

Report on an announced inspection of

HMP/YOI Swinfen Hall

7–11 June 2010

by HM Chief Inspector of Prisons

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Introduction

The full announced inspection of HMP/YOI Swinfen Hall took place in June this year before I took up my appointment. The inspection took place and the initial draft of this report was written during the tenure of my predecessor, Dame Anne Owers.

HMP/YOI Swinfen Hall is a Category C training prison taking young adults aged 18 to 25 serving three and a half years up to and including life. It has recently undergone significant expansion.

Inspectors rated Swinfen Hall reasonably good against three of our four 'healthy prison tests' and within these there was some excellent work.

Swinfen Hall is a reasonably safe prison, although safety was still a concern to some adult prisoners and their perceptions need to be addressed. Violence reduction arrangements are good and the number of recorded violent incidents is low for an establishment of this kind and with this type of population. There was very little use of drugs. Vulnerable prisoners were generally well integrated and indicated that they felt safe. The personal officer scheme was more effective than in many prisons. Complaints and discipline were dealt with efficiently and fairly. The chaplaincy and health care were very good.

There was an effective resettlement strategy that provided both some practical assistance and useful interventions by external voluntary and private sector organisations on issues such as accommodation and employment. Inspectors found that work to support prisoners to change their behaviour and attitudes on release was good and appropriate.

The emphasis on security is sometimes unbalanced. In some cases inspectors found that restrictive rules and security procedures were disproportionate and affected the daily lives of prisoners unnecessarily.

The environment in some of the older parts of the prison is poor. Whilst the newer accommodation provides a much better environment, inspectors describe a bleak picture of the environment on the older wings:

'The cells on A, B, and C wings were small with grilles on windows: many of the internal plastic windows were fire damaged. The cells had integral toilets and sinks although prisoners' beds were often close to the toilet. The cells were austere and many had graffiti.'

Inspectors noted that the design of these older wings makes them difficult to supervise.

Some cells, mostly in the newer accommodation, are shared and most prisoners eat their meals in cells. Time out of the cells is very restricted. The minimum time a prisoner has to spend in their cell is 15.5 hours a day; some may spend as much as 22 hours a day locked up. Access to cell cleaning materials was restricted. Most prisoners could shower only every other day.

The number of ACCT (vulnerable prisoner) files and incidents of self harm were relatively high for a prison of this kind. The younger prisoners reported higher levels of feeling suicidal or depressed on reception than in other comparable prisons. The prison had reflected on the issue and concluded that the distance newly received adult category C prisoners were being held from their homes and the location of young adult prisoners in the prison's older and more austere accommodation, may have influenced this.

The segregation unit too is in an older part of the prison. It was not used excessively but it was dirty and gloomy. The special cell was very poor and should be refurbished or taken out of use. Staff relationships with prisoners in the segregation unit were appropriate but case management/re-integration planning required further development.

Swinfen Hall is a training prison for young male prisoners. The section of this report that therefore most concerns me is the inspectors' conclusion that the purposeful activity offered by this prison is poor.

These young men spent much of the day idle with just under a third found to be locked in cell during the working part of the day. There were insufficient activity places to meet the needs of the population. Classes were often cancelled and the range of provision was poor. The working day was short and did not promote a work ethic. There was too much ineffective teaching and classroom management was often ineffective. Prisoners were allocated to courses that bore no relation to their sentence plans – some were allocated to 'employability' courses when they had many years of their sentence left to complete, others were reallocated to courses that they had already completed once and in which they had gained a qualification. Vocational training was better. The gym was underused.

Swinfen Hall provides reasonably good outcomes for prisoners in three of the four healthy prison tests. However, I know that Ministers and NOMS attach the greatest importance to prisoners – and especially young prisoners – being purposefully occupied during the day and will be as concerned as I am to read this account of the failure to ensure that at Swinfen Hall. We will expect to see a convincing action plan from NOMS and the prison, setting out how they intend to address this weakness and we will decide how quickly the prison should be re-inspected once this has been assessed.

Nick Hardwick
HM Chief Inspector of Prisons

September 2010

Fact page

Task of the establishment

Young adult long-term training establishment.

Area organisation

West Midlands

Number held

9 June 2010: 627

Certified normal accommodation

604

Operational capacity

654

Last inspection

Full inspection: 5-9 September 2005

Short follow-up: 15-17 April 2008

Brief history

Swinfen Hall opened as a borstal in 1963 and, following a short period as a youth custody centre, in 1988-89 it became a long-term closed young offender institution. Two new wings were built in 1998, increasing the capacity to 320 places. The establishment has gone through a major expansion programme that has increased prisoner places from 320 to 620. It takes young men aged between 18 and 25 serving 3.5 years up to and including life.

The establishment is currently re-rolling D and E wings from young adults to category C adult prisoners.

Description of residential units

A, B and C wings – 184 young adults aged 18-21.

D and E wings – 128 adults aged 21-25 and lifers/IPP prisoners.

F and G wings – 180 adults aged 21-25.

I and J wings – 162 adults, young adults and adult enhanced prisoners.

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 Procedures to manage early days in custody were adequate, although there needed to be improved and dedicated first night accommodation, and less lock up on the first

night and during induction. Violence reduction arrangements were good but perceptions of safety were a concern for some prisoners. The number of violent incidents was low. Self-harm procedures were generally well managed but there was inappropriate continuous camera supervision of prisoners in crisis. The assimilation and use of security intelligence was good but many rules and procedures were petty or disproportionate. The environment and regime in the segregation unit were poor, although usage was low. Use of force was not excessive. The special cell was poor. There was very little use of drugs. Vulnerable prisoners were integrated and generally well supported and safe, but some protocols needed better safeguards. Outcomes for prisoners in Swinfen Hall were reasonably good against this healthy prison test.

- HP4 The escort providers were Reliance for courts and G4S for transfers. Vans were clean and fit for purpose, and the escort staff treated prisoners with respect. Prisoners frequently said they spent more than four hours in escort vans during transfer, indicating that many were a considerable distance from home. Reception was closed during lunch. Most escorts were planned and movement through reception was not excessive, but prisoners said that they waited up to an hour outside the gate and up to half an hour on the van after admission. Prisoner escort records were properly completed and handed over to reception staff.
- HP5 Reception was clean and welcoming. There were televisions in the holding rooms, a well-stocked magazine rack and a separate toilet that was clean. An Insider worked in reception but was not always available when new prisoners arrived. First night and cell sharing risk assessments by first night officers in reception were carried out sensitively and confidentially but their quality varied. Procedures were respectful and staff were generally welcoming although the process was slow and some prisoners spent extended periods in reception before location to the wings.
- HP6 Newly arrived young adults were first located on B wing in poor accommodation. The wing was also used to hold indeterminate-sentenced prisoners, which was inappropriate because staff had to manage competing priorities. Adult new receptions were meant to be located on D wing but were actually located in any available cell across the prison. Cells on B wing and other locations were not prepared for the new arrivals but handover arrangements, particularly to night staff, appeared satisfactory. Prisoners were given clean fresh bedding and access to basic amenities. Access to showers was limited. All new arrivals were locked in cell, often unnecessarily, as a matter of routine for their first 24 hours in the prison.
- HP7 The rolling induction programme should have commenced the day after prisoners arrived but we observed instances where this did not happen. Many prisoners were retained in cell and did not start the induction process for several days. The induction programme was meaningful and adequately met the needs of prisoners. In our survey, prisoners reported positively about their induction experience. There was a comprehensive information booklet and a tracking system ensured prisoners received all aspects. Induction processes also identified need and integrated with resettlement work.
- HP8 The management of violence reduction was good. Safer custody committee meetings were well attended and focused. Information was analysed consistently and used to inform some recently introduced interventions to reduce violence. Bullying was evident but given the nature of the prison, the number of fights, assaults and serious violent incidents was reasonably low. Reporting systems were effective and the

quality of investigations into alleged incidents was good. Despite this, prisoners in our survey, notably adults, had concerns about their safety that needed to be addressed.

- HP9 The quality of assessment, care in custody and teamwork (ACCT) self-harm monitoring documentation was reasonably good, although care maps and post-closure reviews required improvement. Case reviews were well attended and multidisciplinary. In the previous six months, 87 ACCT documents had been opened. There was a comprehensive policy, with good staff awareness, and this was supported by a well-attended safer custody monthly meeting and a bi-monthly meeting of ACCT assessors and prisoner Listeners and Insiders. A safer custody continuous improvement plan was updated monthly. There were 23 Listeners and seven Insiders, who felt supported by the prison. Prisoners with medical concerns who required constant watch were normally transferred, but others were placed in cells with cameras. They were observed from public offices, which was inappropriate, and in some cases camera cells were used for intermittent observations. Governance of these arrangements required improvement.
- HP10 Security was intelligence-driven with effective systems to process and analyse information. The flow of information into the department was good, and trained analysts efficiently processed the large number of security information reports received. The security committee was properly constructed and meetings were well attended. There were effective links to the violence reduction strategy committee and strong links with local and regional police forces. The prison's response to gang activity was proportionate. Despite these good systems however, there were too many restrictive and redundant security procedures or petty rules that affected the daily lives of prisoners unnecessarily.
- HP11 The environment in the segregation unit was poor. Many cells were dirty, had offensive graffiti and most were inadequately furnished. Communal corridors were reasonably clean but in a poor state of repair. The unit was too big although its use was not excessive. Mandatory reviews were completed on time but assessment and monitoring was not well developed and reintegration planning was limited. Staff tried to help prisoners on a day-to-day basis and were respectful but care planning and the provision of a constructive regime, particularly for longer stay prisoners, required improvement. Observations in personal files were poor and did not reflect the good interaction we observed between staff and prisoners.
- HP12 The prison completed about 40 adjudications a month which was reasonable. Hearings were managed well and punishments were proportionate. Quarterly adjudication standardisation meetings were well attended by adjudicating governors. Minutes showed a good standard of discussion and included analysis of a range of information about charges and offence types to identify trends and potential problems. There was good coordination with the violence reduction committee.
- HP13 Given the size and nature of the population, the incidence of the use of force was not excessive, at about 90 in 2010 to date. It was evident, however, that young adults were involved in a disproportionate number of recorded incidents. Paperwork was not always completed correctly but written accounts from officers gave assurance that force was used as a last resort. There was evidence that de-escalation techniques were deployed and encouraged. Planned intervention was video recorded and governance through the monthly use of force committee was good. Special accommodation, however, was overused and conditions in the cell were very poor.

- HP14 Illicit drug use was low. The 2009-10 positive random mandatory drug testing rate was only 2.4%, with zero rates in April and May 2010. All positive results were for cannabis. Prisoners completed detoxification before they arrived at Swinfen Hall but the establishment did not yet accept those maintained on opiate-substitute regimes. Enhanced clinical services under the integrated drug treatment system (IDTS) were due to be introduced in October 2010 although demand was likely to be low.
- HP15 The integration of vulnerable prisoners, particularly sex offenders, within the general population, was well established and worked reasonably well. Staff were aware of the risks involved with this strategy and most had a good knowledge of vulnerable prisoners on their wings. Vulnerable prisoners indicated that they felt safe. An up-to-date policy setting out broad definitions, instructions and protocols to manage and assess vulnerable prisoners had recently been published. However, it had not been fully implemented and formal monitoring arrangements had not yet been adequately developed. We had concerns about governance of the temporary removal from activities processes, linked to the restricted to wing procedure. It lacked necessary safeguards and there were no properly defined criteria for its application. The use of individual care plans for vulnerable prisoners was inconsistent.

Respect

- HP16 The standard of accommodation varied depending on the age of the residential unit. Cleanliness was acceptable despite poor prisoner access to cleaning materials. Own-clothes rules were confused. Overall, staff-prisoner relationships were satisfactory but could be more proactive. The personal officer scheme was, however, effective. The promotion of race equality was good, and work with foreign prisoners was developing. Other diversity stands were being addressed but also required more development. The catering and shop services were good and the prison had an impressive chaplaincy and health care centre. Outcomes for prisoners in Swinfen Hall were reasonably good against this healthy prison test.
- HP17 The standards of accommodation varied greatly between the older and newer parts of the prison. Cells on the older wings, A, B and C, were small and austere in comparison to their more modern counterparts. Communal areas generally were clean although the older wings were drab and much more difficult to supervise. Recreational equipment was of a generally good standard and best on the adult wings. The cleanliness and privacy in showers was satisfactory. Access to cell cleaning materials was inadequate. The policy on the wearing own clothes was complicated and unnecessarily restrictive. Access to telephones was satisfactory but prisoners were charged £1 a time to change a PIN number which was inappropriate. The policy on stamps in possession was restrictive.
- HP18 The incentives and earned privileges (IEP) scheme operated consistently and fairly across the prison. Survey results across all indicators for IEP were significantly better than the comparators.¹ There was evidence that prisoners were promoted or demoted on the basis of their behaviour over time rather for individual incidents and regression of regime levels was properly authorised following an organised review. Most prisoners were on the enhanced level of the scheme.

¹ The comparator figure is calculated by aggregating all survey responses together and so is not an average across establishments.

- HP19 In our survey, two-thirds of prisoners indicated that staff treated them with respect, but the response from young adults was significantly better than for adults. However, in our survey, a significant number of prisoners had felt victimised by staff. In discussion with prisoners, many spoke positively about staff and saw them as friendly, but others questioned their reliability and said they were talked down to. We observed much friendly engagement between staff and prisoners but staff did not use preferred names or titles and the approach of some staff lacked appropriate challenge. The application of petty rules impeded positive relationships.
- HP20 In our survey, prisoners reported positively about their personal officer and those we spoke to knew who their personal officer was. Personal officers had a good knowledge of their prisoners and they routinely visited their charges held in segregation. There were links with offender supervisors and some staff had a good understanding of their prisoners' sentence planning targets. Staff did not routinely make the required weekly entries in prisoner case notes but the quality of entries was good and showed a degree of interaction with and rounded understanding of prisoners. Management checks were limited.
- HP21 The quality of food was reasonably good. The four-week menu cycle was adequate, although some prisoners complained that portions were small. Food comments books were widely available and used, but there were few formal complaints about the food. The kitchen was suitable for purpose and halal food was stored, prepared and cooked separately. The introduction of a level 2 qualification in food safety in catering was a useful initiative. There was some limited dining in association.
- HP22 The prison had a standard DHL prison shop contract with weekly bagged orders. Prisoners spoke positively about the provision but prisoners from a black and minority ethnic background questioned the product range.
- HP23 There was no overarching diversity policy or action plan, but there were separate foreign national, disability and race equality policies. Not all diversity strands were currently addressed but the prison had recently appointed a full-time equalities manager. Impact assessments had so far focused solely upon race but there was a timetable to draw up single equality assessments. Prisoners could disclose disabilities on arrival and had follow-up assessments by the disability liaison officer. There were some adapted cells on the new wings and personal emergency evacuation plans for prisoners who needed them. In our survey, two-thirds of Muslim prisoners said their religious beliefs were respected but in other areas they had more negative perceptions of their treatment which need to be addressed. Initiatives to address sexual orientation were lacking.
- HP24 Just over a third of the population were from a black and minority ethnic background. Structures to support race equality work were appropriate and the monthly race equality action team (REAT) meeting included many prisoner representatives. REAT membership was well advertised around the prison. In our survey, black and minority ethnic prisoners were more positive than white prisoners across a range of indicators. Ethnic monitoring data had not identified any major concerns although the prison had recently introduced local monitoring of access to wing-based work in response to perceptions by some prisoners of under-representation in this area. Racist incident

report forms were generally dealt with in a timely manner but some investigations were unsatisfactory and insufficiently rigorous.

