the prisoner.
- 9.44 There should be consultative meetings with indeterminate-sentenced prisoners in Camp Hill to discuss the shortcomings of the regime for them and to agree action on this.
- 9.45 Town visits should be provided for appropriate indeterminate-sentenced prisoners.
- 9.46 Parole dossiers should be submitted on time.

Resettlement pathways

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

- 9.47 Pathway provision in relation to accommodation and finance, debt and benefit was comprehensive. Resettlement support for employment, training and education was poor at Parkhurst and Camp Hill. Health care discharge planning was particularly concerning at Albany.

Accommodation

- 9.48 Good housing support was offered across the three sites. At Parkhurst and Albany, single resettlement officers provided a comprehensive service for prisoners who did not fall in scope for offender management. At Camp Hill, a dedicated team of probation service officers provided this service. Housing needs were identified on arrival, by self-referral at any time during a prisoner's stay at the prison or through pre-discharge checks.
- 9.49 All staff dealing with accommodation had links with the local council (although this was relevant in only a few releases) and voluntary housing organisations. The few short-term prisoners received at the prison were supported to sustain tenancies through continuing

housing benefit payments. There were no specific initiatives such as good tenants' courses, completion of which allowed priority on council waiting lists.

- 9.50 Most prisoners released from Parkhurst and Albany had their accommodation arranged in approved premises by their offender managers. Only one prisoner in the last six months from these two prisons was recorded as going out to no fixed address. He was a recalled prisoner whose accommodation placement was the responsibility of the offender manager but who was not subject to offender supervision on release as he had completed his sentence. This was also an issue at Camp Hill where around four prisoners a month in the last six months had been discharged with no address. About half were the responsibility of offender managers and had reached the end of their licence. Those dealt with by the prison either refused to engage or were difficult to place and had appointments with local councils for the day after release, when they would have become a priority.

Education, training and employment

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

- 9.51 The revised range of vocational and work activities at Parkhurst was more equitable and appropriate in supporting positive progression on release or into category C prisons. There was too little support for prisoners in preparing curriculum vitae and practising interview and disclosure techniques to promote themselves effectively on release. Two prisoners had been successfully interviewed for employment while in the Parkhurst workshop but they had yet to start work as they were still waiting for disclosure certificates. Prisoners received an individual careers information and advice service (CIAS) from Tribal staff as there was no pre-release course.
- 9.52 Resettlement processes were satisfactory overall at Albany where only a few prisoners were released to the community every year. There was an adequate range of interventions, many of which included external agencies, such as Jobcentre Plus and Citizens Advice. CIAS was not yet available for prisoners about to be released as the new provider had not yet taken on this element of its contract. The prison had recognised that there was a need for greater coordination of these sources of information and advice to provide a more coherent approach to resettlement.
- 9.53 Camp Hill had insufficient strategies to improve prisoners' employment prospects on release. There were inadequate links with employers in areas where most prisoners were being released. The prison had recently created a designated role to develop links with employers in the community but this had not yet had an impact. Resettlement services did not provide prisoners with formal job seeking skills, and the pre-release course had not been delivered for some time. Resettlement activities relied on external agencies to provide job search support. Release on temporary licence was not adequately used for job interviews or work placements.

Recommendations

- 9.54 The prison should increase the amount of guidance and support available to prisoners before their release to improve their prospects for engaging in education, training and/or employment.
- 9.55 The prison should introduce a pre-release course to ensure all prisoners are better prepared and have increased awareness and understanding in the practical aspects of finding jobs, education and training on release.

Mental and physical health

- 9.56 Health services for prisoners being released varied across the three sites. At Parkhurst, health care staff saw prisoners and gave them verbal information about registering with a GP, and a list of GPs in the area to which they were being released if requested. We were concerned that at Albany, particularly in light of the specific needs of the population, health care staff did not routinely see prisoners who were to be released unless they requested an appointment. In Camp Hill, prisoners were sent an appointment for a pre-release clinic one week before their release. They were given details of any vaccinations they had received, drug harm minimisation information, a letter for their GP, information about accessing community health services and a PCT mental health patient satisfaction survey.
- 9.57 There were good links between offender health and mental health, and prisoners on the mental health caseload subject to the care programme approach due for release were linked with the relevant community mental health team. Despite efforts to engage external teams, only a minority visited prisoners before their release. Links were easier to facilitate with local teams
- 9.58 There were reasonable links with palliative care services, and prisoners with palliative care needs were referred to the relevant clinical nurse specialist at the hospital, who visited them in prison. Staff did not use a specific care pathway to plan for those with palliative care needs, although we were told that one was in development. There were two beds in the inpatient unit specifically for prisoners with palliative care needs and a garden funded by the King's Fund 'enhancing the healing environment' project, but it had not been used when we inspected because it had not been risk assessed by the security department (see housekeeping point 5.117).
- 9.59 At Albany there was a nurse-led support group for prisoners with life-limiting conditions, which was welcomed by those who attended, but it was not easily accessible to those in the other two sites.

Recommendations

- 9.60 Prisoners with complex health needs should be the subject of a single multidisciplinary assessment to identify their needs so that they can be referred to relevant health, social service and voluntary agencies in the community.
- 9.61 All prisoners should be given information and assistance to access health and social care services on their release, and support in accessing the services if required.

Housekeeping point

- 9.62 Prisoners with life-limiting conditions on all three sites should be able to benefit from the nurse-led support group.

Good practice

- 9.63 *The nurse-led support group for prisoners with life-limiting conditions at Albany gave them the opportunity to discuss their thoughts and feelings in a confidential and supportive environment.*

Finance, benefit and debt

- 9.64 There were good and responsive services across all three sites to support prisoners with finance, benefit and debt issues. Services included budgeting and money management courses, Citizens Advice appointments and, at Camp Hill, the Law Centre (see paragraph 3.105). Jobcentre Plus provided benefits advice and appointments for fresh claims. Support provided included contacting creditors and advising prisoners on benefits, setting up rent arrears repayment plans and surrendering tenancies.
- 9.65 All sites ran the financial capability course developed by UNLOCK (a voluntary organisation for ex-prisoners). It was wholly peer-run at Camp Hill but jointly run by Citizens Advice and a peer tutor at Parkhurst and there was a peer tutor in Albany. Prisoners spoke very highly of this course, which included the option to open bank accounts. In our survey, prisoners at all three sites were more positive than at comparator prisons about who to go to for help with opening a bank account on release. Different banks provided the service at each site, and at Camp Hill the bank had suspended the opening of accounts since June 2010. This had left 69 prisoners on the waiting list to open accounts and around a further 30 prisoners had been released without having had the opportunity to do so.

Recommendation

- 9.66 **The facility for prisoners to open bank accounts should be restarted at Camp Hill.**

Drugs and alcohol

- 9.67 Drug supply reduction and drug strategy meetings were held quarterly, with good representation from across the prison. CARAT teams at Parkhurst and Albany had lower caseloads than at Camp Hill but provided an appropriate and client-focused service. The CARAT team's work at Camp Hill had become very difficult recently due to the high level of drugs availability. There were effective communications and good working relationships between the prison's drug services and community resettlement agencies.
- 9.68 The prison was covered by separate drug and alcohol strategies. There were quarterly drug supply reduction and drug strategy meetings, with good representation from across the prison. However, given the extent of drugs availability at Camp Hill, we were surprised at the relative infrequency of the supply reduction meeting.
- 9.69 The CARAT (counselling, assessment, referral, advice and throughcare) team covered all three sites. The team, employed by Inclusion, comprised a manager, senior practitioner and seven full-time equivalent (FTE) workers. There were 1.6 FTE administrative workers directly employed, as were 1.5 FTE drug strategy officers. These officer posts were under threat with pending funding cuts, which could potentially leave no drug treatment-trained officers to supervise opiate substitution medication administration.
- 9.70 CARAT workers delivered the standard integrated drug treatment system (IDTS) 28-day psychosocial groupwork programme. IDTS nurses were not yet co-facilitating these groups, though they did sit in. There were plans for a gradual introduction of co-facilitation following the completion of their facilitation training.

- 9.71 The prison addressing substance related offending (P-ASRO) programme was run at Camp Hill and Albany with targets of 96 starts and 62 completions. These targets were being achieved in the year-to-date, with 48 starts and 41 completions. Three more courses were still to run in the current year. The programme was due to start at Parkhurst in the near future. CARAT workers facilitated peer support groups every Friday afternoon for P-ASRO graduates and any others who wished to attend.
- 9.72 The CARAT team's work at Camp Hill had become very difficult in recent months, due to a high level of drugs availability. Prisoners often either did not attend groups or were frequently attending one-to-one sessions under the influence of substances.
- 9.73 The education department delivered drug and alcohol awareness level 1 courses accredited by the National Open College Network across the prison. Fourteen places were available and there was a waiting list of 25.
- 9.74 There were no other interventions available for prisoners with alcohol problems and, as with most CARAT services elsewhere, the team was not funded to work with prisoners with alcohol-only primary problems.
- 9.75 Despite the difficulties of releasing many prisoners to the mainland, there were good working relationships between the prison's drug services and community resettlement agencies.

Recommendation

- 9.76 **The establishment should revise its alcohol strategy and address the currently insufficient level of services for prisoners with primary alcohol problems.**

Children and families of offenders

- 9.77 Visits could be booked by telephone, email and on site although many visitors were not aware of the options. Visits provision at all three sites met only minimum requirements with few, if any, concessions to the long journeys that visitors had made to the island. The visits halls at Parkhurst and Albany had been improved but the facility at Camp Hill remained poor. Visitors had limited access to waiting facilities and those visiting Parkhurst and Albany shared a small centre. Visitors and prisoners at all three sites criticised the entry to visits, and we observed long delays. Family visits were predominantly available only for enhanced prisoners and took place regularly at all three sites. However there had been family days held for standard prisoners in June. Storybook Dads was a new initiative, although it was temporarily suspended at Camp Hill. There was a three-week family learning course at Camp Hill but other services in support of the children and families pathway were limited.
- 9.78 Visits could be booked at all three sites by telephone, email and during visits. However, visitors we spoke to were generally unaware that there were options other than the telephone booking line. Staff were not active in promoting the different ways of booking visits, and only booked visits on site if visitors approached them.
- 9.79 The visits provision for the prison met only minimum requirements. There was a bus service from London on Sundays but little else to enhance the visits experience or ensure that those travelling the necessarily long distances to the island were given the maximum time possible with their relatives or friends (see also main recommendation HP67).

- 9.80 Waiting facilities for visitors were poor at all three sites with Albany and Parkhurst sharing a centre. The visitor centre either closed as visits started or after the last visitors arrived, leaving visitors with nowhere to go after visits. Prisoners and visitors across the prison complained about the starting time of visits and the time it took for visitors to get into the visits halls. Our observations across the three sites confirmed that visitors faced lengthy waits to go through searching and identification checks. A new system had been introduced to speed up entry at all three sites but had proved unsuccessful. Each visitor was given a number when booking a visit which gave them the order in which they would be admitted. There were visitors' toilets at all three sites but only prisoners at Parkhurst and Albany could use toilets during visits, and were subject to a strip search on return. The visits halls at Parkhurst and Albany had been refurbished and had soft furniture. Camp Hill's visits facility was poor with fixed furniture and was dark with a low ceiling. We were told that the furniture was to be replaced. Closed visits booths in all three sites were in full view of the general visits hall.
- 9.81 Visitors to Parkhurst generally waited outside the main entrance or in the small gate lodge as the shared visitor centre was some distance away. We observed that both domestic and legal visitors did not begin the entry process until 1.50pm for visits starting at 2pm. Visitors were called by entry number and went through search and drug dog procedures. There were no mats for them to stand on when they removed their shoes for searching. Staff were respectful and friendly and did all they could to put visitors at ease.
- 9.82 At Parkhurst, visitors entered the visits hall from 2pm onwards but the first prisoners did not arrive until 2.10pm. Prisoners were in the waiting area but were called in one at a time with a gap of about five minutes between each. The last visit commenced at 2.35pm and staff told us that visitors would be permitted entry until 3.30pm.
- 9.83 The visits hall at Parkhurst had room for 34 visits with five booths for legal visits. The hall was large although dark, and there had been attempts to brighten the area with artwork. A supervised play area staffed by volunteers from the Mother's Union was open for every visits session, and a small tea bar provided hot and cold drinks and snacks. The prisoner waiting area was large, with bench seating, toilets and a television. The atmosphere was relaxed and staff remained at a discreet distance and were helpful when approached by visitors for advice.
- 9.84 The visitor centre at Albany opened between 12 noon and 2pm. The area was small and had basic facilities, including toilets, play area and hot and cold drinks. The first visitors were called across, by number, at 1.35pm. The entry process took some time as the entry and search areas were small. Staff were polite and business-like. When visitors removed their shoes for searching, they had to stand on a tiled floor with no mats.
- 9.85 The last visitors taken to the visits hall at Albany arrived at 2.10pm. There were only 10 visits taking place in Albany on the day we observed. There were spaces for up to 20 domestic and two legal visits. Some of the tables in the main visits hall were too close together for privacy. There were two prisoner holding areas and a prisoner waiting area with a toilet, which had some graffiti. Prisoners had to wait in this area until 3.30pm if their visitors do not arrive. There was a small play area that was only open when children attended, and no tea bar. Comments in the visitors' book often reported the vending machines as being out of order or not well stocked.
- 9.86 Visitors to Camp Hill had the worst experience across the three sites. There was a small visitor centre outside the gate, which was staffed by personnel who also ran the tea bar in visits. It remained open until the last visitors had arrived, which meant that the tea bar in the visits hall was late in opening. The centre provided basic facilities with toilets and refreshments and a small play area.

- 9.87 Entry to visits in Camp Hill was, as in the other sites, very slow. The waiting and search areas in the gate complex were small and cramped. We observed visitors waiting up to half an hour in this area after being called across from the visitor centre. Search and drug dog procedures were protracted with often only one person searched by the dog at a time. Staff were polite and friendly but this did not compensate for the overall poor facilities and long waiting times. We observed adults become increasingly frustrated and impatient, and children upset by the experience. The last visits did not commence until 2.55pm. The tea bar opened at 2.30pm.
- 9.88 The visits hall in Camp Hill was large but with a low ceiling, noisy and cramped. There were spaces for up to 25 visits with four legal visits booths in an upstairs area. There was a small unsupervised play area. Staff informed us that if visitors did not arrive as booked they assumed the prisoner would know this and would not contact the wings to inform them of the non-arrival.
- 9.89 Other provision under the children and families pathway was limited and, although there was an action plan to address deficiencies, changes had been slow and improving prisoners' contact with families and friends had yet to become a priority. Managers felt that the need for family initiatives was under-reported and more work with offender supervisors was required to identify the provision required. The action plan was monitored through the resettlement meeting but was out of date.
- 9.90 Family visits were available across all three sites but predominantly for enhanced prisoners only. Parkhurst and Camp Hill provided these visits six times a year, during school holidays where possible, and Albany was due to hold its second family visits day. However family days had been held for standard prisoners in June. Adults as well as children could be invited, and activities for different age groups of children were provided at some visits.
- 9.91 There was a three-week family learning course at Camp Hill. Storybooks Dad was provided at each site, although this had been temporarily suspended at Camp Hill due to lack of facilities for recordings (see paragraph 6.36). The use of release on temporary licence to maintain family ties had increased (see paragraph 9.21).

Recommendations

- 9.92 Visitor waiting facilities should be improved at all three sites with centres remaining open until after visits finish.
- 9.93 Prisoners using the toilet during visits should only be subject to a strip search on return where intelligence or security considerations deem this necessary.
- 9.94 Closed visits booths should be out of sight of general visits.
- 9.95 The visits hall in Albany should be rearranged to provide privacy at all tables, and the refreshment facilities should be improved.
- 9.96 The visits hall at Camp Hill should be refurbished and the fixed furniture replaced.
- 9.97 Family visits should be available to all prisoners legally able to take part in them.

Housekeeping points

- 9.98 Floor mats should be provided in the visitors' search areas.

9.99 The tea bar at Camp Hill should be opened at the start of visits.

Attitudes, thinking and behaviour

9.100 Accredited programmes were centrally managed and a high number of places were offered. Prisoners were not disadvantaged by undertaking programmes and the provision matched demand. Support for prisoners undertaking programmes was mixed but the mentor scheme at Albany was a positive initiative. There was a strategy for challenging prisoners who did not admit their offence but no alternative programmes, and there were no alternative programmes for those unsuitable for accredited courses.

9.101 The accredited programmes team was centrally organised and covered all three sites. In Parkhurst and Camp Hill prisoners were offered the thinking skills programme (TSP) and controlling anger and learning to manage it (CALM), and those in Albany had access to the extended and core versions of the sex offender treatment programme (SOTP) and the TSP.

9.102 In our survey, a comparatively high proportion of prisoners across the prison (76% against the comparator of 69%) said that they had been involved in offending behaviour programmes, and there was a target of 365 completions for 2010-11.

9.103 Prisoners were not disadvantaged in undertaking programmes. On all sites, they maintained their employment and wages with continued access to other facilities, such as gym and library. Prisoners told us that preparation for the courses was thorough and programmes staff were available to deal with any questions.

9.104 Programmes were well managed and the number of prisoners awaiting them was matched to the places available. Attendance at programmes was well aligned with potential release dates, using information collected at induction.

9.105 Prisoners convicted of sexual offences were accepted at the prison without an assessment of their suitability for the programmes offered. Assessments were undertaken at the prison. If they required a programme available at another prison, they were transferred when a place became available. This caused delays for some prisoners, especially those requiring a move to a category B prison which offered the rolling SOTP.

9.106 Support for prisoners undertaking programmes was mixed. Staff awareness training was delivered to 25% of staff a year, but the residential staff we spoke with did not feel confident in advising prisoners about programmes or discussing their work. Prisoners told us that they received support from other prisoners who had undertaken programmes. This had been recently formalised in Albany with the appointment of peer mentors. Personal officers submitted reports to some post-programme reviews but had difficulty in being released to attend.

9.107 Parkhurst and Albany had a significant number of prisoners who did not admit their sexual offending and were not ready to undertake accredited programmes. There was a strategy to ensure that such prisoners were made aware of the consequences and to train residential staff in motivational interviewing to encourage prisoners to consider their position. We were told that such prisoners would previously have been referred to the enhanced thinking skills programme, which did not require them to admit to offending and usefully challenged denial. This was no longer available and there was no replacement.

- 9.108 There were no offending related or thinking skills programmes for prisoners not suitable for accredited programmes. At the time of the inspection there were 116 prisoners assessed as not needing the TSP or CALM course on the basis of their risk and need, for whom no alternative was offered.

Recommendations

- 9.109 Prisoners should be assessed for their suitability for the programmes offered before they are transferred to the prison.
- 9.110 The mentoring scheme on the Albany site should be extended to the other two sites to cover all programmes offered.
- 9.111 Prisoners maintaining their innocence should be considered for programmes that do not require them to admit their offending.
- 9.112 The prison should increase the opportunities for prisoners assessed as unsuitable for current accredited programmes to address their offending behaviour.

Section 10: Recommendations, housekeeping points and good practice

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

-
- 10.1 Prisoners at Parkhurst and Camp Hill should consistently complete all aspects of the induction programme. (HP57)
 - 10.2 The use of special accommodation across the prison should be reviewed immediately, and more effective governance arrangements put in place. (HP58)
 - 10.3 There should be effective security measures, including robust, timely and sufficiently staffed target drug testing, to reduce the supply of drugs, especially at Camp Hill. (HP59)
 - 10.4 Prisoners should be able to access toilet facilities 24 hours a day. (HP60)
 - 10.5 The role of diversity managers at each site should be clarified to ensure that each strand of diversity is covered appropriately and sufficiently, and with necessary links to senior managers and the diversity and race equality action team. (HP61)
 - 10.6 Prisoners across all three sites should have timely access to health services that are patient focused and meet their individual needs. (HP62)
 - 10.7 There should be an increase in the accredited vocational training available across the three sites. (HP63)
 - 10.8 At Parkhurst and Albany, wings should not be closed during any part of the core day, and evening association should not be cancelled. (HP64)
 - 10.9 The reducing reoffending resettlement strategic plan should be informed by an up-to-date needs analysis which reflects the needs of all categories of prisoners in the population and pays adequate attention to diversity needs. (HP65)
 - 10.10 A plan to improve the quality of offender management assessment and planning should be implemented. (HP66)
 - 10.11 Provision under the children and families pathway, especially visits, should enable and encourage prisoners to maintain contact and relationships with family and friends and maximise the time they can spend with them. (HP67)

Recommendation

To NOMS

-
- 10.12 Prisoners should be assessed for their suitability for the programmes offered before they are transferred to the prison. (9.109)

Recommendations

To director of offender management

- 10.13 The leaking roof in the library at Albany should be repaired, the interior painted and the temperature made controllable to improve the environment for library users and staff. (6.41)
- 10.14 The outstanding building work to provide larger cardiovascular and modular weight training areas in Camp Hill should be completed. (6.53)

Recommendations

To the governor

Courts, escorts and transfers

- 10.15 Prisoners should receive a safety briefing before embarkation on to ferries. (1.10)
- 10.16 Prisoners should receive 24 hours' notice of planned transfers. (1.11)
- 10.17 Prisoners should not be routinely strip-searched on arrival at sites on an internal transfer if they have already been strip-searched at the sending site. (1.12)
- 10.18 Prisoners should not be routinely handcuffed when embarking or disembarking escort vehicles at the Parkhurst site. (1.13)
- 10.19 Prisoners should be held in cellular vehicles for the minimum period possible. (1.14)

First days in custody: reception

- 10.20 First night health screening and cell sharing risk assessment interviews should be conducted in private. (1.22)
- 10.21 Prisoners should not be strip-searched in front of the booking-in desk at Camp Hill. (1.23)
- 10.22 Prisoners should be able to make a free telephone call in private on the day of reception. (1.24)

First days in custody: first night

- 10.23 The cells on F wing at Parkhurst should be clearly designated, refurbished and made fit for their purpose. (1.32)
- 10.24 The location of new prisoners should be clearly indicated in wing offices. (1.33)

First days in custody: induction

- 10.25 Induction programmes should actively engage prisoners during the core day. (1.40)
- 10.26 First night and induction recording should be standardised across the prison and there should be effective tracking and quality assurance arrangements to ensure all risk assessments and induction modules are completed. (1.41)

Residential units: accommodation and facilities

- 10.27 Single cells should only be used to accommodate one prisoner. (2.9)
- 10.28 Cells housing two prisoners should be adequately equipped, and all cells should have lockable cabinets, curtains and effective screening for in-cell toilets, and be fitted with privacy locks. (2.10)
- 10.29 Prisoners who are required to use a bucket for a toilet should be provided with a hand sanitiser. (2.11)
- 10.30 The offensive displays policy should be reviewed, simplified and communicated to all staff and prisoners. (2.12)
- 10.31 Prisoners at Camp Hill should be allowed access to their cells during association. (2.13)
- 10.32 Emergency cell call bells should be responded to within five minutes across the prison. (2.14)
- 10.33 All telephones should be sufficiently screened for privacy. (2.15)

Residential units: clothing and possessions

- 10.34 Prisoners should be able to access their property from reception within a week of making an application. (2.22)
- 10.35 Prisoners should be able to have items of property sent in. (2.23)

Residential units: hygiene

- 10.36 Showers should be clean and refurbished where necessary and offer privacy, and there should be sufficient numbers to meet the daily need of prisoners on each wing. (2.27)
- 10.37 There should be sufficient wing laundry equipment to meet the need of the population. (2.28)

Staff-prisoner relationships

- 10.38 Staff should address prisoners by their preferred name. (2.37)

Personal officers

- 10.39 Personal officers at Parkhurst and Camp Hill should meet their prisoners monthly in a formal setting, and make more meaningful entries in electronic case history notes that demonstrate interaction with the prisoner. (2.45)
- 10.40 Links between personal officers and offender management units on all sites should be developed, and personal officers should attend sentence planning boards regularly. (2.46)

Bullying and violence reduction

- 10.41 All staff and prisoner violence reduction representatives should receive training in the revised violence reduction strategy. (3.26)
- 10.42 There should be regular quality assurance of open violence reduction monitoring logs to ensure investigations are sufficiently thorough, and daily entries and weekly reviews should evidence engagement with prisoners. (3.27)
- 10.43 There should be interventions to challenge bullying behaviour and support victims. (3.28)
- 10.44 The violence reduction coordinator in Parkhurst should ensure there is formal supervision and monitoring of the work of violence reduction representatives. (3.29)
- 10.45 There should be a strategy to respond to the level of bullying for prescription medication in Parkhurst and Albany. (3.30)
- 10.46 Managers in Albany should explore and address the negative perceptions of safety expressed by minority groups. (3.31)

Vulnerable prisoners

- 10.47 The reasons for the high number of prisoners in Camp Hill requesting protection for their own safety should be investigated, and other support systems should be developed for these prisoners. (3.42)
- 10.48 The role of St Andrew's wing in Camp Hill should be clarified and consistently adhered to. (3.43)

Self-harm and suicide

- 10.49 Monthly site safer custody meetings should not be cancelled. (3.69)
- 10.50 There should be an enhanced case review before any decision to place a prisoner on an open assessment, care in custody and teamwork (ACCT) form into special accommodation, which should only be used for such prisoners in exceptional circumstances. (3.70)
- 10.51 There should be a Listener in reception in Parkhurst to welcome and reassure new arrivals. (3.71)
- 10.52 All staff in the prison should be trained in ACCT foundation, including those who work permanent nights. (3.72)
- 10.53 Health care staff should attend case reviews at all three sites. (3.73)
- 10.54 Staff at Parkhurst should be given guidance on the Listener scheme and encouraged to ensure Listeners have access to prisoners in crisis during the night state. (3.74)
- 10.55 Parkhurst should have a Listener suite that is available 24 hours a day. (3.75)
- 10.56 Care maps in Albany should always address fully the risks for prisoners in crisis. (3.76)

10.57 CCTV should be removed from the Listener suite in Albany. (3.77)

Applications and complaints

10.58 Complaint boxes should only be opened by staff responsible for processing complaints. (3.95)

10.59 The administration of complaints should be standardised to ensure they are directed to the most appropriate person or department, and complaint clerks should consistently adhere to this process. (3.96)

10.60 All complaint replies should be addressed to the complainant. (3.97)

10.61 There should be frequent analysis of submitted complaints by subject across the prison to enable managers to identify trends and respond accordingly. (3.98)

10.62 Confidential complaint responses should deal with all aspects of a complaint and provide a full and complete answer. (3.99)

10.63 Complaint forms should not be sent back to prisoners because of technicalities in procedure. (3.100)

Legal rights

10.64 The visits booths at Camp Hill should be soundproofed to ensure legal visits take place in confidence. (3.110)

Faith and religious activity

10.65 The chapel at Albany should be repaired to prevent leaks. (3.116)

10.66 Camp Hill should have a multi-faith room. (3.117)

Substance use: drug testing

10.67 Prisoners testing positive under mandatory drug testing (MDT) should be consistently referred to the counselling, assessment, referral, advice and throughcare (CARAT) service, and all available test result data forwarded without delay to the health care department, CARAT team, clinical integrated drug treatment system team and release on temporary licence boards. (3.140)

10.68 All MDT facilities should be refurbished to create an adequate testing and waiting environment. (3.141)

Diversity

10.69 Each strand of diversity should be covered by an up-to-date policy and related action plan. (4.12)

10.70 The role of prisoner diversity representatives should be clarified to ensure a consistent approach across the prison. (4.13)

- 10.71 The impact of the prison's regime on all aspects of diversity, including disability, age and religion, should be monitored. (4.14)
- 10.72 Focus groups for each strand of diversity should be available at all sites. (4.15)

Diversity: race equality

- 10.73 The prison should develop and implement a programme designed to challenge racist and discriminatory prisoner behaviour. (4.25)
- 10.74 All racist complaint investigations should be completed within the agreed timescale. (4.26)

Diversity: foreign nationals

- 10.75 The prison should compile a list of staff and prisoners prepared to act as interpreters at all sites and ensure that this information is available to all departments. Prisoners acting as interpreters and translators should be paid. (4.44)
- 10.76 Professional interpreting services should be used in all confidential settings, including adjudications, assessment, care in custody and teamwork (ACCT) reviews and health care interviews. (4.45)
- 10.77 All prisoners should have access to independent immigration advice. (4.46)
- 10.78 Information about the regime at all sites should be available to foreign national prisoners in a language they understand. (4.47)
- 10.79 All foreign national new arrivals should have their specific needs identified, and there should be support systems to meet these needs. The information obtained should be used to develop a needs analysis of foreign nationals and appropriate services to meet them. (4.48)

Diversity: disability and older prisoners

- 10.80 Information about disability identified at induction should be forwarded consistently to the disability liaison officer at Parkhurst or appropriate wings. (4.69)
- 10.81 All prisoners with a disability should have an integrated care plan, along with their personal emergency and evacuation plan. (4.70)
- 10.82 Hospital appointments should not be cancelled because of staff refusal to push wheelchairs, and the motorised wheelchair at Parkhurst should be used to make the transportation of prisoners easier. (4.71)
- 10.83 There should be an appropriate regime of support and activity for prisoners with disabilities on all sites. (4.72)
- 10.84 All prisoner buddies should be paid. (4.73)
- 10.85 A range of age-appropriate, wing-based activities should be available for older prisoners no longer working. (4.74)
- 10.86 Retirement pay should be the average wage across the prison. (4.75)

Diversity: sexual orientation

- 10.87 Diversity incident reports should be available across the prison. When submitted, all should be investigated and managed within the same timescale as for racist incident report forms. (4.81)