- HP25 In our survey, foreign national prisoners were more negative than British respondents across a range of indicators, particularly concerning feelings of safety and victimisation by other prisoners. Foreign national prisoners were supposed to be identified on arrival and have an individual needs assessment but this had not happened consistently. The foreign national coordinator was supported by a team of wing liaison officers who had some facility time for the work. Monthly foreign national meetings run by liaison officers were not well attended; staff said they followed up prisoners who declined to attend. Prisoners had mixed views about the value of the bi-monthly surgeries with the UK Border Agency and felt visiting immigration staff were not always adequately prepared to discuss individual cases. Although staff knew about the availability of interpreting services, there was an over-reliance on the use of other prisoners to act as interpreters.
- HP26 Prisoners had ready access to applications and complaint forms but were more negative about the timeliness of responses than in comparator establishments. They expressed a lack of confidence in both processes and some said that staff had encouraged them to withdraw complaints; this was also reflected in our survey findings. Complaints boxes were opened by the night orderly officer which was inappropriate. Monthly complaints statistics were collated and a deputy governor or the equalities manager routinely checked a complaints log but findings were not recorded to provide feedback and help improve practice. Most replies to complaints were reasonable although a few were less respectful and curt. Prisoners had access to a trained legal services officer and the service was advertised at induction.
- HP27 The chaplaincy team was well integrated into all aspects of prison life and had a visible profile throughout the establishment. Facilities for worship were very good particularly the mosque which was well equipped and welcoming. In our survey, significantly more prisoners than at the previous inspection felt their religious beliefs were respected. There was an appropriate range of faith and non-faith courses, and the chaplaincy actively assisted prisoners to maintain family ties.
- HP28 The health care team had the strong support of the primary care trust and the governor. The environment in health care was impressive. Health promotion information was freely available. Staff were well trained and motivated and relationships were amicable and professional. There was a wide range of clinical services and clinic attendance rates were generally good. Excellent support from dedicated operational support grade staff ensured that health care ran efficiently. Primary mental health support was good, but there had been some turbulence in the staffing of secondary mental health services. Pharmacy services were generally good but prisoners could not access simple medication, such as paracetamol, outside of health care opening times. Dental services were generally good but there was no triage system to prioritise urgent cases.

Purposeful activity

- HP29 Learning and skills overall lacked effectiveness. The provision of education needed to be better aligned with the identified needs of prisoners. Learning was too often uninspiring and allocation to learning inappropriately sequenced. Resources were

limited and underutilised. Behaviour and engagement were inadequate. Vocational training was better with a breadth of provision and good standards. Activity sessions generally were too short and prisoners did not attend promptly. Library standards and access required improvement. The gym facility was excellent but underused. We found just under a third of prisoners locked in cell during the working part of the day and general access to time out of cell was poor. Outcomes for prisoners in Swinfen Hall were poor against this healthy prison test.

- HP30 The prison provided about 257 education places, but the overall the quality of provision was poor. The new Offender Learning and Skills Service (OLASS) contractor, The Manchester College, had made some improvements in the nine months since taking over the contract, but these were insufficient. Too many classes were cancelled and the range of provision was insufficient. The current needs of the population were not reflected in the curriculum despite identification of the need for it to be realigned. The working day was short and did not promote a work ethic to prisoners. Prisoners were insufficiently engaged at induction and the sequencing of learning was poor. Programmes provided a satisfactory range of levels in literacy, numeracy and English for speakers of other languages (ESOL). The range of personal and social development programmes was very limited. Learning support embedded in the vocational training workshops was adequate. Education places were not sufficiently utilised. There was too much unsatisfactory teaching and ineffective classroom management.
- HP31 Success rates on vocational course, provided for about 160 prisoners, were high. Learners developed important work skills and produced high standards of work quickly and effectively. Provision was well planned and managed. This was particularly in the courses operated by South Birmingham College, which included carpentry and joinery, brickwork, painting and decorating, plumbing and tiling at levels 1 and 2. However, there were problems with cancellation of car valeting and motor vehicle courses run by The Manchester College. The daily time spent on training was too short, due to the affect of regime movement on class time, and did not replicate a realistic working day. Teaching, training and assessment were satisfactory, as was attendance.
- HP32 There was not enough purposeful work to employ all prisoners full time. Work in the main kitchen developed useful work skills but was not accredited. A high proportion of jobs involved cleaning or were menial, and too many prison workers were underemployed. The allocation to work board was ineffective. Some prisoners were unable to access courses due to long waiting lists and others were allocated to inappropriate areas not identified in their sentence plans. This led to passive resistance in engaging in the sessions and often to poor behaviour.
- HP33 The library had been refurbished to a good standard but was too small for the increased population. It could only accommodate 16 prisoners at a time and access was restricted. The stock was adequate for the size of prison. About a hundred prisoners visited the library each week during the evenings but equality of access was not measured. There were good links with vocational training, but links with education were underdeveloped.
- HP34 Recreational PE was available to prisoners during the day, evening and at weekends. PE facilities were very good but were underused, and not all prisoners had sufficient access. The sports field and two all-weather floodlit sports courts provided good

facilities for outdoor activities and there was a wide range of indoor activities. Links with health care were good and involved courses to improve health and well-being.

HP35 The prison reported a time locked figure of just under eight hours a day. Time out of cell was, however, very restricted. The core day suggested that the maximum time available for a fully employed prisoner was eight hours, depending on access to evening association, and could be less than two hours for those without access to regime. Only enhanced prisoners were guaranteed association every weekday evening and other prisoners had sessions on alternate evenings. There was little domestic time and many prisoners were not unlocked until lunchtime. We found just under a third of all prisoners locked in cell during the working part of the day. Access to exercise was limited.

Resettlement

HP36 There was a detailed reducing reoffending strategy, supported by a comprehensive needs analysis. All prisoners were appropriately assessed against resettlement pathways during induction; these linked well to the work of offender supervisors in the offender management unit. The core work of offender supervisors was generally good and coordinated well with community offender managers. Work on risk assessment and motivation required improvement. Public protection protocols were appropriate. There were good arrangements for sentence planning, resettlement boards and pre-release work. Pathway work was generally appropriate, particularly that on attitudes, thinking and behaviour. Outcomes for prisoners in Swinfen Hall were reasonably good against this healthy prison test.

HP37 The overarching reducing reoffending strategy was thorough, linked well to the resettlement pathways and offender management and was supported by a comprehensive needs analysis based on OASys (offender assessment system) assessments. The quarterly resettlement committee and monthly resettlement and offender management strategy meetings were appropriately constituted but attendance was inconsistent.

HP38 Resettlement assessments completed for all prisoners on induction were reasonably comprehensive and offered a good platform for offender management. All prisoners had an offender supervisor, with generally little to differentiate the service received by those formally in or out of scope. Although the core work of offender supervisors in liaising across departments, contributing to reviews and linking with community offender managers was good, that relating to motivation, reinforcing post-programme learning and one-to-one risk assessment was more limited. Contact between prisoners and offender supervisors was generally low. In our offender management survey, only 42% of respondents said they saw offender supervisor monthly, against a comparator of 82%. This was compounded by the regular redeployment of offender supervisors. The use of the *Road to resettlement* self-help manual, supported by peer advisers, was a constructive initiative, but operated in isolation from the work of offender supervisors. Community engagement was generally good, as was the use of mentors and volunteers. The pre-release course was comprehensive and the pre-release/resettlement meetings were also generally well managed and attended; families were invited to these assessments. Public protection arrangements were comprehensive.

- HP39 Approximately 37% of prisoners were serving indeterminate sentences. The 193 prisoners on indeterminate sentences for public protection (IPPs) were managed by probation officer offender supervisors and there was evidence of some individual work with this group. However, there was little provision specifically for IPPs or the 42 lifers. There were no lifer or IPP forums and lifer days were too infrequent. The allocation and co-location of most indeterminate-sentenced young adults with first night prisoners on B wing was also inappropriate. There were problems in progressing IPP prisoners to open conditions.
- HP40 Accommodation support provided by New Bridge was satisfactory. There were good arrangements to identify prisoner need at induction and at resettlement boards. There was reasonable coordination with other departments including the offender management unit (OMU) and community offender managers. No prisoners had been released without fixed accommodation in the last 12 months.
- HP41 There were three employability courses to support prisoners approaching release. The careers information and advice service provider, JHP, provided information, advice and guidance work, with good support and interventions addressing resettlement. JHP could enable prisoners to continue training courses on release through national links in their company. A pilot programme to record and accredit employability skills was a good initiative but at an early stage of development. Work with external agencies to support prisoners on release were limited. Links with two national employers provided opportunities for work on release. The short working day in the prison did not promote or develop a work ethic to prisoners.
- HP42 In the last needs analysis, a third of prisoners had been identified as having a financial or debt problem associated with their offending. Citizens Advice provided support one day a week, and in the last year over £200,000 worth of debt had been identified. However, much of this work remained confidential and was not disclosed to OMU or linked to managing offending behaviour risk.
- HP43 Health staff saw all prisoners on the morning of their release and ensured they had all relevant medicines and documentation, including names and addresses of GP practices if appropriate. The community psychiatric nurse saw those under the care of the mental health in-reach team and, wherever possible, arranged a meeting with the community mental health team to ensure a smooth transition of care.
- HP44 There were well-coordinated and comprehensive drug and alcohol strategy policies, informed by a recent needs analysis. The strategies included performance measures and an annual action plan. The counselling, assessment, referral, advice and throughcare (CARAT) team engaged well with over 150 clients, and the P-ASRO (prison addressing substance related offending) programme was well established. The use of peer supporters was also well managed and offered good support. There was little provision for prisoners with alcohol problems, although almost half the population were assessed as requiring interventions. One-to-one work with primary alcohol users was not available through CARATs, but the COVAID (control of violence for angry impulsive drinkers) programme was due to be introduced. Few prisoners qualified for the drug intervention programme but some were put into contact with community drug and alcohol services.
- HP45 The visitors' centre was reasonably clean but had no refreshment or play area facilities. Family induction visits, in which families were shown around the prison, were an excellent initiative. Visitors could book a visit in person as well as by

telephone and there were good admission arrangements to ensure that visits started at the published time. The environment in the visits hall was reasonable but the furniture was fixed and in a poor state of repair. Closed visits were limited to one hour which was unnecessarily restrictive. In our survey, significantly more prisoners than the comparator said they had been helped to maintain contact with family and friends while in Swinfen Hall. There was currently no accredited parenting or relationship course but there were other initiatives to support family contact including monthly family visits, Storybook Dads, facilitated by the library, and family mediation visits, facilitated by the chaplaincy.

- HP46 Provision of offending behaviour programmes was generally good and appropriate, and included the thinking skills programme, CALM (controlling anger and learning to manage it) and sex offender treatment programme (SOTP). Course completions were also generally high. The deployment of caseworkers for those identified as sex offenders, even those refusing to attend SOTP, was a useful initiative. Post-programme support and reinforcement of learning needs required further development and coordination with the OMU. In our survey, 82% of prisoners said they had been on an offending behaviour course at the prison and 75% felt the programmes would help them on release, which was significantly better than the comparators.

Main recommendations

- HP47 The prison should identify designated first night cells that are prepared for new occupants, and prisoners should not be routinely locked in cell for the first 24 hours after arrival.
- HP48 A, B and C wings should undergo a complete refurbishment to bring them up to modern standards.
- HP49 Every strand of diversity should be covered by an up-to-date policy and related action plan.
- HP50 The quality of the Offender Learning and Skills Service (OLASS) provision should be improved to provide a better experience for prisoners, and the provider should ensure that the contracted hours are fulfilled and that there is sufficient staffing to prevent cancellation of classes.
- HP51 The range of learning and skills provision should be broadened to meet prisoner need.
- HP52 The core day should be revised to ensure longer activity sessions during the working day.
- HP53 Allocation to activities should be improved to ensure that prisoners attend activities that are appropriate, sequenced correctly to respond to sentence planning requirements, and meet their educational and personal development needs.
- HP54 Prisoners should have more time unlocked each day.

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 Escort staff treatment of prisoners was acceptable, although journeys were lengthy and prisoners spent too long in the vehicles once they had arrived.
- 1.2 Reliance provided the escort for court transfers and G4S for prison transfers. Escort staff treated prisoners with respect and the vehicles were clean and carried adequate supplies of food and water. Prisoners told us that they had been given food and water during transfer to the prison.
- 1.3 The number of discharges through reception was relatively low at around 26 a month. The number of prisoners arriving on transfer had increased during the previous two months as the prison was taking more adult prisoners. In May 2010 there were 44 new receptions.
- 1.4 In our survey, 11% of respondents, significantly worse than the comparator of 6%, said they had spent more than four hours in the escort vans. Approximately two-thirds of the population had homes more than 50 miles from the establishment and many of the new adult prisoners had been transferred in from prisons a long distance away.
- 1.5 Prisoners said that they had had to wait for up to one hour in the van outside the establishment when the vehicle arrived and up to 30 minutes in the sterile area awaiting disembarkation. We observed a van that arrived during the lunch period, when the reception was closed, and which had to wait outside the gate for 20 minutes. Once it was in the sterile area, it took 15 minutes to disembark all prisoners.
- 1.6 In our survey, only 16% of respondents, against the comparator of 24%, said they had received written information about the prison before arrival. Prisoners told us that their transition into Swinfen Hall would have been easier if they had been given advance information.
- 1.7 Appropriate paperwork accompanied prisoners arriving and leaving the prison. Prisoner escort records (PERs) were completed and the handover between escort contractor and prison staff was good. In our survey, 92% of respondents, against the comparator of 84%, said that their property arrived at the same time as them.

Recommendations

- 1.8 Planned transfers should be scheduled with a stopover if the travelling time is likely to be lengthy.
- 1.9 Reception should remain open during the lunch period when planned transfers and /or court returns are due. Escort vans should not be left waiting outside the prison and prisoners should be disembarked immediately.

- 1.10 Prisoners should be given written information about the prison before a planned transfer in.

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.

- 1.11 Reception was clean and welcoming but the process was prolonged. First night risk assessments took place but the quality of some was limited. There was no designated first night accommodation which meant that the first night process was disjointed and new arrivals were locked up for long periods. The induction programme was good but there were delays in starting it for some new arrivals which again resulted in long periods of lock up.

Reception

- 1.12 The reception area was clean, welcoming and was fit for purpose. There were seven holding rooms, of which two were used for storage. The holding rooms were clean and adequate and had televisions. There was a well-stocked magazine rack outside the holding rooms. A separate toilet area was clean and well maintained.
- 1.13 In our survey, only 58% of respondents, against a comparator of 62%, said that staff treated them well in reception and only 65%, against 79%, said that they were searched with respect. We observed that reception staff spoke to prisoners in a respectful manner and that the searching of prisoners and their property was satisfactory.
- 1.14 An Insider worked in reception to welcome new arrivals and give them information about the prison to help them settle in. However, we observed two planned receptions when the Insider had been redeployed to other duties and was not available to assist new arrivals.
- 1.15 First night staff attended reception to carry out first night and cell sharing risk assessments. This interview took place in a dedicated and private interview room. The first night risk assessment was completed by the residential wing manager after a further interview. The interviews we observed were comprehensive and conducted sensitively. However, we found examples where the information was limited and often just a checklist.
- 1.16 Prisoners told us that they spent as long as four hours in reception. We observed two new arrivals who entered reception at 1.40pm and were not located on to their residential wings until 4.30pm. The reception process was methodical but unnecessary delays between its components prolonged the time that prisoners spent there.
- 1.17 In our survey, only 66% of respondents, against the comparator of 82%, said that they had been given something to eat in reception. We observed prisoners arrive after lunch who had been on the road since 9am and who were not offered a meal until they were located on the residential wings in time for their evening meal. Prisoners were not offered a drink. Staff told us

that that they could have a drink if they asked but this information was not made clear to prisoners.

- 1.18 New arrivals could buy a smoker's or non-smoker's pack and were allowed to make a free telephone call in reception. They were given clean bedding and adequate supplies of basic amenities.
- 1.19 In our survey only 24% of respondents, against a comparator of 44%, said that they were offered a shower on their day of arrival. We were not assured that a shower was always offered, and the prisoners we tracked through the first days in custody were not given the opportunity of a shower.
- 1.20 Although in our survey fewer respondents than the comparator said that they had seen a member of health care staff in reception, we observed that a nurse attended reception and interviewed prisoners in a dedicated and private room.

First night

- 1.21 The first night policy stated that new arrivals would go to a dedicated first night wing for young adults or adults. We observed that young adults went to B wing but the cells were not dedicated and were not always prepared and ready for new occupants. B wing also held indeterminate-sentenced prisoners which was not appropriate for a first night wing. Adult prisoners were moved to any one of the four adult mainstream wings – D, E, F or G – rather than a dedicated first night wing and as a result, their first night process was disjointed. (See main recommendation HP47.)
- 1.22 New arrivals were locked up for their first night and were not offered association. Staff said that this was done to aid the risk assessment process, although they had little interaction with the prisoner.

Induction

- 1.23 Induction was a rolling programme that young adults and adults completed together over six half-day modules. The content of the modules gave information on the regime, education, gym, first aid/manual handling and offender behaviour programmes.
- 1.24 Induction was split into four separate groups based on the prisoner's day of arrival and scheduled to start the following day. However, we were not assured that the induction programme started the day after arrival and prisoners confirmed this. In an induction class that we observed, the prisoners had arrived on Tuesday and did not start the induction until the following Monday. Other than association and exercise, they were mainly locked behind their door in the intervening period. The prisoners who we tracked through the reception process did not start their induction the day after arrival and were located in their cell with little to occupy them.
- 1.25 The induction programme took place in a dedicated room that could only hold 10 prisoners comfortably although induction records suggested that the number in sessions did not exceed this. In our survey, 92% of respondents said they had been on induction and they were positive about the course. The prison had developed an effective means of tracking new arrivals through the process. The programme was well delivered by a range of prison staff, and was supported by an information booklet.

Recommendations

- 1.26 The prison should monitor and seek to improve prisoner perceptions of the reception process.
- 1.27 The reception Insider should always be available to assist new arrivals.
- 1.28 The first night risk assessments should be meaningful and fully address the risk factors for new arrivals.
- 1.29 Prisoners should not spend prolonged periods in reception.
- 1.30 Prisoners should always be offered the opportunity to have a shower on their day of arrival.
- 1.31 Indeterminate-sentenced prisoners should not be located on the same wing as new arrivals.
- 1.32 The induction programme should always start on the next working day after a prisoner has arrived, and prisoners on induction should spend less time locked in their cell.

Housekeeping point

- 1.33 Prisoners should be offered a drink and a meal in reception.

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 The standard of accommodation varied greatly between the older and modern wings. Access to cleaning materials was limited although communal areas were kept clean. Prisoners had adequate access to laundry facilities but found the policy on the wearing their own clothes difficult to understand. Showers were fit for purpose but prisoners did not have daily access to them.

Accommodation and facilities

2.2 There were nine residential units. A, B and C wings were older designs with three landings with side spurs of cells. Sightlines were poor, which affected staff supervision. D and E wings were more modern, with central office accommodation and two long gallery-style landings. F and G and I and J wings were modern L-shaped units with gallery-style landings and large exercise areas. A, B and C wings held young adults, D and E held a mix of young adults and adults, F and G wings held adult prisoners. I and J wings were the enhanced wings with a mix of young adults and adults.

2.3 The cells on A, B and C wings were small with grilles on the windows; many of the internal plastic windows were fire damaged. The cells had integral toilets and sinks although prisoners' beds were often close to the toilet. The cells were austere and many had graffiti. (See main recommendation HP48.) The cells on the other wings were modern, clean, large and fit for purpose. Cells on all nine wings had privacy keys.

2.4 Communal areas were clean. Each residential unit had an adequate supply of satisfactorily maintained recreational equipment although it was better on the adult wings. There was a comprehensive offensive displays policy which staff and prisoners adhered to.

2.5 Incoming and outgoing mail was dealt with in a timely fashion. However, the prison had a policy that prisoners could have only six stamps in possession; any more than this number had to be sent back. This was justified by allowing unlimited stamped addressed envelopes. This was disproportionate.

2.6 Each wing had enough telephones to offer one per 20 prisoners and all had privacy hoods. However, prisoners were charged £1 for each change to their personal identification number (PIN) telephone account. In the previous six months, more than £1,800 had been accumulated as a result.

2.7 Each residential block had its own prisoner council that met monthly with relevant staff attending to answer action points on their department.

Clothing and possessions

- 2.8 All prisoners could wear their own clothes. However, the policy was confused and both staff and prisoners had conflicting views on when prisoners could wear their own clothes and what combination of own clothes and prison clothes could be worn. The laundry policy allowed for regular weekly exchanges. Items were swapped on a one-to-one basis and each wing had access to a specific laundry.
- 2.9 Prisoners had good access to their stored property via an application. In our survey, 49% of respondents said that they had good access their property against the comparator of 34%.

Hygiene

- 2.10 In our survey, only 50% of respondents, against the comparator of 57%, said that they had weekly access to cell cleaning materials. Except for I and J wings, which had open access to cleaning materials, the other wings had no scheduled cleaning time. Staff stated that prisoners could access cleaning materials if they asked but prisoners told us that this did not happen. Prisoners on all wings told us that they had to use old clothing and their own hygiene products to keep their cells clean.
- 2.11 All units had showers that were relatively modern and clean with individual cubicles that provided privacy. The ceiling in the A wing shower had damp but was due to be repainted under a shower ceilings painting programme.
- 2.12 Prisoners told us that they could not get a shower daily and in our survey only 61% of respondents, against the comparator of 69%, said they could normally shower every day. Staff gave mixed views on who could shower and when but they agreed that prisoners could only shower during association which for the majority of prisoners was every other day.
- 2.13 Prisoners reported negatively about receiving clean sheets weekly.

Recommendations

- 2.14 Prisoners should be allowed unlimited stamps in possession.
- 2.15 Prisoners should not be charged to alter their PIN telephone account.
- 2.16 The own clothes policy should be revised so that it is easily understandable to staff and prisoners.
- 2.17 Cell cleaning time should be built into the regime and all prisoners should have weekly access to appropriate cell cleaning materials.
- 2.18 Prisoners should be allowed daily access to showers.

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.

- 2.19 Many prisoners spoke positively about staff but others questioned their reliability and said they were patronised. In our survey, a significant proportion of prisoners said they felt victimised by staff. The application of petty rules and a poor unlock regime impeded positive relationships and the development of trust.
- 2.20 The findings in our survey about treatment by staff were consistent with the comparators, although only 61% of respondents over 21, compared with 74% of those under 21, said they felt respected by staff. In addition, 28% of all respondents had felt victimised by staff and 24% had felt threatened and intimidated; this was significantly worse than the comparators. The prison's recent Measuring the Quality of Prison Life (MQPL) survey was generally positive about staff-prisoner relationships. For example, 70% of respondents said that they personally got on well with officers. However, some responses raised questions about the level of trust between staff and prisoners – half the respondents said they did not trust the officers.
- 2.21 Prisoners we spoke to were generally positive about the staff with some reservations. Some, particularly adults, felt that staff condescended and spoke down to them. Some saw staff as unreliable in addressing their issues and needs. However, many saw staff as friendly. The relationships we observed appeared relaxed and constructive and we saw many instances of friendly and purposeful engagement. It was clear that staff knew their prisoners well but the restricted unlock regime, combined with petty rules, impeded the development of trust between staff and prisoners.
- 2.22 Staff did not use prisoners' first names or preferred titles when addressing them which also limited the development of mutual trust and respect.

Recommendations

- 2.23 The prison should develop a strategy that focuses on developing trust between staff and prisoners.
- 2.24 Staff should address prisoners by their preferred name or title.

Personal officers

Expected outcomes:

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

- 2.25 There was an effective personal officer scheme and staff showed a good knowledge of their prisoners, even while they were in segregation. Links between personal officers and offender supervisors were satisfactory. Personal officers did not always update electronic case notes weekly.
- 2.26 Every prisoner was allocated a personal officer and a back-up officer, who covered leave or absence, and their names were on cell cards. Wing managers allocated personal officers to prisoners. Changes of personal officers were minimal and usually only when a prisoner moved wings. In our survey, a very high 96% of respondents said they had a personal officer, against a comparator of 69%. All the prisoners we spoke to knew the name of their personal officer and back-up officer.
- 2.27 The personal officer policy detailed all aspects of the scheme and staff we spoke to had a good understanding of the policy and their role as a personal officer. Staff knew their prisoners and showed a good knowledge of their individual circumstances. Links between personal officers and offender supervisors were in place and personal officers played a role in the offender management of their prisoners. Personal officers visited the care and separation unit at least once a week when they had prisoners located there.
- 2.28 Personal officers were required to make entries on their prisoners on to the P-Nomis electronic case note system. Although the policy said that entries should be weekly, not all staff did this. Most made entries fortnightly, and others once a month. The entries on P-Nomis were not always quality checked by a manager. However, their quality was good, and nearly all showed that there had been interaction between staff and prisoners, and that prisoners' individual issues were addressed.

Recommendation

- 2.29 Personal officers and/or back-up personal officers should make at least weekly case note entries on their prisoners.

Housekeeping point

- 2.30 Managers should quality check P-Nomis entries, and record this.

Good practice

- 2.31 *Personal officers visited the care and separation unit each week to see their prisoners.*

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 Formal violence reduction structures and processes were sound and supported a comprehensive strategy and policy. Bullying was evident but the number of fights, assaults and serious violent incidents was reasonably low given the nature of the prison. Reporting systems were effective and the quality of investigations into alleged incidents was good. Despite this, too many prisoners said that they did not feel safe and most of the safety indicators in our survey were worse than the comparators. We also had concerns about governance of the policy on temporary removal from activities which lacked necessary safeguards or properly defined criteria. The integration of vulnerable prisoners, particularly sex offenders, with the general population, was well established and worked reasonably well. Staff were aware of the risks involved and most had a good knowledge of vulnerable prisoners on their wings.
- 3.2 There was a comprehensive violence reduction strategy based on analysis of the pattern of violence in the prison and a prisoner survey in 2009. A full-time violence reduction coordinator – who was also the suicide prevention coordinator – managed its day-to-day operation, supported by residential officers who acted as wing violence reduction representatives.
- 3.3 Given the nature and size of the establishment, the number of recorded violent incidents (fights and assaults) was reasonably low at 42 in 2010 to date. The prison also recorded all reported low-level incidents. The number of these was much higher at more than 200 in 2010 so far and included incidents such as arguments between prisoners, threats, abusive language and all alleged bullying incidents. These were all fully investigated by the violence reduction coordinator or one of the violence reduction representatives. The quality of investigation was particularly good with evidence that all allegations were taken seriously. Outcomes were recorded and consistently acted upon, usually by residential managers supported by wing officers and the violence reduction coordinator.
- 3.4 Organisational arrangements to deal with bullying and the overall level of violence were a high priority. Recording systems were more robust than we usually find and both prisoners and staff were aware of how to use the reporting arrangements.
- 3.5 The violence reduction coordinator maintained a database of violent incidents, which included their nature, location and the names of perpetrators. This was based on information from wing observation books, prisoners' formal complaints and security information reports. The system was well developed and information was properly analysed and presented monthly to the overarching safer custody committee to inform necessary changes to the violence reduction strategy.
- 3.6 Safer custody committee meetings were usually chaired by the head of residence with consistent support from managers in relevant areas such as security and residential units.

They were well attended and representation from senior managers was consistently high. Minutes showed that meetings were properly focused on prisoner self-harm and suicide prevention, and emphasised matters concerning other forms of violence.

- 3.7 There was a four-stage system to challenge anti-social behaviour (green, amber and red levels one and two). Prisoners were put on to the initial (green) level at the first suspicion of violent or bullying behaviour. This was usually sanctioned by residential staff. Their behaviour was openly and closely monitored by staff for a minimum of four weeks then formally reviewed in a case conference attended by residential staff and the prisoner. If the behaviour was proven or continued, the prisoner moved on to the amber stage for at least four weeks of open observation and interviews and could face sanctions under the incentives and earned privileges (IEP) scheme whilst having his movement about the prison restricted. Prisoners could be placed directly on the amber phase depending on the seriousness of the behaviour.
- 3.8 If there were no changes following a further case review, the prisoner was placed on the red zone level one where sanctions, decided during a case conference, were always applied – such as limiting work opportunities, reduction to the basic regime, and removal to the segregation unit. He was required to complete a recently introduced antisocial behaviour intervention pack (Get a grip). This consisted of modules given over seven days to make the perpetrator think about the reasons for his behaviour and its impact on others. No prisoners had yet received the course and, although its content seemed appropriate, it was too early to evaluate its effectiveness.
- 3.9 Prisoners progressed to the final phase (red zone level two) following a case conference where, following improvements in behaviour, some of the restrictions imposed under level one were removed. Prisoners usually remained on this phase for about four weeks.
- 3.10 There were nine prisoners on formal procedures during our inspection – five on green phase, three on amber and one on red level two. Monitoring records we examined showed that regular reviews were held in all cases and included the attendance of personal officers. Officers' entries in documentation showed that they were actively engaged in the day-to-day management of actual and suspected perpetrators.
- 3.11 The prison had also introduced a scheme that allowed the temporary removal of prisoners from off-wing activities. The scheme was used outside other formal systems, such as assessment, care in custody and teamwork (ACCT) self-harm monitoring, the violence reduction strategy and the vulnerable prisoner policy. Although authorised by a governor grade, the criteria for its use had not been stated, and there were no governance arrangements to ensure that improper sanctions were not applied. We found 11 prisoners who had been removed from off-wing activities for a variety of reasons, including prisoners at risk from other prisoners, suspected bullies and a few for different security reasons.
- 3.12 An up-to-date vulnerable prisoner policy had recently been published setting out broad definitions, instructions and protocols to manage, support and assess vulnerable prisoners. The integration of sex offenders and other vulnerable prisoners with the general population was well established and generally worked well. This was evidenced by the relatively low number of fights, assaults and prisoners seeking sanctuary in the segregation unit.
- 3.13 Despite the mostly long-term population, with good staff knowledge of their prisoners, supported by a sound violence reduction strategy and strong personal officer scheme, too many prisoners reported that they did not always feel safe. In our survey, 18% of respondents, against the comparator of 14%, said that they currently felt unsafe, 28% against 21% said that

they had been victimised by another prisoner, and 28% against 23% said that they had been victimised by a member of staff.

Recommendations

- 3.14 There should be governance arrangements to ensure that the temporary removal from off-wing activities is managed correctly and does not include improper sanctions.
- 3.15 Criteria for the use of temporary removal from activities should be introduced.
- 3.16 There should be further consultation with prisoners to explore the reasons for their poor perceptions of safety.

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.

- 3.17 Suicide and self-harm procedures were generally well managed although the number of incidents and open ACCTs was high. Documentation was completed to a satisfactory standard and case reviews were well attended. The use of cameras to observe and supervise prisoners at risk was disproportionate in most cases.
- 3.18 Self-harm and suicide prevention was covered by a comprehensive policy updated in May 2010 and managed under the wider safer custody umbrella. The policy was under the governance of the head of residence, supported by a safer custody manager who managed the day-to-day aspects. In addition to the monthly safer custody meeting attended by multidisciplinary staff (see paragraph 3.6), there was a bi-monthly meeting attended by prisoner Insiders and Listeners and senior officer assessment, care in custody and teamwork (ACCT) self-harm monitoring assessors. This meeting shared ideas and issues and supported the monthly safer custody meeting.
- 3.19 There were 23 Listeners and seven Insiders, who indicated that they were well supported by the safer custody manager and residential wing staff. There were separate rota for young adult and adult Listeners, and five dedicated Listener suites – on B, F, G, I and J wings.
- 3.20 Since the previous inspection, there had been two deaths in custody – one self-inflicted and one natural cause. The Prisons and Probation Ombudsman (PPO) had investigated both. The prison had received the reports and recommendations and formulated an action plan in response.
- 3.21 There were currently 20 open ACCT documents. In the previous six months, 87 ACCTs had been opened and there had been 151 incidents of self-harm (a number of prolific self-harmers had contributed to this number). These figures seemed relatively high for the type of prison.

The prison had reflected on this and concluded that the distances newly arrived adult category C prisoners were being held from their homes and the location of young adult prisoners in the prison's older and more austere accommodation may have influenced the rise. The findings in our survey indicated that at initial reception significantly more respondents than the comparator said that they had felt suicidal or depressed (19% against 13%). The prison had not instigated any actions as a consequence of their findings.

- 3.22 The quality of ACCT documentation was mostly good. Immediate issues were dealt with well, and the ongoing record showed good interaction between staff and those at risk. Care maps and post-closure reviews were limited and needed to be improved to be meaningful for assessing and dealing with immediate and future risk factors.
- 3.23 Case reviews were timely and well attended by a multidisciplinary team, including health care staff, and the prisoner. Reviews explored all issues with the prisoner and sought to minimise risk.
- 3.24 Training records were unavailable and the safer custody team was not fully assured about the extent of ACCT training for staff. Night staff told us they had been trained in the previous year, and they were fully aware of their responsibilities and the individual prisoners on ACCT at the time of inspection. All night staff carried anti-ligature knives on their person for quick access in an emergency.
- 3.25 Prisoners deemed to need a constant watch and who had immediate medical needs were transferred temporarily to a prison nearby that had 24-hour health care cover. Prisoners risk assessed by health care staff as needing constant watch but not 24-hour health care were placed on to constant supervision. This procedure ensured that a member of staff supervised the prisoner when he was out of his cell at activities etc (although little interaction took place). When in his cell, the prisoner was put in a camera cell observed by staff, which gave 24-hour supervision coverage for the duration of his stay. The monitor for the cameras was in the general wing office on A, B and C wings – visited by staff, visitors and prisoners – and in a more discreet office on the newer wings. In the previous six months, constant supervision had been used 16 times, in some cases for up to 14 days. We also observed prisoners on normal ACCT procedures who were located in a camera cell. The governance of the camera arrangements was weak.