Health services: general

- 10.88 The health care department and waiting room at Parkhurst should be suitable for its role. (5.12)
- 10.89 There should be comprehensive cleaning schedules in all health service areas, so that infection control requirements can be met. (5.13)

Health services: clinical governance

- 10.90 All clinical policies should be up to date, relevant and applicable to the prison setting. (5.23)
- 10.91 All staff should know the location of the resuscitation equipment and defibrillators, and receive annual refresher training in their use. (5.24)
- 10.92 All clinical records should be clear, accurate and comply with professional requirements. (5.25)
- 10.93 Care plans should be implemented for patients with complex or specific needs and be up to date and used appropriately. (5.26)
- 10.94 There should be planned training, including induction, to ensure all health care professionals and staff have appropriate skills and knowledge to meet patient needs. (5.27)

Health services: primary care

- 10.95 Prisoners should have access to responsive health services at all times. (5.50)
- 10.96 SystmOne should be reorganised to register prisoners as being at HMP Isle of Wight, rather than separate sites, so that contemporaneous clinical records can be maintained and waiting list information is not lost when prisoners transfer between sites. (5.51)
- 10.97 Health care staff should contribute to the induction programme at all three sites. (5.52)
- 10.98 Prisoners should not wait excessive periods for any health services appointments. (5.53)
- 10.99 All staff should be familiar with SystmOne; it should be available and used to facilitate health services and patient care, and provide comprehensive clinical audit data. (5.54)
- 10.100 Prisoners with lifelong conditions should be seen in line with evidence-based practice. (5.55)

Health services: pharmacy

- 10.101 Prisoners should have access to a pharmacist. (5.70)

- 10.102 Treatment queues should be supervised adequately by discipline staff, to reduce the potential for bullying or the passing of medications. (5.71)
- 10.103 A step-wise approach to pain management, such as the World Health Organization analgesic ladder, should be used, modified for the prison environment, to reduce opiate usage. (5.72)
- 10.104 Secondary dispensing should stop. (5.73)
- 10.105 The timing of medication rounds and medicine delivery to the treatment rooms should be revised to ensure that patients get their medications without gaps or delays. (5.74)
- 10.106 The nurse should observe each administration of medication where it has been deemed unsuitable for the prisoner to hold it in possession. (5.75)

Health services: dentistry

- 10.107 There should be an oral health needs assessment. (5.92)
- 10.108 There should be regular and appropriate maintenance of dental equipment, with clear demarcation of which staff are responsible. (5.93)
- 10.109 Annual surgery inspections should be scheduled as a matter of urgency. (5.94)
- 10.110 Clinical waste control measures should be put in place and adhered to in all three dental surgeries. (5.95)

Health services: inpatient care

- 10.111 There should be active health promotion advice and literature for inpatients. (5.111)
- 10.112 The inpatient unit should have links with the education department to enable patients to benefit from therapeutic activity. (5.112)
- 10.113 There should be greater focus on inpatients with mental health needs, to ensure that they have appropriate care. (5.113)
- 10.114 Medication charts on the inpatient unit should enable safe administration and recording that complies with professional guidance. (5.114)

Health services: secondary care

- 10.115 External routine referrals should be expedited, to ensure that patients' appointments are not unnecessarily delayed. (5.124)
- 10.116 There should be equity of access for external health appointments across the three sites. (5.125)
- 10.117 The prison should ensure that there are no unnecessary delays or obstacles to prisoners attending hospital appointments. (5.126)

Health services: mental health

- 10.118 There should be a mental health needs analysis to inform service provision and ensure equity across the sites. (5.138)
- 10.119 A counselling service and support tools, such as cognitive behavioural therapy, should be provided to support prisoners with low-level primary mental health needs. (5.139)
- 10.120 There should be suitable space for mental health consultations. (5.140)
- 10.121 Mental health training should be expanded to ensure wider coverage of frontline staff. (5.141)
- 10.122 Assessments and transfers to secure placements under the Mental Health Act should be expedited to ensure that seriously ill patients are not delayed inappropriately. (5.142)

Learning and skills and work activities: leadership and management

- 10.123 The prison should further develop the quality improvement arrangements to ensure it can monitor and evaluate the effectiveness of all purposeful activities. (6.6)
- 10.124 The prison should improve the sharing and use of data and information to improve the efficiency of its initial assessment and inform allocation to learning and activities. (6.7)
- 10.125 The learning and skills department should ensure that the self-assessment process is sufficiently critical and includes all purposeful activities delivered in the prison. (6.8)

Learning and skills and work activities: work

- 10.126 The prison should increase the number of prisoners participating in purposeful activities. (6.15)
- 10.127 Prisoners in Camp Hill should not suffer delays in accessing work and education activities. (6.16)
- 10.128 The prison should broaden the range of work activities at Albany and Camp Hill. (6.17)
- 10.129 The recognition and recording of prisoners' employability skills acquired during their work in the prison should be improved. (6.18)

Learning and skills and work activities: education

- 10.130 The prison should increase the range of the education provision and the accredited learning above level 2 across the three sites. (6.30)
- 10.131 The education department should increase the use of information learning technologies to stimulate and vary the lessons in Albany and Parkhurst. (6.31)
- 10.132 The quality of target setting and recording of learners' progress attending lessons in Parkhurst should be improved. (6.32)

Learning and skills and work activities: library

- 10.133 The library at Parkhurst should be relocated to a more suitable site and wheelchair users and those prisoners with limited mobility should be able to access it. (6.39)
- 10.134 There should be a dedicated library officer at Parkhurst to facilitate prisoner movement and to improve the security, particularly in the evening. (6.40)
- 10.135 The library at Camp Hill should be enlarged and include at least one adjacent room for related activities, such as the preparation of Storybook Dad CDs. (6.42)
- 10.136 The opening hours for, and stock in, each library should be continually reviewed and the needs of all prisoners should be met. (6.43)
- 10.137 All prisoners should have access to a library for a suitable length of time and none should be disadvantaged because of attendance at education, vocational training and work or for any other reason. (6.44)

Physical education and health promotion

- 10.138 The range of PE courses should be extended and have a vocational relevance. (6.54)
- 10.139 There should be accredited PE instructor qualifications to enable gymnasium orderlies to gain an accreditation for their work. (6.55)
- 10.140 The condition of the showers in the cardiovascular and weight training areas in Albany should be improved. (6.56)

Time out of cell

- 10.141 Regime slippage at all three sites should be reduced and prisoners should always receive their full association period of 75 minutes. (6.70)
- 10.142 At the Parkhurst and Albany sites, exercise time should be rescheduled to one hour and at a time that would enable more prisoners to participate. (6.71)

Security and rules

- 10.143 Safer custody staff should attend monthly security committee meetings. (7.15)
- 10.144 Prisoners should not be required to apply to attend religious services. (7.16)
- 10.145 Prisoners in Albany should not be handcuffed within the grounds, and those walking with mobility aids should be able to walk unrestricted with either single cuffs or closing chains outside the establishment. (7.17)
- 10.146 Required outcomes from security information reports (SIRs) at Camp Hill should be completed without delay, including target searching and actions to remedy known risks to prisoners or security. (7.18)

10.147 Closed visits restrictions at Camp Hill should only be applied where intelligence suggests illicit activity in visits, and appeals should be considered without delay. (7.19)

Discipline: disciplinary procedures

10.148 Managers should carry out quality assurance checks of adjudication documentation and formal ongoing monitoring and analysis of statistics and trends. (7.28)

10.149 At Albany and Camp Hill, there should be swift investigations and proper recording of safer custody matters identified during adjudications to enable the adjudication to be completed and safer custody issues to be addressed. (7.29)

Discipline: the use of force

10.150 Handcuffs should only be used when moving prisoners who remain violent or refractory. (7.40)

10.151 Planned use of force should be recorded and recordings kept securely. Recordings should identify all staff and prisoners involved. (7.41)

10.152 Managers should review use of force recordings for any lessons to be learned and for reassurance that de-escalation has been attempted and force has been used as a last resort. (7.42)

10.153 The apparently inappropriate use of force incidents identified by the inspection team should be formally investigated. (7.43)

10.154 Managers should check use of force and special cell documentation to identify inappropriate use and monitor trends and statistics. (7.44)

10.155 Special accommodation should only be used for prisoners who are self-harming in exceptional circumstances and when they present a current and active danger to others. (7.45)

Discipline: segregation unit

10.156 The secreted items policy should be revised to enable prisoners to access regime activities, including showers and telephones, and to remove the need for placing them on the escape list and for staff to deal with them dressed in full personal protective equipment. (7.63)

10.157 Prisoners should only be strip-searched on location to segregation where a risk assessment deems this necessary. (7.64)

10.158 Targets set for prisoners in segregation should be meaningful and address the reasons why they have been segregated. (7.65)

10.159 There should be formal care planning and reintegration policies for the segregation units. (7.66)

10.160 Prisoners in the segregation units should not have to make applications for access to showers, telephones and exercise, and the regime should be improved to include activities in association, where appropriate. (7.67)

10.161 Segregation monitoring meetings should be held for all three segregation units. (7.68)

- 10.162 The reduction in the number of segregation beds should be sustained but the number of prisoners working in the segregation unit at Parkhurst and Albany should be reviewed and their regime improved. (7.69)
- 10.163 The purpose of the cell in Parkhurst used to house refractory or violent prisoners should be clearly defined and appropriate governance procedures put in place. (7.70)
- 10.164 The dirty protest cell in Albany should not be used to house prisoners segregated for reasons other than a dirty protest. (7.71)
- 10.165 Prisoners at Camp Hill requesting own protection should not be held in segregation on other wings. (7.72)

Incentives and earned privileges

- 10.166 Review boards should clearly demonstrate full consideration of prisoners' individual circumstances and should evidence how this information was used to inform their outcomes. (7.85)
- 10.167 Decisions to downgrade prisoners should only be authorised at the level specified in the published incentives and earned privileges (IEP) policy. (7.86)
- 10.168 Prisoners should not receive differential rates of pay for the same job. (7.87)
- 10.169 Prisoners on basic should be able to retain access to in-cell power. (7.88)

Catering

- 10.170 The kitchen and serveries should use separate utensils and equipment for the preparation, cooking and serving of halal food. (8.9)
- 10.171 Lunch should be served between 12 noon and 1.30pm and dinner should be served between 5pm and 6.30pm. (8.10)
- 10.172 Breakfast packs should be issued on the morning they are to be eaten. (8.11)
- 10.173 Menus should be translated into appropriate languages. (8.12)
- 10.174 Residential staff should closely supervise servery areas and ensure that food is managed appropriately, including taking temperatures, once it is unloaded from the kitchen lorry. (8.13)
- 10.175 Staff and managers should ensure that food for Albany prisoners is not contaminated and should be able to offer consistent assurance to prisoners. (8.14)
- 10.176 All servery workers should be trained in food hygiene. (8.15)
- 10.177 The area used to serve meals for A-E wings at Albany should be refurbished. (8.16)
- 10.178 The kitchen should log and analyse food comment slips and respond to them in a polite manner that addresses the issues raised. (8.17)
- 10.179 Prisoners should have the opportunity to dine out of cell. (8.18)

Prison shop

- 10.180 Prisoners should be able to buy items from the prison shop within 24 hours of arrival. (8.27)
- 10.181 Catalogue orders should be available to prisoners within 72 hours of delivery at the prison. (8.28)

Strategic management of resettlement

- 10.182 The effectiveness of resettlement services should be monitored and the information used to improve provision. (9.9)

Offender management and planning: sentence planning and offender management

- 10.183 Every eligible prisoner should have an up-to-date OASys (offender assessment system) assessment and sentence plan. (9.23)
- 10.184 Offender supervisors should contact prisoners on their caseload once a month to monitor and drive progress in achieving sentence plan targets. (9.24)

Offender management and planning: categorisation

- 10.185 Prisoners' representations should be considered in categorisation decisions. (9.29)
- 10.186 The backlog of recategorisation decisions should be eliminated. (9.30)

Offender management and planning: public protection

- 10.187 Information gathered by the public protection unit should be used to inform the risk assessment and risk management plan in OASys assessments. (9.36)

Offender management and planning: indeterminate-sentenced prisoners

- 10.188 Sentence planning targets for indeterminate-sentenced prisoners should be set in consultation with the prisoner. (9.43)
- 10.189 There should be consultative meetings with indeterminate-sentenced prisoners in Camp Hill to discuss the shortcomings of the regime for them and to agree action on this. (9.44)
- 10.190 Town visits should be provided for appropriate indeterminate-sentenced prisoners. (9.45)
- 10.191 Parole dossiers should be submitted on time. (9.46)

Resettlement pathways: education, training and employment

- 10.192 The prison should increase the amount of guidance and support available to prisoners before their release to improve their prospects for engaging in education, training and/or employment. (9.54)

- 10.193 The prison should introduce a pre-release course to ensure all prisoners are better prepared and have increased awareness and understanding in the practical aspects of finding jobs, education and training on release. (9.55)

Resettlement pathways: mental and physical health

- 10.194 Prisoners with complex health needs should be the subject of a single multidisciplinary assessment to identify their needs so that they can be referred to relevant health, social service and voluntary agencies in the community. (9.60)
- 10.195 All prisoners should be given information and assistance to access health and social care services on their release, and support in accessing the services if required. (9.61)

Resettlement pathways: finance, benefit and debt

- 10.196 The facility for prisoners to open bank accounts should be restarted at Camp Hill. (9.66)

Resettlement pathways: drugs and alcohol

- 10.197 The establishment should revise its alcohol strategy and address the currently insufficient level of services for prisoners with primary alcohol problems. (9.76)

Resettlement pathways: children and families of offenders

- 10.198 Visitor waiting facilities should be improved at all three sites with centres remaining open until after visits finish. (9.92)
- 10.199 Prisoners using the toilet during visits should only be subject to a strip search on return where intelligence or security considerations deem this necessary. (9.93)
- 10.200 Closed visits booths should be out of sight of general visits. (9.94)
- 10.201 The visits hall in Albany should be rearranged to provide privacy at all tables, and the refreshment facilities should be improved. (9.95)
- 10.202 The visits hall at Camp Hill should be refurbished and the fixed furniture replaced. (9.96)
- 10.203 Family visits should be available to all prisoners legally able to take part in them. (9.97)

Resettlement pathways: attitudes, thinking and behaviour

- 10.204 The mentoring scheme on the Albany site should be extended to the other two sites to cover all programmes offered. (9.110)
- 10.205 Prisoners maintaining their innocence should be considered for programmes that do not require them to admit their offending. (9.111)
- 10.206 The prison should increase the opportunities for prisoners assessed as unsuitable for current accredited programmes to address their offending behaviour. (9.112)

Housekeeping points

First days in custody: reception

- 10.207 The DVD player in Albany reception should be repaired and the initiative expanded to the other sites. (1.25)
- 10.208 The integration compact at Parkhurst should be updated. (1.26)
- 10.209 The BOSS chair at Camp Hill should be brought into use expeditiously. (1.27)

Residential units: accommodation and facilities

- 10.210 In-cell toilets should be de-scaled. (2.16)
- 10.211 Graffiti should be removed from cells. (2.17)
- 10.212 Television shelves in double cells should be repositioned so that prisoners can see the television screen in safety. (2.18)
- 10.213 Mail should be delivered to prisoners as soon as it is received on to the residential unit. (2.19)
- 10.214 Delays in adding new telephone numbers to prisoners' accounts should be investigated and rectified. (2.20)

Personal officers

- 10.215 Cell cards in Camp Hill should identify the name of the personal officer. (2.47)

Bullying and violence reduction

- 10.216 Safer custody reports should be completed promptly at Camp Hill following an incident. (3.32)
- 10.217 The violence reduction coordinator at Albany should introduce quality checks to ensure consistency of response to reported incidents and in the application of formal monitoring. (3.33)
- 10.218 There should be improved links between the work of safer custody and the security department at Camp Hill and Parkhurst. (3.34)

Self-harm and suicide

- 10.219 All relevant information on the history of prisoners at risk or in crisis should be completed in the relevant sections of the ACCT document. (3.78)
- 10.220 The self-harm and suicide prevention policy document should focus more on the care of prisoners at risk of self-harm and suicide. (3.79)

- 10.221 There should be a daily check of the Samaritans telephones at Parkhurst to ensure that they are available to prisoners 24 hours a day. (3.80)
- 10.222 The family and friends reporting line at each site should be checked at least twice a day and a record log kept. (3.81)

Applications and complaints

- 10.223 There should be a plentiful supply of triplicate application forms on all wings. (3.101)
- 10.224 All application responses should be signed by the respondent. (3.102)
- 10.225 Envelopes for confidential complaints should be readily available on all wings. (3.103)

Diversity: foreign nationals

- 10.226 Once foreign national prisoners have applied for and received a monthly free telephone call in lieu of visits, they should not have to reapply on subsequent occasions. (4.49)

Diversity: disability and older prisoners

- 10.227 All sites should keep an up-to-date log of prisoners with disabilities, including those without a personal emergency and evacuation plan. (4.76)

Health services: primary care

- 10.228 Prisoners should receive accurate, easy-to-read information about health services during their induction, including a primary care timetable, in a language they understand. (5.56)
- 10.229 The applications system for health services should be confidential, timely and suitable for use, depending on the regime of the site. (5.57)
- 10.230 Prisoners should be able to obtain barrier protection. (5.58)

Health services: pharmacy

- 10.231 Maximum and minimum temperatures should be recorded daily for the drug refrigerators in treatment rooms and pharmacy, to ensure that heat-sensitive items are stored within the 2–8°C range. Corrective action should be taken where necessary and should be monitored by pharmacy staff. (5.76)
- 10.232 The medicines trolleys in the inpatient health unit should be attached to the fabric of the building. (5.77)
- 10.233 Full and complete records of administration of medicines should be made. This should include records of all occasions where the patient has refused medication or failed to attend, and issues relating to drug compliance should be followed up where appropriate. (5.78)
- 10.234 Prescribing data should be used to demonstrate and promote effective medicines management and prescribing should be based on evidence. (5.79)

10.235 There should be appropriate policies covering all areas of pharmacy provision. (5.80)

10.236 The in-possession risk assessments of each drug and patient should be documented and any the reasons for the determination recorded. (5.81)

Health services: dentistry

10.237 There should be regular, properly structured meetings between the dental and health care teams. (5.96)

10.238 Commissioning of the wall-mounted X-ray unit at Albany should be completed. (5.97)

Health services: inpatient care

10.239 Temperature control for some of the non-clinical inpatient unit rooms should be improved. (5.115)

10.240 Screening of inpatient bedroom windows and shower areas should be improved. (5.116)

10.241 The King's Fund garden should be available for use by prisoners. (5.117)

10.242 Inpatients with mobility difficulties leaving and returning to the unit should be given appropriate support. (5.118)

10.243 Inpatient unit cleaning schedules should be introduced. (5.119)

Learning and skills and work activities: vocational training

10.244 Machinery in the bricks workshop in Camp Hill should be well maintained and repaired. (6.23)

Learning and skills and work activities: library

10.245 Responsibilities in the prison for managing the level 1 library and information skills qualification and for line managing the libraries should be clarified. (6.45)

Physical education and health promotion

10.246 The cardiovascular equipment in Parkhurst and Camp Hill should be repaired. (6.57)

Security and rules

10.247 The monthly meeting between heads of security departments should be minuted and ongoing trends monitored. (7.20)

10.248 Risk assessments of prisoners at Parkhurst for access to activities should only consider up-to-date information. (7.21)

Discipline: disciplinary procedures

- 10.249 Adjudication records in Camp Hill should give a full account of the hearing and show that a full investigation has been carried out. (7.30)

The use of force

- 10.250 Staff should be trained in the use of recording equipment. (7.46)

Discipline: segregation unit

- 10.251 Results of investigations for those held in segregation should be communicated quickly on completion to allow for a full review of the prisoner. (7.73)

Incentives and earned privileges

- 10.252 Procedures to verify prisoners' enhanced status attained at a previous establishment should be improved to ensure they do not experience delays in retaining their IEP status. (7.89)
- 10.253 The published IEP policy should include information about the role of St Stephen's, the enhanced unit at Camp Hill. (7.90)

Catering

- 10.254 Food comment slips should be freely available. (8.19)

Strategic management of resettlement

- 10.255 The health care pathway in the reducing reoffending resettlement strategic plan should focus on preparation for release and links with community services after release. (9.10)
- 10.256 The reducing reoffending resettlement strategic plan should include an explicit link with the regional resettlement strategy. (9.11)
- 10.257 External providers of services should be included in resettlement governance arrangements. (9.12)

Resettlement pathways: mental and physical health

- 10.258 Prisoners with life-limiting conditions on all three sites should be able to benefit from the nurse-led support group. (9.62)

Resettlement pathways: children and families of offenders

- 10.259 Floor mats should be provided in the visitors' search areas. (9.98)

10.260 The tea bar at Camp Hill should be opened at the start of visits. (9.99)

Examples of good practice

10.261 Each arriving prisoner on Albany was provided with a new personal-issue mattress. (1.34)

10.262 There was positive and active use of prisoner violence reduction representatives across the prison, particularly at Albany. (3.35)

10.263 The information and guidance sheets in the ACCT files at each stage of the process assisted staff in managing prisoners at risk of self-harm and suicide more effectively. (3.82)

10.264 The Listener in reception at Camp Hill carried out a private interview with new arrivals which helped them to settle. (3.83)

10.265 The nurse prescriber role provided wider coverage of specialist prescribing for mental health patients. (5.143)

10.266 The nurse-led support group for prisoners with life-limiting conditions at Albany gave them the opportunity to discuss their thoughts and feelings in a confidential and supportive environment. (9.63)

Appendix I: Inspection team

Nigel Newcomen	Deputy Chief Inspector
Martin Lomas	Team leader
Karen Dillon	Inspector
Keith McInnis	Inspector
Kevin Parkinson	Inspector
Kellie Reeve	Inspector
Andrew Rooke	Inspector
Paul Rowlands	Inspector
Sara Snell	Inspector
Andrea Walker	Inspector
Louise Falshaw	Head of research, development and thematics
Laura Nettleingham	Senior researcher
Catherine Nichols	Researcher
Adam Altoft	Researcher
Michael Skidmore	Researcher
Joe Simmonds	Research trainee
Helen Wark	Research trainee
Specialist inspectors	
Elizabeth Tysoe	Health services inspector
Nicola Rabjohns	Health services inspector
Paul Roberts	Substance use inspector
Susan Melvin	Pharmacist
Martin Wedgwood	Dentist
Jane Attwood	HMI Probation
Martin Jolly	HMI Probation
Maria Navarro	Ofsted team leader
Julia Horsman	Ofsted inspector
Martin Hughes	Ofsted inspector
Ian Handscombe	Ofsted inspector
Ken Fisher	Ofsted inspector
Neil Edwards	Ofsted inspector

Appendix II: Prison population profile - Parkhurst

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

Status	18-20 yr olds	21 and over	%
Sentenced	1	498	96.7
Recall	0	1	0.2
Convicted unsentenced	2	0	0.4
Remand	2	12	2.7
Total	5	511	100

Sentence	18-20 yr olds	21 and over	%
Unsentenced	4	12	3.1
Less than 6 months	1	1	0.4
6 months to less than 12 months	0	0	0
12 months to less than 2 years	0	6	1.2
2 years to less than 4 years	0	6	1.2
4 years to less than 10 years	0	2	0.4
10 years and over (not life)	0	46	8.9
ISPP	0	211	40.8
Life	0	227	44
Total	5	511	100

Age	Number	%
Under 21 years: <i>minimum age=18</i>	5	1.0
21 years to 29 years	99	19.1
30 years to 39 years	130	25.1
40 years to 49 years	156	30.2
50 years to 59 years	72	14
60 years to 69 years	43	8.3
70 plus years: <i>maximum age=80</i>	11	2.1
Total	516	100

Nationality	18-20 yr olds	21 and over	%
British	5	423	83
Foreign nationals	0	88	17
Total	5	511	100

Security category	18-20 yr olds	21 and over	%
Uncategorised unsentenced	0	14	2.7
Cat B	5	438	85.8
Cat C	0	57	11
Cat D	0	2	0.4
Total	5	511	100

Ethnicity	18-20 yr olds	21 and over	%
<i>White:</i>			
British	5	352	69
Irish	0	4	0.8
Other white	0	34	7
<i>Mixed:</i>			
White and black Caribbean	0	5	0.9
White and Asian	0	1	0.2
Other mixed	0	2	0.4
<i>Asian or Asian British:</i>			
Indian	0	7	1.4

Pakistani	0	3	0.6
Bangladeshi	0	4	0.8
Other Asian	0	12	2.3
<i>Black or black British:</i>			
Caribbean	0	42	8
African	0	15	3
Other black	0	14	3
<i>Chinese or other ethnic group:</i>			
Chinese	0	1	0.2
Other ethnic group	0	1	0.2
Not stated	0	14	3
Total	5	511	

Religion	18–20 yr olds	21 and over	%
Baptist		2	0.4
Church of England		179	35
Roman Catholic		88	17
Other Christian denominations	1	49	10
Muslim		44	9
Sikh		6	1.2
Hindu		2	0.4
Buddhist		6	1.2
Jewish		2	0.4
Other		11	2.1
No religion	4	122	24.4
Total	5	511	

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	1		27	5.2
1 month to 3 months	0		68	13.3
3 months to 6 months	0		149	29.1
6 months to 1 year	0		61	11.9
1 year to 2 years	0		83	16.2
2 years to 4 years	0		82	16
4 years or more	0		29	5.6
Total	1		499	

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	1	25	3	25
1 month to 3 months	3	75	7	58.3
3 months to 6 months	0		2	16.6
Total	4		12	

Main offence	18–20 yr olds	21 and over	%
Violence against the person	1	142	27.7
Sexual offences	0	277	53.6
Burglary	1	15	3.1
Robbery	3	42	8.7
Theft and handling	0	2	0.4
Fraud and forgery	0	4	0.8
Drugs offences	0	21	4
Other offences	0	7	1.3

Civil offences	0	0	0
Offence not recorded/holding warrant	0	1	0.19
Total	5	511	

Prison population profile - Albany

Status	21 and over	%
Sentenced	565	99.8
Recall	1	0.2
Total	566	100

Sentence	21 and over	%
2 years to less than 4 years	5	0.9
4 years to less than 10 years	5	0.9
10 years and over (not life)	49	8.7
ISPP	188	33.2
Life	319	56.3
Total	566	100

Age	Number	%
21 years to 29 years	82	14.4
30 years to 39 years	97	17.1
40 years to 49 years	170	30
50 years to 59 years	111	20
60 years to 69 years	80	14.1
70 plus years: <i>maximum age=80</i>	26	5
Total	566	100

Nationality	21 and over	%
British	500	88.3
Foreign nationals	66	11.6
Total	566	

Security category	21 and over	%
Cat B	484	85.5
Cat C	81	14.3
Cat D	1	0.2
Total	566	100

Ethnicity	21 and over	%
<i>White:</i>		
British	431	76
Irish	4	0.7
Other white	28	5
<i>Mixed:</i>		
White and black Caribbean	5	0.9
White and black African	1	0.2
White and Asian	2	0.4
Other mixed	2	0.4
<i>Asian or Asian British:</i>		
Indian	5	0.9
Pakistani	4	0.7
Bangladeshi	1	0.2
Other Asian	6	1.1
<i>Black or black British:</i>		
Caribbean	30	5.3
African	20	3.5
Other black	9	1.6
<i>Chinese or other ethnic group:</i>		
Chinese	1	0.2

Other ethnic group	2	0.4
Not stated	15	2.7
Total	566	100

Religion	21 and over	%
Baptist	2	0.4
Church of England	218	39
Roman Catholic	66	12
Other Christian denominations	49	9
Muslim	42	7.4
Sikh	4	0.7
Hindu	1	0.2
Buddhist	24	4.2
Jewish	2	0.4
Other	38	7
No religion	120	21.2
Total	566	

Sentenced prisoners only

Length of stay	21 and over	
	Number	%
Less than 1 month	20	3.5
1 month to 3 months	32	5.6
3 months to 6 months	123	21.7
6 months to 1 year	202	35.6
1 year to 2 years	49	8.6
2 years to 4 years	71	12.5
4 years or more	69	12.2
Total	566	

Main offence	21 and over	%
Violence against the person	52	9.1
Sexual offences	461	81.4
Burglary		
Robbery	40	7
Drugs offences	1	0.2
Other offences	9	1.5
Offence not recorded/holding warrant	3	0.5
Total	566	

Prison population profile - Camp Hill

Status	18-20 yr olds	21 and over	%
Sentenced	1	573	98.4
Recall	0	8	1.3
Total	1	581	100

Sentence	18-20 yr olds	21 and over	%
6 months to less than 12 months	0	6	1.0
12 months to less than 2 years	0	52	8.9
2 years to less than 4 years	1	226	38.9
4 years to less than 10 years	0	226	38.9
10 years and over (not life)	0	15	2.6
ISPP	0	56	9.6
Total	1	581	

Age	Number of prisoners	%
Under 21 years: <i>minimum age=20</i>	1	0.2
21 years to 29 years	289	50
30 years to 39 years	157	27
40 years to 49 years	94	16.2
50 years to 59 years	30	5.2
60 years to 69 years: <i>maximum age=68</i>	11	1.9
Total	582	100

Nationality	18-20 yr olds	21 and over	%
British	1	512	88.1
Foreign nationals	0	69	11.9
Total	1	581	

Security category	18-20 yr olds	21 and over	%
Cat B	0	2	0.3
Cat C	0	565	97
Cat D	1	14	2.6
Total	1	581	100

Ethnicity	18-20 yr olds	21 and over	%
<i>White:</i>			
British	1	375	65
Irish		4	0.7
Other white		30	5.1
<i>Asian or Asian British:</i>			
Indian		4	0.7
Pakistani		1	0.2
Bangladeshi		2	0.3
Other Asian		16	2.7
<i>Black or black British:</i>			
Caribbean		61	10.4
African		19	3.3
Other black		30	5.1
<i>Chinese or other ethnic group:</i>			
Chinese		4	0.7
Other ethnic group		4	0.7
Not stated		17	3
Total	1	581	100

Religion	18-20 yr olds	21 and over	%
Baptist		2	0.3
Church of England	1	173	30
Roman Catholic		91	16
Other Christian denominations		69	11.9
Muslim		52	9
Sikh		3	0.5
Hindu		4	0.7
Buddhist		16	2.7
Jewish		1	0.2
Other		7	1.2
No religion		163	28
Total			

Unsentenced prisoners only

Length of stay	18-20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			71	12.3
1 month to 3 months			137	23.7
3 months to 6 months	1	100	174	29.9
6 months to 1 year			129	22.2
1 year to 2 years			63	10.9
2 years to 4 years			7	1.2
Total	1		581	

Main offence	18-20 yr olds	21 and over	%
Violence against the person		164	28.2
Burglary		95	16.3
Robbery	1	98	17
Theft and handling		12	2
Fraud and forgery		16	2.7
Drugs offences		149	25.4
Other offences		36	6.2
Offence not recorded/holding warrant		11	1.9
Total	1	581	

Appendix III: Summary of prisoner questionnaires and interviews – Parkhurst

Prisoner survey methodology

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

Choosing the sample size

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 8 September 2010, the prisoner population at HMP Isle of Wight (Parkhurst) was 522. The sample size was 174. Overall, this represented 33% of the prisoner population.