Recommendations

- 3.26 The prison should work with new arrivals to alleviate their initial concerns and follow up their own findings regarding the rise in the number of ACCT documents.
- 3.27 The quality of care maps and post-closure reviews should be improved.
- 3.28 Up-to-date ACCT training records should be maintained.
- 3.29 The constant supervision policy should be amended to ensure that prisoners at risk are managed without the use of intrusive methods.
- 3.30 Prisoners on normal ACCT procedures should not be located in a camera cell but should be managed through staff interaction.
- 3.31 Governance arrangements for the use of cell cameras should be improved.

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.

- 3.32 Prisoners had ready access to applications and complaints but were negative about the timeliness of responses. Application responses were not routinely monitored. One-third of respondents in our survey said staff had encouraged them to withdraw complaints. Complaint boxes were emptied by night staff, which was inappropriate. Most responses were reasonable but some were less respectful and terse.
- 3.33 Information about request and complaint systems was explained during induction and incorporated into the induction information booklet. Prisoners had ready access to application forms on residential wings. In our survey, 95% of respondents said it was easy to get an application form, significantly better than the comparator of 84%.
- 3.34 There was a generic application form with specific forms for certain departments, such as health care, access to property in reception and applications for a transfer. Submitted applications were logged in a book kept in the wing office, which included a record of the date of receipt, the nature of the request, and the department to which it had been sent for action.
- 3.35 Replies to applications were not recorded in wing logbooks but were usually sent direct to the prisoner. There was no evidence that the time taken to deal with applications was monitored. In our survey and in discussions, prisoners expressed dissatisfaction with the timeliness and fairness of application responses. In our survey, only 42% of respondents, significantly worse than the comparator of 50%, felt applications were dealt with promptly and 58%, against 63%, felt they were dealt with fairly.
- 3.36 The full range of formal complaint forms was readily available on residential units. Complaint boxes were emptied by the night orderly officer which was inappropriate and could undermine prisoner confidence in the scheme.
- 3.37 In the previous six months, there was an average of 160 complaints a month. Following the transition to the P-Nomis IT system, managers were aware of problems with ensuring prisoners' earnings were accurate, and there had been a significant number of complaints about this. Monitoring records showed that in 2009-10 most complaints related to prisoners' finances, the prison regime, confidential access and property issues.
- 3.38 Monthly monitoring statistics collated by the complaints clerk showed that most but not all complaints were responded to within the required timescales. In our survey, only 37% of respondents, against the comparator of 44%, said complaints were dealt with promptly.
- 3.39 The deputy governor or equalities manager checked and signed the complaints log each week. We were told this check included a random sample of complaint responses but records of such checks to provide feedback and improve practice were not retained. Most of the complaint responses we sampled were reasonably polite and provided a full response but a few were less respectful and curt. On complaint had resulted appropriately in the commissioning of a formal investigation.

- 3.40 The complaints log showed that in the year to date, prisoners had formally withdrawn eight submitted complaints. In our survey, 34% of respondents, significantly more than the comparator of 21%, said they had been encouraged to withdraw a complaint. Prisoners also told us that staff discouraged the submission of formal complaints.
- 3.41 Complaint monitoring data were included in the safer custody committee report. Complaints were discussed at senior management meetings and in bilateral meetings with managers.

Recommendations

- 3.42 Managers should ensure prisoners receive a prompt response to submitted applications and the timeliness and quality of responses should be monitored formally.
- 3.43 Complaints boxes should only be opened by staff responsible for processing complaints.
- 3.44 Prisoners should receive a response to their complaint within three days, or 10 days in exceptional circumstances.
- 3.45 The quality of complaint responses should be improved and formal quality assurances procedures should be introduced, with findings recorded and shared with managers.
- 3.46 Managers should monitor the reasons why complaints are withdrawn, and should ensure that all prisoners who wish to complain are able to do so.

Legal rights

Expected outcomes:

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

- 3.47 Prisoners had access to a trained legal services officer, and the service was advertised at induction.
- 3.48 The prison had several staff who had attended formal legal services training, although in practice most applications were dealt with by one trained and experienced officer based on a residential unit. The service was advertised in the induction booklet and staff on other wings were aware of who to contact for advice. No designated facility time was allocated for the work, but the officer said managers were supportive and allocated facility time to deal with urgent applications. The majority of applications related to appeals or solicitors contact details for assistance with adjudications.
- 3.49 In our survey, only 52% of respondents, against the comparator of 58%, said it was easy to attend legal visits. Two-hour legal visits were held on four weekday mornings. There were no designated legal visits booths and legal visits took place in the visits hall. Managers told us the prison had secured funding to adapt some closed visits rooms to provide four legal visits booths.

Recommendation

- 3.50 Designated legal visits booths should be installed.

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.

- 3.51 The busy chaplaincy team was well integrated into all aspects of prison life and was visible throughout the establishment. Facilities for services were well equipped and welcoming, and more prisoners than at the previous inspection said their religious beliefs were respected. An appropriate range of faith and non-faith activities was available. The chaplaincy team assisted prisoners to maintain family ties and provided good support for families.
- 3.52 The chaplaincy team was led by a full-time Church of England chaplain and included chaplains from a range of faiths, supported by volunteers. The team was busy, had a high profile across the establishment and was integrated into all aspects of prison life. This included attendance at key meetings, such as safer custody, ACCT assessor and diversity meetings. The team met regularly and shared duties such as visits to the segregation unit and induction. In our survey, 63% of respondents, significantly better than the comparator of 56%, said they were given information about the chaplaincy on their day of arrival and 63%, against 45%, said they met a chaplain or religious leader in their first 24 hours.
- 3.53 Prisoners were given a copy of the chaplaincy newsletter which included names of the team and the times of weekly services. In our survey, 52% of respondents, significantly better than the 45% at the previous inspection, said they felt their religious beliefs were respected. Foreign national prisoners and Muslim prisoners were more positive than others about being able to speak to a minister of their faith in private and 65% of Muslim respondents, against 50% of non-Muslims, said their religious beliefs were respected. Muslim prisoners expressed a high regard for the full-time Muslim chaplain.
- 3.54 The chaplaincy team maintained a central list of prisoners who attended or wished to attend weekly services and forwarded this to the security department which noted any concerns about individuals to inform the team. Prisoners who wished to attend could have their names added to the list by speaking to a member of wing staff or the chaplaincy. The level of attendance at all services was high with an average weekly attendance of around 160 prisoners at all religious services in the previous year.
- 3.55 Facilities for worship were very good and all areas, particularly the relatively new mosque, were well equipped, clean and welcoming. The team used the facilities well to provide pastoral and spiritual support, and they were also used by other departments.
- 3.56 The chaplaincy facilitated a range of faith and non-faith activities, including the Alpha course, Islamic, Sikh and Hindu teaching groups and Christian prayer groups. A volunteer led a weekly guitar group. The prison was facilitating its second bereavement group, 'A time for hope', which began in August 2009. Nine prisoners were participating in the seven-week course which was led by the team and a chaplaincy volunteer. A Christian faith group, 'Youth with a future', was awaiting security clearances for staff.

- 3.57 The chaplaincy organised twice-yearly inter-faith worship sessions to enable prisoners to develop an awareness of different faiths and religious beliefs. Other departments, such as catering, assisted in the celebration of major religious festivals. An active prison visitor scheme was also run through the chaplaincy.
- 3.58 The chaplaincy team was actively involved in supporting prisoners' families and assisting prisoners to maintain family ties. In May 2010, there had been 50 telephone contacts with families. The team also facilitated a range of family visits in the chapel, including bereavement visits, family visits for newborn children and family mediation. Members of the team also visited the visitors' centre and visits room to meet families.

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.

- 3.59 The establishment did not yet provide clinical substance misuse services, but was due to introduce the integrated drug treatment system (IDTS). Mandatory drug testing results and finds indicated a low availability of illicit drugs.

Clinical management

- 3.60 Prisoners had to complete detoxification before they arrived at Swinfen Hall and the establishment did not currently accept those maintained on opiate substitutes. There had been a short-term exception for a prisoner on a very low level of methadone. The integrated drug treatment system (IDTS) was due to be introduced in autumn 2010, but demand was unlikely to be high.
- 3.61 A draft cluster service specification contained detailed prescribing protocols, clinical management procedures and staffing arrangements. The health services manager and two nurses at Swinfen Hall were completing part two of the Royal College of General Practitioners training in the management of substance use and work was progressing to create a treatment/drug administration area.
- 3.62 Counselling, assessment, referral, advice and throughcare (CARAT) services were already based in the health services building which provided a high standard of accommodation and facilities. There was a basic joint working protocol between health and CARAT teams, but there was no multiagency meeting to plan and coordinate clients' care.
- 3.63 Drug and alcohol users with complex needs had good access to primary and secondary mental health services and a dedicated counselling service was due to commence.

Drug testing

- 3.64 There was little evidence of illicit drug use. The 2009-10 random mandatory drug testing (MDT) rate averaged 2.4% against a target of 5.1%, and 11 prisoners had tested positive under suspicion MDT (40.7%). No positive results had been recorded in April or May 2010.

- 3.65 The MDT programme came under the remit of the security department. Officers met testing targets but not all suspicion tests were completed within the required timeframe and none took place during some months although drug-related security information reports had been submitted.
- 3.66 All positive tests were for cannabis and finds confirmed that this was the drug of choice. However, some anabolic steroid finds had also been made. The availability of hooch was described as 'seasonal'.
- 3.67 Appropriate procedures were followed and the dedicated testing suite was clean. A wing breakdown of positive results did not point towards a particular section of the population. There were good links between the security and drug strategy departments, and there was a range of supply reduction measures.

Recommendations

- 3.68 Joint work between counselling, assessment, referral, advice and throughcare (CARAT) and health services should be formalised to improve care planning and coordination.
- 3.69 The mandatory drug testing (MDT) programme should be adequately resourced to undertake the required level of suspicion testing.

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 There was no overarching diversity policy. Formal monitoring to ensure equality of treatment did not cover all diversity strands. Completed impact assessments focused solely on race but a timetable for the completion of single equality impact assessments had been drawn up. The prison had recently appointed a full-time equalities manager.
- 4.2 The prison did not have an overarching diversity policy and not all diversity strands were covered. There were separate policies covering service delivery for foreign nationals and prisoners with disabilities, and a separate race equality policy. An equalities and disability action plan had been incorporated into the race and equality action plan which had identified the need to develop a local policy to cover all diversity strands but no one had been allocated responsibility for this and there was no target date for its completion. (See main recommendation HP49.)
- 4.3 The prison had recently appointed a full-time equalities officer who was the race equality officer (REO) and also responsible for other diversity strands. He was supported by a deputy equalities manager, a foreign national coordinator and disability liaison officer (DLO). There were officer and prisoner diversity representatives on residential units. Some representatives were new and there were currently no prisoner representatives on two wings although recruitment was under way. There were separate foreign national prisoner representatives and liaison officers. Job descriptions for diversity representatives focused chiefly on race although representatives we spoke to understood that they provided a support service for all diversity strands. Eight of the prisoner diversity representatives had been trained but four still needed to be trained.
- 4.4 The monthly race and equalities team (REAT) was chaired by the deputy governor and attended by representatives from a range of relevant departments and the external community and advice project Prison Link, which provided support to prisoners and their families. Meetings were well attended by prisoner diversity representatives who told us they felt fully involved in meetings. The majority of agenda items related to race. Diversity, DLO and foreign national reports were standing agenda items but the discussions were usually limited to an overview of the number of foreign national prisoners or no issues were raised.
- 4.5 There was no formal monitoring of the different groups of prisoners to ensure equality of treatment and impact assessments completed and reviewed to date focused solely on race. A timetable of single equality impact assessments had been completed.
- 4.6 In our survey, 6% of respondents said they were a Gypsy, Romany or Traveller, but the equalities manager was not aware of any prisoners from these groups, and there was no specific support for them.
- 4.7 In addition to racist incident report forms, a local pro forma attached to complaint forms allowed prisoners to indicate if they felt their complaint was related to a diversity issue and

inequality of treatment. This system had been in place for around 10 months. Only two complaints with this pro forma completed had been received to date.

- 4.8 The prison was focusing on ensuring that all staff had received the 'Challenge it, change it' training, with a target of all staff being trained by January 2011. To date, 23% of staff had attended the training.

Recommendations

- 4.9 Prisoner monitoring should include all elements of diversity, including disability, age and religion.
- 4.10 There should be equality impact assessments for all areas of diversity.
- 4.11 The prison should ensure there are appropriate support mechanisms for prisoners from Gypsy, Romany or Traveller backgrounds.

Housekeeping point

- 4.12 Job descriptions for diversity staff and prisoner representatives should clearly outline the full range of duties across all diversity strands.

Race equality

4.13 Structures to support race equality work were appropriate, and a significant number of prisoner representatives attended the monthly race equality action team (REAT) meeting. Members of the REAT were well advertised around the prison. In our survey, black and minority ethnic prisoners were more positive than white prisoners on many indicators. Ethnic monitoring data had not identified any areas of concern, and local monitoring had begun to include allocation to wing-based work. Racist incident report forms were usually dealt with in a timely manner but some investigations were insufficient.

- 4.14 Approximately 37% of prisoners were from black and minority ethnic backgrounds. Just under 5% of staff in contact roles with prisoners were from black and minority ethnic backgrounds. The equalities manager, who was also the race equality officer (REO) had recently attended the national training, and had some support from a deputy equalities manager.
- 4.15 There were race equality notice boards in key areas throughout the prison, including each residential unit. Photographs of race and equality action team (REAT) members, including prisoner and staff wing representatives, were displayed, and a REAT newsletter included the names of wing representatives and promoted events to celebrate cultural diversity.
- 4.16 In our survey, black and minority ethnic respondents were more positive than white prisoners across 15 indicators including perceptions of safety. For example, only 27% of black and minority ethnic respondents said they had ever felt unsafe, significantly better than the 40% of white respondents. Only 17% of black and minority ethnic prisoners said they had ever felt threatened or intimidated by another group of prisoners, compared with 37% of white respondents. There were, however, some areas where black and minority ethnic prisoners had poorer perceptions than white prisoners, including their experience of the incentives and earned privileges (IEP) scheme and the range of prison shop goods suitable for their needs.

The latter issue had been identified following the review of the canteen impact assessment in 2009.

- 4.17 The REAT monitored SMART (systematic monitoring and analysing of race equality treatment) ethnic monitoring data, which included mandatory and locally agreed fields. Local monitoring included wing allocation. In the previous month, the equalities manager had begun to monitor the allocation of wing-based work, such as servery and cleaning jobs. Although the first month's data had not shown any inequality of treatment, some black and minority ethnic prisoners told us their perception was that fewer wing-based jobs were allocated to them. An action plan was generated at each meeting to note and address areas of concern, although no significant ones had been noted in the data in the previous year. Prisoner representatives had received some training in understanding SMART data.

Managing racist incidents

- 4.18 Racist incident report forms (RIRFs) were available on all units and in other key areas, such as the visits hall. Envelopes were provided with forms so they could be submitted confidentially. Complaints boxes were emptied by the night orderly officer, which was inappropriate (see recommendation 3.43). There had been 70 racist RIRFs submitted in 2009, broadly the same number as in 2008, and 25 had been received to date in 2010. There were no outstanding complaints at the time of the inspection. The majority of RIRFs were investigated by the deputy equalities manager, although the equalities manager intended to deal with future RIRFs.
- 4.19 The REAT discussed RIRFs submitted during the previous month, and there was an overview of each incident. However, RIRFs were not analysed by location or type to identify any patterns or trends. The equalities manager had recognised this gap and had created a local database that could be readily used to provide this data.
- 4.20 RIRFs were usually dealt with in a timely manner and complainants received a feedback questionnaire, although these were not analysed routinely to improve practice.
- 4.21 We reviewed a sample of RIRFs and found some investigations to be unsatisfactory. Some lacked rigorous enquiry and did not include a record or summary of interviews, which made it unclear how the conclusion was reached. In one example, a prisoner had alleged that a member of staff had used racist language, but the member of staff did not appear to have been interviewed and the complaint was not pursued, as the prisoner told the investigator that the matter had been satisfactorily resolved by another manager.
- 4.22 The deputy governor and REAT chair countersigned all completed RIRFs. In some cases, such as the example above, areas of concern were noted, but there were no records that concerns were acted upon and addressed.
- 4.23 Some RIRFs in our sample were submitted by staff after a prisoner had accused them of being racist. There was no evidence that the reason for the accusation was thoroughly explored.
- 4.24 The equalities manager shared an office with the complaints clerk and there were good links between the two processes. The equalities manager saw all submitted complaints that indicated a racial aspect. There were also links with the security department. We saw a recent example where a security information report had been raised when racist language had been found during routine mail monitoring and the equalities manager had been appropriately informed.

- 4.25 The regional diversity manager undertook independent scrutiny of RIRFs and a volunteer on a work placement in the prison had recently completed a quality check of a random sample of RIRFs and provided written feedback.
- 4.26 There were no formal interventions to challenge inappropriate behaviour identified through RIRFs or for prisoners who had previous convictions for racially motivated offending. One RIRF noted that it was the third occasion when staff had been required to speak to the prisoner about alleged racist behaviour. However, there was no evidence of any formal measures taken as a result – such as use of IEP or adjudications – and the prisoner was not included on the register of racist prisoners maintained by the security department.

Race equality duty

- 4.27 The equalities manager met prisoner diversity representatives before the REAT, and there had been focus groups including black and minority ethnic prisoners to inform the review of impact assessments but there was no wider regular consultation with black and minority ethnic prisoners. Notes of meetings with diversity representatives indicated that often no issues were raised. The equalities manager had recognised this and was developing the agenda to ensure an appropriate focus on race issues.
- 4.28 There was a quarterly themed cultural quiz for staff and prisoners to celebrate cultural diversity and raise awareness. The quiz included the display of cultural material and information throughout the prison, and had involved other departments such as the kitchen, which had developed a themed menu for previous quizzes.

Recommendations

- 4.29 The race equality action team (REAT) should analyse submitted racist incident report forms to identify and respond to any patterns or trends.
- 4.30 The equalities manager should routinely analyse completed racist incident report form (RIRF) feedback forms, and the REAT should regularly discuss the information and, where necessary, act upon it.
- 4.31 Reports of racist incidents should be fully investigated, including interviews with all those involved, and completed investigations should clearly evidence how conclusions were reached.
- 4.32 There should be records of action taken in response to queries and concerns raised by the REAT chair when countersigning racist incident report forms.
- 4.33 Investigations of complaints raised by staff defending themselves against an accusation of racism should explore the original reason for the accusation.
- 4.34 There should be a programme to challenge racist and discriminatory prisoner behaviour.
- 4.35 The equalities manager should ensure the appropriate and consistent use of formal measures, such as incentives and earned privileges reviews and adjudications, to challenge prisoners found to have engaged in racist behaviour.
- 4.36 There should be regular consultation with black and minority prisoners.

Religion

- 4.37 There was no monitoring to assess the impact of the regime on different religious groups. In our survey, Muslim prisoners were more negative than non-Muslims across a range of indicators.
- 4.38 In our survey, only 42% of Muslim respondents – significantly worse than the 57% for non-Muslims – said they were on the top level of the IEP scheme and 30%, compared with 15%, said they had spent a night in the segregation unit in the previous six months. In addition, 14% said they had been victimised by staff because of their race or ethnic origin, compared with 5% of non-Muslims. Only 15%, compared with 27% of non-Muslims, said staff spoke to them during association. However, Muslim respondents were more positive about access to a religious leader and respect for their religious beliefs (see paragraph 3.53).
- 4.39 Equality of treatment was not formally analysed by religion (see recommendation 4.9). The coordinating chaplain and full-time Muslim chaplain were members of the REAT but religion was not covered in the equalities and diversity action plan (see main recommendation HP49). There were no focus groups for Muslim prisoners or other religious groups linked to the work of the REAT.

Recommendation

- 4.40 The prison should explore the reasons why Muslim prisoners hold more negative perceptions than non-Muslims.

Foreign nationals

- 4.41 The foreign national coordinator was new to the role. The published policy was informed by two focus group discussions but not by a comprehensive analysis of need and there were no action points relating to foreign national prisoners in the equalities and disability action plan. Monthly foreign national meetings facilitated by wing-based foreign national liaison officers were not well attended. Prisoners expressed mixed views about the value of bi-monthly surgeries with the UK Border Agency. There were no records that formal telephone interpreting services had been used in the last year and there was an over-reliance on using prisoners as interpreters. The prison had bought a tool to translate local policy documents.
- 4.42 There were 55 foreign national prisoners from about 26 countries. These included two detainees. The largest groups were from Somalia and Jamaica.
- 4.43 Services for foreign national prisoners were described in a policy published in 2009. The policy should have been based on a needs analysis but never had been undertaken. There had been two focus groups in 2009, one with foreign national prisoner representatives and one with foreign national liaison officers (FNLOs), and the findings of these had been used to inform the policy. The equalities and disabilities action plan had no action points to drive forward work with foreign national prisoners.
- 4.44 Strategic responsibility for foreign national prisoners had transferred between several managers since the previous inspection and the new foreign national coordinator (FNC), a residential developing prison service manager, had taken on responsibility for the role eight

weeks previously. He had received no training for the role and had additional residential responsibilities. There were nine designated FNLOs on the residential units. Some had received awareness training and some had visited an immigration removal centre to see how it dealt with foreign national prisoners. FNLOs were given some facility time for their work and those we spoke to were clear about their responsibilities.

- 4.45 An initial interview with foreign national prisoners was supposed to be completed during the first night interview. However, the comprehensive questionnaire was not completed consistently and the few that were completed were retained by the FNC and not shared with FNLOs or personal officers.
- 4.46 In our survey, foreign national prisoners responded more negatively than British nationals across a range of indicators, particularly feelings of safety and victimisation by other prisoners. Only 68%, significantly worse than the 82% for British respondents, said they felt safe on their first night; 58%, against 31%, said they had ever felt unsafe, and 46% against 27%, said they had felt threatened or intimidated by other prisoners.
- 4.47 Monthly meetings were held for foreign national prisoners and facilitated by FNLOs, who shared responsibility for chairing a meeting across one of three residential units or held a separate meeting for their own wing. There was a standard agenda for all meetings. Notes of meetings showed that attendance was very limited. FNLOs knew the individual circumstances of prisoners on their wing and we were told they followed up prisoners who declined to attend meetings.
- 4.48 A quarterly foreign national committee had met since October 2009 to monitor the delivery of the policy. Meetings were attended by FNLOs when they were available. The most recent meeting, in March 2010, had not been well attended. It was not clear how information from these meetings linked strategically with the work of the REAT. There were identified foreign national prisoner representatives but they did not attend the committee meeting. Some foreign national representatives said they felt their work was not given as much priority or support as other prisoner representative roles, and that they were not readily identifiable to foreign national prisoners on the wings.
- 4.49 There were bi-monthly surgeries with immigration staff from the UK Border Agency (UKBA) but foreign national prisoners had mixed views about the value of these and said that staff sometimes had no knowledge of their circumstances or case. The prison had no links with agencies able to provide independent immigration advice.
- 4.50 Prisoners were often informed of a deportation decision close to their release date – one of the detainees in the prison at the time of the inspection was only told of the decision to deport the day before his release.
- 4.51 Foreign national prisoners were eligible to receive a £10 international telephone card every two months if they had received no social visits. Cards were distributed by FNLOs. Foreign national prisoners we spoke to were aware of the cards but were confused about whether they were charged a connection fee to make calls. All prisoners received the same value card irrespective of the country they were calling and the cost of such calls.
- 4.52 There was an over-reliance on the use of other prisoners to act as interpreters. There was no record of the prison using formal telephone interpreting services in the previous year, although staff were aware of the service. The prison maintained a list of all foreign national prisoners and the languages they spoke, and a similar list of staff able to act as interpreters.

- 4.53 The prison had recently bought a tool to translate local policy documents, which was installed in the library. The library had recently introduced a specific session for foreign national prisoners and endeavoured to source reading material to meet their needs.

Recommendations

- 4.54 The foreign national policy should be informed by an annual needs assessment.
- 4.55 All members of the foreign national team should receive specific training for the role.
- 4.56 Initial interview forms should be completed for all prisoners identified as foreign nationals, and the completed forms should be shared with foreign national liaison officers and wing staff to ensure they are aware of prisoners' individual needs.
- 4.57 The foreign national team should consult all foreign national prisoners to explore the reasons for poor attendance at monthly meetings and the negative findings in our survey.
- 4.58 The foreign national coordinator should ensure all members of the foreign national committee regularly attend quarterly meetings, and that the membership includes prisoner representatives.
- 4.59 Action points from the quarterly foreign national committee should be shared with the REAT.
- 4.60 There should be appropriate priority and support to prisoner foreign national representatives, who should be promoted and readily identifiable to foreign national prisoners.
- 4.61 The prison should work with the UK Border Agency to ensure that foreign national prisoners have regular access to UKBA representatives who are familiar with their individual cases and circumstances. (4.61)
- 4.62 Foreign national prisoners should have access to accredited independent immigration advice. (4.62)
- 4.63 The prison should work with the UK Border Agency to ensure that decisions on whether to proceed to deportation or removal are made as early as possible in a prisoner's sentence, and at least six months before the earliest date of release. (4.63)
- 4.64 Foreign national prisoners should not be charged a connection fee to make international calls, and the value of telephone card they receive should be based on their individual circumstances.
- 4.65 Prisoners should have access to accredited translation and interpreting services, particular when there are issues of confidentiality.

Housekeeping point

- 4.66 Information about international telephone cards should be clearly communicated to foreign national prisoners.

Disability

- 4.67 Prisoners could disclose disabilities on arrival, and the disability liaison officer conducted follow-up assessments. There were some adapted cells and personal evacuation plans for those who needed them.
- 4.68 The prison had a disability policy that covered both staff and prisoners and a three-year disability action plan for 2008-2011. The progress made against identified action points was not clear and some of the target dates had passed.
- 4.69 The disability liaison officer (DLO) had taken on responsibility for the work in March 2010. An officer on a residential unit, he had been allocated some facility time to undertake the work but had not received any formal training. The equalities manager was to be the DLO's line manager. The DLO said managers were supportive of the work.
- 4.70 In our survey, 9% of respondents said they had a disability. The DLO maintained a central register of prisoners who had disclosed disabilities and this information was routinely shared with residential managers, personal officers and other relevant departments, including education. The records listed 29 prisoners with disabilities, seven of whom had physical disabilities, and 12 of those on the list reported that they had dyslexia.
- 4.71 New arrivals could disclose disabilities, initially during the health care screening and then through a questionnaire that they completed during induction. The questionnaire had been translated into two foreign languages using the local translation tool (see paragraph 4.53). The DLO conducted follow-up interviews with prisoners who declared disabilities to identify and respond to any individual needs. Prisoner diversity representatives had recently been given the names of all prisoners on their units who had disclosed disabilities.
- 4.72 The DLO said there was a positive working relationship with health care and learning and skills staff. The previous DLO had been trained to undertake learning needs assessments and there were plans to train the current DLO. The DLO had put together folders that included awareness raising information on learning difficulties, such as dyslexia, which were available for staff and prisoner representatives on residential units.
- 4.73 There were several adapted cells on the newer accommodation that could accommodate wheelchair users and the newer units had lifts. Residential senior officers completed personal emergency and evacuation plans for prisoners who required them.
- 4.74 There was no opportunity for prisoners with disabilities to meet as a group and there was no formal carer system.

Recommendations

- 4.75 The REAT meeting should regularly review and update the disability action plan, and progress against identified action points should be clearly recorded.
- 4.76 The disability liaison officer should receive appropriate training.
- 4.77 There should be regular consultation with prisoners with disabilities to identify and respond to any areas of concern.

4.78 A formal carer scheme should be introduced.

Sexual orientation

4.79 No work had been undertaken so far on this strand of diversity.

4.80 Sexual orientation was not a recognised strand in existing diversity policy documents and there were no targets in the equalities and diversity action plan to drive service delivery and raise awareness. In our survey, 3% of respondents said they were gay or bisexual. There were no specific support groups for transgender, gay or bisexual prisoners.

Recommendation

4.81 Support groups for transgender, gay and bisexual prisoners should be introduced.

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 Prisoners had good access to health services and appeared content with the care they received. The South Staffordshire Primary Care Trust (PCT) provided excellent support to the prison, and health care had strong backing from the governor. There was good access to all clinics and a wide range of visiting health professionals supported the in-house services. Mental health services were generally good. Although secondary services had been turbulent in the previous 18 months, a new provider had been selected. Staff were well trained and highly motivated and there was a high level of mutual respect. Pharmacy services were good but more access to pharmacy professionals was needed. Dental services were also good with a manageable waiting list.

General

- 5.2 The South Staffordshire Primary Care Trust (PCT) was responsible for the delivery of health services at the prison. The prison was one of six within the PCT and many organisational and clinical policies were PCT-wide. The PCT provided excellent support to prisoners and staff. A health needs analysis had been completed in December 2009, followed by a prison health action plan for 2010-11. The PCT was heavily engaged in Department of Health (DOH) initiatives, such as 'Transforming community services', and was developing a degree in offender health with a local university. Its health care managers met monthly and it was involved in the regional offender health meetings. Various other meetings included the prison partnership board. The relationship with the PCT and local health economy was excellent and there was much evidence of strong interaction between the groups.
- 5.3 There was evidence that prisoners could access health services equivalent to those found in the community. A good range of DOH quality and regulatory frameworks were in place and accessible to staff.
- 5.4 The health care department was five years old. It was a very patient-focused area with an excellent reception. Health promotion and contemporary reading material were available for waiting prisoners. The treatment, office and clinical areas were clean and generally tidy. A full-time prisoner cleaner covered the whole area every day.
- 5.5 The dental surgery was spacious, clean and tidy, although not all edges of the floor were sealed. The dental chair, unit, light and X-ray machine were modern and functional. Dental staff did not know if an amalgam separator was fitted to the dental unit. Dental equipment was satisfactory, except that there were insufficient three-in-one syringe tips. There was no amalgam spillage tray. Other equipment was checked daily. A washer/disinfectant was not fully fitted and therefore unusable.
- 5.6 Clinical and hazardous waste was stored appropriately and disposed of by external contractors but documentation relating to this was unavailable. Servicing of autoclave, compressor and X-ray machines was in date. The automatic X-ray developer was faulty; although due to be

repaired. Most policy documents relating to dental practice were present. There was no dedicated dental resuscitation equipment.

- 5.7 There were treatment rooms on some residential areas, all of which were clean, tidy and appropriately furnished.
- 5.8 One of the nurses was responsible for infection control matters and liaised with the PCT infection control lead. There had been an audit three months previously.
- 5.9 Relationships between prisoners and health care staff were very good and showed mutual respect. This was supported in our survey in which 63% of respondents said the overall quality of health care was good, against the comparator of 54%. Interpreting services were rarely used, and there was limited health information in languages other than English.
- 5.10 There was no evidence that security procedures impeded treatment in the prison or in outside NHS facilities. GPs saw patients in wing treatment areas wherever possible.

Recommendation

- 5.11 The dental surgery should have dedicated resuscitation equipment.

Housekeeping points

- 5.12 The washer/disinfector should be functional and re-sited to provide compliance with essential dental practice guidelines.
- 5.13 Health promotion publications should be available in a range of languages.
- 5.14 All edges of the dental surgery floor should be sealed.
- 5.15 An amalgam separator should be provided in the dental surgery.
- 5.16 There should be sufficient three-in-one syringe tips for single use only.
- 5.17 An aluminium foil-lined spillage tray should be provided.
- 5.18 Copies of waste disposal contracts should be held in the dental surgery.

Clinical governance

- 5.19 Clinical governance arrangements included the management and accountability of staff. Staffing levels were appropriate, although there was some long-term sickness absence among nursing staff. PCT bank staff covered absences. Nursing staff had a good range of qualifications, including asthma, nurse prescribing and mental health. Health care assistants provided additional support. Administrative support was low for the number of prisoners and nurses had to perform many administrative task.
- 5.20 Three operational support grade (OSG) staff worked in health care and provided excellent support to the department. They managed the throughput of prisoners, supervised medication rounds, and ensured that security and discipline matters were managed well. However, most of their role was custodial and therefore not a PCT responsibility.

- 5.21 The GPs came from community practices and three doctors provided five sessions a week. The out of hours service was provided through a contracted third party. Health care staff said the system worked well, although residential staff cited an incident when they said the out of hours service would not attend the prison.
- 5.22 Staff training and clinical supervision were fully supported and access to professional development courses was good. NHS publications and guidelines were readily available for all health staff.
- 5.23 Emergency equipment was located in health care and on wing treatment rooms. The equipment was appropriate and daily checks were carried out and documented. Additional medical equipment was available through local NHS services.
- 5.24 Clinical records were maintained on the SystmOne electronic medical information system and contained up-to-date and comprehensive assessment and care plans. Our review indicated that entries were professional and appropriate. All clinical records were safely stored in accordance with Data Protection Act and Caldicott data confidentiality principles. Access was limited to health care staff and reference numbers ensured paper records were located quickly. Prisoners were asked to sign an agreement for health staff to share information with other relevant partners.
- 5.25 There was no patient forum, although a member of health care attended the generic prisoner consultative committee. In our prisoner groups, prisoners expressed some concerns about health issues.
- 5.26 Complaints were well managed. They were logged in health care and dealt with by the health care manager. The responses we reviewed were polite and appropriate. If prisoners were unhappy with the prison's response, the complaint was escalated up to the complaints manager at the PCT. A new Patient Advice and Liaison Service was due to be rolled out in the prison.
- 5.27 There were good links with the local Health Protection Agency, and robust management of communicable diseases.