Selecting the sample

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. Ten respondents refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. One respondent was interviewed.

Methodology

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 room for collection.

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

Response rates

In total, 151 respondents completed and returned their questionnaires. This represented 29% of the prison population. The response rate was 87%. In addition to the 10 respondents who refused to complete a questionnaire, six questionnaires were not returned and seven were returned blank.

Comparisons

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 category B training prisons. This comparator is based on all responses from prisoner surveys carried out in seven category B training prisons since 2006.
- The current survey responses in 2010 against the responses of prisoners surveyed at HMP Parkhurst in 2008.
- 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 British nationals and those who are foreign nationals.
- A comparison within the 2010 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2010 survey between those who are aged 50 and over and those under 50.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures, i.e. 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

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 is excluded). The actual numbers will match up as the data is 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 has been weighted for comparison purposes.

Parkhurst survey results

Section 1: About you

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

Q1.2 How old are you?

<i>Under 21</i>	5 (3%)
<i>21 - 29</i>	34 (23%)
<i>30 - 39</i>	30 (20%)
<i>40 - 49</i>	45 (30%)
<i>50 - 59</i>	17 (11%)
<i>60 - 69</i>	14 (9%)
<i>70 and over</i>	3 (2%)

Q1.3 Are you sentenced?

<i>Yes</i>	134 (91%)
<i>Yes - on recall</i>	3 (2%)
<i>No - awaiting trial</i>	4 (3%)
<i>No - awaiting sentence</i>	7 (5%)
<i>No - awaiting deportation</i>	0 (0%)

Q1.4 How long is your sentence?

<i>Not sentenced</i>	11 (7%)
<i>Less than 6 months</i>	0 (0%)
<i>6 months to less than 1 year</i>	0 (0%)
<i>1 year to less than 2 years</i>	1 (1%)
<i>2 years to less than 4 years</i>	6 (4%)
<i>4 years to less than 10 years</i>	16 (11%)
<i>10 years or more</i>	47 (32%)
<i>IPP (Indeterminate Sentence for Public Protection)</i>	34 (23%)
<i>Life</i>	33 (22%)

Q1.5 Approximately, how long do you have left to serve? (If you are serving life or IPP, please use the date of your next board.)

<i>Not sentenced</i>	11 (9%)
<i>6 months or less</i>	13 (11%)
<i>More than 6 months</i>	97 (80%)

Q1.6 How long have you been in this prison?

<i>Less than 1 month</i>	2 (1%)
<i>1 to less than 3 months</i>	26 (17%)
<i>3 to less than 6 months</i>	18 (12%)

6 to less than 12 months.....	15 (10%)
12 months to less than 2 years.....	23 (15%)
2 to less than 4 years.....	28 (19%)
4 years or more.....	37 (25%)

Q1.7 Are you a foreign national (i.e. do not hold UK citizenship)?

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

Q1.8 Is English your first language?

Yes.....	129 (88%)
No.....	18 (12%)

Q1.9 What is your ethnic origin?

White - British.....	101 (67%)	Asian or Asian British - Bangladeshi.....	4 (3%)
White - Irish.....	7 (5%)	Asian or Asian British - other.....	2 (1%)
White - other.....	8 (5%)	Mixed heritage - white and black Caribbean.....	3 (2%)
Black or black British - Caribbean.....	14 (9%)	Mixed heritage - white and black African.....	0 (0%)
Black or black British - African... ..	3 (2%)	Mixed heritage - white and Asian.....	1 (1%)
Black or black British - other.....	0 (0%)	Mixed heritage - other.....	1 (1%)
Asian or Asian British - Indian....	3 (2%)	Chinese.....	0 (0%)
Asian or Asian British - Pakistani.....	1 (1%)	Other ethnic group.....	2 (1%)

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

Yes.....	5 (4%)
No.....	136 (96%)

Q1.11 What is your religion?

None.....	35 (24%)	Hindu.....	2 (1%)
Church of England.....	55 (37%)	Jewish.....	0 (0%)
Catholic.....	31 (21%)	Muslim.....	11 (7%)
Protestant.....	0 (0%)	Sikh.....	1 (1%)
Other Christian denomination.....	6 (4%)	Other.....	3 (2%)
Buddhist.....	3 (2%)		

Q1.12 How would you describe your sexual orientation?

Heterosexual/straight.....	144 (99%)
Homosexual/gay.....	2 (1%)
Bisexual.....	0 (0%)
Other.....	0 (0%)

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

Yes.....	38 (26%)
No.....	110 (74%)

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>
	69 (47%)	25 (17%)	28 (19%)	25 (17%)
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>	
	11 (8%)	116 (80%)	18 (12%)	
Q1.16	Do you have any children under the age of 18?			
	Yes.....			77 (53%)
	No.....			69 (47%)

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?	14 (10%)	64 (44%)	23 (16%)	26 (18%)	11 (7%)	4 (3%)	5 (3%)	
Your personal safety during the journey?	14 (11%)	66 (50%)	8 (6%)	24 (18%)	13 (10%)	4 (3%)	4 (3%)	
The comfort of the van?	4 (3%)	18 (13%)	14 (10%)	56 (39%)	43 (30%)	3 (2%)	4 (3%)	
The attention paid to your health needs?	10 (7%)	35 (25%)	26 (19%)	27 (19%)	21 (15%)	5 (4%)	15 (11%)	
The frequency of toilet breaks?	3 (2%)	15 (10%)	14 (10%)	27 (19%)	61 (42%)	3 (2%)	21 (15%)	
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>			
	12 (8%)	12 (8%)	66 (45%)	47 (32%)	10 (7%)			
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%)	63 (43%)	36 (25%)	12 (8%)	5 (3%)	5 (3%)		
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?					104 (71%)	39 (27%)	4 (3%)	
Before you arrived here did you receive any written information about what would happen to you?					18 (12%)	124 (85%)	4 (3%)	
When you first arrived here did your property arrive at the same time as you?					116 (81%)	24 (17%)	3 (2%)	

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.)**
- | | | | |
|--|----------|--|----------|
| Didn't ask about any of these | 37 (26%) | <i>Money worries</i> | 17 (12%) |
| <i>Loss of property</i> | 14 (10%) | <i>Feeling depressed or suicidal</i> .. | 55 (39%) |
| <i>Housing problems</i> | 19 (14%) | <i>Health problems</i> | 72 (51%) |
| <i>Contacting employers</i> | 11 (8%) | <i>Needing protection from other prisoners</i> | 23 (16%) |
| <i>Contacting family</i> | 52 (37%) | <i>Accessing phone numbers</i> | 44 (31%) |
| <i>Ensuring dependants were being looked after</i> | 13 (9%) | <i>Other</i> | 8 (6%) |
- Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)**
- | | | | |
|--|----------|--|----------|
| Didn't have any problems | 42 (31%) | <i>Money worries</i> | 15 (11%) |
| <i>Loss of property</i> | 24 (18%) | <i>Feeling depressed or suicidal</i> .. | 26 (19%) |
| <i>Housing problems</i> | 15 (11%) | <i>Health problems</i> | 30 (22%) |
| <i>Contacting employers</i> | 5 (4%) | <i>Needing protection from other prisoners</i> | 18 (13%) |
| <i>Contacting family</i> | 50 (37%) | <i>Accessing phone numbers</i> | 39 (29%) |
| <i>Ensuring dependants were looked after</i> | 9 (7%) | <i>Other</i> | 8 (6%) |
- Q3.3 Please answer the following questions about reception:**
- | | Yes | No | Don't remember |
|---|-----------|----------|----------------|
| Were you seen by a member of health services? | 107 (73%) | 34 (23%) | 6 (4%) |
| When you were searched, was this carried out in a respectful way? | 109 (77%) | 25 (18%) | 7 (5%) |
- Q3.4 Overall, how well did you feel you were treated in reception?**
- | Very well | Well | Neither | Badly | Very badly | Don't remember |
|-----------|----------|----------|---------|------------|----------------|
| 34 (23%) | 63 (42%) | 33 (22%) | 14 (9%) | 3 (2%) | 2 (1%) |
- 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> | 57 (41%) |
| <i>Information about what support was available for people feeling depressed or suicidal</i> | 56 (41%) |
| <i>Information about how to make routine requests</i> | 44 (32%) |
| <i>Information about your entitlement to visits</i> | 44 (32%) |
| <i>Information about health services</i> | 58 (42%) |
| <i>Information about the chaplaincy</i> | 46 (33%) |
| Not offered anything | 54 (39%) |
- 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> | 103 (70%) |
|---|-----------|

<i>The opportunity to have a shower</i>	52 (35%)
<i>The opportunity to make a free telephone call</i>	35 (24%)
<i>Something to eat</i>	101 (69%)
<i>Did not receive anything</i>	18 (12%)

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>	49 (33%)
<i>Someone from health services</i>	93 (63%)
<i>A Listener/Samaritans</i>	40 (27%)
<i>Did not meet any of these people</i>	40 (27%)

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

<i>Yes</i>	10 (7%)
<i>No</i>	137 (93%)

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

<i>Yes</i>	95 (64%)
<i>No</i>	41 (28%)
<i>Don't remember</i>	13 (9%)

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

<i>Have not been on an induction course</i>	27 (18%)
<i>Within the first week</i>	89 (60%)
<i>More than a week</i>	17 (11%)
<i>Don't remember</i>	15 (10%)

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

<i>Have not been on an induction course</i>	27 (19%)
<i>Yes</i>	60 (41%)
<i>No</i>	38 (26%)
<i>Don't remember</i>	20 (14%)

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?	14 (10%)	52 (36%)	19 (13%)	27 (19%)	18 (13%)	14 (10%)
Attend legal visits?	10 (8%)	40 (31%)	22 (17%)	15 (12%)	17 (13%)	26 (20%)
Obtain bail information?	3 (3%)	10 (9%)	14 (12%)	12 (10%)	9 (8%)	67 (58%)

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

<i>Not had any letters</i>	19 (13%)
---	----------

Yes..... 58 (41%)
 No..... 64 (45%)

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

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	107 (74%)	29 (20%)	2 (1%)	7 (5%)
Are you normally able to have a shower every day?	131 (90%)	11 (8%)	3 (2%)	0 (0%)
Do you normally receive clean sheets every week?	121 (84%)	11 (8%)	5 (3%)	7 (5%)
Do you normally get cell cleaning materials every week?	127 (88%)	15 (10%)	2 (1%)	0 (0%)
Is your cell call bell normally answered within five minutes?	73 (51%)	31 (22%)	28 (20%)	11 (8%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	99 (70%)	39 (27%)	3 (2%)	1 (1%)
Can you normally get your stored property, if you need to?	46 (32%)	49 (35%)	36 (25%)	11 (8%)

Q4.4 What is the food like here?

Very good	Good	Neither	Bad	Very bad
6 (4%)	29 (20%)	43 (29%)	41 (28%)	27 (18%)

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

Have not bought anything yet..... 2 (1%)
 Yes..... 74 (52%)
 No..... 67 (47%)

Q4.6 Is it easy or difficult to get either

	Very easy	Easy	Neither	Difficult	Very difficult	Don't know
A complaint form	66 (45%)	60 (41%)	9 (6%)	6 (4%)	2 (1%)	4 (3%)
An application form	67 (48%)	59 (42%)	4 (3%)	5 (4%)	2 (1%)	2 (1%)

Q4.7 Have you made an application?

Yes..... 126 (86%)
 No..... 21 (14%)

Q4.8 Please answer the following questions concerning applications:

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

	Not made one	Yes	No
Do you feel <i>applications</i> are dealt with fairly?	21 (14%)	90 (61%)	36 (24%)
Do you feel <i>applications</i> are dealt with promptly (within seven days)?	21 (15%)	61 (43%)	59 (42%)

Q4.9 Have you made a complaint?
 Yes 74 (50%)
 No 73 (50%)

Q4.10 Please answer the following questions concerning complaints:
(If you have not made a complaint please tick the 'not made one' option.)

	Not made one	Yes	No
Do you feel <i>complaints</i> are dealt with fairly?	73 (50%)	25 (17%)	47 (32%)
Do you feel <i>complaints</i> are dealt with promptly (within seven days)?	73 (50%)	28 (19%)	44 (30%)
Were you given information about how to make an appeal?	44 (34%)	31 (24%)	54 (42%)

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 73 (50%)
 Yes 20 (14%)
 No 52 (36%)

Q4.12 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
28 (20%)	7 (5%)	19 (14%)	48 (35%)	22 (16%)	14 (10%)

Q4.13 What level of the IEP scheme are you on now?
Don't know what the IEP scheme is 7 (5%)
Enhanced 97 (66%)
Standard 41 (28%)
Basic 2 (1%)
Don't know 1 (1%)

Q4.14 Do you feel you have been treated fairly in your experience of the IEP scheme?
Don't know what the IEP scheme is 7 (5%)
 Yes 80 (55%)
 No 46 (32%)
Don't know 13 (9%)

Q4.15 Do the different levels of the IEP scheme encourage you to change your behaviour?
Don't know what the IEP scheme is 7 (5%)
 Yes 60 (42%)
 No 57 (40%)
Don't know 20 (14%)

Q4.16 Please answer the following questions about this prison:

	Yes	No
In the last six months have any members of staff physically restrained you (C&R)?	12 (8%)	133 (92%)
In the last six months have you spent a night in the segregation/care and separation unit?	25 (17%)	118 (83%)

Q4.17 Please answer the following questions about your religious beliefs:

	Yes	No	Don't know/N/A
Do you feel your religious beliefs are respected?	86 (61%)	19 (13%)	37 (26%)
Are you able to speak to a religious leader of your faith in private if you want to?	75 (57%)	10 (8%)	47 (36%)

Q4.18 Can you speak to a Listener at any time if you want to?

Yes	No	Don't know
86 (60%)	10 (7%)	48 (33%)

Q4.19 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?	121 (84%)	23 (16%)
Do most staff treat you with respect?	114 (81%)	26 (19%)

Section 5: Safety

Q5.1 Have you ever felt unsafe in this prison?

Yes	68 (46%)
No	79 (54%)

Q5.2 Do you feel unsafe in this prison at the moment?

Yes	31 (21%)
No	116 (79%)

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

Never felt unsafe	79 (57%)	<i>At mealtimes</i>	14 (10%)
<i>Everywhere</i>	15 (11%)	<i>At health services</i>	23 (17%)
<i>Segregation unit</i>	2 (1%)	<i>Visit's area</i>	4 (3%)
<i>Association areas</i>	23 (17%)	<i>In wing showers</i>	20 (14%)
<i>Reception area</i>	7 (5%)	<i>In gym showers</i>	12 (9%)
<i>At the gym</i>	16 (12%)	<i>In corridors/stairwells</i>	16 (12%)
<i>In an exercise yard</i>	22 (16%)	<i>On your landing/wing</i>	21 (15%)
<i>At work</i>	11 (8%)	<i>In your cell</i>	13 (9%)
<i>During movement</i>	26 (19%)	<i>At religious services</i>	3 (2%)
<i>At education</i>	11 (8%)		

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

Yes 42 (29%)
 No..... 103 (71%)

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>	21 (14%)	<i>Because of your sexuality.....</i>	3 (2%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	12 (8%)	<i>Because you have a disability.....</i>	5 (3%)
<i>Sexual abuse.....</i>	3 (2%)	<i>Because of your religion/religious beliefs.....</i>	7 (5%)
<i>Because of your race or ethnic origin.....</i>	5 (3%)	<i>Because of your age.....</i>	5 (3%)
<i>Because of drugs.....</i>	3 (2%)	<i>Being from a different part of the country than others.....</i>	7 (5%)
<i>Having your canteen/property taken.....</i>	11 (8%)	<i>Because of your offence/crime.....</i>	22 (15%)
<i>Because you were new here...</i>	13 (9%)	<i>Because of gang related issues.....</i>	4 (3%)

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

Yes 34 (24%)
 No..... 108 (76%)

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>	11 (8%)	<i>Because you have a disability.....</i>	3 (2%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	4 (3%)	<i>Because of your religion/religious beliefs.....</i>	3 (2%)
<i>Sexual abuse.....</i>	1 (1%)	<i>Because of your age.....</i>	4 (3%)
<i>Because of your race or ethnic origin.....</i>	4 (3%)	<i>Being from a different part of the country than others.....</i>	4 (3%)
<i>Because of drugs.....</i>	8 (6%)	<i>Because of your offence/crime.....</i>	13 (9%)
<i>Because you were new here...</i>	9 (6%)	<i>Because of gang related issues.....</i>	3 (2%)
<i>Because of your sexuality.....</i>	1 (1%)		

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

Not been victimised 89 (63%)
 Yes 27 (19%)
 No..... 26 (18%)

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

Yes 51 (35%)
 No..... 94 (65%)

Q5.10 Have you ever felt threatened or intimidated by a member of staff/group of staff in here?
 Yes 33 (22%)
 No 114 (78%)

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>
15 (10%)	20 (14%)	3 (2%)	5 (3%)	6 (4%)	98 (67%)

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	16 (11%)	5 (3%)	28 (19%)	22 (15%)	52 (36%)	21 (15%)
The nurse	19 (14%)	14 (10%)	46 (33%)	26 (19%)	21 (15%)	13 (9%)
The dentist	16 (11%)	2 (1%)	10 (7%)	11 (8%)	54 (39%)	47 (34%)
The optician	20 (14%)	1 (1%)	9 (6%)	12 (9%)	38 (27%)	59 (42%)

Q6.2 Are you able to see a pharmacist?
 Yes 52 (42%)
 No 73 (58%)

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	14 (10%)	22 (15%)	51 (36%)	25 (17%)	18 (13%)	13 (9%)
The nurse	16 (12%)	26 (19%)	49 (36%)	20 (14%)	12 (9%)	15 (11%)
The dentist	40 (29%)	9 (7%)	28 (21%)	16 (12%)	23 (17%)	20 (15%)
The optician	49 (37%)	10 (8%)	24 (18%)	19 (15%)	8 (6%)	21 (16%)

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>
	8 (6%)	11 (8%)	37 (26%)	37 (26%)	31 (21%)	21 (14%)

Q6.5 Are you currently taking medication?
 Yes 87 (60%)
 No 59 (40%)

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

<i>Not taking medication</i>	59 (42%)
Yes	65 (46%)
No	16 (11%)

Q6.7 Do you feel you have any emotional well-being/mental health issues?
 Yes 46 (33%)
 No 95 (67%)

Q6.8 Are your emotional well-being/mental health issues being addressed by any of the following? (Please tick all that apply to you.)

<i>Do not have any issues/not receiving any help</i>	105 (78%)
<i>Doctor</i>	17 (13%)
<i>Nurse</i>	7 (5%)
<i>Psychiatrist</i>	11 (8%)
<i>Mental health in-reach team</i>	8 (6%)
<i>Counsellor</i>	2 (1%)
<i>Other</i>	6 (4%)

Q6.9 Did you have a problem with either of the following when you came into this prison?

	Yes	No
Drugs	27 (19%)	117 (81%)
Alcohol	19 (13%)	122 (87%)

Q6.10 Have you developed a problem with drugs since you have been in this prison?

Yes	10 (7%)
No.....	136 (93%)

Q6.11 Do you know who to contact in this prison to get help with your drug or alcohol problem?

Yes	27 (18%)
No.....	7 (5%)
<i>Did not/do not have a drug or alcohol problem</i>	112 (77%)

Q6.12 Have you received any intervention or help (including, CARATs, Health Services etc.) for your drug/alcohol problem, while in this prison?

Yes	29 (20%)
No.....	7 (5%)
<i>Did not/do not have a drug or alcohol problem</i>	112 (76%)

Q6.13 Was the intervention or help you received, while in this prison, helpful?

Yes	24 (16%)
No.....	4 (3%)
<i>Did not have a problem/have not received help</i>	119 (81%)

Q6.14 Do you think you will have a problem with either of the following when you leave this prison?

	Yes	No	Don't know
Drugs	10 (7%)	122 (84%)	14 (10%)
Alcohol	10 (7%)	117 (84%)	13 (9%)

Q6.15 Do you know who in this prison can help you contact external drug or alcohol agencies on release?

Yes	10 (7%)
No.....	12 (9%)

N/A..... 115 (84%)

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	100 (70%)
Vocational or skills training.....	23 (16%)
Education (including basic skills).....	35 (25%)
Offending behaviour programmes.....	26 (18%)
Not involved in any of these	25 (18%)

Q7.2 If you have been involved in any of the following, while in this prison, do you think it will help you on release?

	Not been involved	Yes	No	Don't know
Prison job	14 (11%)	47 (37%)	50 (39%)	17 (13%)
Vocational or skills training	21 (22%)	42 (44%)	23 (24%)	10 (10%)
Education (including basic skills)	19 (18%)	53 (50%)	24 (23%)	10 (9%)
Offending behaviour programmes	25 (25%)	33 (33%)	27 (27%)	14 (14%)

Q7.3 How often do you go to the library?

Don't want to go	8 (6%)
Never.....	21 (15%)
Less than once a week.....	36 (25%)
About once a week.....	73 (51%)
More than once a week.....	2 (1%)
Don't know.....	4 (3%)

Q7.4 On average how many times do you go to the gym each week?

Don't want to go	0	1	2	3 to 5	More than 5	Don't know
35 (24%)	32 (22%)	13 (9%)	33 (23%)	28 (19%)	4 (3%)	0 (0%)

Q7.5 On average how many times do you go outside for exercise each week?

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
20 (14%)	26 (18%)	36 (25%)	29 (20%)	27 (19%)	5 (3%)

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.)

Less than 2 hours	16 (11%)
2 to less than 4 hours.....	15 (10%)
4 to less than 6 hours.....	35 (24%)
6 to less than 8 hours.....	35 (24%)
8 to less than 10 hours.....	28 (19%)
10 hours or more.....	11 (8%)
Don't know.....	5 (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	<i>Don't know</i>
2 (1%)	4 (3%)	3 (2%)	24 (17%)	105 (74%)	3 (2%)

Q7.8 How often do staff normally speak to you during association time?

<i>Do not go on association</i>	8 (5%)
<i>Never</i>	17 (12%)
<i>Rarely</i>	34 (23%)
<i>Some of the time</i>	49 (34%)
<i>Most of the time</i>	24 (16%)
<i>All of the time</i>	14 (10%)

Section 8: Resettlement

Q8.1 When did you first meet your personal officer?

<i>Still have not met him/her</i>	14 (10%)
<i>In the first week</i>	52 (36%)
<i>More than a week</i>	49 (34%)
<i>Don't remember</i>	29 (20%)

Q8.2 How helpful do you think your personal officer is?

<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>
14 (10%)	45 (31%)	42 (29%)	24 (16%)	11 (7%)	11 (7%)

Q8.3 Do you have a sentence plan/OASys?

<i>Not sentenced</i>	11 (7%)
<i>Yes</i>	120 (82%)
<i>No</i>	16 (11%)

Q8.4 How involved were you in the development of your sentence plan?

<i>Do not have a sentence plan/OASys</i>	27 (19%)
<i>Very involved</i>	15 (11%)
<i>Involved</i>	41 (29%)
<i>Neither</i>	11 (8%)
<i>Not very involved</i>	18 (13%)
<i>Not at all involved</i>	30 (21%)

Q8.5 Can you achieve all or some of your sentence plan targets in this prison?

<i>Do not have a sentence plan/OASys</i>	27 (19%)
<i>Yes</i>	56 (39%)
<i>No</i>	59 (42%)

Q8.6 Are there plans for you to achieve all/some of your sentence plan targets in another prison?

<i>Do not have a sentence plan/OASys</i>	27 (20%)
<i>Yes</i>	58 (42%)
<i>No</i>	52 (38%)

- Q8.7 Do you feel that any member of staff has helped you to address your offending behaviour while at this prison?**
Not sentenced..... 11 (8%)
 Yes 37 (28%)
 No 86 (64%)
- Q8.8 Do you feel that any member of staff has helped you to prepare for your release?**
 Yes 21 (15%)
 No 120 (85%)
- Q8.9 Have you had any problems with sending or receiving mail?**
 Yes 71 (49%)
 No 69 (48%)
 Don't know..... 5 (3%)
- Q8.10 Have you had any problems getting access to the telephones?**
 Yes 23 (16%)
 No 119 (82%)
 Don't know..... 3 (2%)
- Q8.11 Did you have a visit in the first week that you were here?**
Not been here a week yet 0 (0%)
 Yes 22 (15%)
 No 115 (80%)
 Don't remember..... 7 (5%)
- 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
0 (0%)	110 (79%)	24 (17%)	5 (4%)	1 (1%)
- Q8.13 How are you and your family/friends usually treated by visits staff?**
Not had any visits..... 54 (39%)
 Very well..... 19 (14%)
 Well 25 (18%)
 Neither 19 (14%)
 Badly 5 (4%)
 Very badly 2 (1%)
 Don't know..... 15 (11%)
- Q8.14 Have you been helped to maintain contact with your family/friends while in this prison?**
 Yes 43 (30%)
 No 99 (70%)
- Q8.15 Do you know who to contact to get help with the following within this prison? (Please tick all that apply to you.)**
Don't know who to contact .. 76 (62%) *Help with your finances in preparation for release* 22 (18%)
Maintaining good relationships 22 (18%) *Claiming benefits on release*... 24 (20%)

<i>Avoiding bad relationships</i>	14 (11%)	<i>Arranging a place at college/continuing education on release.....</i>	18 (15%)
<i>Finding a job on release</i>	22 (18%)	<i>Continuity of health services on release.....</i>	22 (18%)
<i>Finding accommodation on release.....</i>	26 (21%)	<i>Opening a bank account.....</i>	27 (22%)

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>	61 (46%)	<i>Help with your finances in preparation for release</i>	32 (24%)
<i>Maintaining good relationships</i>	18 (14%)	<i>Claiming benefits on release...</i>	36 (27%)
<i>Avoiding bad relationships</i>	14 (11%)	<i>Arranging a place at college/continuing education on release.....</i>	25 (19%)
<i>Finding a job on release</i>	56 (42%)	<i>Continuity of health services on release.....</i>	27 (20%)
<i>Finding accommodation on release.....</i>	44 (33%)	<i>Opening a bank account.....</i>	31 (23%)

Q8.17 Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?

<i>Not sentenced.....</i>	11 (8%)
<i>Yes.....</i>	61 (47%)
<i>No.....</i>	59 (45%)

Summary of prisoner questionnaires and interviews – Albany

Prisoner survey methodology

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

Choosing the sample size

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 8 September 2010, the prisoner population at HMP Isle of Wight (Albany) was 570. The sample size was 190. Overall, this represented 33% of the prisoner population.

Selecting the sample

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. Five respondents refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. Six respondents were interviewed.

Methodology

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 room for collection.

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

Response rates

In total, 167 respondents completed and returned their questionnaires. This represented 29% of the prison population. The response rate was 88%. In addition to the five respondents who refused to complete a questionnaire, 11 questionnaires were not returned and seven were returned blank.

Comparisons

The following details the results from the survey. Data from each establishment has 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 category B trainer prisons. This comparator is based on all responses from prisoner surveys carried out in seven category B trainer prisons since February 2006.
- The current survey responses in 2010 against the responses of prisoners surveyed at HMP Albany in 2007.
- 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 British nationals and those who are foreign nationals.
- A comparison within the 2010 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2010 survey between responses of prisoners who consider themselves to be homosexual, bisexual or other and those who consider themselves to be heterosexual.
- A comparison within the 2010 survey between those who are aged under 50 and those aged 50 or over.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures, i.e. 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

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 is excluded). The actual numbers will match up as the data is 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 has been weighted for comparison purposes.

Albany survey results

Section 1: About you

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

Q1.2 How old are you?