Recommendations

- 5.28 There should be more administrative support, and nurses should not perform unnecessary administrative tasks.
- 5.29 The responsibility for financing operational support grade staff support to health care should be reviewed.
- 5.30 Any non-attendance by the out of hours medical service should be reported to the health care manager and fully investigated.
- 5.31 There should be a dedicated health care prisoner forum so that prisoner representatives can speak directly to senior health care staff about general health care issues.

Good practice

- 5.32 *The employment of operational support grade staff in the health care department enhanced its smooth running.*

Primary care

- 5.33 Health care staff saw all new arrivals in reception and completed a comprehensive initial health screening. Secondary screening was not routine, unless indicated through the initial health screen. Prisoners were advised how to access health clinics and encouraged to participate in regular health promotion activities. Those on medication were seen by the GP to review and, where appropriate, change any medication.
- 5.34 Condoms were available from health care staff and on release. Health protection information was always offered when issuing condoms.
- 5.35 Prisoners accessed health services through health care applications, which were available on all wings and featured a pictorial as well as written form. Nurses collected applications twice a day during the medicine administration rounds, assessed the forms and, if appropriate, conducted a routine assessment of the prisoner before returning to health care. The nurses then made appointments with the appropriate health professional. The system worked well, but the collection of applications and making and delivery of appointments should have been done by non-clinical staff to free nurses for clinical duties. The 'did not attend rate' for all clinics was very low, due to the vigilance of the OSGs who followed them up.
- 5.36 There were several nurse-led clinics, including smoking cessation, chlamydia screening, asthma and vaccinations. The vaccination clinics included routine and age-related immunisations, such as meningitis, mumps and measles. Other regular clinics were supported by visiting nurse specialists, and community sexual health specialists held weekly clinics.
- 5.37 Nurses were allocated to specific wings, which enabled good continuity of care for prisoners. The system worked well and staff were rotated around the wings, usually on a six to 12 month basis.
- 5.38 Nurse triage was in place but was not consistent, as each nurse used a different system. This meant that prisoners received competing advice from different nurses. During triage, the nurse made an assessment and, if necessary, made an appointment for the appropriate health professional. There were no lengthy waits for any clinical appointments. Prisoners saw the GP very quickly, and on the same day if necessary.
- 5.39 Chronic disease management was good with the lead nurse qualified in asthma management. A lead nurse for diabetics had not been formally trained, but she received excellent support from the cluster resource based at HMP Stafford. A list of prisoners with chronic diseases was readily accessible from SystemOne.
- 5.40 Other visiting health professionals included a physiotherapist and optician, who held regular clinics, and there was access to podiatry services on demand. The department worked well with the gym, which supported the 2009 health care fair.
- 5.41 Prisoners in the segregation unit were seen by a nurse every day and by a GP three times a week. Nurses provided support where necessary, and CSU staff appreciated the support they received from health care. Health care staff had good relationships with departments throughout the prison.

Recommendations

- 5.42 The appointment system should be revised to release nurses from non-clinical administrative duties.
- 5.43 There should be a documented nurse triage system.

Pharmacy

- 5.44 Pharmacy services were provided by a local pharmacy, with a quick turnaround for medicines. The medicines and therapeutics committee met monthly and included representation from the PCT.
- 5.45 The pharmacist visited the prison monthly and prisoners had the opportunity to see the pharmacist although there were no dedicated pharmacy clinics. The pharmacist technician date-checked stock held in health care but not medicines held in wing treatment rooms.
- 5.46 Pharmacy policies and procedures were held electronically, and included an in-possession policy and patient group directions (PGDs). There were arrangements to report any pharmacy-related incidents to the PCT. The medicines and therapeutics committee reviewed prescribing data.
- 5.47 Pharmacy items were held in health care and on wing treatment rooms. The security of medicines was satisfactory. Controlled drugs were administered from the pharmacy room in health care. Wing rooms had key safes bolted to the wall but the medicine trolleys were not fixed to the walls. There were pharmacy refrigerators in health care and treatment rooms and temperature recordings were maintained accurately.
- 5.48 Nurses administered all medications and were responsible for the management of medicines held in the prison. They used PGDs where necessary. Medicines were supplied in possession, depending on risk assessment. Medicines were administered daily at 8.30am and 4.30pm, with no reported problems with prisoner behaviour at these times.
- 5.49 Access to medicines out of hours was not completely satisfactory. The out of hours service had to be called to provide medication. There was no out of hours medicine cupboard and no supporting policies. This meant that prisoners could not access simple medication, such as paracetamol, between 6pm on Saturday and 8am on Sunday. Prisoners could only access such medication by reporting to nurses at treatment times, where they were given a strip of paracetamol or ibuprofen.
- 5.50 Several of the medication and administration charts we reviewed had gaps where the administrator should have signed that the medicine was given and if it was not, why not.

Recommendations

- 5.51 There should be dedicated pharmacy-led clinics.
- 5.52 The pharmacist should date-check all medicines.
- 5.53 Medicine trolleys should be fixed to the wall.

- 5.54 Prisoners should be able to access simple medication when the health care department is closed.
- 5.55 Medicine administration records should always be completed and include whether prisoners have attended or not and if they have refused medication. Prisoners failing to comply with their medication should be routinely followed up.

Dentistry

- 5.56 The dental service was very good. A visiting dental practitioner held two sessions a week at the prison, assisted by a dental surgery assistant (DSA), and both were employed by the PCT. Both practitioners met PCT requirements for registration, ongoing professional development and immunity status, and the PCT covered annual leave.
- 5.57 Clinical records were kept on dental record cards but not entered on to the main patient clinical record. Record keeping and radiograph management were generally satisfactory, although documentation of a baseline charting outcome of soft tissue examination, recall interval and clinical evaluation of radiographs was not always evident. Personal dental treatment plan forms FP17DC were not used. FP17 forms were submitted to NHS Dental Services as a record of treatment provided. The prison dental service did not have an individual contract.
- 5.58 Prisoners could access the dentist through the application system, and the DSA managed the waiting list. Names were added to the waiting list in the order in which they were received, including those who presented in dental pain, and prisoners were not triaged or prioritised. Prisoners who saw the nurse at medication time and claimed to have dental pain were seen at the next dental session. Where necessary, they were seen by the GP or taken to the local dental access service or hospital A & E department. At the time of the inspection, there were two urgent dental applications and 10 on the list for routine treatment, with the longest wait less than a fortnight. As dental waiting lists were full until early August, some routine applications could be waiting for up to 12 weeks. Patients were notified of future appointments.
- 5.59 A full range of NHS treatments was offered and there were very few non-attendees. There was no oral health education. The sale of toothbrushes through the prison shop had been stopped although toothpaste was still available.

Recommendations

- 5.60 Dental clinical records should be entered into the patient clinical record.
- 5.61 There should be dental triage to reduce waiting time for patients with problems.
- 5.62 There should be an additional hygienist session to increase clinic time and enhance oral health promotion.

Housekeeping points

- 5.63 Personal dental treatment plan forms FP17DC should be used in accordance with General Dental Council Regulations 2005.
- 5.64 The prison dental service should have an individual contract with the commissioner to facilitate contract monitoring.

- 5.65 Oral health promotion sessions and literature should be available.
- 5.66 Good quality toothbrushes should be available for sale in the prison shop.

Secondary care

- 5.67 NHS outpatient appointments were managed well and there were very few cancellations due to lack of escort staff. The administrators had good relationships with local hospitals and the only recent cancellation was due to the prisoner refusing to attend.

Mental health

- 5.68 The mental health service was generally good, although recent turbulence in the staffing of secondary services continued to cause some concerns. There was no formal mental health training for prison staff, but primary and secondary staff provided indirect training through case supervision.
- 5.69 Primary care services were well structured and delivered by a small team of three registered mental health nurses (RMNs), who had protected time for their speciality. They were mainly supported by the GP and the community psychiatric nurse (CPN). All had been trained as ACCT case managers.
- 5.70 The initial health screening included a mental health assessment, and any prisoner considered to need mental health support was referred to the RMN, who automatically saw any new arrival already under the care of mental health staff at the sending prison. The RMNs accepted referrals from across the prison, including self-referrals. The RMNs met weekly to review new and old cases and to allocate new referrals; there were usually up to 15 referrals a month. The majority of prisoners presented with low-level mental health problems, including depression and anxiety. The duty roster was designed to ensure that, wherever possible, an RMN was on duty whenever the health care department was open.
- 5.71 The RMNs had excellent relationships with wing staff, who were involved in case reviews where appropriate. The team felt that the involvement of personal officers in the mental health management of prisoners benefited the prisoner. If appropriate, families were invited to attend case reviews. The system worked well. The team also liaised with the chaplaincy, which provided strong support to prisoners. The management of these prisoners included self-help books and prescription exercise. A new counselling service had just been commissioned and would improve the support to prisoners; recruitment was under way.
- 5.72 The team was fully integrated into the prison and attended meetings such as safer custody, safeguarding children, lifer boards and sentence planning to provide relevant information and guidance for prison staff working with prisoners. The team attended all ACCT reviews.
- 5.73 Any prisoner considered to be too ill to remain at the prison was transferred to the nearest inpatient facility. There were no daycare facilities.
- 5.74 The mental health in-reach team was from the Birmingham and Solihull Mental Health Trust. There had been considerable turbulence in CPN support to the prison, but a new contract had been awarded to another provider who was due to take over. Currently, a senior CPN was at the prison two days a week and a bank CPN provided 10 hours weekly input. They were supported by a forensic adult psychiatric who visited every two weeks. There was no clinical psychologist although one was being recruited to provide one session a week. The CPN

accepted referrals from the primary team and had a caseload of 30 clients; there had been eight referrals in the previous three weeks. The majority of clients had a diagnosis of personality disorder.

- 5.75 There was good liaison between both services, who met regularly to discuss common issues. The CPN completed a handover book, which staff could consult, along with clinical records, in her absence. The CPN also liaised regularly with wing staff to ensure they were fully briefed on how to manage individual prisoners with mental health care needs.

Recommendation

- 5.76 The prison should provide regular mental health training for officers.

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 head of learning and skills had a strategic overview of provision and learner need. The contractor for education and vocational training had changed to The Manchester College in August 2009. There had been some improvement to provision but not enough to have a significant effect and much was unsatisfactory. Vocational training courses offered by South Birmingham College provided well-managed, -staffed and -resourced provision but the overall range was insufficient and the working day too short. There was not enough purposeful work for all prisoners to be employed full-time. The careers information and advice service provider, JHP, provided a range of interventions at key points during sentences. The library was too small for the population and too few prisoners used it.

Leadership and management

- 6.2 The head of learning and skills had a strategic overview of provision and learner need, with a close connection with operational delivery. However, this had had little impact on improving the poor education provision. The Offender Learning and Skills Service (OLASS) contractor for education and vocational training had changed to The Manchester College (TMC) in August 2009. There had been improvements in the poorly performing learning provision but too many classes were still cancelled. Some staff performance issues had been addressed, but too much of the provision was still unsatisfactory. (See main recommendation HP50.)
- 6.3 Some good partnership working had had a positive affect on prisoners' experiences in vocational training. A service level agreement with South Birmingham College (SBC) provided a range of vocational training programmes that were well-staffed and resourced. JHP, which provided the careers information and advice service, worked well with all providers to review and support prisoners. Some good links with external providers delivered one-off bespoke courses in music and art for small groups of prisoners. The prison supported a prison officer to provide accredited music courses for young adults who were disengaged and had severe behavioural problems. This programme had had a significant effect on improving their behaviour.
- 6.4 The range of provision was insufficient, with a short working day and no evening or weekend provision. (See main recommendation HP51) The current needs of the population were not reflected in the education curriculum, although a need for realignment had been identified through a training needs analysis. The range of Skills for Life provision was satisfactory, although the curriculum had not been adapted to reflect the fact that approximately 60% of new arrivals held a literacy and/or numeracy qualification at level 1.

- 6.5 Learning and skills quality assurance procedures were thorough. There had been improvements in teaching and learning and in the setting and recording of individual goals and targets for prisoners. Regular quality audits identified areas for improvement and better practice. However, the processes did not extend to the education provider, which had its own procedures, and impact of improvement was not evident. The self-assessment report was broadly accurate in identifying strengths and areas for improvement. However, insufficient emphasis was placed on areas for improvement and the impact on prisoners when arriving at overall grades, which were mostly over inflated. The observation of teaching and learning in education was not rigorous and failed to identify unsatisfactory teaching.
- 6.6 Recent training in safeguarding had improved staff knowledge and understanding. Attention to learners' safety in workshops was good and safe working was well promoted.
- 6.7 Equality and diversity were satisfactorily promoted. However, equality of access to some provision could not be measured as the prison did not collect data on attendance by individuals, only by the volume of prisoners. Data management systems to supply and report information on attendance and achievement were underdeveloped. Achievement data was collected in different formats by the college providers and could not be easily aggregated to give a view of overall performance. Aspects of the P-Nomis prison data collection were not fully developed in learning and skills.

Induction

- 6.8 The induction programme gave new arrivals information about the range of activities available but this set unrealistic expectations as they were not told about the restrictions on some activities before they selected five course preferences. Induction activities did not engage prisoners sufficiently well and the process was not sequenced appropriately. TMC staff made a paper-based initial assessment of prisoners' literacy and numeracy skills if their records were not available on the managing information across providers (MIAP) system.
- 6.9 The allocation of work board – the job club – was ineffective and did not meet prisoner need. The prison had recognised this and had recently appointed a manager to improve the process. There was inadequate communication with prisoners to explain why they had not been placed on programmes of their choice. Some prisoners were allocated to inappropriate courses not identified by their sentence plans or to courses that they had previously completed and gained qualifications in. This led to passive resistance in participation, and often disruptive behaviour. Waiting lists, particularly for vocational training courses were long. (See main recommendation HP53.)

Work

- 6.10 There was not enough purposeful work in the prison for all prisoners to be employed full-time. Around 74% of the population were employed in the morning and 61% in the afternoon. Work consisted of cleaning, stores and kitchen work, and vocational training and education courses. Work in the main kitchen developed useful work skills but did not lead to formally recognised qualifications. Pay was equitable and not a disincentive to participating in accredited learning. Learners engaged in learning and skills received the same wage as those in purposeful work, apart from in the main kitchens where prisoners worked much longer hours for extra pay.

Vocational training

- 6.11 There were 161 vocational training places, which were mostly full-time. TMC provided courses in motor vehicle repair, car valeting, food hygiene and Industrial cleaning. SBC provided a range of vocational training in carpentry and joinery, brickwork, painting and decorating, plumbing and tiling at levels 1 and 2. Other prison work, such as waste management, construction site safety training and PE courses, also led to accredited qualifications. The prison planned to introduce training in reprographics, Prisons Information Communication Technology Academy (PICTA), CISCO (Computer Information System Company) and barbering but these were not yet in place.
- 6.12 Success rates were high on vocational training courses. Learners developed important work skills and produced high standards of work quickly and effectively, and enjoyed the courses. There was good partnership working between the two colleges. TMC provided additional learning support to SBC's learners, enabling them to progress and achieve their qualifications. Courses were generally well planned and managed, particularly those operated by SBC, which were also well staffed and very well equipped. Equipment and resources in TMC's car valeting and motor vehicle workshops were poor. Staffing problems had affected some TMC provision with cancelled or delayed courses (see main recommendation HP50). Operational problems meant that the daily time spent on training was too short and did not reflect a working day (see main recommendation HP51). Teaching, training and assessment were satisfactory, as were punctuality and attendance.