<i>Under 21</i>	0 (0%)
<i>21 - 29</i>	26 (16%)
<i>30 - 39</i>	31 (19%)
<i>40 - 49</i>	46 (28%)
<i>50 - 59</i>	32 (20%)
<i>60 - 69</i>	24 (15%)
<i>70 and over</i>	5 (3%)

Q1.3 Are you sentenced?

<i>Yes</i>	161 (98%)
<i>Yes - on recall</i>	3 (2%)
<i>No - awaiting trial</i>	1 (1%)
<i>No - awaiting sentence</i>	0 (0%)
<i>No - awaiting deportation</i>	0 (0%)

Q1.4 How long is your sentence?

<i>Not sentenced</i>	1 (1%)
<i>Less than 6 months</i>	0 (0%)
<i>6 months to less than 1 year</i>	1 (1%)
<i>1 year to less than 2 years</i>	0 (0%)
<i>2 years to less than 4 years</i>	1 (1%)
<i>4 years to less than 10 years</i>	30 (18%)
<i>10 years or more</i>	41 (25%)
<i>IPP (Indeterminate Sentence for Public Protection)</i>	59 (36%)
<i>Life</i>	30 (18%)

Q1.5 Approximately, how long do you have left to serve? (If you are serving life or IPP, please use the date of your next board.)

<i>Not sentenced</i>	1 (1%)
<i>6 months or less</i>	16 (12%)
<i>More than 6 months</i>	122 (88%)

Q1.6 How long have you been in this prison?

<i>Less than 1 month</i>	5 (3%)
<i>1 to less than 3 months</i>	6 (4%)
<i>3 to less than 6 months</i>	3 (2%)

6 to less than 12 months.....	14 (8%)
12 months to less than 2 years.....	25 (15%)
2 to less than 4 years.....	63 (38%)
4 years or more.....	49 (30%)

Q1.7 Are you a foreign national (i.e. do not hold UK citizenship)?

Yes.....	15 (9%)
No.....	143 (91%)

Q1.8 Is English your first language?

Yes.....	141 (89%)
No.....	18 (11%)

Q1.9 What is your ethnic origin?

White - British.....	126 (76%)	Asian or Asian British - Bangladeshi.....	0 (0%)
White - Irish.....	4 (2%)	Asian or Asian British - other.....	3 (2%)
White - other.....	9 (5%)	Mixed heritage - white and black Caribbean.....	1 (1%)
Black or black British - Caribbean.....	8 (5%)	Mixed heritage - white and black African.....	3 (2%)
Black or black British - African.....	4 (2%)	Mixed heritage - white and Asian.....	0 (0%)
Black or black British - other.....	5 (3%)	Mixed heritage - other.....	0 (0%)
Asian or Asian British - Indian.....	1 (1%)	Chinese.....	1 (1%)
Asian or Asian British - Pakistani.....	0 (0%)	Other ethnic group.....	1 (1%)

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

Yes.....	4 (2%)
No.....	157 (98%)

Q1.11 What is your religion?

None.....	36 (22%)	Hindu.....	0 (0%)
Church of England.....	54 (34%)	Jewish.....	1 (1%)
Catholic.....	16 (10%)	Muslim.....	11 (7%)
Protestant.....	4 (2%)	Sikh.....	2 (1%)
Other Christian denomination.....	8 (5%)	Other.....	20 (12%)
Buddhist.....	9 (6%)		

Q1.12 How would you describe your sexual orientation?

Heterosexual/straight.....	142 (89%)
Homosexual/gay.....	8 (5%)
Bisexual.....	10 (6%)
Other.....	0 (0%)

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

Yes.....	65 (40%)
No.....	99 (60%)

Q1.14	How many times have you been in prison before?				
	0	1	2 to 5	More than 5	
	80 (48%)	31 (19%)	38 (23%)	16 (10%)	
Q1.15	Including this prison, how many prisons have you been in during this sentence/remand time?				
	1	2 to 5	More than 5		
	15 (9%)	129 (80%)	18 (11%)		
Q1.16	Do you have any children under the age of 18?				
	Yes				56 (35%)
	No				106 (65%)

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?	20 (13%)	73 (46%)	26 (17%)	19 (12%)	11 (7%)	3 (2%)	5 (3%)
	Your personal safety during the journey?	19 (13%)	76 (52%)	13 (9%)	22 (15%)	9 (6%)	4 (3%)	4 (3%)
	The comfort of the van?	3 (2%)	17 (11%)	21 (13%)	54 (35%)	55 (35%)	1 (1%)	5 (3%)
	The attention paid to your health needs?	7 (5%)	38 (25%)	37 (25%)	26 (17%)	26 (17%)	4 (3%)	13 (9%)
	The frequency of toilet breaks?	2 (1%)	8 (5%)	18 (12%)	32 (21%)	70 (45%)	2 (1%)	22 (14%)
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%)	16 (10%)	94 (59%)	36 (23%)		5 (3%)	
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>	
		23 (15%)	87 (55%)	29 (18%)	11 (7%)	7 (4%)	0 (0%)	
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?			125 (78%)	30 (19%)		6 (4%)	
	Before you arrived here did you receive any written information about what would happen to you?			12 (8%)	144 (90%)		4 (3%)	
	When you first arrived here did your property arrive at the same time as you?			139 (87%)	19 (12%)		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> | 42 (29%) | <i>Money worries</i> | 12 (8%) |
| <i>Loss of property</i> | 13 (9%) | <i>Feeling depressed or suicidal</i> .. | 66 (45%) |
| <i>Housing problems</i> | 11 (7%) | <i>Health problems</i> | 89 (61%) |
| <i>Contacting employers</i> | 8 (5%) | <i>Needing protection from other prisoners</i> | 26 (18%) |
| <i>Contacting family</i> | 33 (22%) | <i>Accessing phone numbers</i> | 33 (22%) |
| <i>Ensuring dependants were being looked after</i> | 11 (7%) | <i>Other</i> | 2 (1%) |
- 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> | 55 (38%) | <i>Money worries</i> | 15 (10%) |
| <i>Loss of property</i> | 20 (14%) | <i>Feeling depressed or suicidal</i> .. | 34 (23%) |
| <i>Housing problems</i> | 6 (4%) | <i>Health problems</i> | 48 (33%) |
| <i>Contacting employers</i> | 5 (3%) | <i>Needing protection from other prisoners</i> | 8 (6%) |
| <i>Contacting family</i> | 37 (26%) | <i>Accessing phone numbers</i> | 38 (26%) |
| <i>Ensuring dependants were looked after</i> | 4 (3%) | <i>Other</i> | 2 (1%) |
- Q3.3 Please answer the following questions about reception:**
- | | Yes | No | Don't remember |
|---|-----------|----------|----------------|
| Were you seen by a member of health services? | 119 (74%) | 28 (18%) | 13 (8%) |
| When you were searched, was this carried out in a respectful way? | 114 (76%) | 26 (17%) | 10 (7%) |
- Q3.4 Overall, how well did you feel you were treated in reception?**
- | | Very well | Well | Neither | Badly | Very badly | Don't remember |
|--|-----------|----------|----------|---------|------------|----------------|
| | 33 (20%) | 81 (50%) | 29 (18%) | 12 (7%) | 5 (3%) | 2 (1%) |
- 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> | 64 (42%) |
| <i>Information about what support was available for people feeling depressed or suicidal</i> | 63 (42%) |
| <i>Information about how to make routine requests</i> | 43 (28%) |
| <i>Information about your entitlement to visits</i> | 37 (25%) |
| <i>Information about health services</i> | 61 (40%) |
| <i>Information about the chaplaincy</i> | 50 (33%) |
| Not offered anything | 58 (38%) |
- 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> | 78 (49%) |
|---|----------|

<i>The opportunity to have a shower</i>	36 (23%)
<i>The opportunity to make a free telephone call</i>	21 (13%)
<i>Something to eat</i>	87 (55%)
<i>Did not receive anything</i>	40 (25%)

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>	32 (20%)
<i>Someone from health services</i>	104 (66%)
<i>A Listener/Samaritans</i>	27 (17%)
<i>Did not meet any of these people</i>	46 (29%)

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

<i>Yes</i>	13 (8%)
<i>No</i>	142 (92%)

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

<i>Yes</i>	124 (77%)
<i>No</i>	30 (19%)
<i>Don't remember</i>	8 (5%)

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

<i>Have not been on an induction course</i>	5 (3%)
<i>Within the first week</i>	68 (44%)
<i>More than a week</i>	74 (47%)
<i>Don't remember</i>	9 (6%)

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

<i>Have not been on an induction course</i>	5 (3%)
<i>Yes</i>	105 (69%)
<i>No</i>	32 (21%)
<i>Don't remember</i>	10 (7%)

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?	32 (21%)	69 (45%)	16 (11%)	20 (13%)	7 (5%)	8 (5%)
Attend legal visits?	21 (14%)	62 (43%)	18 (12%)	15 (10%)	8 (6%)	21 (14%)
Obtain bail information?	6 (5%)	6 (5%)	12 (10%)	5 (4%)	11 (9%)	77 (66%)

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

<i>Not had any letters</i>	14 (9%)
---	---------

Yes..... 75 (48%)
 No..... 68 (43%)

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

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	139 (87%)	14 (9%)	0 (0%)	6 (4%)
Are you normally able to have a shower every day?	146 (90%)	17 (10%)	0 (0%)	0 (0%)
Do you normally receive clean sheets every week?	146 (91%)	5 (3%)	0 (0%)	9 (6%)
Do you normally get cell cleaning materials every week?	122 (77%)	29 (18%)	4 (3%)	4 (3%)
Is your cell call bell normally answered within five minutes?	78 (49%)	55 (34%)	18 (11%)	9 (6%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	110 (71%)	46 (29%)	0 (0%)	0 (0%)
Can you normally get your stored property if you need to?	39 (25%)	74 (48%)	31 (20%)	10 (6%)

Q4.4 What is the food like here?

Very good	Good	Neither	Bad	Very bad
5 (3%)	28 (17%)	45 (28%)	41 (25%)	42 (26%)

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

Have not bought anything yet..... 2 (1%)
 Yes..... 65 (41%)
 No..... 90 (57%)

Q4.6 Is it easy or difficult to get either

	Very easy	Easy	Neither	Difficult	Very difficult	Don't know
A complaint form	76 (50%)	62 (41%)	8 (5%)	2 (1%)	0 (0%)	5 (3%)
An application form	74 (48%)	66 (43%)	6 (4%)	7 (5%)	1 (1%)	0 (0%)

Q4.7 Have you made an application?

Yes..... 151 (93%)
 No..... 11 (7%)

Q4.8 Please answer the following questions concerning applications (If you have not made an application please tick the 'not made one' option)

	Not made one	Yes	No
Do you feel <i>applications</i> are dealt with fairly?	11 (7%)	84 (55%)	58 (38%)
Do you feel <i>applications</i> are dealt with promptly (within seven days)?	11 (7%)	77 (49%)	68 (44%)

Q4.9	Have you made a complaint?				
	Yes			101 (62%)	
	No			62 (38%)	
Q4.10	Please answer the following questions concerning complaints: (If you have not made a complaint please tick the 'not made one' option.)				
		Not made one	Yes	No	
	Do you feel <i>complaints</i> are dealt with fairly?	62 (39%)	34 (22%)	62 (39%)	
	Do you feel <i>complaints</i> are dealt with promptly (within seven days)?	62 (39%)	43 (27%)	56 (35%)	
	Were you given information about how to make an appeal?	40 (29%)	39 (28%)	59 (43%)	
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			62 (39%)	
	Yes			33 (20%)	
	No			66 (41%)	
Q4.12	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?				
	<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>
	19 (12%)	13 (8%)	36 (23%)	48 (31%)	26 (17%)
					12 (8%)
Q4.13	What level of the IEP scheme are you on now?				
	Don't know what the IEP scheme is				5 (3%)
	Enhanced				93 (58%)
	Standard				61 (38%)
	Basic				2 (1%)
	Don't know				0 (0%)
Q4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?				
	Don't know what the IEP scheme is				5 (3%)
	Yes				74 (47%)
	No				69 (44%)
	Don't know				8 (5%)
Q4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?				
	Don't know what the IEP scheme is				5 (3%)
	Yes				64 (43%)
	No				67 (45%)
	Don't know				14 (9%)
Q4.16	Please answer the following questions about this prison:				
		Yes	No		
	In the last six months have any members of staff physically restrained you (C&R)?	2 (1%)	158 (99%)		

In the last six months have you spent a night in the segregation/care and separation unit? 17 (10%) 146 (90%)

Q4.17 Please answer the following questions about your religious beliefs:

	Yes	No	Don't know/N/A
Do you feel your religious beliefs are respected?	82 (53%)	31 (20%)	43 (28%)
Are you able to speak to a religious leader of your faith in private if you want to?	85 (56%)	21 (14%)	47 (31%)

Q4.18 Can you speak to a Listener at any time if you want to?

Yes	No	Don't know
119 (75%)	11 (7%)	28 (18%)

Q4.19 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?	133 (83%)	28 (17%)
Do most staff treat you with respect?	128 (82%)	29 (18%)

Section 5: Safety

Q5.1 Have you ever felt unsafe in this prison?

Yes 63 (39%)
No 100 (61%)

Q5.2 Do you feel unsafe in this prison at the moment?

Yes 20 (12%)
No 143 (88%)

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

Never felt unsafe	100 (67%)	<i>At meal times</i>	12 (8%)
<i>Everywhere</i>	9 (6%)	<i>At health services</i>	7 (5%)
<i>Segregation unit</i>	5 (3%)	<i>Visit's area</i>	2 (1%)
<i>Association areas</i>	12 (8%)	<i>In wing showers</i>	18 (12%)
<i>Reception area</i>	1 (1%)	<i>In gym showers</i>	8 (5%)
<i>At the gym</i>	8 (5%)	<i>In corridors/stairwells</i>	16 (11%)
<i>In an exercise yard</i>	15 (10%)	<i>On your landing/wing</i>	17 (11%)
<i>At work</i>	10 (7%)	<i>In your cell</i>	14 (9%)
<i>During movement</i>	12 (8%)	<i>At religious services</i>	1 (1%)
<i>At education</i>	5 (3%)		

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

Yes 49 (30%)
No 113 (70%) **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>	19 (12%)	<i>Because of your sexuality.....</i>	7 (4%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	13 (8%)	<i>Because you have a disability.</i>	8 (5%)
<i>Sexual abuse.....</i>	5 (3%)	<i>Because of your religion/religious beliefs.....</i>	8 (5%)
<i>Because of your race or ethnic origin.....</i>	10 (6%)	<i>Because of your age.....</i>	7 (4%)
<i>Because of drugs.....</i>	7 (4%)	<i>Being from a different part of the country than others.....</i>	3 (2%)
<i>Having your canteen/property taken.....</i>	8 (5%)	<i>Because of your offence/crime</i>	11 (7%)
<i>Because you were new here...</i>	7 (4%)	<i>Because of gang related issues.....</i>	4 (2%)

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

Yes.....	56 (35%)	
No.....	106 (65%)	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>	22 (14%)	<i>Because you have a disability.</i>	6 (4%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	5 (3%)	<i>Because of your religion/religious beliefs.....</i>	9 (6%)
<i>Sexual abuse.....</i>	0 (0%)	<i>Because if your age.....</i>	5 (3%)
<i>Because of your race or ethnic origin.....</i>	14 (9%)	<i>Being from a different part of the country than others.....</i>	3 (2%)
<i>Because of drugs.....</i>	3 (2%)	<i>Because of your offence/crime</i>	22 (14%)
<i>Because you were new here...</i>	6 (4%)	<i>Because of gang related issues.....</i>	5 (3%)
<i>Because of your sexuality.....</i>	4 (2%)		

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

Not been victimised	87 (56%)
Yes.....	34 (22%)
No.....	34 (22%)

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

Yes.....	46 (29%)
No.....	115 (71%)

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

Yes.....	47 (30%)
No.....	110 (70%)

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>
	15 (10%)	17 (11%)	8 (5%)	6 (4%)	11 (7%)	98 (63%)

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	8 (5%)	18 (11%)	46 (29%)	25 (16%)	47 (30%)	13 (8%)
The nurse	4 (3%)	30 (20%)	66 (43%)	26 (17%)	20 (13%)	7 (5%)
The dentist	8 (5%)	5 (3%)	9 (6%)	11 (7%)	54 (36%)	64 (42%)
The optician	21 (14%)	7 (5%)	5 (3%)	14 (9%)	36 (24%)	70 (46%)

Q6.2	Are you able to see a pharmacist?	
	Yes	47 (34%)
	No	93 (66%)

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	7 (5%)	25 (16%)	65 (42%)	23 (15%)	18 (12%)	15 (10%)
The nurse	8 (5%)	32 (21%)	57 (37%)	25 (16%)	17 (11%)	14 (9%)
The dentist	32 (21%)	23 (15%)	38 (25%)	19 (13%)	15 (10%)	25 (16%)
The optician	40 (26%)	22 (14%)	33 (21%)	24 (16%)	12 (8%)	23 (15%)

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>
	2 (1%)	12 (8%)	42 (27%)	28 (18%)	49 (31%)	25 (16%)

Q6.5	Are you currently taking medication?	
	Yes	107 (66%)
	No	54 (34%)

Q6.6	If you are taking medication, are you allowed to keep possession of your medication in your own cell?	
	<i>Not taking medication</i>	54 (35%)
	Yes	79 (51%)
	No	22 (14%)

Q6.7	Do you feel you have any emotional well-being/mental health issues?	
	Yes	43 (27%)
	No	114 (73%)

Q6.8	Are your emotional well-being/mental health issues being addressed by any of the following? (Please tick all that apply to you.)	
	<i>Do not have any issues/not receiving any help</i>	130 (83%)
	<i>Doctor</i>	14 (9%)
	<i>Nurse</i>	8 (5%)
	<i>Psychiatrist</i>	10 (6%)

<i>Mental health in-reach team</i>	11 (7%)
<i>Counsellor</i>	3 (2%)
<i>Other</i>	3 (2%)

- Q6.9 Did you have a problem with either of the following when you came into this prison?**
- | | Yes | No |
|---------|----------|-----------|
| Drugs | 18 (12%) | 137 (88%) |
| Alcohol | 23 (15%) | 133 (85%) |
- Q6.10 Have you developed a problem with drugs since you have been in this prison?**
- | | |
|-----------|-----------|
| Yes | 6 (4%) |
| No..... | 152 (96%) |
- Q6.11 Do you know who to contact in this prison to get help with your drug or alcohol problem?**
- | | |
|---|-----------|
| Yes | 26 (17%) |
| No..... | 6 (4%) |
| <i>Did not/do not have a drug or alcohol problem</i> | 125 (80%) |
- Q6.12 Have you received any intervention or help (including, CARATs, Health Services etc.) for your drug/alcohol problem, while in this prison?**
- | | |
|---|-----------|
| Yes | 27 (17%) |
| No..... | 3 (2%) |
| <i>Did not / do not have a drug or alcohol problem</i> | 125 (81%) |
- Q6.13 Was the intervention or help you received, while in this prison, helpful?**
- | | |
|---|-----------|
| Yes | 18 (11%) |
| No..... | 11 (7%) |
| <i>Did not have a problem/have not received help</i> | 128 (82%) |
- Q6.14 Do you think you will have a problem with either of the following when you leave this prison?**
- | | Yes | No | Don't know |
|---------|--------|-----------|------------|
| Drugs | 8 (5%) | 137 (90%) | 8 (5%) |
| Alcohol | 7 (5%) | 139 (91%) | 7 (5%) |
- Q6.15 Do you know who in this prison can help you contact external drug or alcohol agencies on release?**
- | | |
|-----------|-----------|
| Yes | 11 (7%) |
| No..... | 8 (5%) |
| N/A..... | 133 (88%) |

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 | 112 (71%) |
| Vocational or skills training | 19 (12%) |
| Education (including basic skills)..... | 55 (35%) |
| Offending behaviour programmes..... | 26 (16%) |
| Not involved in any of these | 20 (13%) |
- Q7.2 If you have been involved in any of the following, while in this prison, do you think it will help you on release?**
- | | <i>Not been involved</i> | Yes | No | <i>Don't know</i> |
|------------------------------------|--------------------------|----------|----------|-------------------|
| Prison job | 14 (11%) | 57 (43%) | 52 (39%) | 9 (7%) |
| Vocational or skills training | 18 (20%) | 44 (48%) | 27 (29%) | 3 (3%) |
| Education (including basic skills) | 15 (13%) | 73 (62%) | 26 (22%) | 4 (3%) |
| Offending behaviour programmes | 23 (23%) | 47 (46%) | 27 (26%) | 5 (5%) |
- Q7.3 How often do you go to the library?**
- | | |
|------------------------------------|----------|
| Don't want to go | 5 (3%) |
| <i>Never</i> | 11 (7%) |
| <i>Less than once a week</i> | 48 (31%) |
| <i>About once a week</i> | 70 (46%) |
| <i>More than once a week</i> | 16 (10%) |
| <i>Don't know</i> | 3 (2%) |
- 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 | <i>Don't know</i> |
|-------------------------|----------|--------|----------|----------|-------------|-------------------|
| 27 (17%) | 46 (29%) | 8 (5%) | 19 (12%) | 48 (30%) | 8 (5%) | 2 (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 | <i>Don't know</i> |
|-------------------------|----------|----------|----------|-------------|-------------------|
| 21 (13%) | 39 (24%) | 56 (35%) | 25 (16%) | 15 (9%) | 4 (3%) |
- 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> | 14 (9%) |
| <i>2 to less than 4 hours</i> | 29 (18%) |
| <i>4 to less than 6 hours</i> | 27 (17%) |
| <i>6 to less than 8 hours</i> | 44 (28%) |
| <i>8 to less than 10 hours</i> | 18 (11%) |
| <i>10 hours or more</i> | 18 (11%) |
| <i>Don't know</i> | 7 (4%) |
- 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 | <i>Don't know</i> |
|-------------------------|--------|---------|----------|-------------|-------------------|
| 4 (3%) | 3 (2%) | 10 (6%) | 45 (29%) | 87 (55%) | 8 (5%) |

Q7.8	How often do staff normally speak to you during association time?	
	<i>Do not go on association</i>	11 (7%)
	<i>Never</i>	18 (12%)
	<i>Rarely</i>	42 (27%)
	<i>Some of the time</i>	55 (35%)
	<i>Most of the time</i>	21 (14%)
	<i>All of the time</i>	8 (5%)

Section 8: Resettlement

Q8.1	When did you first meet your personal officer?	
	<i>Still have not met him/her</i>	14 (9%)
	<i>In the first week</i>	65 (41%)
	<i>More than a week</i>	53 (33%)
	<i>Don't remember</i>	27 (17%)

Q8.2	How helpful do you think your personal officer is?				
	<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>
	14 (9%)	39 (25%)	49 (31%)	27 (17%)	18 (11%)
					12 (8%)

Q8.3	Do you have a sentence plan/OASys?	
	<i>Not sentenced</i>	1 (1%)
	<i>Yes</i>	132 (86%)
	<i>No</i>	21 (14%)

Q8.4	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/OASys</i>	22 (14%)
	<i>Very involved</i>	16 (11%)
	<i>Involved</i>	32 (21%)
	<i>Neither</i>	15 (10%)
	<i>Not very involved</i>	23 (15%)
	<i>Not at all involved</i>	44 (29%)

Q8.5	Can you achieve all or some of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/OASys</i>	22 (15%)
	<i>Yes</i>	56 (38%)
	<i>No</i>	70 (47%)

Q8.6	Are there plans for you to achieve all/some of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/OASys</i>	22 (15%)
	<i>Yes</i>	64 (42%)
	<i>No</i>	65 (43%)

Q8.7	Do you feel that any member of staff has helped you to address your offending behaviour while at this prison?	
	<i>Not sentenced</i>	1 (1%)

Yes 51 (34%)
 No 96 (65%)

Q8.8 Do you feel that any member of staff has helped you to prepare for your release?
 Yes 22 (15%)
 No 126 (85%)

Q8.9 Have you had any problems with sending or receiving mail?
 Yes 69 (44%)
 No 83 (53%)
 Don't know 5 (3%)

Q8.10 Have you had any problems getting access to the telephones?
 Yes 13 (8%)
 No 144 (92%)
 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 12 (8%)
 Yes 8 (5%)
 No 126 (83%)
 Don't remember 5 (3%)

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
12 (8%)	131 (85%)	10 (6%)	1 (1%)	1 (1%)

Q8.13 How are you and your family/friends usually treated by visits staff?
Not had any visits 74 (48%)
 Very well 18 (12%)
 Well 27 (18%)
 Neither 15 (10%)
 Badly 3 (2%)
 Very badly 3 (2%)
 Don't know 13 (8%)

Q8.14 Have you been helped to maintain contact with your family/friends while in this prison?
 Yes 31 (22%)
 No 112 (78%)

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> .. 69 (52%)	<i>Help with your finances in preparation for release</i> 30 (23%)
<i>Maintaining good relationships</i> 29 (22%)	<i>Claiming benefits on release</i> ... 34 (26%)
<i>Avoiding bad relationships</i> 24 (18%)	<i>Arranging a place at college/continuing education on release</i> 22 (17%)

<i>Finding a job on release</i>	30 (23%)	<i>Continuity of health services on release.....</i>	27 (20%)
<i>Finding accommodation on release.....</i>	36 (27%)	<i>Opening a bank account.....</i>	46 (35%)

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.)

No problems.....	54 (37%)	<i>Help with your finances in preparation for release</i>	45 (31%)
<i>Maintaining good relationships</i>	24 (16%)	<i>Claiming benefits on release...</i>	49 (33%)
<i>Avoiding bad relationships</i>	22 (15%)	<i>Arranging a place at college/continuing education on release.....</i>	30 (20%)
<i>Finding a job on release</i>	67 (46%)	<i>Continuity of health services on release.....</i>	36 (24%)
<i>Finding accommodation on release.....</i>	62 (42%)	<i>Opening a bank account.....</i>	49 (33%)

Q8.17 Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?

Not sentenced.....	1 (1%)
Yes	90 (64%)
No.....	49 (35%)

Summary of prisoner questionnaires and interviews – Camp Hill

Prisoner survey methodology

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

Choosing the sample size

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 7 September 2010, the prisoner population at HMP Isle of Wight (Camp Hill) was 588. The sample size was 195. Overall, this represented 33% of the prisoner population.

Selecting the sample

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. Eight respondents refused to complete a questionnaire.

Interviews are carried out with any respondents with literacy difficulties. In this case no respondents were interviewed.

Methodology

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 room for collection.

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

Response rates

In total, 144 respondents completed and returned their questionnaires. This represented 24% of the prison population. The response rate was 74%. In addition to the eight respondents who refused to complete a questionnaire, 17 questionnaires were not returned and 26 were returned blank.

Comparisons

The following details the results from the survey. Data from each establishment has 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 category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 37 category C training prisons since 2005.
- The current survey responses in 2010 against the responses of prisoners surveyed at HMP Camp Hill in 2009.
- 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 the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures, i.e. 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

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 is excluded). The actual numbers will match up as the data is 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 has been weighted for comparison purposes.

Camp Hill survey results

Section 1: About you

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

Q1.2 How old are you?

<i>Under 21</i>	0 (0%)
<i>21 - 29</i>	66 (46%)
<i>30 - 39</i>	41 (28%)
<i>40 - 49</i>	27 (19%)
<i>50 - 59</i>	9 (6%)
<i>60 - 69</i>	2 (1%)
<i>70 and over</i>	0 (0%)

Q1.3 Are you sentenced?

<i>Yes</i>	123 (85%)
<i>Yes - on recall</i>	22 (15%)
<i>No - awaiting trial</i>	0 (0%)
<i>No - awaiting sentence</i>	0 (0%)
<i>No - awaiting deportation</i>	0 (0%)

Q1.4 How long is your sentence?

<i>Not sentenced</i>	0 (0%)
<i>Less than 6 months</i>	0 (0%)
<i>6 months to less than 1 year</i>	5 (3%)
<i>1 year to less than 2 years</i>	23 (16%)
<i>2 years to less than 4 years</i>	51 (35%)
<i>4 years to less than 10 years</i>	47 (33%)
<i>10 years or more</i>	4 (3%)
<i>IPP (Indeterminate Sentence for Public Protection)</i>	8 (6%)
<i>Life</i>	6 (4%)

Q1.5 Approximately, how long do you have left to serve? (If you are serving life or IPP, please use the date of your next board.)

<i>Not sentenced</i>	0 (0%)
<i>6 months or less</i>	47 (36%)
<i>More than 6 months</i>	85 (64%)

Q1.6 How long have you been in this prison?

<i>Less than 1 month</i>	11 (8%)
<i>1 to less than 3 months</i>	24 (17%)
<i>3 to less than 6 months</i>	43 (30%)

6 to less than 12 months.....	31 (22%)
12 months to less than 2 years.....	15 (10%)
2 to less than 4 years.....	14 (10%)
4 years or more.....	5 (3%)

Q1.7 Are you a foreign national (i.e. do not hold UK citizenship)?

Yes.....	13 (9%)
No.....	128 (91%)

Q1.8 Is English your first language?

Yes.....	126(92%)
No.....	11 (8%)

Q1.9 What is your ethnic origin?

White - British.....	98 (68%)	Asian or Asian British - Bangladeshi.....	1 (1%)
White - Irish.....	2 (1%)	Asian or Asian British - other... ..	1 (1%)
White - other.....	9 (6%)	Mixed heritage - white and black Caribbean.....	6 (4%)
Black or black British - Caribbean.....	14 (10%)	Mixed heritage - white and black African.....	1 (1%)
Black or black British - African.....	7 (5%)	Mixed heritage - white and Asian.....	1 (1%)
Black or black British - other ...	1 (1%)	Mixed heritage - other.....	1 (1%)
Asian or Asian British - Indian.....	1 (1%)	Chinese.....	0 (0%)
Asian or Asian British - Pakistani.....	1 (1%)	Other ethnic group.....	0 (0%)

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

Yes.....	4 (3%)
No.....	135 (97%)

Q1.11 What is your religion?