Education

- 6.13 Approximately 50% of prisoners participated in some education. There were 192 part-time education places in the morning and 171 in the afternoon, run by TMC. The range of programmes was satisfactory in literacy, numeracy, English for speakers of other languages (ESOL) and information and communications technology (ICT), and provided a range of progression. There were classes in the education department, as well as supported literacy and numeracy learning in vocational training workshops and in the care and separation unit. There were too few programmes to meet prisoners' personal and social development needs and little wider provision, such as art, music or personal financial management. Twenty eight prisoners were following distance learning courses supported by education.
- 6.14 Education places were not used to capacity, with only 65% occupancy in the previous month. TMC had cancelled 20% of classes as a result of staff shortages, although this was an improvement on previous months when figures were much higher. Many prisoners were allocated to inappropriate classes. For example, some were on an employability programme with many years of their sentence yet to complete before they could utilise these skills. Others were allocated to programmes that they had already completed and achieved the qualification. Learners who had chosen to attend education made satisfactory progress and produced work to an acceptable standard but those who had been instructed to attend against their wishes were unmotivated, frequently disruptive and made very little progress.
- 6.15 There was too much unsatisfactory teaching and learning in education. In the poorer classes, classroom management was ineffective, inappropriate behaviour often went unchallenged and teaching was mundane and uninspiring. The over-reliance on learning through completion of worksheets failed to interest or motivate learners and the resources were mostly poor quality. In better classes, teachers directed learning at a good pace and generated a lively interest in the subject matter. Information learning technology had been installed but did not work and tutors had not been trained to use the facilities or develop resources to aid teaching and

learning. A well-managed team of learning mentors gave effective support in classes and on the wings.

- 6.16 Individual learning plans lacked detail. Learning targets were too general and some tutors did not use the learning plans to set improvement targets or use them to record learners' progress.
- 6.17 Achievement of qualifications was satisfactory. Class attendance was 82% and punctuality was satisfactory. However, the working day was short, with less than two hours in the morning and afternoon.

Library

- 6.18 The library was run by Staffordshire County Council Library and Information Service, and was managed by a part-time qualified librarian. It was staffed by a full-time supervisor and two part-time library assistants, but they were not qualified. Two part-time prisoner orderlies worked in the library. The accommodation was newly refurbished to a good standard but was too small for the population and could only accommodate 16 prisoners at a time.
- 6.19 Access to library facilities was insufficient. Prisoners could visit the library once a week through an evening wing rota. The allotted time of 40 minutes a wing was often reduced to around 30 minutes. About a hundred prisoners a week visited the library during the evenings. Attendance was recorded by volume, not by individual, and therefore equality of access could not be measured.
- 6.20 The library had poor links with the education department, even though they were in the same block. Few prisoners in education, mainly prisoners on distance learning and more recently foreign national learners, used the library during the day. There was no weekend provision. There was no access to the library for wheelchair users. There was a small book stock in the care and separation unit but no mobile provision for prisoners unable to leave the residential units, who could borrow books through wing representatives. Promotion of the library services was poor. No additional activities or events were offered to encourage participation.
- 6.21 The stock of 6,000 books was adequate for the population and was refreshed annually. It included a limited collection of easy-read, large print, and illustrated novels. There were very few audio books. There were sufficient books related to the development of vocational skills. Foreign language stock reflected the different cultures of the population and was regularly reviewed and adjusted to match changing need. English newspapers were routinely available, as well as two weekly newspapers in foreign languages. The library wing representatives were consulted about the range of magazines. There was a good range of legal practitioner texts and relevant Prison Service Orders, but they were only accessible through a member of the library staff, which was not sufficiently advertised.
- 6.22 The library staff managed Storybook Dads and provided the administrative support for the Toe-by-Toe reading mentoring scheme.

Recommendations

- 6.23 **The quality of the education provision should be improved through better management of curriculum planning and implementation of quality improvement processes.**
- 6.24 **The collection and analysis of data should be improved to give accurate information on learner performance.**

- 6.25 The prison should provide nationally recognised catering qualifications for prisoners working in the kitchens.
- 6.26 The prison should further develop courses in reprographics, Prisons Information Communication Technology Academy (PICTA), CISCO (Computer Information System Company) and barbering to provide more activity opportunities.
- 6.27 The equipment and resources in the motor vehicle and car valeting workshops should be improved.
- 6.28 The range of personal and social development programmes should be extended.
- 6.29 The quality of teaching and learning should be improved, including better use of information learning technology in classes.
- 6.30 There should be better setting and monitoring of learner targets to improve the management of learner progress.
- 6.31 Training and accredited qualifications should be provided for the library supervisors and assistants.
- 6.32 The library accommodation should be extended to meet the needs of the population.
- 6.33 Attendance at the library should be recorded and analysed by individuals to ensure equity of access.
- 6.34 The library should develop links with education to support education courses.
- 6.35 There should be a trolley book service for prisoners who cannot access the library.
- 6.36 There should be promotional activities to encourage more prisoners to use the library.

Housekeeping point

- 6.37 The availability of legal material in the library should be better advertised.

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.

- 6.38 PE facilities were very good but were underused. A sports field and two floodlit all-weather sports courts provided outdoor activities and there was a wide range of indoor PE facilities. The weekly timetable was well planned and operated but not all prisoners had sufficient access to the facilities. The department had good links with health care and courses to promote healthy lifestyles and remedial programmes.

- 6.39 PE facilities were very good and were open from early in the morning until late evenings every weekday and all day at weekends. The sports field and two floodlit all-weather sports courts were available for outdoor activities such as football, rugby, tennis and cricket. Inside PE activities included weight-lifting, spinning, cardiovascular exercise and team games such as football, volleyball, basketball, and cricket. Links with local community groups had diminished due to staff time constraints and security policy changes.
- 6.40 All new arrivals received a general introduction to the gym during their induction, including clear information on the range of courses and programmes available and when they could attend. The opening hours of the gym were well advertised in the residential units. The medical officer assessed new arrivals for their suitability for physical exercise. Prisoners had to complete a health questionnaire before taking part in gym activities to ensure that exercise was safe and appropriate for every prisoner. Induction to the gym took place weekly.
- 6.41 Recreational PE and personal fitness were explicit objectives in prisoner sentence plans where need was identified. Prisoners on all residential wings could attend recreational PE at least twice a week. However, records were not systematically analysed to ensure fair allocation of individuals from the residential units. In our survey, only 45% of respondents said that they went to the gym twice a week against the comparator of 52%. Daily rehabilitative PE was offered during the week.
- 6.42 A good range of well-planned and well-managed vocational qualifications was offered on an annual cycle, with each course taking 10 weeks to complete. Attendance on the courses was good and success rates were high.
- 6.43 There were good shower facilities, which were used by most prisoners. Appropriate records were kept of accidents in the gym.

Recommendations

- 6.44 **Records of PE attendance should be improved to monitor individual attendance and ensure fairer allocations from the wings.**
- 6.45 **The use of the PE facilities should be increased to allow prisoners more access.**

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.

- 6.46 Time out of cell was very restricted with the potential for extended periods in cell for prisoners not working. Only enhanced prisoners were guaranteed association on every weekday evening, with others given sessions on alternate evenings. There was little domestic time and many prisoners were not unlocked until lunchtime. We found just under a third of prisoners locked in cell during the working part of the day. Access to exercise was limited but take-up was better.

- 6.47 Over the year, the prison was reporting a time unlocked figure of 7.9 hours a week, varying between 7.6 and 8.1 hours from month to month. A standard core day was applied to the whole prison, although there were some differences in access to evening association depending on location. A fully employed prisoner with evening association could have a maximum of about 8.5 hours out of cell, assuming a generous interpretation of the core day. This dropped to under seven hours when there was no evening association. For an unemployed prisoner, the maximum possible time out of cell was just over two hours when association was accessible, dropping to potentially under an hour at other times. For an unemployed prisoner who decided not to attend exercise, normally scheduled for half an hour straight after unlock each morning, it was probable they would not be unlocked until lunchtime, and then only briefly to collect a meal. (See main recommendation HP54.)
- 6.48 The core day incorporated hardly any domestic time and only limited periods of general unlock. The worst effects were mitigated by staff discretion to unlock a few prisoners during the day sometimes to use the wing gyms or attend organised gym sessions. However, routine access to amenities such as showers was largely dependent on evening association periods. The reality was that a large number of prisoners were locked in cell at any point during the core day. During a roll check, we found 30% of the population in cell when they should have been engaged in activity.
- 6.49 On A, B and C wings, evening association was only available on every other evening, Monday to Thursday, and for enhanced prisoners only on a Friday afternoon. Association was normally confined to a small but reasonably equipped association room. On D and E wings, enhanced prisoners received association every evening but standard prisoners only every other evening. On F, G, I and J wings, all prisoners, standard and enhanced, received association each evening. In terms of staffing and ease of supervision, it seemed difficult to justify the disparity in practice, particularly between D and E wing and the newer wings. Prisoners on the newer wings had access to the whole wing during association. The association periods that were scheduled were rarely cancelled. Supervision by staff appeared reasonable and we observed some interaction with prisoners.
- 6.50 At other times, adherence to the core day was less assured. The structure of the core day meant that periods for purposeful activity were short. For example, staff were not even required to begin moving prisoners to work until 9am in the morning or 2pm in the afternoon. The process was slow, and we observed movement taking upwards of 30 minutes, ensuring slippage and delay.
- 6.51 In our survey, 65% of respondents said that they exercised three or more times a week, significantly better than the 38% comparator. The prison had sought to provide some limited facilities on the exercise yards, such as football posts.

Recommendations

- 6.52 An hour's outdoor exercise should be provided for all prisoners.
- 6.53 There should be a period of general unlock in the morning before activity.
- 6.54 All prisoners should receive evening association every day.
- 6.55 Core day routines should be adhered to.
- 6.56 Prisoner movement to activity should start earlier and be concluded more quickly.

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 generally intelligence-driven with effective systems to process and analyse information. The flow of information into the department was good and trained analysts processed the large number of security information reports efficiently. The security committee had appropriate internal and external representation and meetings were well attended, given a high profile and had effective links to the violence reduction strategy committee. Despite these good systems however, too many restrictive and redundant security procedures affected the daily lives of prisoners.

Security

- 7.2 The security department was effectively managed overall by two operational governors. It had followed a national intelligence model to establish a separate intelligence unit staffed by a full-time intelligence officer and a full-time clerk. The security managers had identified five key strategic intelligence priorities and had been allocated the management and oversight of each one. There were good links with the local police, particularly in operations to deal with gang-related issues.
- 7.3 The security committee was properly constructed and meetings were generally well attended by managers and staff representatives from relevant areas. The monthly meetings were chaired by an operational governor and the level of support for them indicated the prison's priority to security information and intelligence. The standing agenda was comprehensive and included an analysis of security information reports (SIRs) and reports from other areas of the prison, particularly from the safer custody officer and residential staff.
- 7.4 The security department received an average of 220 SIRs a month. They were processed and categorised by security collators following an initial check by a security senior officer. Intelligence was effectively communicated to other areas, particularly the safer custody group and the residential areas, and there were well-developed links with other departments.
- 7.5 We reviewed a random selection of SIRs. They had been submitted by staff from a wide range of departments and the information reported was not purely observational. All the SIRs we looked at had been processed appropriately and without undue delay.
- 7.6 Residential staff carried out routine cell searches. The establishment was reaching its targets for searching all cells every quarter and all areas monthly. A list of cells for searching was sent to residential managers and progress against targets monitored by the security department and reported to the security committee.
- 7.7 Despite these good systems however, we found too many examples of restrictive and redundant security procedures that affected the daily lives of prisoners unnecessarily. We were

told that, because of general security, prisoners were not permitted to have more than six stamps in possession and were not permitted to have any articles sent in at all, civilian staff were not permitted to move about the prison while prisoners were moving to activities, and officers in the gym were not permitted to supervise more than 16 prisoners together.

Rules

- 7.8 Prison service and local rules were published and displayed on notice boards, and prisoners were required to sign compacts that acknowledged their receipt and understanding of the published rules.
- 7.9 There was some confusion in the application of local rules and routines. For example, prisoners could sometimes wear their own clothes but the times for this varied across the wings. Officers on some wings allowed more prisoners out for association than on other wings. Prisoners told us that they were confused by some of the prisons rules and that their application was not always consistent.

Recommendations

- 7.10 The regime for prisoners should not be impeded by unnecessarily restrictive rules and security measures.
- 7.11 Rules and routines should be widely publicised on all wings and their application should be consistent.

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.

- 7.12 Adjudication hearings were conducted fairly and punishments were appropriate and consistent. Prisoners understood the charges and were given time to prepare their case and put it across. The use of force was not excessive for the size and nature of the population although recorded incidents involved a disproportionate number of young adults. The paperwork was not always completed correctly but written accounts from officers gave assurance that force was used as a last resort. Special accommodation was overused and conditions in the special cell were dreadful. The environment in the segregation unit was poor with dirty cells and offensive graffiti. Systems to return prisoners segregated under good order or discipline to normal prison location were underdeveloped. Although mandatory reviews were completed on time, there was little evidence that changes in behaviour and circumstances were always acted upon. Although segregation staff tried to help prisoners and dealt with them respectfully, care planning needed to improve, as did the provision of a constructive regime, particularly for longer stay prisoners. Written observations in personal files were poor and did not reflect staff interaction with prisoners.

Disciplinary procedures

- 7.13 There had been about 300 adjudications between January and May 2010. This was not excessive given the nature of the prison population.
- 7.14 The adjudication room was adequately set out, and a copy of prison rules, a pen and writing paper were available to the prisoner.
- 7.15 Records of adjudications showed that hearings were generally conducted fairly and charges were fully investigated. Punishments were fair and there were examples where adjudicating governors had dismissed cases due to a lack of evidence or anomalies in process. The number referred to the independent adjudicator was also reasonable at about 20 in 2010 to date. There was evidence that governors took time to ensure that the prisoner fully understood each stage of the process before moving on and offered them the opportunity to seek legal advice. Prisoners could challenge the evidence, put across their version of events and call witnesses in their defence.
- 7.16 Monthly statistics about the number and nature of adjudications were presented to the senior management team and the safer custody committee. Results of proven offences were noted, categorised and communicated to managers to identify trends and deal with problem areas as they arose.
- 7.17 Adjudication standardisation meetings took place quarterly and were usually chaired by the governor. They were well attended by adjudicating governors. The minutes indicated good standards of discussion on appropriate issues. Punishment tariffs had been published and were used consistently at formal hearings.
- 7.18 There was no evidence that unofficial or collective punishments were used, either individually or systematically.

The use of force

- 7.19 Incidents involving the use of force were not excessive for the nature of the population. There had been 90 incidents in 2010 to date. This included about 30 cases where full control and restraint techniques had not been used, and was a reduction of about 20% compared with the same period in 2009. Although the use of force was reasonably low, a disproportionate number of incidents involved young adults. Although accounting for about 43% of the population, this group was involved in over 70% of all incidents.
- 7.20 Planned intervention was well organised, properly carried out and documentation was generally completed correctly. Proper authority was recorded, all incidents were appropriately supervised by senior staff and intervention was video recorded.
- 7.21 Statements from the staff following spontaneous incidents gave assurance that intervention techniques were used properly and that de-escalation had been used to good effect. However, forms were not properly completed in all cases and there was little evidence of consistent management checks.
- 7.22 Health care staff attended planned interventions and saw prisoners involved in spontaneous incidents soon after they ended. We found accident report forms with all the documentation.

- 7.23 Overarching governance arrangements were rigorous. Incidents were monitored at monthly use of force committee meetings, violence reduction committee meetings and by the senior management team. Information, including the nature of the incident, its location, and the ethnicity of the prisoner, was collated each month at the use of force committee meeting, and presented later to the violence reduction committee for analysis. Information about age was not consistently collated, despite clear evidence that prisoners under 21 accounted for most of the incidents involving the use of force. Minutes of the use of force committee indicated good standards of debate on most of the relevant issues. Trends were identified and appropriate action taken. The rates of incidents had been noted, particularly those to do with fights, assaults and non-compliance. There was evidence that this information was used to inform the overarching violence reduction strategy (see paragraph 3.2).
- 7.24 Special accommodation had been used 12 times in 2009 and five times in 2010 to date. The average length of stay was about two hours, ranging from 10 minutes to five hours, with one overnight stay. Authorisation documentation had been completed in all cases but entries from officers and authorising governors did not give assurance that its use was always justified. It had been used inappropriately to manage a prisoner as part of a suicide prevention intervention. In most cases the behaviour described in the documentation could have been managed in less extreme conditions, such as the safer cell in the segregation unit.
- 7.25 Conditions in the special cell were worse than we usually see. It was too small, filthy, lacked natural light and was poorly ventilated, and had no bed or other fixed furniture. We were also concerned that a large wire mesh screen over the single window provided ligature points. During inspection, a strip blanket was hung over the open door in readiness for its use.