None.....	36 (25%)	Hindu.....	0 (0%)
Church of England.....	58 (40%)	Jewish.....	0 (0%)
Catholic.....	25 (17%)	Muslim.....	11 (8%)
Protestant.....	2 (1%)	Sikh.....	1 (1%)
Other Christian denomination.....	4 (3%)	Other.....	6 (4%)
Buddhist.....	1 (1%)		

Q1.12 How would you describe your sexual orientation?

Heterosexual/straight.....	140 (97%)
Homosexual/gay.....	2 (1%)
Bisexual.....	1 (1%)
Other.....	1 (1%)

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

Yes.....	17 (12%)
No.....	127 (88%)

Q1.14	How many times have you been in prison before?				
	0	1	2 to 5	More than 5	
	39 (27%)	19 (13%)	50 (34%)	37 (26%)	
Q1.15	Including this prison, how many prisons have you been in during this sentence/remand time?				
	1	2 to 5	More than 5		
	8 (6%)	113 (79%)	22 (15%)		
Q1.16	Do you have any children under the age of 18?				
	Yes.....				77 (53%)
	No.....				67 (47%)

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?	13 (9%)	66 (47%)	31 (22%)	18 (13%)	7 (5%)	4 (3%)	1 (1%)
	Your personal safety during the journey?	15 (11%)	71 (52%)	25 (18%)	15 (11%)	8 (6%)	2 (1%)	0 (0%)
	The comfort of the van?	2 (1%)	16 (11%)	23 (16%)	53 (38%)	46 (33%)	1 (1%)	0 (0%)
	The attention paid to your health needs?	3 (2%)	43 (32%)	46 (34%)	19 (14%)	14 (10%)	3 (2%)	7 (5%)
	The frequency of toilet breaks?	0 (0%)	10 (7%)	28 (20%)	30 (22%)	51 (37%)	1 (1%)	17 (12%)
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>	
		4 (3%)	28 (19%)	80 (56%)	30 (21%)		2 (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>	
		21 (15%)	83 (58%)	31 (22%)	7 (5%)	0 (0%)	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?				129 (91%)	12 (8%)	1 (1%)	
	Before you arrived here did you receive any written information about what would happen to you?				39 (28%)	95 (67%)	7 (5%)	
	When you first arrived here did your property arrive at the same time as you?				126 (89%)	14 (10%)	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.)**
- | | | | |
|--|----------|--|----------|
| Didn't ask about any of these | 22 (17%) | <i>Money worries</i> | 26 (20%) |
| <i>Loss of property</i> | 23 (17%) | <i>Feeling depressed or suicidal</i> .. | 64 (48%) |
| <i>Housing problems</i> | 38 (29%) | <i>Health problems</i> | 81 (61%) |
| <i>Contacting employers</i> | 18 (14%) | <i>Needing protection from other prisoners</i> | 24 (18%) |
| <i>Contacting family</i> | 75 (56%) | <i>Accessing phone numbers</i> | 49 (37%) |
| <i>Ensuring dependants were being looked after</i> | 12 (9%) | <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.)**
- | | | | |
|--|----------|--|----------|
| Didn't have any problems | 48 (41%) | <i>Money worries</i> | 16 (14%) |
| <i>Loss of property</i> | 18 (15%) | <i>Feeling depressed or suicidal</i> .. | 14 (12%) |
| <i>Housing problems</i> | 22 (19%) | <i>Health problems</i> | 21 (18%) |
| <i>Contacting employers</i> | 7 (6%) | <i>Needing protection from other prisoners</i> | 5 (4%) |
| <i>Contacting family</i> | 24 (21%) | <i>Accessing phone numbers</i> | 19 (16%) |
| <i>Ensuring dependants were looked after</i> | 5 (4%) | <i>Other</i> | 5 (4%) |
- Q3.3 Please answer the following questions about reception:**
- | | Yes | No | Don't remember |
|---|-----------|----------|----------------|
| Were you seen by a member of health services? | 135 (94%) | 4 (3%) | 4 (3%) |
| When you were searched, was this carried out in a respectful way? | 120 (87%) | 15 (11%) | 3 (2%) |
- Q3.4 Overall, how well did you feel you were treated in reception?**
- | Very well | Well | Neither | Badly | Very badly | Don't remember |
|-----------|----------|----------|----------|------------|----------------|
| 22 (16%) | 75 (54%) | 25 (18%) | 15 (11%) | 1 (1%) | 1 (1%) |
- 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> | 81 (59%) |
| <i>Information about what support was available for people feeling depressed or suicidal</i> | 74 (54%) |
| <i>Information about how to make routine requests</i> | 70 (51%) |
| <i>Information about your entitlement to visits</i> | 73 (53%) |
| <i>Information about health services</i> | 97 (71%) |
| <i>Information about the chaplaincy</i> | 81 (59%) |
| Not offered anything | 32 (23%) |
- 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> | 134 (96%) |
|---|-----------|

<i>The opportunity to have a shower</i>	59 (42%)
<i>The opportunity to make a free telephone call</i>	104 (74%)
<i>Something to eat</i>	113 (81%)
<i>Did not receive anything</i>	7 (5%)

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>	73 (53%)
<i>Someone from health services</i>	122 (88%)
<i>A Listener/Samaritans</i>	39 (28%)
<i>Did not meet any of these people</i>	10 (7%)

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

<i>Yes</i>	9 (6%)
<i>No</i>	130 (94%)

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

<i>Yes</i>	117 (84%)
<i>No</i>	18 (13%)
<i>Don't remember</i>	5 (4%)

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

<i>Have not been on an induction course</i>	8 (6%)
<i>Within the first week</i>	99 (71%)
<i>More than a week</i>	30 (22%)
<i>Don't remember</i>	2 (1%)

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

<i>Have not been on an induction course</i>	8 (6%)
<i>Yes</i>	94 (68%)
<i>No</i>	28 (20%)
<i>Don't remember</i>	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?	16 (12%)	48 (35%)	28 (20%)	20 (14%)	11 (8%)	16 (12%)
Attend legal visits?	14 (11%)	37 (29%)	29 (23%)	8 (6%)	8 (6%)	31 (24%)
Obtain bail information?	8 (7%)	17 (14%)	31 (26%)	7 (6%)	11 (9%)	46 (38%)

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

<i>Not had any letters</i>	18 (13%)
---	----------

Yes..... 44 (32%)
 No..... 77 (55%)

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

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	86 (61%)	44 (31%)	6 (4%)	5 (4%)
Are you normally able to have a shower every day?	118 (84%)	23 (16%)	0 (0%)	0 (0%)
Do you normally receive clean sheets every week?	120 (87%)	14 (10%)	2 (1%)	2 (1%)
Do you normally get cell cleaning materials every week?	112 (79%)	25 (18%)	2 (1%)	2 (1%)
Is your cell call bell normally answered within five minutes?	51 (38%)	55 (40%)	20 (15%)	10 (7%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	97 (72%)	36 (27%)	2 (1%)	0 (0%)
Can you normally get your stored property, if you need to?	32 (23%)	75 (54%)	22 (16%)	9 (7%)

Q4.4 What is the food like here?

Very good	Good	Neither	Bad	Very bad
1 (1%)	30 (21%)	49 (35%)	39 (27%)	23 (16%)

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

Have not bought anything yet..... 3 (2%)
 Yes..... 78 (56%)
 No..... 58 (42%)

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

	Very easy	Easy	Neither	Difficult	Very difficult	Don't know
A complaint form	68 (50%)	50 (37%)	9 (7%)	4 (3%)	0 (0%)	5 (4%)
An application form	70 (51%)	53 (39%)	11 (8%)	2 (1%)	0 (0%)	1 (1%)

Q4.7 Have you made an application?

Yes..... 131 (94%)
 No..... 9 (6%)

Q4.8 Please answer the following questions concerning applications:

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

	Not made one	Yes	No
Do you feel <i>applications</i> are dealt with fairly?	9 (7%)	84 (64%)	39 (30%)
Do you feel <i>applications</i> are dealt with promptly (within seven days)?	9 (7%)	58 (45%)	63 (48%)

Q4.9	Have you made a complaint?				
	Yes			65 (47%)	
	No			73 (53%)	
Q4.10	Please answer the following questions concerning complaints:				
	<i>(If you have not made a complaint please tick the 'not made one' option.)</i>				
		Not made one	Yes	No	
	Do you feel <i>complaints</i> are dealt with fairly?	73 (54%)	23 (17%)	39 (29%)	
	Do you feel <i>complaints</i> are dealt with promptly (within seven days)?	73 (54%)	17 (13%)	46 (34%)	
	Were you given information about how to make an appeal?	48 (38%)	35 (28%)	44 (35%)	
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			73 (54%)	
	Yes			11 (8%)	
	No			50 (37%)	
Q4.12	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?				
	<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>
	43 (32%)	10 (8%)	26 (20%)	44 (33%)	8 (6%)
					2 (2%)
Q4.13	What level of the IEP scheme are you on now?				
	Don't know what the IEP scheme is				8 (6%)
	Enhanced				90 (65%)
	Standard				40 (29%)
	Basic				1 (1%)
	Don't know				0 (0%)
Q4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?				
	Don't know what the IEP scheme is				8 (6%)
	Yes				87 (64%)
	No				29 (21%)
	Don't know				13 (9%)
Q4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?				
	Don't know what the IEP scheme is				8 (6%)
	Yes				76 (55%)
	No				43 (31%)
	Don't know				10 (7%)
Q4.16	Please answer the following questions about this prison:				
		Yes	No		
	In the last six months have any members of staff physically restrained you (C&R)?	5 (4%)	132 (96%)		

In the last six months have you spent a night in the segregation/care and separation unit?	11 (8%)	122 (92%)
--	---------	-----------

Q4.17 Please answer the following questions about your religious beliefs:

	Yes	No	Don't know/N/A
Do you feel your religious beliefs are respected?	81 (60%)	13 (10%)	42 (31%)
Are you able to speak to a religious leader of your faith in private if you want to?	82 (62%)	8 (6%)	43 (32%)

Q4.18 Can you speak to a Listener at any time if you want to?

Yes	No	Don't know
92 (66%)	2 (1%)	46 (33%)

Q4.19 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?	114 (84%)	21 (16%)
Do most staff treat you with respect?	114 (86%)	19 (14%)

Section 5: Safety

Q5.1 Have you ever felt unsafe in this prison?

Yes	39 (29%)
No	97 (71%)

Q5.2 Do you feel unsafe in this prison at the moment?

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

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

Never felt unsafe	97 (72%)	<i>At mealtimes</i>	7 (5%)
<i>Everywhere</i>	13 (10%)	<i>At health services</i>	0 (0%)
<i>Segregation unit</i>	0 (0%)	<i>Visit's area</i>	0 (0%)
<i>Association areas</i>	7 (5%)	<i>In wing showers</i>	10 (7%)
<i>Reception area</i>	0 (0%)	<i>In gym showers</i>	5 (4%)
<i>At the gym</i>	6 (4%)	<i>In corridors/stairwells</i>	6 (4%)
<i>In an exercise yard</i>	11 (8%)	<i>On your landing/wing</i>	6 (4%)
<i>At work</i>	3 (2%)	<i>In your cell</i>	7 (5%)
<i>During movement</i>	10 (7%)	<i>At religious services</i>	0 (0%)
<i>At education</i>	1 (1%)		

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

Yes	19 (14%)
No	115 (86%)

- 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> | 10 (7%) | <i>Because of your sexuality.....</i> | 0 (0%) |
| <i>Physical abuse (being hit, kicked or assaulted).....</i> | 5 (4%) | <i>Because you have a disability....</i> | 0 (0%) |
| <i>Sexual abuse.....</i> | 1 (1%) | <i>Because of your religion/religious beliefs.....</i> | 2 (1%) |
| <i>Because of your race or ethnic origin.....</i> | 2 (1%) | <i>Because of your age.....</i> | 5 (4%) |
| <i>Because of drugs.....</i> | 3 (2%) | <i>Being from a different part of the country than others.....</i> | 3 (2%) |
| <i>Having your canteen/property taken.....</i> | 2 (1%) | <i>Because of your offence/crime...</i> | 1 (1%) |
| <i>Because you were new here.....</i> | 3 (2%) | <i>Because of gang related issues.</i> | 4 (3%) |
- Q5.6 Have you been victimised by a member of staff or group of staff here?**
- | | |
|----------|-----------|
| Yes..... | 22 (16%) |
| No..... | 113 (84%) |
- 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> | 10 (7%) | <i>Because you have a disability....</i> | 2 (1%) |
| <i>Physical abuse (being hit, kicked or assaulted).....</i> | 2 (1%) | <i>Because of your religion/religious beliefs.....</i> | 0 (0%) |
| <i>Sexual abuse.....</i> | 1 (1%) | <i>Because of your age.....</i> | 0 (0%) |
| <i>Because of your race or ethnic origin.....</i> | 3 (2%) | <i>Being from a different part of the country than others.....</i> | 3 (2%) |
| <i>Because of drugs.....</i> | 3 (2%) | <i>Because of your offence/crime...</i> | 3 (2%) |
| <i>Because you were new here.....</i> | 3 (2%) | <i>Because of gang related issues.</i> | 3 (2%) |
| <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 | 104 (79%) |
| Yes..... | 9 (7%) |
| No..... | 19 (14%) |
- Q5.9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?**
- | | |
|----------|-----------|
| Yes..... | 30 (22%) |
| No..... | 104 (78%) |
- Q5.10 Have you ever felt threatened or intimidated by a member of staff/group of staff in here?**
- | | |
|----------|-----------|
| Yes..... | 20 (15%) |
| No..... | 115 (85%) |

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>
	37 (27%)	10 (7%)	16 (12%)	0 (0%)	9 (7%)	66 (48%)

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	18 (13%)	6 (4%)	44 (32%)	25 (18%)	38 (28%)	7 (5%)
The nurse	15 (11%)	13 (10%)	59 (43%)	24 (18%)	21 (15%)	4 (3%)
The dentist	22 (16%)	3 (2%)	19 (14%)	18 (13%)	39 (28%)	36 (26%)
The optician	41 (31%)	3 (2%)	14 (11%)	21 (16%)	28 (21%)	26 (20%)
Q6.2	Are you able to see a pharmacist?					
	Yes					58 (47%)
	No					65 (53%)
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	21 (15%)	14 (10%)	53 (39%)	27 (20%)	13 (9%)	9 (7%)
The nurse	14 (10%)	24 (18%)	57 (42%)	25 (18%)	9 (7%)	7 (5%)
The dentist	38 (29%)	4 (3%)	25 (19%)	30 (23%)	13 (10%)	22 (17%)
The optician	60 (46%)	5 (4%)	20 (15%)	27 (21%)	7 (5%)	11 (8%)
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>
	9 (7%)	13 (10%)	47 (35%)	31 (23%)	27 (20%)	9 (7%)
Q6.5	Are you currently taking medication?					
	Yes					59 (42%)
	No					80 (58%)
Q6.6	If you are taking medication, are you allowed to keep possession of your medication in your own cell?					
	<i>Not taking medication</i>					80 (58%)
	Yes					48 (35%)
	No					9 (7%)
Q6.7	Do you feel you have any emotional well-being/mental health issues?					
	Yes					35 (25%)
	No					105 (75%)
Q6.8	Are your emotional well-being/mental health issues being addressed by any of the following? (Please tick all that apply to you.)					
	<i>Do not have any issues/not receiving any help</i>					118 (87%)
	<i>Doctor</i>					17 (13%)
	<i>Nurse</i>					3 (2%)
	<i>Psychiatrist</i>					4 (3%)
	<i>Mental health in-reach team</i>					4 (3%)

Counsellor..... 0 (0%)
 Other..... 3 (2%)

Q6.9 Did you have a problem with either of the following when you came into this prison?

	Yes	No
Drugs	28 (21%)	104 (79%)
Alcohol	24 (18%)	106 (82%)

Q6.10 Have you developed a problem with drugs since you have been in this prison?

Yes..... 7 (5%)
 No..... 129 (95%)

Q6.11 Do you know who to contact in this prison to get help with your drug or alcohol problem?

Yes..... 37 (27%)
 No..... 3 (2%)
Did not/do not have a drug or alcohol problem 97 (71%)

Q6.12 Have you received any intervention or help (including, CARATs, Health Services etc.) for your drug/alcohol problem, while in this prison?

Yes..... 32 (23%)
 No..... 8 (6%)
Did not / do not have a drug or alcohol problem 97 (71%)

Q6.13 Was the intervention or help you received, while in this prison, helpful?

Yes..... 27 (20%)
 No..... 4 (3%)
Did not have a problem/have not received help..... 105 (77%)

Q6.14 Do you think you will have a problem with either of the following when you leave this prison?

	Yes	No	Don't know
Drugs	5 (4%)	116 (85%)	16 (12%)
Alcohol	7 (5%)	114 (85%)	13 (10%)

Q6.15 Do you know who in this prison can help you contact external drug or alcohol agencies on release?

Yes..... 15 (11%)
 No..... 10 (7%)
 N/A..... 110 (81%)

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 85 (63%)

Vocational or skills training.....	13 (10%)
Education (including basic skills).....	38 (28%)
Offending behaviour programmes.....	17 (13%)
Not involved in any of these	19 (14%)

Q7.2 If you have been involved in any of the following, while in this prison, do you think it will help you on release?

	Not been involved	Yes	No	Don't know
Prison job	16 (15%)	47 (44%)	34 (32%)	10 (9%)
Vocational or skills training	23 (31%)	25 (34%)	18 (24%)	8 (11%)
Education (including basic skills)	18 (19%)	48 (51%)	19 (20%)	9 (10%)
Offending behaviour programmes	19 (25%)	29 (39%)	20 (27%)	7 (9%)

Q7.3 How often do you go to the library?

Don't want to go	4 (3%)
<i>Never</i>	3 (2%)
<i>Less than once a week</i>	35 (26%)
<i>About once a week</i>	66 (49%)
<i>More than once a week</i>	23 (17%)
<i>Don't know</i>	4 (3%)

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
26 (19%)	13 (10%)	5 (4%)	26 (19%)	61 (45%)	2 (1%)	2 (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
12 (9%)	7 (5%)	21 (16%)	50 (37%)	43 (32%)	2 (1%)

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>	21 (16%)
<i>2 to less than 4 hours</i>	19 (14%)
<i>4 to less than 6 hours</i>	39 (29%)
<i>6 to less than 8 hours</i>	30 (22%)
<i>8 to less than 10 hours</i>	12 (9%)
<i>10 hours or more</i>	8 (6%)
<i>Don't know</i>	6 (4%)

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
7 (5%)	5 (4%)	6 (4%)	52 (39%)	56 (42%)	8 (6%)

Q7.8 How often do staff normally speak to you during association time?

Do not go on association	13 (9%)
<i>Never</i>	25 (18%)
<i>Rarely</i>	31 (23%)
<i>Some of the time</i>	42 (31%)

Most of the time.....	20 (15%)
All of the time.....	6 (4%)

Section 8: Resettlement

Q8.1	When did you first meet your personal officer?				
	<i>Still have not met him/her</i>	23	(17%)		
	<i>In the first week</i>	53	(39%)		
	<i>More than a week</i>	42	(31%)		
	<i>Don't remember</i>	19	(14%)		
Q8.2	How helpful do you think your personal officer is?				
	<i>Do not have a personal officer/ still have not met him/her</i>				
	<i>Very helpful</i>	22	(16%)		
	<i>Helpful</i>	54	(40%)		
	<i>Neither</i>	21	(16%)		
	<i>Not very helpful</i>	9	(7%)		
	<i>Not at all helpful</i>	6	(4%)		
Q8.3	Do you have a sentence plan/OASys?				
	<i>Not sentenced</i>	0	(0%)		
	<i>Yes</i>	89	(65%)		
	<i>No</i>	48	(35%)		
Q8.4	How involved were you in the development of your sentence plan?				
	<i>Do not have a sentence plan/OASys</i>	48	(36%)		
	<i>Very involved</i>	23	(17%)		
	<i>Involved</i>	23	(17%)		
	<i>Neither</i>	12	(9%)		
	<i>Not very involved</i>	10	(7%)		
	<i>Not at all involved</i>	18	(13%)		
Q8.5	Can you achieve all or some of your sentence plan targets in this prison?				
	<i>Do not have a sentence plan/OASys</i>	48	(36%)		
	<i>Yes</i>	67	(50%)		
	<i>No</i>	19	(14%)		
Q8.6	Are there plans for you to achieve all/some of your sentence plan targets in another prison?				
	<i>Do not have a sentence plan/OASys</i>	48	(36%)		
	<i>Yes</i>	25	(19%)		
	<i>No</i>	61	(46%)		
Q8.7	Do you feel that any member of staff has helped you to address your offending behaviour while at this prison?				
	<i>Not sentenced</i>	0	(0%)		
	<i>Yes</i>	43	(33%)		
	<i>No</i>	89	(67%)		
Q8.8	Do you feel that any member of staff has helped you to prepare for your release?				
	<i>Yes</i>	25	(19%)		

- No..... 109 (81%)
- Q8.9 Have you had any problems with sending or receiving mail?**
 Yes 42 (31%)
 No..... 87 (64%)
 Don't know..... 6 (4%)
- Q8.10 Have you had any problems getting access to the telephones?**
 Yes 34 (25%)
 No..... 101 (74%)
 Don't know..... 1 (1%)
- Q8.11 Did you have a visit in the first week that you were here?**
Not been here a week yet 4 (3%)
 Yes 10 (7%)
 No..... 120 (88%)
 Don't remember..... 3 (2%)
- Q8.12 How many visits did you receive in the last week?**
- | <i>Not been in a week</i> | <i>0</i> | <i>1 to 2</i> | <i>3 to 4</i> | <i>5 or more</i> |
|---------------------------|-----------|---------------|---------------|------------------|
| 4 (3%) | 102 (80%) | 20 (16%) | 1 (1%) | 0 (0%) |
- Q8.13 How are you and your family/friends usually treated by visits staff?**
Not had any visits 58 (43%)
 Very well..... 15 (11%)
 Well 26 (19%)
 Neither 13 (10%)
 Badly 3 (2%)
 Very badly 4 (3%)
 Don't know..... 15 (11%)
- Q8.14 Have you been helped to maintain contact with your family/friends while in this prison?**
 Yes 45 (35%)
 No..... 84 (65%)
- Q8.15 Do you know who to contact to get help with the following within this prison? (Please tick all that apply to you.)**
- | | |
|--|--|
| Don't know who to contact .. 54 (47%) | <i>Help with your finances in preparation for release</i> 35 (30%) |
| <i>Maintaining good relationships</i> 21 (18%) | <i>Claiming benefits on release</i> ... 45 (39%) |
| <i>Avoiding bad relationships</i> 19 (17%) | <i>Arranging a place at college/continuing education on release</i> 26 (23%) |
| <i>Finding a job on release</i> 39 (34%) | <i>Continuity of health services on release</i> 27 (23%) |
| <i>Finding accommodation on release</i> 44 (38%) | <i>Opening a bank account</i> 40 (35%) |

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 (47%)	<i>Help with your finances in preparation for release</i>	29 (23%)
<i>Maintaining good relationships</i>	9 (7%)	<i>Claiming benefits on release ...</i>	25 (20%)
<i>Avoiding bad relationships</i>	8 (6%)	<i>Arranging a place at college/continuing education on release</i>	15 (12%)
<i>Finding a job on release</i>	51 (40%)	<i>Continuity of health services on release</i>	9 (7%)
<i>Finding accommodation on release</i>	48 (38%)	<i>Opening a bank account</i>	33 (26%)

Q8.17 Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?

<i>Not sentenced</i>	0 (0%)
<i>Yes</i>	67 (52%)
<i>No</i>	61 (48%)

Main comparator and comparator to last time



Prisoner survey responses HMP Isle of Wight 2010

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

Key to tables

		HMP Isle of Wight	B and C category trainers comparator
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		463	5602
SECTION 1: General information			
2	Are you under 21 years of age?	1%	2%
3a	Are you sentenced?	98%	99%
3b	Are you on recall?	7%	8%
4a	Is your sentence less than 12 months?	2%	5%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	21%	7%
5	Do you have six months or less to serve?	20%	34%
6	Have you been in this prison less than a month?	4%	6%
7	Are you a foreign national?	13%	12%
8	Is English your first language?	90%	90%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	21%	27%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	3%	4%
11	Are you Muslim?	7%	11%
12	Are you homosexual/gay or bisexual?	5%	4%
13	Do you consider yourself to have a disability?	26%	15%
14	Is this your first time in prison?	40%	34%
15	Have you been in more than five prisons this time?	13%	14%
16	Do you have any children under the age of 18?	47%	53%
SECTION 2: Transfers and escorts			
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?	56%	53%
1b	Was your personal safety during the journey good/very good?	63%	62%
1c	Was the comfort of the van good/very good?	14%	18%
1d	Was the attention paid to your health needs good/very good?	32%	32%
1e	Was the frequency of toilet breaks good/very good?	9%	13%
2	Did you spend more than four hours in the van?	25%	9%
3	Were you treated well/very well by the escort staff?	68%	66%
4a	Did you know where you were going when you left court or when transferred from another prison?	80%	83%
4b	Before you arrived here did you receive any written information about what would happen to you?	16%	17%
4c	When you first arrived here did your property arrive at the same time as you?	86%	88%

Key to tables

Main comparator and comparator to last time

		HMP Isle of Wight	B and C category trainers comparator
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
1	In the first 24 hours, did staff ask you if you needed help/support with the following:		
1b	Problems with loss of property?	12%	14%
1c	Housing problems?	17%	19%
1d	Problems contacting employers?	9%	10%
1e	Problems contacting family?	39%	45%
1f	Problems ensuring dependants were looked after?	9%	11%
1g	Money problems?	13%	15%
1h	Problems of feeling depressed/suicidal?	44%	45%
1i	Health problems?	58%	58%
1j	Problems in needing protection from other prisoners?	17%	16%
1k	Problems accessing telephone numbers?	30%	36%
2	When you first arrived:		
2a	Did you have any problems?	63%	59%
2b	Did you have any problems with loss of property?	16%	15%
2c	Did you have any housing problems?	11%	15%
2d	Did you have any problems contacting employers?	4%	4%
2e	Did you have any problems contacting family?	28%	21%
2f	Did you have any problems ensuring dependants were being looked after?	5%	5%
2g	Did you have any money worries?	12%	16%
2h	Did you have any problems with feeling depressed or suicidal?	18%	13%
2i	Did you have any health problems?	25%	20%
2j	Did you have any problems with needing protection from other prisoners?	8%	5%
2k	Did you have problems accessing telephone numbers?	24%	21%
3a	Were you seen by a member of health services in reception?	81%	87%
3b	When you were searched in reception, was this carried out in a respectful way?	80%	76%
4	Were you treated well/very well in reception?	69%	70%
5	On your day of arrival, were you offered any of the following information:		
5a	Information about what was going to happen to you?	48%	50%
5b	Information about what support was available for people feeling depressed or suicidal?	46%	44%
5c	Information about how to make routine requests?	38%	40%
5d	Information about your entitlement to visits?	37%	45%
5e	Information about health services?	52%	57%
5f	Information about the chaplaincy?	43%	49%
6	On your day of arrival, were you offered any of the following:		
6a	A smokers'/non-smokers' pack?	72%	78%
6b	The opportunity to have a shower?	34%	41%
6c	The opportunity to make a free telephone call?	38%	50%
6d	Something to eat?	68%	76%
7	Within the first 24 hours, did you meet any of the following people:		
7a	The chaplain or a religious leader?	36%	45%
7b	Someone from health services?	73%	74%

Key to tables

Main comparator and comparator to last time

		HMP Isle of Wight	Band C category trainers comparator
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
7c	A Listener/Samaritans?	24%	27%
8	Did you have access to the prison shop/canteen within the first 24 hours?	7%	22%
9	Did you feel safe on your first night here?	75%	83%
10	Have you been on an induction course?	91%	92%
For those who have been on an induction course:			
11	Did the course cover everything you needed to know about the prison?	66%	64%
SECTION 4: Legal rights and respectful custody			
1	In terms of your legal rights, is it easy/very easy to:		
1a	Communicate with your solicitor or legal representative?	53%	52%
1b	Attend legal visits?	45%	56%
1c	Obtain bail information?	15%	17%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	40%	43%
3	For the wing/unit you are currently on:		
3a	Are you normally offered enough clean, suitable clothes for the week?	74%	58%
3b	Are you normally able to have a shower every day?	88%	95%
3c	Do you normally receive clean sheets every week?	88%	78%
3d	Do you normally get cell cleaning materials every week?	81%	76%
3e	Is your cell call bell normally answered within five minutes?	46%	41%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71%	69%
3g	Can you normally get your stored property if you need to?	27%	30%
4	Is the food in this prison good/very good?	22%	30%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	50%	47%
6a	Is it easy/very easy to get a complaints form?	88%	86%
6b	Is it easy/very easy to get an application form?	90%	90%
7	Have you made an application?	91%	89%
For those who have made an application:			
8a	Do you feel applications are dealt with fairly?	66%	58%
8b	Do you feel applications are dealt with promptly (within seven days)?	51%	52%
9	Have you made a complaint?	53%	57%
For those who have made a complaint:			
10a	Do you feel complaints are dealt with fairly?	36%	34%
10b	Do you feel complaints are dealt with promptly (within seven days)?	37%	39%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	27%	25%
10c	Were you given information about how to make an appeal?	27%	30%
12	Is it easy/very easy to see the Independent Monitoring Board?	26%	38%
13	Are you on the enhanced (top) level of the IEP scheme?	63%	61%
14	Do you feel you have been treated fairly in your experience of the IEP scheme?	55%	58%
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	48%
16a	In the last six months have any members of staff physically restrained you (C&R)?	4%	6%
16b	In the last six months have you spent a night in the segregation/care and separation unit?	12%	11%
13a	Do you feel your religious beliefs are respected?	58%	54%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	58%	59%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight	B and C category trainers comparator
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
14	Are you able to speak to a Listener at any time if you want to?	67%	61%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	84%	73%
15b	Do most staff, in this prison, treat you with respect?	83%	74%
SECTION 5: Safety			
1	Have you ever felt unsafe in this prison?	38%	32%
2	Do you feel unsafe in this prison at the moment?	16%	14%
4	Have you been victimised by another prisoner?	24%	20%
5	Since you have been here, has another prisoner:		
5a	Made insulting remarks about you, your family or friends?	11%	10%
5b	Hit, kicked or assaulted you?	7%	6%
5c	Sexually abused you?	2%	1%
5d	Victimised you because of your race or ethnic origin?	4%	4%
5e	Victimised you because of drugs?	3%	3%
5f	Taken your canteen/property?	5%	4%
5g	Victimised you because you were new here?	5%	4%
5h	Victimised you because of your sexuality?	2%	1%
5i	Victimised you because you have a disability?	3%	2%
5j	Victimised you because of your religion/religious beliefs?	4%	3%
5k	Victimised you because of your age?	4%	2%
5l	Victimised you because you were from a different part of the country?	3%	5%
5m	Victimised you because of your offence/crime?	7%	3%
5n	Victimised you because of gang-related issues?	3%	3%
6	Have you been victimised by a member of staff?	25%	23%
7	Since you have been here, has a member of staff:		
7a	Made insulting remarks about you, your family or friends?	10%	10%
7b	Hit, kicked or assaulted you?	2%	3%
7c	Sexually abused you?	1%	1%
7d	Victimised you because of your race or ethnic origin?	5%	5%
7e	Victimised you because of drugs?	3%	3%
7f	Victimised you because you were new here?	4%	5%
7g	Victimised you because of your sexuality?	1%	1%
7h	Victimised you because you have a disability?	2%	2%
7i	Victimised you because of your religion/religious beliefs?	3%	3%
7j	Victimised you because of your age?	2%	2%
7k	Victimised you because you were from a different part of the country?	2%	5%
7l	Victimised you because of your offence/crime?	8%	4%
7m	Victimised you because of gang-related issues?	3%	2%
For those who have been victimised by staff or other prisoners:			
8	Did you report any victimisation that you have experienced?	47%	39%
9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	29%	22%
10	Have you ever felt threatened or intimidated by a member of staff in here?	22%	19%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight	B and C category trainers comparator
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
11	Is it easy/very easy to get illegal drugs in this prison?	26%	33%
SECTION 6: Health services			
1a	Is it easy/very easy to see the doctor?	34%	39%
1b	Is it easy/very easy to see the nurse?	53%	62%
1c	Is it easy/very easy to see the dentist?	12%	14%
1d	Is it easy/very easy to see the optician?	9%	17%
2	Are you able to see a pharmacist?	41%	54%
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:			
3a	The doctor?	59%	50%
3b	The nurse?	63%	63%
3c	The dentist?	40%	44%
3d	The optician?	43%	46%
4	The overall quality of health services?	39%	44%
5	Are you currently taking medication?	56%	43%
For those currently taking medication:			
6	Are you allowed to keep possession of your medication in your own cell?	81%	87%
7	Do you feel you have any emotional well-being/mental health issues?	28%	24%
For those with emotional well-being/mental health issues, are these being addressed by any of the following:			
8a	Not receiving any help?	35%	34%
8b	A doctor?	41%	31%
8c	A nurse?	16%	18%
8d	A psychiatrist?	22%	19%
8e	The mental health in-reach team?	20%	31%
8f	A counsellor?	4%	12%
9a	Did you have a drug problem when you came into this prison?	17%	19%
9b	Did you have an alcohol problem when you came into this prison?	16%	13%
10a	Have you developed a drug problem since you have been in this prison?	5%	10%
For those with drug or alcohol problems:			
11	Do you know who to contact in this prison for help?	85%	86%
12	Have you received any help or intervention while in this prison?	83%	75%
For those who have received help or intervention with their drug or alcohol problem:			
13	Was this intervention or help useful?	79%	75%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	14%	21%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	14%	15%
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?	55%	58%

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better	HMP Isle of Wight	B and C category trainers comparator
Any percentage highlighted in blue is significantly worse		
Any percentage highlighted in orange shows a significant difference in prisoners' background details		
Percentages which are not highlighted show there is no significant difference		
SECTION 7: Purposeful activity		
1 Are you currently involved in any of the following activities:		
1a A prison job?	68%	65%
1b Vocational or skills training?	13%	18%
1c Education (including basic skills)?	29%	31%
1d Offending behaviour programmes?	16%	18%
2ai Have you had a job while in this prison?	88%	83%
For those who have had a job while in this prison:		
2aii Do you feel the job will help you on release?	47%	47%
2bi Have you been involved in vocational or skills training while in this prison?	76%	70%
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%	65%
2ci Have you been involved in education while in this prison?	84%	77%
For those who have been involved in education while in this prison:		
2cii Do you feel the education will help you on release?	65%	68%
2di Have you been involved in offending behaviour programmes while in this prison?	76%	69%
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?	52%	62%
3 Do you go to the library at least once a week?	58%	45%
4 On average, do you go to the gym at least twice a week?	53%	56%
5 On average, do you go outside for exercise three or more times a week?	45%	52%
6 On average, do you spend 10 or more hours out of your cell on a weekday?	8%	15%
7 On average, do you go on association more than five times each week?	57%	78%
8 Do staff normally speak to you most of the time/all of the time during association?	21%	20%
SECTION 8: Resettlement		
1 Do you have a personal officer?	88%	75%
For those with a personal officer:		
2 Do you think your personal officer is helpful/very helpful?	65%	62%
For those who are sentenced:		
3 Do you have a sentence plan?	79%	68%
For those with a sentence plan?		
4 Were you involved/very involved in the development of your plan?	46%	59%
5 Can you achieve some/all of your sentence plan targets in this prison?	56%	70%
6 Are there plans for you to achieve some/all your targets in another prison?	45%	41%
For those who are sentenced:		
7 Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	33%	34%
8 Do you feel that any member of staff has helped you to prepare for release?	16%	17%
9 Have you had any problems with sending or receiving mail?	41%	38%
10 Have you had any problems getting access to the telephones?	17%	20%
11 Did you have a visit in the first week that you were here?	9%	23%
12 Did you receive one or more visits in the last week?	15%	31%
For those who have had visits:		
13 How are you and your family/friends usually treated by visits staff? (Very well/well)	54%	54%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight	B and C category trainers comparator
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
14	Have you been helped to maintain contact with family/friends while in this prison?	29%	37%
15	Do you know who to contact within this prison to get help with the following:		
15b	Maintaining good relationships?	19%	17%
15c	Avoiding bad relationships?	16%	13%
15d	Finding a job on release?	25%	36%
15e	Finding accommodation on release?	29%	39%
15f	Money/finances on release?	24%	27%
15g	Claiming benefits on release?	29%	39%
15h	Arranging a place at college/continuing education on release?	18%	27%
15i	Accessing health services on release?	21%	29%
15j	Opening a bank account on release?	31%	26%
16	Do you think you will have a problem with any of the following on release from prison?		
16b	Maintaining good relationships?	12%	12%
16c	Avoiding bad relationships?	11%	12%
16d	Finding a job?	43%	44%
16e	Finding accommodation?	38%	37%
16f	Money/finances?	26%	33%
16g	Claiming benefits?	27%	28%
16h	Arranging a place at college/continuing education?	17%	22%
16i	Accessing health services?	17%	17%
16j	Opening a bank account?	28%	31%
For those who are sentenced:			
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	56%	57%

Main comparator and comparator to last time



Prisoner survey responses HMP Isle of Wight (Parkhurst) 2010

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

Key to tables

		HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		151	1018	151	120
SECTION 1: General information					
2	Are you under 21 years of age?	3%	0%	3%	3%
3a	Are you sentenced?	93%	100%	93%	98%
3b	Are you on recall?	2%	2%	2%	3%
4a	Is your sentence less than 12 months?	0%	0%	0%	0%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	23%	17%	23%	21%
5	Do you have six months or less to serve?	11%	12%	11%	10%
6	Have you been in this prison less than a month?	1%	2%	1%	1%
7	Are you a foreign national?	21%	14%	21%	11%
8	Is English your first language?	88%	88%	88%	87%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	23%	32%	23%	25%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	4%	2%	4%	
11	Are you Muslim?	8%	16%	8%	11%
12	Are you homosexual/gay or bisexual?	1%	3%	1%	4%
13	Do you consider yourself to have a disability?	26%	16%	26%	22%
14	Is this your first time in prison?	47%	37%	47%	32%
15	Have you been in more than five prisons this time?	12%	17%	12%	18%
16	Do you have any children under the age of 18?	53%	51%	53%	45%
SECTION 2: Transfers and escorts					
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?	53%	50%	53%	64%
1b	Was your personal safety during the journey good/very good?	60%	58%	60%	56%
1c	Was the comfort of the van good/very good?	16%	18%	16%	27%
1d	Was the attention paid to your health needs good/very good?	32%	32%	32%	40%
1e	Was the frequency of toilet breaks good/very good?	12%	11%	12%	18%
2	Did you spend more than four hours in the van?	32%	13%	32%	29%
3	Were you treated well/very well by the escort staff?	60%	63%	60%	66%
4a	Did you know where you were going when you left court or when transferred from another prison?	71%	88%	71%	77%
4b	Before you arrived here did you receive any written information about what would happen to you?	12%	13%	12%	14%
4c	When you first arrived here did your property arrive at the same time as you?	81%	88%	81%	85%

Key to tables

Main comparator and comparator to last time

Key to tables		HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	10%	10%	10%	10%
1c	Housing problems?	14%	9%	14%	18%
1d	Problems contacting employers?	8%	5%	8%	7%
1e	Problems contacting family?	37%	41%	37%	40%
1f	Problems ensuring dependants were looked after?	9%	8%	9%	10%
1g	Money problems?	12%	10%	12%	12%
1h	Problems of feeling depressed/suicidal?	39%	39%	39%	41%
1i	Health problems?	51%	55%	51%	57%
1j	Problems in needing protection from other prisoners?	17%	15%	17%	23%
1k	Problems accessing phone numbers?	31%	32%	31%	32%
2	When you first arrived:				
2a	Did you have any problems?	69%	52%	69%	69%
2b	Did you have any problems with loss of property?	18%	18%	18%	22%
2c	Did you have any housing problems?	11%	7%	11%	9%
2d	Did you have any problems contacting employers?	4%	3%	4%	4%
2e	Did you have any problems contacting family?	37%	18%	37%	25%
2f	Did you have any problems ensuring dependants were being looked after?	7%	5%	7%	6%
2g	Did you have any money worries?	11%	13%	11%	17%
2h	Did you have any problems with feeling depressed or suicidal?	19%	10%	19%	23%
2i	Did you have any health problems?	22%	19%	22%	32%
2j	Did you have any problems with needing protection from other prisoners?	13%	6%	13%	12%
2k	Did you have problems accessing phone numbers?	29%	19%	29%	20%
3a	Were you seen by a member of health services in reception?	73%	78%	73%	82%
3b	When you were searched in reception, was this carried out in a respectful way?	77%	74%	77%	76%
4	Were you treated well/very well in reception?	65%	71%	65%	65%
5	On your day of arrival, were you offered any of the following information:				
5a	Information about what was going to happen to you?	41%	43%	41%	50%
5b	Information about what support was available for people feeling depressed or suicidal?	41%	38%	41%	49%
5c	Information about how to make routine requests?	32%	34%	32%	40%
5d	Information about your entitlement to visits?	32%	38%	32%	41%
5e	Information about health services?	42%	46%	42%	51%
5f	Information about the chaplaincy?	33%	39%	33%	50%
6	On your day of arrival, were you offered any of the following:				
6a	A smokers/non-smokers pack?	70%	55%	70%	76%
6b	The opportunity to have a shower?	35%	46%	35%	45%
6c	The opportunity to make a free telephone call?	24%	56%	24%	26%
6d	Something to eat?	69%	69%	69%	71%
7	Within the first 24 hours did you meet any of the following people:				
7a	The chaplain or a religious leader?	33%	34%	33%	35%
7b	Someone from health services?	63%	71%	63%	75%

Key to tables

Main comparator and comparator to last time

		HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
7c	A Listener/Samaritans?	27%	22%	27%	11%
8	Did you have access to the prison shop/canteen within the first 24 hours?	7%	22%	7%	6%
9	Did you feel safe on your first night here?	64%	81%	64%	65%
10	Have you been on an induction course?	82%	90%	82%	83%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	51%	60%	51%	50%
SECTION 4: Legal rights and respectful custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	46%	59%	46%	52%
1b	Attend legal visits?	38%	59%	38%	40%
1c	Obtain bail information?	11%	10%	11%	16%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	41%	49%	41%	51%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	74%	48%	74%	69%
3b	Are you normally able to have a shower every day?	90%	99%	90%	93%
3c	Do you normally receive clean sheets every week?	84%	58%	84%	77%
3d	Do you normally get cell cleaning materials every week?	88%	79%	88%	88%
3e	Is your cell call bell normally answered within five minutes?	51%	44%	51%	41%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	70%	71%	70%	74%
3g	Can you normally get your stored property if you need to?	32%	32%	32%	34%
4	Is the food in this prison good/very good?	24%	36%	24%	20%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	52%	45%	52%	37%
6a	Is it easy/very easy to get a complaints form?	86%	84%	86%	85%
6b	Is it easy/very easy to get an application form?	91%	89%	91%	96%
7	Have you made an application?	86%	93%	86%	96%
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	71%	49%	71%	57%
8b	Do you feel applications are dealt with promptly (within seven days)?	51%	49%	51%	52%
9	Have you made a complaint?	50%	68%	50%	67%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	35%	28%	35%	29%
10b	Do you feel complaints are dealt with promptly (within seven days)?	39%	32%	39%	30%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	28%	30%	28%	24%
10c	Were you given information about how to make an appeal?	24%	27%	24%	40%
12	Is it easy/very easy to see the Independent Monitoring Board?	19%	37%	19%	16%
13	Are you on the enhanced (top) level of the IEP scheme?	66%	85%	66%	
14	Do you feel you have been treated fairly in your experience of the IEP scheme?	55%	61%	55%	
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	41%	42%	
16a	In the last six months have any members of staff physically restrained you (C&R)?	8%	4%	8%	
16b	In the last six months have you spent a night in the segregation/care and separation unit?	18%	13%	18%	
13a	Do you feel your religious beliefs are respected?	61%	52%	61%	51%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	57%	61%	57%	52%

Main comparator and comparator to last time

Key to tables

		HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
14	Are you able to speak to a Listener at any time, if you want to?	60%	59%	60%	60%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	84%	69%	84%	69%
15b	Do most staff, in this prison, treat you with respect?	81%	74%	81%	69%
SECTION 5: Safety					
1	Have you ever felt unsafe in this prison?	46%	40%	46%	50%
2	Do you feel unsafe in this prison at the moment?	21%	19%	21%	29%
4	Have you been victimised by another prisoner?	29%	24%	29%	30%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks about you, your family or friends?	15%	14%	15%	15%
5b	Hit, kicked or assaulted you?	8%	6%	8%	13%
5c	Sexually abused you?	2%	1%	2%	3%
5d	Victimised you because of your race or ethnic origin?	3%	6%	3%	5%
5e	Victimised you because of drugs?	2%	3%	2%	6%
5f	Taken your canteen/property?	8%	5%	8%	8%
5g	Victimised you because you were new here?	9%	3%	9%	9%
5h	Victimised you because of your sexuality?	2%	1%	2%	3%
5i	Victimised you because you have a disability?	3%	3%	3%	6%
5j	Victimised you because of your religion/religious beliefs?	5%	4%	5%	5%
5k	Victimised you because of your age?	3%	4%	3%	
5l	Victimised you because you were from a different part of the country?	5%	6%	5%	6%
5m	Victimised you because of your offence/crime?	15%	5%	15%	6%
5n	Victimised you because of gang related issues?	3%	1%	3%	
6	Have you been victimised by a member of staff?	24%	29%	24%	37%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks about you, your family or friends?	8%	13%	8%	16%
7b	Hit, kicked or assaulted you?	3%	3%	3%	4%
7c	Sexually abused you?	1%	1%	1%	2%
7d	Victimised you because of your race or ethnic origin?	3%	9%	3%	13%
7e	Victimised you because of drugs?	6%	2%	6%	4%
7f	Victimised you because you were new here?	6%	5%	6%	9%
7g	Victimised you because of your sexuality?	1%	1%	1%	2%
7h	Victimised you because you have a disability?	2%	3%	2%	4%
7i	Victimised you because of your religion/religious beliefs?	2%	5%	2%	11%
7j	Victimised you because of your age?	3%	5%	3%	
7k	Victimised you because you were from a different part of the country?	3%	6%	3%	8%
7l	Victimised you because of your offence/crime?	9%	5%	9%	17%
7m	Victimised you because of gang related issues?	2%	2%	2%	
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	51%	44%	51%	46%
9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	35%	25%	35%	37%
10	Have you ever felt threatened or intimidated by a member of staff in here?	22%	25%	22%	34%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
11	Is it easy/very easy to get illegal drugs in this prison?	24%	32%	24%	29%
SECTION 6: Health services					
1a	Is it easy/very easy to see the doctor?	23%	35%	23%	21%
1b	Is it easy/very easy to see the nurse?	43%	57%	43%	40%
1c	Is it easy/very easy to see the dentist?	9%	13%	9%	18%
1d	Is it easy/very easy to see the optician?	7%	14%	7%	14%
2	Are you able to see a pharmacist?	42%	46%	42%	38%
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:					
3a	The doctor?	57%	38%	57%	54%
3b	The nurse?	62%	50%	62%	52%
3c	The dentist?	39%	41%	39%	43%
3d	The optician?	41%	41%	41%	54%
4	The overall quality of health services?	35%	31%	35%	34%
5	Are you currently taking medication?	60%	44%	60%	51%
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	80%	87%	80%	86%
7	Do you feel you have any emotional well being/mental health issues?	33%	23%	33%	33%
For those with emotional well-being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	25%	27%	25%	22%
8b	A doctor?	42%	29%	42%	39%
8c	A nurse?	17%	21%	17%	26%
8d	A psychiatrist?	28%	24%	28%	39%
8e	The mental health in-reach team?	20%	38%	20%	34%
8f	A counsellor?	5%	18%	5%	13%
9a	Did you have a drug problem when you came into this prison?	19%	12%	19%	20%
9b	Did you have an alcohol problem when you came into this prison?	14%	11%	14%	17%
10a	Have you developed a drug problem since you have been in this prison?	7%	7%	7%	6%
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	80%	82%	80%	87%
12	Have you received any help or intervention while in this prison?	81%	77%	81%	72%
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	86%	78%	86%	82%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	16%	11%	16%	21%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	17%	8%	17%	18%
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?	46%	49%	46%	65%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 7: Purposeful activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	71%	73%	71%	61%
1b	Vocational or skills training?	16%	17%	16%	16%
1c	Education (including basic skills)?	25%	37%	25%	34%
1d	Offending behaviour programmes?	18%	23%	18%	18%
2ai	Have you had a job while in this prison?	89%	82%	89%	
For those who have had a prison job while in this prison:					
2aii	Do you feel the job will help you on release?	41%	45%	41%	
2bi	Have you been involved in vocational or skills training while in this prison?	78%	54%	78%	
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?	56%	75%	56%	
2ci	Have you been involved in education while in this prison?	82%	74%	82%	
For those who have been involved in education while in this prison:					
2cii	Do you feel the education will help you on release?	61%	75%	61%	
2di	Have you been involved in offending behaviour programmes while in this prison?	75%	66%	75%	
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?	45%	76%	45%	
3	Do you go to the library at least once a week?	52%	43%	52%	50%
4	On average, do you go to the gym at least twice a week?	45%	64%	45%	43%
5	On average, do you go outside for exercise three or more times a week?	39%	52%	39%	25%
6	On average, do you spend ten or more hours out of your cell on a weekday?	8%	17%	8%	13%
7	On average, do you go on association more than five times each week?	74%	87%	74%	74%
8	Do staff normally speak to you most of the time/all of the time during association?	26%	26%	26%	25%
SECTION 8: Resettlement					
1	Do you have a personal officer?	90%	84%	90%	68%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	65%	60%	65%	53%
For those who are sentenced:					
3	Do you have a sentence plan?	88%	87%	88%	88%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	49%	58%	49%	41%
5	Can you achieve some/all of your sentence plan targets in this prison?	49%	71%	49%	43%
6	Are there plans for you to achieve some/all your targets in another prison?	53%	54%	53%	61%
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	30%	41%	30%	20%
8	Do you feel that any member of staff has helped you to prepare for release?	15%	13%	15%	15%
9	Have you had any problems with sending or receiving mail?	49%	39%	49%	56%
10	Have you had any problems getting access to the telephones?	16%	15%	16%	13%
11	Did you have a visit in the first week that you were here?	15%	26%	15%	17%
12	Did you receive one or more visits in the last week?	21%	31%	21%	20%
For those who have had visits:					
13	How are you and your family/ friends usually treated by visits staff? (Very well/well)	52%	55%	52%	

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight (Parkhurst)	Category B trainer comparator	HMP Isle of Wight (Parkhurst)	HMP Parkhurst 2008
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
14	Have you been helped to maintain contact with family/friends while in this prison?	30%	34%	30%	31%
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	18%	14%	18%	12%
15c	Avoiding bad relationships?	11%	12%	11%	13%
15d	Finding a job on release?	18%	21%	18%	27%
15e	Finding accommodation on release?	21%	25%	21%	30%
15f	With money/finances on release?	18%	19%	18%	22%
15g	Claiming benefits on release?	20%	25%	20%	27%
15h	Arranging a place at college/continuing education on release?	15%	19%	15%	20%
15i	Accessing health services on release?	18%	21%	18%	19%
15j	Opening a bank account on release?	22%	20%	22%	20%
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	14%	11%	14%	11%
16c	Avoiding bad relationships?	10%	9%	10%	13%
16d	Finding a job?	42%	40%	42%	34%
16e	Finding accommodation?	33%	32%	33%	36%
16f	Money/finances?	24%	28%	24%	24%
16g	Claiming benefits?	27%	24%	27%	29%
16h	Arranging a place at college/continuing education?	19%	20%	19%	15%
16i	Accessing health services?	20%	16%	20%	17%
16j	Opening a bank account?	23%	28%	23%	25%
For those who are sentenced:					
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	51%	66%	51%	44%

Diversity Analysis



Key question responses (ethnicity and nationality) HMP Isle of Wight (Parkhurst) 2010

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

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		34	116	30	112
1.3	Are you sentenced?	97%	91%	93%	92%
1.7	Are you a foreign national?	47%	14%		
1.8	Is English your first language?	69%	93%	50%	97%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?			50%	15%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	4%	3%	3%
1.11	Are you Muslim?	30%	1%	14%	6%
1.12	Do you consider yourself to have a disability?	21%	27%	22%	27%
1.13	Is this your first time in prison?	46%	47%	45%	49%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	26%	34%	37%	31%
2.3	Were you treated well/very well by the escort staff?	47%	64%	53%	61%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	53%	76%	62%	74%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	36%	38%	32%	38%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	29%	42%	25%	40%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	49%	52%	54%	48%
3.2a	Did you have any problems when you first arrived?	87%	63%	83%	64%
3.3a	Were you seen by a member of health care staff in reception?	60%	77%	62%	76%
3.3b	When you were searched in reception, was this carried out in a respectful way?	66%	81%	67%	78%
3.4	Were you treated well/very well in reception?	56%	68%	57%	69%
3.7b	Did you have access to someone from health care within the first 24 hours?	54%	66%	62%	65%
3.9	Did you feel safe on your first night here?	68%	63%	60%	66%
3.10	Have you been on an induction course?	82%	82%	84%	81%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	46%	46%	52%	46%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.3a	Are you normally offered enough clean, suitable clothes for the week?	62%	77%	76%	74%
4.3b	Are you normally able to have a shower every day?	91%	90%	90%	91%
4.3e	Is your cell call bell normally answered within five minutes?	42%	54%	55%	51%
4.4	Is the food in this prison good/very good?	26%	23%	20%	25%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	43%	54%	43%	56%
4.6a	Is it easy/very easy to get a complaints form?	88%	85%	87%	88%
4.6b	Is it easy/very easy to get an application form?	97%	89%	89%	93%
4.9	Have you made a complaint?	56%	49%	52%	51%
4.13	Are you on the enhanced (top) level of the IEP scheme?	64%	66%	57%	66%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	47%	57%	62%	52%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	29%	45%	43%	40%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	9%	8%	10%	8%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	21%	16%	16%	18%
4.17a	Do you feel your religious beliefs are respected?	61%	60%	57%	62%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	64%	55%	59%	59%
4.18	Are you able to speak to a Listener at any time if you want to?	53%	62%	57%	62%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	82%	85%	100%	82%
4.19b	Do most staff, in this prison, treat you with respect?	84%	81%	92%	80%
5.1	Have you ever felt unsafe in this prison?	37%	49%	39%	47%
5.2	Do you feel unsafe in this prison at the moment?	21%	21%	18%	20%
5.4	Have you been victimised by another prisoner?	32%	28%	29%	28%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	9%	2%	3%	4%
5.5i	Have you been victimised because you have a disability? (By prisoners)	0%	4%	0%	4%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	9%	4%	3%	6%
5.6	Have you been victimised by a member of staff?	36%	21%	33%	20%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	1%	7%	1%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
5.7h	Have you been victimised because you have a disability? (By staff)	0%	3%	0%	3%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	2%	0%	3%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	25%	38%	35%	35%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	36%	19%	23%	22%
5.11	Is it easy/very easy to get illegal drugs in this prison?	25%	23%	28%	23%
6.1a	Is it easy/very easy to see the doctor?	19%	24%	21%	25%
6.1b	Is it easy/ very easy to see the nurse?	36%	45%	47%	43%
6.2	Are you able to see a pharmacist?	43%	41%	66%	37%
6.5	Are you currently taking medication?	56%	61%	65%	56%
6.7	Do you feel you have any emotional well-being/mental health issues?	30%	33%	22%	37%
7.1a	Are you currently working in the prison?	68%	71%	61%	73%
7.1b	Are you currently undertaking vocational or skills training?	22%	14%	7%	20%
7.1c	Are you currently in education (including basic skills)?	45%	19%	25%	22%
7.1d	Are you currently taking part in an offending behaviour programme?	16%	19%	25%	16%
7.3	Do you go to the library at least once a week?	41%	55%	50%	51%
7.4	On average, do you go to the gym at least twice a week?	73%	37%	69%	37%
7.5	On average, do you go outside for exercise three or more times a week?	47%	37%	48%	37%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	3%	9%	10%	6%
7.7	On average, do you go on association more than five times each week?	74%	75%	83%	76%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	40%	22%	30%	27%
8.1	Do you have a personal officer?	82%	92%	90%	92%
8.9	Have you had any problems sending or receiving mail?	53%	48%	57%	48%
8.10	Have you had any problems getting access to the telephones?	18%	15%	14%	16%

Diversity Analysis - Disability



Key questions (disability analysis) HMP Isle of Wight (Parkurst) 2010

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		38	110
1.3	Are you sentenced?	89%	94%
1.7	Are you a foreign national?	17%	21%
1.8	Is English your first language?	95%	87%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	18%	24%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	8%	2%
1.11	Are you Muslim?	2%	7%
1.14	Is this your first time in prison?	44%	48%
2.1d	Was the attention paid to your health needs good/very good?	34%	32%
2.3	Were you treated well/very well by the escort staff?	55%	62%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	63%	75%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	40%	37%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	43%	39%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	57%	49%
3.2a	Did you have any problems when you first arrived?	77%	65%
3.3a	Were you seen by a member of health care staff in reception?	65%	75%
3.3b	When you were searched in reception, was this carried out in a respectful way?	74%	79%
3.4	Were you treated well/very well in reception?	61%	67%
3.7b	Did you have access to someone from health care within the first 24 hours?	61%	64%
3.9	Did you feel safe on your first night here?	53%	68%
3.10	Have you been on an induction course?	70%	85%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	40%	48%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	83%	70%
4.3b	Are you normally able to have a shower every day?	86%	92%
4.3e	Is your cell call bell normally answered within five minutes?	69%	45%
4.4	Is the food in this prison good/very good?	34%	21%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	52%	53%
4.6a	Is it easy/very easy to get a complaints form?	87%	85%
4.6b	Is it easy/very easy to get an application form?	86%	92%
4.9	Have you made a complaint?	53%	50%
4.13	Are you on the enhanced (top) level of the IEP scheme?	56%	69%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	56%	55%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	42%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	9%	8%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	29%	14%
4.17a	Do you feel your religious beliefs are respected?	68%	58%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	65%	54%
4.18	Are you able to speak to a Listener at any time if you want to?	70%	58%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	88%	83%
4.19b	Do most staff, in this prison, treat you with respect?	82%	81%
5.1	Have you ever felt unsafe in this prison?	48%	46%
5.2	Do you feel unsafe in this prison at the moment?	19%	22%
5.4	Have you been victimised by another prisoner?	33%	28%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	3%
5.5i	Have you been victimised because you have a disability? (By prisoners)	13%	0%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	5%
5.6	Have you been victimised by a member of staff?	29%	23%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	3%
5.7h	Have you been victimised because you have a disability? (By staff)	8%	0%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	2%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	39%	35%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	25%	22%
5.11	Is it easy/very easy to get illegal drugs in this prison?	19%	26%
6.1a	Is it easy/very easy to see the doctor?	25%	23%
6.1b	Is it easy/ very easy to see the nurse?	61%	38%
6.2	Are you able to see a pharmacist?	35%	43%
6.5	Are you currently taking medication?	89%	49%
6.7	Do you feel you have any emotional well-being/mental health issues?	51%	26%
7.1a	Are you currently working in the prison?	68%	72%
7.1b	Are you currently undertaking vocational or skills training?	18%	16%
7.1c	Are you currently in education (including basic skills)?	21%	25%
7.1d	Are you currently taking part in an offending behaviour programme?	15%	20%
7.3	Do you go to the library at least once a week?	42%	55%
7.4	On average, do you go to the gym at least twice a week?	17%	53%
7.5	On average, do you go outside for exercise three or more times a week?	37%	39%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	11%	7%
7.7	On average, do you go on association more than five times each week?	77%	73%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	36%	22%
8.1	Do you have a personal officer?	100%	87%
8.9	Have you had any problems sending or receiving mail?	37%	53%
8.10	Have you had any problems getting access to the telephones?	12%	18%



Diversity Analysis - Age
Key question responses **over 50** HMP Isle of Wight (Parkhurst) 2010

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

Key to tables

		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		34	114
1.3	Are you sentenced?	97%	91%
1.7	Are you a foreign national?	15%	24%
1.8	Is English your first language?	94%	86%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	24%	22%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	5%
1.11	Are you Muslim?	6%	8%
1.13	Do you consider yourself to have a disability?	44%	20%
1.14	Is this your first time in prison?	50%	47%
2.1d	Was the attention paid to your health needs good/very good?	42%	30%
2.3	Were you treated well/very well by the escort staff?	70%	56%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	64%	72%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	30%	39%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	34%	42%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	60%	49%
3.2a	Did you have any problems when you first arrived?	58%	72%
3.3a	Were you seen by a member of health care staff in reception?	64%	75%
3.3b	When you were searched in reception, was this carried out in a respectful way?	73%	78%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.4	Were you treated well/very well in reception?	68%	65%
3.7b	Did you have access to someone from health care within the first 24 hours?	56%	65%
3.9	Did you feel safe on your first night here?	68%	62%
3.10	Have you been on an induction course?	86%	82%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	48%	45%
4.3a	Are you normally offered enough clean, suitable clothes for the week?	86%	71%
4.3b	Are you normally able to have a shower every day?	94%	89%
4.3e	Is your cell call bell normally answered within five minutes?	67%	46%
4.4	Is the food in this prison good/very good?	30%	22%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	58%	51%
4.6a	Is it easy/very easy to get a complaints form?	94%	83%
4.6b	Is it easy/very easy to get an application form?	97%	88%
4.9	Have you made a complaint?	47%	51%
4.13	Are you on the enhanced (top) level of the IEP scheme?	59%	67%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	53%	55%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	26%	47%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	11%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	3%	22%
4.17a	Do you feel your religious beliefs are respected?	76%	56%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	77%	51%

Key to tables

Diversity Analysis - Age

		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.18	Are you able to speak to a Listener at any time if you want to?	76%	54%
4.15a	Is there a member of staff you can turn to for help if you have a problem in this prison?	91%	82%
4.15b	Do most staff, in this prison, treat you with respect?	94%	78%
5.1	Have you ever felt unsafe in this prison?	41%	49%
5.2	Do you feel unsafe in this prison at the moment?	12%	24%
5.4	Have you been victimised by another prisoner?	15%	34%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	5%
5.5i	Have you been victimised because you have a disability? (By prisoners)	3%	4%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	6%
5.5k	Have you been victimised because of your age? (By prisoners)	6%	3%
5.6	Have you been victimised by a member of staff?	12%	27%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	4%
5.7h	Have you been victimised because you have a disability? (By staff)	0%	3%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	3%
5.7j	Have you been victimised because of your age? (By staff)	0%	4%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	30%	38%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	15%	24%
5.11	Is it easy/very easy to get illegal drugs in this prison?	6%	29%
6.1a	Is it easy/very easy to see the doctor?	37%	18%
6.1b	Is it easy/ very easy to see the nurse?	58%	39%
6.2	Are you able to see a pharmacist?	42%	42%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
6.5	Are you currently taking medication?	68%	57%
6.7	Do you feel you have any emotional well-being/mental health issues?	21%	35%
7.1a	Are you currently working in the prison?	70%	70%
7.1b	Are you currently undertaking vocational or skills training?	18%	16%
7.1c	Are you currently in education (including basic skills)?	30%	23%
7.1d	Are you currently taking part in an offending behaviour programme?	9%	22%
7.3	Do you go to the library at least once a week?	40%	56%
7.4	On average, do you go to the gym at least twice a week?	18%	53%
7.5	On average, do you go outside for exercise three or more times a week?	46%	37%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	9%	7%
7.7	On average, do you go on association more than five times each week?	70%	76%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	38%	23%
8.1	Do you have a personal officer?	88%	91%
8.9	Have you had any problems sending or receiving mail?	32%	54%
8.10	Have you had any problems getting access to the telephones?	3%	20%

Main comparator and comparator to last time



Prisoner survey responses HMP Isle of Wight (Albany) 2010

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

Key to tables

		HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		167	851	167	101
SECTION 1: General information					
2	Are you under 21 years of age?	0%	0%	0%	0%
3a	Are you sentenced?	100%	100%	100%	100%
3b	Are you on recall?	2%	2%	2%	2%
4a	Is your sentence less than 12 months?	1%	0%	1%	0%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	36%	17%	36%	22%
5	Do you have six months or less to serve?	12%	12%	12%	10%
6	Have you been in this prison less than a month?	3%	2%	3%	
7	Are you a foreign national?	10%	14%	10%	6%
8	Is English your first language?	89%	88%	89%	95%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	16%	32%	16%	12%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	3%	2%	3%	
11	Are you Muslim?	7%	16%	7%	6%
12	Are you homosexual/gay or bisexual?	11%	3%	11%	17%
13	Do you consider yourself to have a disability?	40%	16%	40%	26%
14	Is this your first time in prison?	49%	37%	49%	55%
15	Have you been in more than five prisons this time?	11%	17%	11%	
16	Do you have any children under the age of 18?	35%	51%	35%	46%
SECTION 2: Transfers and escorts					
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%	50%	59%	61%
1b	Was your personal safety during the journey good/very good?	65%	58%	65%	66%
1c	Was the comfort of the van good/very good?	13%	18%	13%	22%
1d	Was the attention paid to your health needs good/very good?	30%	32%	30%	43%
1e	Was the frequency of toilet breaks good/very good?	7%	11%	7%	18%
2	Did you spend more than four hours in the van?	23%	13%	23%	30%
3	Were you treated well/very well by the escort staff?	70%	63%	70%	72%
4a	Did you know where you were going when you left court or when transferred from another prison?	78%	88%	78%	90%
4b	Before you arrived here, did you receive any written information about what would happen to you?	8%	13%	8%	11%
4c	When you first arrived here, did your property arrive at the same time as you?	88%	88%	88%	90%

Key to tables

Main comparator and comparator to last time

Key to tables		HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	9%	10%	9%	
1c	Housing problems?	8%	9%	8%	
1d	Problems contacting employers?	5%	5%	5%	
1e	Problems contacting family?	23%	41%	23%	
1f	Problems ensuring dependants were looked after?	8%	8%	8%	
1g	Money problems?	8%	10%	8%	
1h	Problems of feeling depressed/suicidal?	45%	39%	45%	
1i	Health problems?	61%	55%	61%	
1j	Problems in needing protection from other prisoners?	18%	15%	18%	
1k	Problems accessing telephone numbers?	23%	32%	23%	
2	When you first arrived:				
2a	Did you have any problems?	62%	52%	62%	53%
2b	Did you have any problems with loss of property?	14%	18%	14%	16%
2c	Did you have any housing problems?	4%	7%	4%	6%
2d	Did you have any problems contacting employers?	3%	3%	3%	1%
2e	Did you have any problems contacting family?	26%	18%	26%	21%
2f	Did you have any problems ensuring dependants were being looked after?	3%	5%	3%	3%
2g	Did you have any money worries?	10%	13%	10%	18%
2h	Did you have any problems with feeling depressed or suicidal?	23%	10%	23%	17%
2i	Did you have any health problems?	33%	19%	33%	23%
2j	Did you have any problems with needing protection from other prisoners?	6%	6%	6%	5%
2k	Did you have problems accessing telephone numbers?	26%	19%	26%	
3a	Were you seen by a member of health services in reception?	74%	78%	74%	70%
3b	When you were searched in reception, was this carried out in a respectful way?	76%	74%	76%	75%
4	Were you treated well/very well in reception?	70%	71%	70%	88%
5	On your day of arrival, were you offered any of the following information:				
5a	Information about what was going to happen to you?	42%	43%	42%	43%
5b	Information about what support was available for people feeling depressed or suicidal?	42%	38%	42%	47%
5c	Information about how to make routine requests?	29%	34%	29%	29%
5d	Information about your entitlement to visits?	25%	38%	25%	34%
5e	Information about health services?	40%	46%	40%	
5f	Information about the chaplaincy?	33%	39%	33%	
6	On your day of arrival, were you offered any of the following:				
6a	A smokers'/non-smokers' pack?	49%	55%	49%	59%
6b	The opportunity to have a shower?	23%	46%	23%	30%
6c	The opportunity to make a free telephone call?	13%	56%	13%	29%
6d	Something to eat?	55%	69%	55%	71%
7	Within the first 24 hours, did you meet any of the following people:				
7a	The chaplain or a religious leader?	20%	34%	20%	46%
7b	Someone from health services?	66%	71%	66%	63%

Key to tables

Main comparator and comparator to last time

Any percentage highlighted in green is significantly better		HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
7c	A Listener/Samaritans?	17%	22%	17%	33%
8	Did you have access to the prison shop/canteen within the first 24 hours?	8%	21%	8%	12%
9	Did you feel safe on your first night here?	77%	81%	77%	90%
10	Have you been on an induction course?	97%	90%	97%	98%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	72%	60%	72%	68%
SECTION 4: Legal rights and respectful custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	66%	59%	66%	57%
1b	Attend legal visits?	57%	59%	57%	47%
1c	Obtain bail information?	10%	10%	10%	13%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	48%	49%	48%	45%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	88%	48%	88%	85%
3b	Are you normally able to have a shower every day?	90%	99%	90%	97%
3c	Do you normally receive clean sheets every week?	91%	58%	91%	94%
3d	Do you normally get cell cleaning materials every week?	77%	79%	77%	76%
3e	Is your cell call bell normally answered within five minutes?	49%	44%	49%	46%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71%	71%	71%	82%
3g	Can you normally get your stored property, if you need to?	25%	32%	25%	48%
4	Is the food in this prison good/very good?	21%	37%	21%	20%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	41%	45%	41%	53%
6a	Is it easy/very easy to get a complaints form?	90%	84%	90%	86%
6b	Is it easy/very easy to get an application form?	91%	89%	91%	94%
7	Have you made an application?	93%	93%	93%	89%
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	59%	49%	59%	61%
8b	Do you feel applications are dealt with promptly (within seven days)?	53%	49%	53%	61%
9	Have you made a complaint?	62%	68%	62%	64%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	36%	28%	36%	39%
10b	Do you feel complaints are dealt with promptly (within seven days)?	44%	32%	44%	45%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	33%	30%	33%	21%
10c	Were you given information about how to make an appeal?	28%	27%	28%	33%
12	Is it easy/very easy to see the Independent Monitoring Board?	32%	37%	32%	38%
13	Are you on the enhanced (top) level of the IEP scheme?	58%	85%	58%	
14	Do you feel you have been treated fairly in your experience of the IEP scheme?	47%	61%	47%	
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	43%	41%	43%	
16a	In the last six months have any members of staff physically restrained you (C&R)?	1%	4%	1%	
16b	In the last six months have you spent a night in the segregation/care and separation unit?	10%	13%	10%	
13a	Do you feel your religious beliefs are respected?	53%	52%	53%	60%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	56%	61%	56%	54%

Main comparator and comparator to last time

Key to tables

		HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
14	Are you able to speak to a Listener at any time if you want to?	75%	59%	75%	75%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	83%	69%	83%	81%
15b	Do most staff, in this prison, treat you with respect?	82%	74%	82%	76%
SECTION 5: Safety					
1	Have you ever felt unsafe in this prison?	39%	40%	39%	32%
2	Do you feel unsafe in this prison at the moment?	12%	19%	12%	9%
4	Have you been victimised by another prisoner?	30%	24%	30%	32%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks about you, your family or friends?	12%	14%	12%	14%
5b	Hit, kicked or assaulted you?	8%	6%	8%	4%
5c	Sexually abused you?	3%	1%	3%	5%
5d	Victimised you because of your race or ethnic origin?	6%	6%	6%	7%
5e	Victimised you because of drugs?	4%	3%	4%	3%
5f	Taken your canteen/property?	5%	5%	5%	3%
5g	Victimised you because you were new here?	4%	3%	4%	7%
5h	Victimised you because of your sexuality?	4%	1%	4%	6%
5i	Victimised you because you have a disability?	5%	3%	5%	7%
5j	Victimised you because of your religion/religious beliefs?	5%	4%	5%	5%
5k	Victimised you because of your age?	4%	4%	4%	
5l	Victimised you because you were from a different part of the country?	2%	6%	2%	4%
5m	Victimised you because of your offence/crime?	7%	5%	7%	
5n	Victimised you because of gang-related issues?	3%	1%	3%	
6	Have you been victimised by a member of staff?	35%	29%	35%	26%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks about you, your family or friends?	14%	13%	14%	15%
7b	Hit, kicked or assaulted you?	3%	3%	3%	1%
7c	Sexually abused you?	0%	1%	0%	0%
7d	Victimised you because of your race or ethnic origin?	9%	9%	9%	4%
7e	Victimised you because of drugs?	2%	2%	2%	0%
7f	Victimised you because you were new here?	4%	5%	4%	5%
7g	Victimised you because of your sexuality?	3%	1%	3%	2%
7h	Victimised you because you have a disability?	4%	3%	4%	6%
7i	Victimised you because of your religion/religious beliefs?	6%	5%	6%	3%
7j	Victimised you because of your age?	3%	5%	3%	
7k	Victimised you because you were from a different part of the country?	2%	6%	2%	3%
7l	Victimised you because of your offence/crime?	14%	5%	14%	
7m	Victimised you because of gang-related issues?	3%	2%	3%	
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	50%	44%	50%	48%
9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	29%	25%	29%	30%
10	Have you ever felt threatened or intimidated by a member of staff in here?	30%	25%	30%	24%

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better		HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
	Percentages which are not highlighted show there is no significant difference				
11	Is it easy/very easy to get illegal drugs in this prison?	21%	32%	21%	10%
SECTION 6: Health services					
1a	Is it easy/very easy to see the doctor?	41%	35%	41%	
1b	Is it easy/very easy to see the nurse?	63%	57%	63%	
1c	Is it easy/very easy to see the dentist?	9%	13%	9%	
1d	Is it easy/very easy to see the optician?	8%	14%	8%	
2	Are you able to see a pharmacist?	34%	46%	34%	
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:					
3a	The doctor?	62%	38%	62%	85%
3b	The nurse?	61%	50%	61%	82%
3c	The dentist?	51%	41%	51%	79%
3d	The optician?	48%	41%	48%	72%
4	The overall quality of health services?	35%	31%	35%	58%
5	Are you currently taking medication?	67%	44%	67%	55%
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	78%	87%	78%	96%
7	Do you feel you have any emotional well-being/mental health issues?	27%	23%	27%	
For those with emotional well-being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	38%	29%	38%	
8b	A doctor?	34%	29%	34%	
8c	A nurse?	19%	21%	19%	
8d	A psychiatrist?	24%	24%	24%	
8e	The mental health in-reach team?	26%	38%	26%	
8f	A counsellor?	7%	18%	7%	
9a	Did you have a drug problem when you came into this prison?	12%	12%	12%	2%
9b	Did you have an alcohol problem when you came into this prison?	15%	11%	15%	7%
10a	Have you developed a drug problem since you have been in this prison?	4%	7%	4%	
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	82%	82%	82%	
12	Have you received any help or intervention while in this prison?	90%	77%	90%	
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	62%	78%	62%	
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	11%	11%	11%	4%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	9%	8%	9%	10%
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?	59%	49%	59%	19%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 7: Purposeful activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	71%	73%	71%	
1b	Vocational or skills training?	12%	17%	12%	
1c	Education (including basic skills)?	35%	37%	35%	
1d	Offending behaviour programmes?	17%	23%	17%	
2ai	Have you had a job while in this prison?	89%	82%	89%	
For those who have had a job while in this prison:					
2aii	Do you feel the job will help you on release?	48%	45%	48%	
2bi	Have you been involved in vocational or skills training while in this prison?	81%	54%	81%	
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?	60%	75%	60%	
2ci	Have you been involved in education while in this prison?	87%	74%	87%	
For those who have been involved in education while in this prison:					
2cii	Do you feel the education will help you on release?	71%	75%	71%	
2di	Have you been involved in offending behaviour programmes while in this prison?	78%	66%	78%	
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?	60%	76%	60%	
3	Do you go to the library at least once a week?	56%	44%	56%	53%
4	On average, do you go to the gym at least twice a week?	48%	64%	48%	44%
5	On average, do you go outside for exercise three or more times a week?	25%	52%	25%	37%
6	On average, do you spend 10 or more hours out of your cell on a weekday?	11%	17%	11%	15%
7	On average, do you go on association more than five times each week?	55%	87%	55%	56%
8	Do staff normally speak to you most of the time/all of the time during association?	19%	26%	19%	15%
SECTION 8: Resettlement					
1	Do you have a personal officer?	91%	84%	91%	87%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	61%	60%	61%	67%
For those who are sentenced:					
3	Do you have a sentence plan?	86%	87%	86%	59%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	37%	58%	37%	38%
5	Can you achieve some/all of your sentence plan targets in this prison?	44%	71%	44%	43%
6	Are there plans for you to achieve some/all your targets in another prison?	50%	54%	50%	43%
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	35%	41%	35%	38%
8	Do you feel that any member of staff has helped you to prepare for release?	15%	13%	15%	14%
9	Have you had any problems with sending or receiving mail?	44%	39%	44%	35%
10	Have you had any problems getting access to the telephones?	8%	15%	8%	10%
11	Did you have a visit in the first week that you were here?	5%	26%	5%	4%
12	Did you receive one or more visits in the last week?	8%	31%	8%	6%
For those who have had visits:					
13	How are you and your family/friends usually treated by visits staff? (Very well/ well)	57%	55%	57%	

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
		HMP Isle of Wight (Albany) 2010	Functional type comparator	HMP Isle of Wight (Albany) 2010	HMP Albany 2007
14	Have you been helped to maintain contact with family/friends while in this prison?	22%	34%	22%	
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	22%	14%	22%	
15c	Avoiding bad relationships?	18%	12%	18%	
15d	Finding a job on release?	23%	21%	23%	24%
15e	Finding accommodation on release?	27%	25%	27%	26%
15f	Money/finances on release?	23%	19%	23%	21%
15g	Claiming benefits on release?	26%	25%	26%	20%
15h	Arranging a place at college/continuing education on release?	17%	19%	17%	19%
15i	Accessing health services on release?	20%	21%	20%	24%
15j	Opening a bank account on release?	35%	20%	35%	20%
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	16%	11%	16%	
16c	Avoiding bad relationships?	15%	9%	15%	
16d	Finding a job?	46%	40%	46%	48%
16e	Finding accommodation?	42%	32%	42%	51%
16f	Money/finances?	31%	28%	31%	44%
16g	Claiming benefits?	33%	24%	33%	35%
16h	Arranging a place at college/continuing education?	20%	20%	20%	28%
16i	Accessing health services?	25%	16%	25%	28%
16j	Opening a bank account?	33%	28%	33%	36%
For those who are sentenced:					
17	Have you done anything or has anything happened to you here to make you less likely to offend in future?	65%	66%	65%	71%

Diversity Analysis



Key question responses (ethnicity and nationality) HMP Isle of Wight (Albany) 2010

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

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		27	139	15	143
1.3	Are you sentenced?	100%	99%	100%	100%
1.7	Are you a foreign national?	42%	4%		
1.8	Is English your first language?	60%	95%	39%	95%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?			67%	10%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	3%	0%	2%
1.11	Are you Muslim?	36%	1%	39%	2%
1.12	Do you consider yourself to have a disability?	29%	42%	29%	40%
1.13	Is this your first time in prison?	62%	46%	53%	48%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	23%	31%	50%	30%
2.3	Were you treated well/very well by the escort staff?	68%	70%	71%	70%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	54%	82%	65%	81%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	29%	21%	34%	21%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	38%	46%	34%	44%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	50%	63%	59%	60%
3.2a	Did you have any problems when you first arrived?	79%	59%	71%	60%
3.3a	Were you seen by a member of health care staff in reception?	88%	72%	94%	72%
3.3b	When you were searched in reception, was this carried out in a respectful way?	74%	76%	71%	77%
3.4	Were you treated well/very well in reception?	54%	74%	43%	74%
3.7b	Did you have access to someone from health care within the first 24 hours?	68%	66%	85%	67%
3.9	Did you feel safe on your first night here?	54%	81%	57%	80%
3.10	Have you been on an induction course?	88%	98%	100%	96%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	44%	71%	53%	70%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.3a	Are you normally offered enough clean, suitable clothes for the week?	73%	91%	80%	90%
4.3b	Are you normally able to have a shower every day?	92%	90%	94%	90%
4.3e	Is your cell call bell normally answered within five minutes?	74%	44%	53%	48%
4.4	Is the food in this prison good/very good?	16%	21%	27%	20%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	36%	42%	27%	44%
4.6a	Is it easy/very easy to get a complaints form?	84%	91%	85%	92%
4.6b	Is it easy/very easy to get an application form?	87%	91%	79%	93%
4.9	Have you made a complaint?	55%	63%	80%	59%
4.13	Are you on the enhanced (top) level of the IEP scheme?	46%	60%	39%	61%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	35%	50%	27%	51%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	29%	45%	15%	47%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	2%	0%	1%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	15%	10%	27%	9%
4.17a	Do you feel your religious beliefs are respected?	50%	53%	53%	51%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	72%	52%	67%	55%
4.18	Are you able to speak to a Listener at any time if you want to?	84%	74%	65%	77%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	81%	84%	94%	82%
4.19b	Do most staff, in this prison, treat you with respect?	65%	85%	53%	85%
5.1	Have you ever felt unsafe in this prison?	55%	35%	47%	37%
5.2	Do you feel unsafe in this prison at the moment?	26%	10%	14%	11%
5.4	Have you been victimised by another prisoner?	48%	27%	47%	29%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	26%	2%	33%	4%
5.5i	Have you been victimised because you have a disability? (By prisoners)	3%	5%	6%	5%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	19%	2%	27%	3%
5.6	Have you been victimised by a member of staff?	63%	29%	73%	30%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	29%	4%	61%	3%

Diversity Analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
5.7h	Have you been victimised because you have a disability? (By staff)	0%	4%	0%	4%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	26%	2%	27%	3%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	27%	29%	21%	29%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	52%	26%	50%	28%
5.11	Is it easy/very easy to get illegal drugs in this prison?	12%	22%	39%	20%
6.1a	Is it easy/very easy to see the doctor?	38%	41%	33%	42%
6.1b	Is it easy/very easy to see the nurse?	48%	66%	50%	66%
6.2	Are you able to see a pharmacist?	39%	33%	31%	34%
6.5	Are you currently taking medication?	62%	67%	80%	65%
6.7	Do you feel you have any emotional well-being/mental health issues?	32%	26%	35%	27%
7.1a	Are you currently working in the prison?	68%	71%	85%	70%
7.1b	Are you currently undertaking vocational or skills training?	24%	10%	21%	12%
7.1c	Are you currently in education (including basic skills)?	44%	33%	50%	34%
7.1d	Are you currently taking part in an offending behaviour programme?	20%	16%	29%	15%
7.3	Do you go to the library at least once a week?	60%	56%	67%	57%
7.4	On average, do you go to the gym at least twice a week?	73%	42%	73%	45%
7.5	On average, do you go outside for exercise three or more times a week?	43%	22%	33%	25%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	16%	11%	6%	12%
7.7	On average, do you go on association more than five times each week?	44%	58%	39%	58%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	17%	19%	7%	20%
8.1	Do you have a personal officer?	92%	91%	100%	90%
8.9	Have you had any problems sending or receiving mail?	40%	45%	33%	47%
8.10	Have you had any problems getting access to the telephones?	8%	9%	6%	7%

Diversity Analysis - Disability



Key questions (disability analysis) HMP Isle of Wight (Albany) 2010

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

Key to tables

Key to tables		Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		65	99
1.3	Are you sentenced?	99%	100%
1.7	Are you a foreign national?	7%	10%
1.8	Is English your first language?	95%	86%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	12%	19%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	5%	1%
1.11	Are you Muslim?	5%	7%
1.13	Do you consider yourself to have a disability?		
1.14	Is this your first time in prison?	49%	48%
2.1d	Was the attention paid to your health needs good/very good?	31%	29%
2.3	Were you treated well/very well by the escort staff?	77%	65%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	71%	83%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	22%	22%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	41%	46%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	59%	60%
3.2a	Did you have any problems when you first arrived?	69%	60%
3.3a	Were you seen by a member of health care staff in reception?	67%	79%
3.3b	When you were searched in reception, was this carried out in a respectful way?	70%	79%
3.4	Were you treated well/very well in reception?	68%	72%
3.7b	Did you have access to someone from health care within the first 24 hours?	61%	69%
3.9	Did you feel safe on your first night here?	66%	83%
3.10	Have you been on an induction course?	97%	97%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	62%	69%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	83%	90%
4.3b	Are you normally able to have a shower every day?	91%	90%
4.3e	Is your cell call bell normally answered within five minutes?	51%	47%
4.4	Is the food in this prison good/very good?	26%	16%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	47%	38%
4.6a	Is it easy/very easy to get a complaints form?	87%	92%
4.6b	Is it easy/very easy to get an application form?	87%	94%
4.9	Have you made a complaint?	62%	61%
4.13	Are you on the enhanced (top) level of the IEP scheme?	50%	63%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	41%	53%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	50%	39%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	1%	1%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	11%	10%
4.17a	Do you feel your religious beliefs are respected?	59%	49%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	57%	55%
4.18	Are you able to speak to a Listener at any time if you want to?	82%	71%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	87%	80%
4.19b	Do most staff, in this prison, treat you with respect?	77%	84%
5.1	Have you ever felt unsafe in this prison?	50%	32%
5.2	Do you feel unsafe in this prison at the moment?	20%	7%
5.4	Have you been victimised by another prisoner?	35%	28%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	8%
5.5i	Have you been victimised because you have a disability? (By prisoners)	13%	0%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	5%
5.6	Have you been victimised by a member of staff?	31%	38%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	8%
5.7h	Have you been victimised because you have a disability? (By staff)	8%	1%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	7%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	32%	27%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	26%	33%
5.11	Is it easy/very easy to get illegal drugs in this prison?	19%	23%
6.1a	Is it easy/very easy to see the doctor?	42%	40%
6.1b	Is it easy/ very easy to see the nurse?	62%	63%
6.2	Are you able to see a pharmacist?	27%	37%
6.5	Are you currently taking medication?	85%	54%
6.7	Do you feel you have any emotional well-being/mental health issues?	29%	27%
7.1a	Are you currently working in the prison?	55%	80%
7.1b	Are you currently undertaking vocational or skills training?	13%	12%
7.1c	Are you currently in education (including basic skills)?	27%	41%
7.1d	Are you currently taking part in an offending behaviour programme?	10%	21%
7.3	Do you go to the library at least once a week?	56%	56%
7.4	On average, do you go to the gym at least twice a week?	29%	60%
7.5	On average, do you go outside for exercise three or more times a week?	11%	35%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	9%	14%
7.7	On average, do you go on association more than five times each week?	52%	58%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	16%	21%
8.1	Do you have a personal officer?	89%	92%
8.9	Have you had any problems sending or receiving mail?	39%	48%
8.10	Have you had any problems getting access to the telephones?	5%	10%

Disability Analysis - Sexual Orientation



Key questions (sexual orientation analysis) HMP Isle of Wight (Albany) 2010

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

Key to tables

Key to tables		Consider themselves to be homosexual, bisexual or other	Consider themselves to be heterosexual
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		18	142
1.3	Are you sentenced?	100%	99%
1.7	Are you a foreign national?	5%	9%
1.8	Is English your first language?	100%	89%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	5%	16%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	2%
1.11	Are you Muslim?	0%	6%
1.13	Do you consider yourself to have a disability?	50%	38%
1.14	Is this your first time in prison?	29%	51%
2.1d	Was the attention paid to your health needs good/very good?	47%	27%
2.3	Were you treated well/very well by the escort staff?	76%	69%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	61%	81%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	5%	25%
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%	47%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	35%	65%
3.2a	Did you have any problems when you first arrived?	76%	59%
3.3a	Were you seen by a member of health care staff in reception?	56%	77%
3.3b	When you were searched in reception, was this carried out in a respectful way?	71%	77%
3.4	Were you treated well/very well in reception?	61%	72%
3.7b	Did you have access to someone from health care within the first 24 hours?	44%	70%
3.9	Did you feel safe on your first night here?	77%	76%
3.10	Have you been on an induction course?	100%	96%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	77%	66%

Disability Analysis - Sexual Orientation

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual, bisexual or other	Consider themselves to be heterosexual
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	95%	87%
4.3b	Are you normally able to have a shower every day?	100%	88%
4.3e	Is your cell call bell normally answered within five minutes?	50%	47%
4.4	Is the food in this prison good/very good?	0%	23%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	33%	42%
4.6a	Is it easy/very easy to get a complaints form?	95%	89%
4.6b	Is it easy/very easy to get an application form?	89%	91%
4.9	Have you made a complaint?	72%	61%
4.13	Are you on the enhanced (top) level of the IEP scheme?	77%	57%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	47%	49%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	66%	41%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	2%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	0%	12%
4.17a	Do you feel your religious beliefs are respected?	61%	52%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	72%	52%
4.18	Are you able to speak to a Listener at any time if you want to?	67%	77%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	95%	82%
4.19b	Do most staff, in this prison, treat you with respect?	88%	81%
5.1	Have you ever felt unsafe in this prison?	39%	38%
5.2	Do you feel unsafe in this prison at the moment?	11%	12%
5.4	Have you been victimised by another prisoner?	39%	28%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	6%
5.5h	Have you been victimised because of your sexuality? (By prisoners)	28%	2%
5.5i	Have you been victimised because you have a disability? (By prisoners)	5%	5%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	4%
5.6	Have you been victimised by a member of staff?	29%	35%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	9%
5.7f	Have you been victimised because of your sexuality? (By staff)	17%	1%
5.7h	Have you been victimised because you have a disability? (By staff)	0%	4%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	5%

Disability Analysis - Sexual Orientation

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual, bisexual or other	Consider themselves to be heterosexual
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	33%	28%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	33%	29%
5.11	Is it easy/very easy to get illegal drugs in this prison?	47%	18%
6.1a	Is it easy/very easy to see the doctor?	56%	39%
6.1b	Is it easy/ very easy to see the nurse?	53%	64%
6.2	Are you able to see a pharmacist?	14%	35%
6.5	Are you currently taking medication?	47%	68%
6.7	Do you feel you have any emotional well-being/mental health issues?	35%	27%
7.1a	Are you currently working in the prison?	89%	68%
7.1b	Are you currently undertaking vocational or skills training?	23%	11%
7.1c	Are you currently in education (including basic skills)?	16%	38%
7.1d	Are you currently taking part in an offending behaviour programme?	11%	18%
7.3	Do you go to the library at least once a week?	35%	59%
7.4	On average, do you go to the gym at least twice a week?	28%	50%
7.5	On average, do you go outside for exercise three or more times a week?	33%	23%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	28%	10%
7.7	On average, do you go on association more than five times each week?	44%	58%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	6%	21%
8.1	Do you have a personal officer?	95%	91%
8.9	Have you had any problems sending or receiving mail?	50%	44%
8.10	Have you had any problems getting access to the telephones?	0%	8%



Diversity Analysis - Age
Key question responses (age- over 50) HMP Isle of Wight (Albany) 2010

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

Key to tables

		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		61	103
1.3	Are you sentenced?	100%	99%
1.7	Are you a foreign national?	4%	13%
1.8	Is English your first language?	95%	85%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	7%	22%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	4%	1%
1.11	Are you Muslim?	5%	8%
1.13	Do you consider yourself to have a disability?	63%	26%
1.14	Is this your first time in prison?	56%	45%
2.1d	Was the attention paid to your health needs good/very good?	22%	34%
2.3	Were you treated well/very well by the escort staff?	70%	69%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	76%	79%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	18%	26%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	32%	53%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	59%	62%
3.2a	Did you have any problems when you first arrived?	57%	65%
3.3a	Were you seen by a member of health care staff in reception?	69%	78%
3.3b	When you were searched in reception, was this carried out in a respectful way?	81%	73%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.4	Were you treated well/very well in reception?	77%	66%
3.7b	Did you have access to someone from health care within the first 24 hours?	56%	73%
3.9	Did you feel safe on your first night here?	81%	74%
3.10	Have you been on an induction course?	99%	96%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	69%	64%
4.3a	Are you normally offered enough clean, suitable clothes for the week?	88%	87%
4.3b	Are you normally able to have a shower every day?	85%	92%
4.3e	Is your cell call bell normally answered within five minutes?	47%	51%
4.4	Is the food in this prison good/very good?	20%	20%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	42%	40%
4.6a	Is it easy/very easy to get a complaints form?	89%	91%
4.6b	Is it easy/very easy to get an application form?	88%	93%
4.9	Have you made a complaint?	59%	64%
4.13	Are you on the enhanced (top) level of the IEP scheme?	37%	70%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	53%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	37%	45%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	2%	1%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	5%	14%
4.17a	Do you feel your religious beliefs are respected?	56%	52%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	53%	58%

Key to tables

Diversity Analysis - Age

		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.18	Are you able to speak to a Listener at any time if you want to?	76%	75%
4.15a	Is there a member of staff you can turn to for help if you have a problem in this prison?	83%	82%
4.15b	Do most staff, in this prison, treat you with respect?	79%	83%
5.1	Have you ever felt unsafe in this prison?	30%	43%
5.2	Do you feel unsafe in this prison at the moment?	17%	10%
5.4	Have you been victimised by another prisoner?	26%	34%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	7%	6%
5.5i	Have you been victimised because you have a disability? (By prisoners)	5%	5%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	5%
5.5k	Have you been victimised because of your age? (By prisoners)	5%	4%
5.6	Have you been victimised by a member of staff?	25%	41%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	9%
5.7h	Have you been victimised because you have a disability? (By staff)	7%	2%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	2%	8%
5.7j	Have you been victimised because of your age? (By staff)	0%	5%
5.9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	26%	31%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	25%	33%
5.11	Is it easy/very easy to get illegal drugs in this prison?	9%	27%
6.1a	Is it easy/very easy to see the doctor?	43%	41%
6.1b	Is it easy/very easy to see the nurse?	67%	61%
6.2	Are you able to see a pharmacist?	25%	39%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
6.5	Are you currently taking medication?	84%	57%
6.7	Do you feel you have any emotional well-being/mental health issues?	16%	35%
7.1a	Are you currently working in the prison?	62%	75%
7.1b	Are you currently undertaking vocational or skills training?	13%	12%
7.1c	Are you currently in education (including basic skills)?	32%	36%
7.1d	Are you currently taking part in an offending behaviour programme?	9%	20%
7.3	Do you go to the library at least once a week?	55%	59%
7.4	On average, do you go to the gym at least twice a week?	22%	63%
7.5	On average, do you go outside for exercise three or more times a week?	14%	31%
7.6	On average, do you spend 10 or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	13%	11%
7.7	On average, do you go on association more than five times each week?	54%	58%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	17%	18%
8.1	Do you have a personal officer?	90%	92%
8.9	Have you had any problems sending or receiving mail?	39%	47%
8.10	Have you had any problems getting access to the telephones?	9%	8%

Main comparator and comparator to last time



Prisoner survey responses HMP Isle of Wight CAMP HILL 2010

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

Key to tables

		HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		145	4438	145	117
SECTION 1: General information					
2	Are you under 21 years of age?	0%	1%	0%	0%
3a	Are you sentenced?	100%	100%	100%	100%
3b	Are you on recall?	15%	9%	15%	12%
4a	Is your sentence less than 12 months?	3%	5%	3%	10%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	5%	6%	2%
5	Do you have six months or less to serve?	36%	37%	36%	48%
6	Have you been in this prison less than a month?	8%	6%	8%	10%
7	Are you a foreign national?	9%	12%	9%	15%
8	Is English your first language?	92%	90%	92%	84%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	24%	26%	24%	41%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	3%	5%	3%	
11	Are you Muslim?	8%	11%	8%	10%
12	Are you homosexual/gay or bisexual?	3%	4%	3%	5%
13	Do you consider yourself to have a disability?	12%	15%	12%	14%
14	Is this your first time in prison?	27%	34%	27%	27%
15	Have you been in more than five prisons this time?	15%	15%	15%	13%
16	Do you have any children under the age of 18?	54%	54%	54%	53%
SECTION 2: Transfers and escorts					
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?	56%	54%	56%	60%
1b	Was your personal safety during the journey good/very good?	63%	62%	63%	65%
1c	Was the comfort of the van good/very good?	13%	18%	13%	18%
1d	Was the attention paid to your health needs good/very good?	34%	32%	34%	32%
1e	Was the frequency of toilet breaks good/very good?	7%	13%	7%	10%
2	Did you spend more than four hours in the van?	21%	8%	21%	14%
3	Were you treated well/very well by the escort staff?	73%	67%	73%	66%
4a	Did you know where you were going when you left court or when transferred from another prison?	91%	82%	91%	86%
4b	Before you arrived here did you receive any written information about what would happen to you?	28%	17%	28%	39%
4c	When you first arrived here did your property arrive at the same time as you?	89%	88%	89%	84%

Key to tables

Main comparator and comparator to last time

Key to tables		HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	17%	14%	17%	18%
1c	Housing problems?	29%	19%	29%	29%
1d	Problems contacting employers?	14%	10%	14%	17%
1e	Problems contacting family?	57%	43%	57%	58%
1f	Problems ensuring dependants were looked after?	9%	12%	9%	9%
1g	Money problems?	20%	15%	20%	18%
1h	Problems of feeling depressed/suicidal?	48%	47%	48%	38%
1i	Health problems?	61%	59%	61%	61%
1j	Problems in needing protection from other prisoners?	18%	17%	18%	11%
1k	Problems accessing phone numbers?	37%	35%	37%	41%
2	When you first arrived:				
2a	Did you have any problems?	59%	60%	59%	72%
2b	Did you have any problems with loss of property?	15%	14%	15%	29%
2c	Did you have any housing problems?	19%	16%	19%	30%
2d	Did you have any problems contacting employers?	6%	4%	6%	4%
2e	Did you have any problems contacting family?	20%	22%	20%	22%
2f	Did you have any problems ensuring dependants were being looked after?	4%	5%	4%	4%
2g	Did you have any money worries?	14%	15%	14%	17%
2h	Did you have any problems with feeling depressed or suicidal?	12%	14%	12%	12%
2i	Did you have any health problems?	18%	20%	18%	23%
2j	Did you have any problems with needing protection from other prisoners?	4%	5%	4%	6%
2k	Did you have problems accessing phone numbers?	16%	21%	16%	23%
3a	Were you seen by a member of health services in reception?	95%	89%	95%	89%
3b	When you were searched in reception, was this carried out in a respectful way?	87%	77%	87%	73%
4	Were you treated well/very well in reception?	70%	71%	70%	63%
5	On your day of arrival, were you offered any of the following information:				
5a	Information about what was going to happen to you?	59%	52%	59%	53%
5b	Information about what support was available for people feeling depressed or suicidal?	54%	46%	54%	51%
5c	Information about how to make routine requests?	51%	40%	51%	50%
5d	Information about your entitlement to visits?	53%	46%	53%	48%
5e	Information about health services?	71%	60%	71%	61%
5f	Information about the chaplaincy?	59%	52%	59%	57%
6	On your day of arrival, were you offered any of the following:				
6a	A smokers/non-smokers pack?	96%	81%	96%	88%
6b	The opportunity to have a shower?	42%	41%	42%	35%
6c	The opportunity to make a free telephone call?	74%	47%	74%	72%
6d	Something to eat?	81%	77%	81%	76%
7	Within the first 24 hours did you meet any of the following people:				
7a	The chaplain or a religious leader?	53%	47%	53%	53%
7b	Someone from health services?	88%	74%	88%	86%

Key to tables

Main comparator and comparator to last time

Any percentage highlighted in green is significantly better		HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
7c	A Listener/Samaritans?	28%	29%	28%	10%
8	Did you have access to the prison shop/canteen within the first 24 hours?	7%	22%	7%	18%
9	Did you feel safe on your first night here?	84%	83%	84%	86%
10	Have you been on an induction course?	94%	93%	94%	91%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	72%	64%	72%	75%
SECTION 4: Legal rights and respectful custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	46%	51%	46%	49%
1b	Attend legal visits?	40%	56%	40%	39%
1c	Obtain bail information?	21%	18%	21%	12%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	32%	41%	32%	31%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	61%	61%	61%	55%
3b	Are you normally able to have a shower every day?	84%	94%	84%	80%
3c	Do you normally receive clean sheets every week?	87%	81%	87%	89%
3d	Do you normally get cell cleaning materials every week?	79%	76%	79%	79%
3e	Is your cell call bell normally answered within five minutes?	38%	41%	38%	49%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	72%	70%	72%	71%
3g	Can you normally get your stored property if you need to?	23%	30%	23%	25%
4	Is the food in this prison good/very good?	22%	30%	22%	16%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	56%	46%	56%	52%
6a	Is it easy/very easy to get a complaints form?	87%	86%	87%	90%
6b	Is it easy/very easy to get an application form?	90%	90%	90%	93%
7	Have you made an application?	94%	88%	94%	94%
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	68%	60%	68%	68%
8b	Do you feel applications are dealt with promptly (within seven days)?	48%	53%	48%	64%
9	Have you made a complaint?	47%	56%	47%	49%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	37%	35%	37%	38%
10b	Do you feel complaints are dealt with promptly (within seven days)?	27%	41%	27%	51%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	18%	24%	18%	15%
10c	Were you given information about how to make an appeal?	28%	31%	28%	26%
12	Is it easy/very easy to see the Independent Monitoring Board?	27%	38%	27%	30%
13	Are you on the enhanced (top) level of the IEP scheme?	65%	62%	65%	
14	Do you feel you have been treated fairly in your experience of the IEP scheme?	64%	58%	64%	
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	56%	47%	56%	
16a	In the last six months have any members of staff physically restrained you (C&R)?	4%	5%	4%	
16b	In the last six months have you spent a night in the segregation/ care and separation unit?	8%	10%	8%	
13a	Do you feel your religious beliefs are respected?	60%	55%	60%	58%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	62%	59%	62%	63%

Main comparator and comparator to last time

Key to tables

		HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
14	Are you able to speak to a Listener at any time, if you want to?	66%	62%	66%	66%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	85%	73%	85%	79%
15b	Do most staff, in this prison, treat you with respect?	86%	74%	86%	81%
SECTION 5: Safety					
1	Have you ever felt unsafe in this prison?	29%	30%	29%	31%
2	Do you feel unsafe in this prison at the moment?	14%	14%	14%	11%
4	Have you been victimised by another prisoner?	14%	19%	14%	16%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks about you, your family or friends?	8%	10%	8%	5%
5b	Hit, kicked or assaulted you?	4%	5%	4%	4%
5c	Sexually abused you?	1%	1%	1%	0%
5d	Victimised you because of your race or ethnic origin?	2%	4%	2%	5%
5e	Victimised you because of drugs?	2%	3%	2%	2%
5f	Taken your canteen/property?	2%	4%	2%	3%
5g	Victimised you because you were new here?	2%	4%	2%	3%
5h	Victimised you because of your sexuality?	0%	1%	0%	0%
5i	Victimised you because you have a disability?	0%	2%	0%	0%
5j	Victimised you because of your religion/religious beliefs?	2%	3%	2%	3%
5k	Victimised you because of your age?	4%	2%	4%	
5l	Victimised you because you were from a different part of the country?	2%	5%	2%	4%
5m	Victimised you because of your offence/crime?	1%	4%	1%	1%
5n	Victimised you because of gang related issues?	3%	3%	3%	
6	Have you been victimised by a member of staff?	16%	22%	16%	27%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks about you, your family or friends?	8%	10%	8%	11%
7b	Hit, kicked or assaulted you?	2%	3%	2%	7%
7c	Sexually abused you?	1%	1%	1%	2%
7d	Victimised you because of your race or ethnic origin?	2%	5%	2%	7%
7e	Victimised you because of drugs?	2%	3%	2%	4%
7f	Victimised you because you were new here?	2%	4%	2%	6%
7g	Victimised you because of your sexuality?	0%	1%	0%	1%
7h	Victimised you because you have a disability?	2%	2%	2%	1%
7i	Victimised you because of your religion/religious beliefs?	0%	3%	0%	2%
7j	Victimised you because of your age?	0%	2%	0%	
7k	Victimised you because you were from a different part of the country?	2%	4%	2%	5%
7l	Victimised you because of your offence/crime?	2%	4%	2%	2%
7m	Victimised you because of gang related issues?	2%	2%	2%	
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	33%	39%	33%	24%
9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	22%	21%	22%	18%
10	Have you ever felt threatened or intimidated by a member of staff in here?	15%	18%	15%	16%

Main comparator and comparator to last time

Key to tables

		HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
11	Is it easy/very easy to get illegal drugs in this prison?	34%	34%	34%	31%
SECTION 6: Health services					
1a	Is it easy/very easy to see the doctor?	36%	41%	36%	36%
1b	Is it easy/very easy to see the nurse?	53%	65%	53%	61%
1c	Is it easy/very easy to see the dentist?	16%	14%	16%	26%
1d	Is it easy/very easy to see the optician?	13%	18%	13%	20%
2	Are you able to see a pharmacist?	47%	54%	47%	50%
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:					
3a	The doctor?	58%	53%	58%	68%
3b	The nurse?	67%	66%	67%	53%
3c	The dentist?	31%	45%	31%	52%
3d	The optician?	36%	47%	36%	51%
4	The overall quality of health services?	47%	46%	47%	53%
5	Are you currently taking medication?	43%	43%	43%	39%
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	84%	89%	84%	93%
7	Do you feel you have any emotional well-being/mental health issues?	25%	25%	25%	25%
For those with emotional well-being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	42%	35%	42%	48%
8b	A doctor?	48%	31%	48%	36%
8c	A nurse?	10%	18%	10%	4%
8d	A psychiatrist?	13%	17%	13%	24%
8e	The mental health in-reach team?	13%	33%	13%	12%
8f	A counsellor?	0%	11%	0%	12%
9a	Did you have a drug problem when you came into this prison?	21%	19%	21%	34%
9b	Did you have an alcohol problem when you came into this prison?	18%	12%	18%	30%
10a	Have you developed a drug problem since you have been in this prison?	5%	10%	5%	6%
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	93%	87%	93%	94%
12	Have you received any help or intervention while in this prison?	80%	77%	80%	76%
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	87%	74%	87%	89%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	15%	22%	15%	27%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	15%	15%	15%	26%
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?	60%	58%	60%	81%

Main comparator and comparator to last time

Key to tables

		HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 7: Purposeful activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	63%	64%	63%	57%
1b	Vocational or skills training?	10%	20%	10%	13%
1c	Education (including basic skills)?	28%	31%	28%	26%
1d	Offending behaviour programmes?	13%	17%	13%	18%
2ai	Have you had a job while in this prison?	85%	87%	85%	
For those who have had a prison job while in this prison:					
2aii	Do you feel the job will help you on release?	52%	46%	52%	
2bi	Have you been involved in vocational or skills training while in this prison?	69%	77%	69%	
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?	49%	66%	49%	
2ci	Have you been involved in education while in this prison?	81%	83%	81%	
For those who have been involved in education while in this prison:					
2cii	Do you feel the education will help you on release?	63%	68%	63%	
2di	Have you been involved in offending behaviour programmes while in this prison?	75%	75%	75%	
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?	52%	61%	52%	
3	Do you go to the library at least once a week?	66%	46%	66%	37%
4	On average, do you go to the gym at least twice a week?	66%	54%	66%	70%
5	On average, do you go outside for exercise three or more times a week?	69%	51%	69%	29%
6	On average, do you spend ten or more hours out of your cell on a weekday?	6%	15%	6%	13%
7	On average, do you go on association more than five times each week?	42%	77%	42%	60%
8	Do staff normally speak to you most of the time/all of the time during association?	19%	19%	19%	18%
SECTION 8: Resettlement					
1	Do you have a personal officer?	83%	74%	83%	76%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	68%	62%	68%	65%
For those who are sentenced:					
3	Do you have a sentence plan?	65%	66%	65%	44%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	54%	59%	54%	49%
5	Can you achieve some/all of your sentence plan targets in this prison?	78%	69%	78%	56%
6	Are there plans for you to achieve some/all your targets in another prison?	29%	37%	29%	46%
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	33%	32%	33%	32%
8	Do you feel that any member of staff has helped you to prepare for release?	19%	18%	19%	23%
9	Have you had any problems with sending or receiving mail?	31%	38%	31%	35%
10	Have you had any problems getting access to the telephones?	25%	21%	25%	19%
11	Did you have a visit in the first week that you were here?	7%	23%	7%	11%
12	Did you receive one or more visits in the last week?	17%	31%	17%	14%
For those who have had visits:					
13	How are you and your family/ friends usually treated by visits staff? (Very well/well)	54%	54%	54%	

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Camp Hill	Functional type comparator	HMP Camp Hill 2010	HMP Camp Hill 2009
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
14	Have you been helped to maintain contact with family/friends while in this prison?	35%	38%	35%	32%
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	18%	18%	18%	12%
15c	Avoiding bad relationships?	17%	13%	17%	11%
15d	Finding a job on release?	34%	40%	34%	37%
15e	Finding accommodation on release?	38%	42%	38%	35%
15f	With money/finances on release?	30%	29%	30%	29%
15g	Claiming benefits on release?	39%	42%	39%	45%
15h	Arranging a place at college/continuing education on release?	23%	29%	23%	15%
15i	Accessing health services on release?	24%	32%	24%	25%
15j	Opening a bank account on release?	35%	28%	35%	23%
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	7%	12%	7%	15%
16c	Avoiding bad relationships?	6%	12%	6%	18%
16d	Finding a job?	40%	44%	40%	58%
16e	Finding accommodation?	38%	39%	38%	40%
16f	Money/finances?	23%	45%	23%	30%
16g	Claiming benefits?	20%	29%	20%	29%
16h	Arranging a place at college/continuing education?	12%	22%	12%	24%
16i	Accessing health services?	7%	18%	7%	15%
16j	Opening a bank account?	26%	32%	26%	28%
For those who are sentenced:					
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	52%	56%	52%	54%

Diversity Analysis



Key question responses (ethnicity) HMP Isle of Wight CAMP HILL 2010

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

Key to tables

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		35	109
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	12%	9%
1.8	Is English your first language?	91%	92%
1.9	Are you from a minority ethnic group? Including all those who did not tick white British, white Irish or white other categories.		
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	4%
1.11	Are you Muslim?	30%	1%
1.12	Do you consider yourself to have a disability?	6%	13%
1.13	Is this your first time in prison?	23%	28%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	38%	33%
2.3	Were you treated well/very well by the escort staff?	86%	69%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	86%	94%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	63%	55%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	43%	50%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	47%	65%
3.2a	Did you have any problems when you first arrived?	64%	57%
3.3a	Were you seen by a member of health care staff in reception?	100%	93%
3.3b	When you were searched in reception, was this carried out in a respectful way?	91%	87%
3.4	Were you treated well/very well in reception?	79%	67%
3.7b	Did you have access to someone from health care within the first 24 hours?	84%	91%
3.9	Did you feel safe on your first night here?	88%	82%
3.10	Have you been on an induction course?	94%	95%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	48%	46%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	62%	61%
4.3b	Are you normally able to have a shower every day?	79%	85%
4.3e	Is your cell call bell normally answered within five minutes?	36%	38%
4.4	Is the food in this prison good/very good?	34%	18%
4.5	Does the shop /canteen sell a wide enough range of goods to meet your needs?	58%	56%
4.6a	Is it easy/very easy to get a complaints form?	84%	88%
4.6b	Is it easy/very easy to get an application form?	90%	90%
4.9	Have you made a complaint?	45%	48%
4.13	Are you on the enhanced (top) level of the IEP scheme?	64%	65%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	53%	66%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	52%	57%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	3%	4%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	7%	9%
4.17a	Do you feel your religious beliefs are respected?	66%	58%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	63%	61%
4.18	Are you able to speak to a Listener at any time if you want to?	78%	62%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	84%	85%
4.19b	Do most staff, in this prison, treat you with respect?	84%	86%
5.1	Have you ever felt unsafe in this prison?	26%	30%
5.2	Do you feel unsafe in this prison at the moment?	16%	14%
5.4	Have you been victimised by another prisoner?	13%	15%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	1%
5.5i	Have you been victimised because you have a disability? (By prisoners)	0%	0%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	7%	0%
5.6	Have you been victimised by a member of staff?	19%	15%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	10%	0%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.7h	Have you been victimised because you have a disability? (By staff)	0%	2%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	0%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	16%	24%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	10%	16%
5.11	Is it easy/very easy to get illegal drugs in this prison?	22%	37%
6.1a	Is it easy/very easy to see the doctor?	35%	37%
6.1b	Is it easy/ very easy to see the nurse?	60%	51%
6.2	Are you able to see a pharmacist?	36%	51%
6.5	Are you currently taking medication?	22%	48%
6.7	Do you feel you have any emotional well-being/mental health issues?	16%	28%
7.1a	Are you currently working in the prison?	57%	65%
7.1b	Are you currently undertaking vocational or skills training?	10%	10%
7.1c	Are you currently in education (including basic skills)?	40%	25%
7.1d	Are you currently taking part in an offending behaviour programme?	10%	13%
7.3	Do you go to the library at least once a week?	74%	64%
7.4	On average, do you go to the gym at least twice a week?	76%	63%
7.5	On average, do you go outside for exercise three or more times a week?	69%	69%
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.)	3%	7%
7.7	On average, do you go on association more than five times each week?	38%	43%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	23%	18%
8.1	Do you have a personal officer?	80%	84%
8.9	Have you had any problems sending or receiving mail?	30%	32%
8.10	Have you had any problems getting access to the telephones?	20%	27%

Diversity Analysis - Disability



Key questions (disability analysis) HMP Isle of Wight CAMP HILL 2010

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		17	127
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	0%	10%
1.8	Is English your first language?	100%	92%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	12%	26%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	7%	2%
1.11	Are you Muslim?	0%	9%
1.13	Do you consider yourself to have a disability?		
1.14	Is this your first time in prison?	23%	27%
2.1d	Was the attention paid to your health needs good/very good?	7%	38%
2.3	Were you treated well/very well by the escort staff?	75%	73%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	75%	93%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	39%	58%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	39%	49%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	74%	59%
3.2a	Did you have any problems when you first arrived?	84%	56%
3.3a	Were you seen by a member of healthcare staff in reception?	88%	96%
3.3b	When you were searched in reception, was this carried out in a respectful way?	71%	90%
3.4	Were you treated well/very well in reception?	61%	71%
3.7b	Did you have access to someone from health care within the first 24 hours?	82%	89%
3.9	Did you feel safe on your first night here?	67%	86%
3.10	Have you been on an induction course?	87%	95%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	25%	49%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	43%	63%
4.3b	Are you normally able to have a shower every day?	82%	84%
4.3e	Is your cell call bell normally answered within five minutes?	20%	39%
4.4	Is the food in this prison good/very good?	6%	23%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	50%	57%
4.6a	Is it easy/very easy to get a complaints form?	87%	87%
4.6b	Is it easy/very easy to get an application form?	87%	90%
4.9	Have you made a complaint?	39%	48%
4.13	Are you on the enhanced (top) level of the IEP scheme?	69%	65%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	57%	65%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	57%	55%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	13%	2%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	8%	9%
4.17a	Do you feel your religious beliefs are respected?	57%	60%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	46%	64%
4.18	Are you able to speak to a Listener at any time if you want to?	63%	66%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	67%	87%
4.19b	Do most staff, in this prison, treat you with respect?	86%	86%
5.1	Have you ever felt unsafe in this prison?	43%	27%
5.2	Do you feel unsafe in this prison at the moment?	28%	12%
5.4	Have you been victimised by another prisoner?	13%	14%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	2%
5.5i	Victimised you because you have a disability?	0%	0%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	2%
5.6	Have you been victimised by a member of staff?	26%	15%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	3%
5.7h	Victimised you because you have a disability?	7%	1%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	0%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	33%	21%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	33%	13%
5.11	Is it easy/very easy to get illegal drugs in this prison?	39%	34%
6.1a	Is it easy/very easy to see the doctor?	13%	39%
6.1b	Is it easy/ very easy to see the nurse?	50%	54%
6.2	Are you able to see a pharmacist?	37%	49%
6.5	Are you currently taking medication?	74%	39%
6.7	Do you feel you have any emotional well-being/mental health issues?	57%	21%
7.1a	Are you currently working in the prison?	47%	65%
7.1b	Are you currently undertaking vocational or skills training?	13%	9%
7.1c	Are you currently in education (including basic skills)?	33%	27%
7.1d	Are you currently taking part in an offending behaviour programme?	20%	11%
7.3	Do you go to the library at least once a week?	61%	67%
7.4	On average, do you go to the gym at least twice a week?	37%	70%
7.5	On average, do you go outside for exercise three or more times a week?	50%	71%
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.)	12%	5%
7.7	On average, do you go on association more than five times each week?	31%	44%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	19%	19%
8.1	Do you have a personal officer?	75%	84%
8.9	Have you had any problems sending or receiving mail?	47%	29%
8.10	Have you had any problems getting access to the telephones?	47%	23%