Segregation unit

- 7.26 The segregation unit was in the older part of the prison next to B wing. It consisted of 15 cells, including four safer cells equipped with CCTV cameras, one functioning special cell, two small prisoner showers, a staff office, adjudication room and a kitchen servery.
- 7.27 The standard of accommodation was poor. Although recently painted, communal corridors were engrained with dirt, despite attempts to keep them clean, walls were damaged, and a lack of natural light made the atmosphere dark and gloomy. There were no displays of art or other normalising features. Cells were dirty, in-cell toilets needed deep cleaning, and graffiti was scratched into walls. We saw particularly offensive racist comments scratched on to a plastic window of a safer cell occupied by a black and minority ethnic prisoner.
- 7.28 Given the nature of the population, the use of segregation was not excessive. In the previous six months, 47 prisoners had been segregated under prison rules 45 (adults) or 48 (young adults) for good order or discipline. This included 11 prisoners seeking their own protection. The number was a reduction of about 12 from the same period in 2009. The average length of stay was about three weeks, although a few prisoners had been segregated for up to three months.
- 7.29 The governance and management of segregation was reasonable. The unit was administered day to day by one of two nominated senior officers supported by trained officers, who all reported to the head of residence. A published strategy document set out the management arrangements and expected working practices of the unit and there was a specific staff selection policy with published criteria.

- 7.30 The basic daily regime included showers, exercise, access to telephones and some in-cell education. Prisoners had to be up and out of their beds by 7.30am to engage with any part of the regime. Those who were not could not access showers, telephones or exercise until the following day. There was little for longer stay prisoners. Although we were told that they could continue to attend communal education activities following risk assessment, there was no evidence that this happened in practice.
- 7.31 Planning systems to allow prisoners segregated under good order or discipline to return to normal prison location were underdeveloped. Although segregation reviews were completed on time, there was little to show that progress in behaviour and circumstances was monitored or acted upon. Behaviour targets were not set and staff were not engaged in the planning process. The care planning procedures we saw during our last inspection had been abandoned.
- 7.32 Written staff observations in personal files were generally poor. Most focused on single examples of behaviour relating to the daily regime, such as access to exercise and showers. We saw nothing comprehensive enough to show that each prisoner's emotional and mental well-being was being effectively monitored.
- 7.33 Despite this, the staff-prisoner relationships we observed were reasonable and, as at the last inspection, personal officers visited their prisoners held in the segregation unit every week. Segregation unit officers interviewed all newly arriving prisoners in private to identify any immediate needs. They were searched thoroughly and respectfully, and only strip-searched following an assessment of risk, authorised by the senior officer in charge. Officers dealt with difficult prisoners respectfully, and there was better use of preferred names and titles than we found in the main prison (see paragraph 2.20).

Recommendations

- 7.34 There should be regular management checks of use of force documentation to ensure that it is completed correctly.
- 7.35 Special accommodation should only be used as a last resort and because of the most extreme circumstances.
- 7.36 The special cell in the segregation unit is unfit for purpose and its use should be discontinued.
- 7.37 Living conditions in the segregation unit should be improved, and graffiti should be removed from all areas.
- 7.38 All prisoners in the segregation unit should be able to have exercise, showers and access to a telephone every day, and the regime should be developed, including purposeful activity for longer stay prisoners.
- 7.39 There should be reintegration and care planning for prisoners in the segregation unit.

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.

- 7.40 The incentives and earned privileges (IEP) scheme operated consistently across the prison, and prisoners reported a good experience of it. Prisoners were promoted or demoted on the basis of their behaviour over time rather than for individual incidents, and regression of regime levels was properly authorised following an organised review. Most prisoners were on the enhanced level of the scheme.
- 7.41 An incentives and earned privileges (IEP) policy document had been reviewed in March 2010 and agreed by the governor. It set out in simple language how the system worked, how prisoners could progress, and the standards of expected behaviour. All prisoners had signed compacts. The scheme had the usual three incentive levels (basic, standard and enhanced). New arrivals were placed on standard unless they had earned enhanced status at a previous establishment. Copies of the document were available to new arrivals during their induction and on all wings. New arrivals on standard were assessed within 28 days of applying for progression to enhanced level
- 7.42 At the time of inspection, most prisoners were on the enhanced level (341), 13 were on basic and 293 were on standard. Although I and J wings were exclusively for enhanced prisoners, prisoners on this status were also found on most of the other residential units. Incentives for enhanced prisoners included two privileged visits a month, an increase in their private cash entitlement and access to a reasonable range of items on the facilities list, such as computer games.
- 7.43 Standard prisoners were reviewed every 13 weeks. Prisoners on basic received an initial review after seven days then not reviewed again for 14 days. Although limited, the regime for prisoners on basic included daily exercise, association, and access to telephone and shower.
- 7.44 Demotion within the scheme was normally the result of a pattern of behaviour, although a single serious incident could trigger an IEP review. Prisoners could be issued with behaviour warnings for a range of reasons, including failure to adhere to wing rules or sentence planning targets or attend work, or proven adjudications or generally poor behaviour that failed to meet the criteria for their regime level. Behaviour warnings remained active for a two-month period, and an extra-ordinary IEP review board was convened if a prisoner received five or more behaviour warnings within that period.
- 7.45 Entries in IEP documentation were generally good, particularly from personal officers, and there was evidence that the scheme was connected to the sentence planning process and that prisoners were challenged to meet agreed targets. Personal officers attended review boards as a matter of routine.
- 7.46 Prisoners reported a positive experience of the scheme. In our survey, 54% of respondents, significantly better than the comparator of 47%, said that they were treated fairly in the scheme and 63%, against 50%, said that it had encouraged them to change their behaviour.

Recommendation

- 7.47 Prisoners on the basic regime should be reviewed at least every week.

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 The quality and variety of food was adequate, although prisoners complained about small portions. There were consultation arrangements, which led to changes to the menu. Only prisoners on I and J wings could dine out.
- 8.2 The kitchen was clean and well maintained with suitable equipment. It had separate facilities for storage, preparation and cooking, including separate sections for halal food. The wing serveries were kept clean and free from food waste.
- 8.3 The four-week menu cycle offered a good selection of choices, including halal meals and food to meet dietary requirements. The standard of the food was satisfactory. In 2009, only 80 of the 1,609 formal complaints were about the food and very few were on the quality. Prisoners used food comments books and the catering manager made responses. The main areas of complaint were about the quantity of food and small portions, although the portions we saw were adequate.
- 8.4 There were satisfactory consultation arrangements, with food a standing agenda item on monthly unit prisoner council meetings. There was a twice-yearly prison food survey, with menu changes made as a result.
- 8.5 Except for the I and J enhanced wings and a limited number on F and G wings, there were no facilities for prisoners to dine out, and the majority of prisoners ate their food in cell. Prisoners on I and J wings told us they appreciated the opportunity to eat communally.
- 8.6 There were training records for all kitchen workers and wing servery workers. Since March 2010, all prisoners who wanted to work in the kitchen had to complete a level 2 certificate in food safety in catering. Prisoners employed in the kitchen before then and wing servery workers were trained to level 1 food hygiene. No formal work-based catering qualifications were available (see recommendation 6.25).

Recommendation

- 8.7 There should be more opportunities for prisoners to dine communally.

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.

- 8.8 Most prisoners appeared to be satisfied with the prison shop service, although black and minority ethnic prisoners had some concerns about the range of items available.
- 8.9 The prison had been operating the standard DHL shop contract for about a year. Prisoners placed weekly orders, which were delivered in bags each Friday. The order sheet listed over 350 items, and we were told that there were few problems with access. One manager said that there were usually about five errors a week but there were good systems to deal with this.
- 8.10 Only 5.4% of formal complaints in the last year had concerned the shop. In our survey, findings on whether the shop sold sufficient goods to meet needs were close to the comparators, except for black and minority ethnic respondents: only 34% said the range of goods in the shop met their needs, significantly worse than the 49% for white respondents.
- 8.11 Prisoners could order larger goods through a range of catalogues, including one that specialised in items meeting the needs of Muslim prisoners.
- 8.12 There had been good consultation arrangements on the shop in 2009, when there were four meetings, with evidence that the views of prisoners had been given consideration but there had been no further consultation meetings since December 2009.

Recommendations

- 8.13 The prison should investigate and take action on the views of black and minority ethnic prisoners about the prison shop.
- 8.14 Shop consultation meetings should be held routinely and at least quarterly.

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 reducing reoffending policy and strategy were well constructed and linked to area developments. Provision was based on a comprehensive needs analysis, which was updated annually. Quarterly strategy meetings and monthly operational meetings were appropriately constituted but attendance was inconsistent. Resettlement work was prioritised across the establishment.
- 9.2 The overall strategic lead for resettlement was the head of reducing reoffending and was on the senior management team. The offender management and resettlement functions were divided into two separate, but closely linked, departments each with their own lead manager. The reducing reoffending strategy covered 2008-11 and was connected to the area policy, although this was currently being updated. It was comprehensive, detailed all aspects of the strategy, and linked to other aspects of the prison's regime, including violence reduction.
- 9.3 The strategy document was updated annually and supported by an annual needs analysis. The last needs analysis, in August 2009, had been undertaken by the psychology department. It was very comprehensive and, given that all prisoners were serving at least 12 months, was appropriately based on OASys (offender assessment system) information. It covered general population information, including offence types, age and length of sentence, as well as specific needs under each of the seven resettlement pathways.
- 9.4 The resettlement policy committee met quarterly and, despite its name, was the primary strategic mechanism through which the wider reducing reoffending work of the prison was taken forward. The reducing reoffending action plan was also reviewed and updated after each meeting. However, attendance at this meeting was inconsistent. This was significant because they were relatively infrequent. There was a further monthly offender management and resettlement operational meeting. In principle, these meetings included leads or representatives of each resettlement pathways but attendance at these was also sporadic and some pathways were rarely represented.
- 9.5 The prison had good strategic links with the West Midlands prison area. The joint operational implementation group met bi-monthly and alternated with the area offender management leads meeting. Managers at Swinfen Hall felt well supported by both groups.

Recommendations

- 9.6 The quarterly resettlement committee meetings should be attended by all committee members or their representatives.
- 9.7 The monthly offender management and resettlement meetings should be attended by all members and representatives of each resettlement pathway, or their representatives.

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.

9.8 Prisoners had their resettlement needs assessed during induction and were allocated an offender supervisor. The work of offender supervisors was limited to information gathering and communication with offender managers and they did little or no offending behaviour work. Contact between prisoners and offender supervisors was poor, compounded by the regular loss of offender supervisor hours. Pre-release resettlement boards were well managed and well attended. Work with indeterminate-sentenced prisoners was limited and there were no specific forums and only annual lifer days. Release on temporary licence was not used for resettlement or training. Public protection arrangements were generally good.

Sentence planning and offender management

- 9.9 All new arrivals had an initial resettlement assessment, as part of the induction programme, and they were also seen by many resettlement pathway staff. As the resettlement department was responsible for induction, coordination of this assessment was relatively easy. The individual assessments assessed needs, which were recorded on a central document, resulting in an overall assessment for each prisoner. This document was forwarded to the offender management unit (OMU) and used by the allocated offender supervisor as part of their assessment with the prisoner, undertaken within five working days of their arrival. Although some prisoners had a release date some time in the future, the resettlement assessments ensured that identified needs were picked up and pursued at the earliest opportunity.
- 9.10 All new arrivals were also offered the *Road to resettlement* booklet as part of their induction. This workbook was oriented to identification of personal goals and objectives against individual targets and for prisoners to become self-motivating. The *Road to resettlement* model incorporated similar principles of self-management used by programme teams and offender supervisors and managers, and was a positive initiative. Prisoners could use the workbook at any time, and we were told that many chose to participate at a later stage rather than immediately upon arrival. Nine prisoners had been trained in mentoring on this project and could offer guidance, help and advice to prisoners. Mentors said that many prisoners used the workbooks at parole boards and sentence planning reviews to evidence their progress. However, the model was not well integrated into the programme teams or the OMU or used by these departments to reinforce learning points for prisoners from courses attended or other progress during sentence.
- 9.11 There were currently 421 prisoners in scope for offender management and 205 out of scope. All prisoners were allocated an offender supervisor and there was little to differentiate the service to each group. Six officer offender supervisors were allocated to all cases, apart from indeterminate sentence for public protection (IPP) cases, which were the responsibility of the 2.5 probation officer offender supervisors. Allocation of cases was managed in pods through an alphabetic system, with officers holding caseloads of between 65 and 75. Case administrators were allocated to each pod. Most OASys reviews were up to date. Although 36 (8%) in-scope cases had out-of-date reviews, 11 of these were less than a month late. Only 10

out-of-scope cases (5%) were out of date and the majority had recently arrived at Swinfen Hall with out-of-date reviews. In our survey, 89% of respondents said they had a sentence plan, against a comparator of 54% and only 67% at the inspection in 2005.

- 9.12 The role of offender supervisors, particularly officer supervisors, was unclear. Although their liaison with community offender managers was generally good, as was the completion of contributions to sentence planning boards and other reviews, their wider engagement and actual contact was very limited. There was virtually no one-to-one work to reinforce learning points from offending behaviour programmes, and little to support continuous risk assessment. With colleagues from the probation inspectorate, we reviewed several case files for both in- and out-of-scope prisoners. While there were examples of information relayed to offender managers about adjudications and other behaviour, we saw no assessments of how such behaviour affected risk or reflected concerns linked to the original offence. Offender supervisors acted almost exclusively as conduits through which information about their prisoners was passed. There was little indication (apart from probation staff – see paragraph 9.24) that they engaged in motivational work with prisoners or work to address victim issues.
- 9.13 Offender supervisors told us that they usually only saw prisoners at annual OASys and sentence plan reviews or when parole reports were required. All offender supervisors undertook one shift a week as residential staff, but contact during this time was usually fleeting. This was reflected in our offender management survey (see Appendix III), in which only 42% of respondents said they saw their offender supervisor monthly, against a comparator of 82%. The situation was compounded because offender supervisors were regularly taken away from the OMU for residential duties. In 2009, over 1,300 hours had been lost, and 266 hours had already been lost in the first five months of 2010.
- 9.14 The offender management senior officer reviewed all OASys assessments before acceptance, but there was no quality assurance to review the quality and frequency of broader offender supervisor work. At the time of the inspection, probation staff were not offered this facility either, as there was no senior probation officer cover, although they had a contact point if they required specific support or guidance.
- 9.15 There were reasonable links between the OMU and personal officers and we saw some evidence of information sharing between them. Prisoners convicted of a sex offence (176 at the time of the inspection) were allocated a caseworker – see paragraph 9.103 – and there had been some initial training for personal officers by the programmes team on offence paralleling (behaviour that mirrors issues relating to offending). However, most officers we spoke to were unaware of this. Offender supervisors had not yet been included in this training.
- 9.16 Approximately 15-20 prisoners were released a month. All prisoners had a pre-release resettlement board between eight and 12 weeks before release. Boards were well attended and included representatives from housing, mentoring, programmes, offender management and personal officers. Police and offender managers were also invited, as well as the prisoner's family. The board focused on ensuring that the prisoner was aware of licence conditions, had appropriate accommodation and highlighted any concerns that needed to be addressed before release. The meetings generally worked well. In our survey, 24% of respondents said that a member of staff had helped them prepare for release, significantly better than the 18% comparator.
- 9.17 There was also a two-week pre-release programme that ran 10 times a year. It covered all key issues and practical matters, such as work, benefits and education, as well as motivation and reducing the risk of reoffending. Prisoners who had attended the course were very positive about it.

- 9.18 The coordinating chaplain was the lead for developing community links. There were monthly meetings with community providers, and a reasonable range of community provision. As well as organisations delivering specific services, including housing, Citizens Advice and mentoring services, several groups offered support specifically on release. Over 120 volunteers had been identified providing services from running the visits tea bar to visiting prisoners who had no other regular community support.
- 9.19 There was no significant use of release on temporary licence (ROTL), which had not been granted in the previous 12 months for either vocational training or specific resettlement needs, such as a job or college interview. The prison had developed links with employment providers in the community and was hoping to develop this work further.
- 9.20 Arrangements for home detention curfew (HDC) were reasonable, although relatively few prisoners qualified. In the previous 12 months, only nine prisoners had been reviewed, of whom three had been successful.

Categorisation

- 9.21 Wing managers were responsible for recategorisation reviews, which were automatically undertaken when they were due. Prisoners who potentially met the criteria were formally reviewed, but only seven prisoners had obtained category D status in the previous 12 months. For IPP prisoners, although decisions regarding re-categorisation were made by the Parole Board progress was, we were told, extremely difficult due to the acceptance criteria of some category D prisons.

Public protection

- 9.22 Ninety-five per cent of the population, 593 prisoners, were subject to MAPPAs (multi-agency public protection) arrangements – 148 were MAPPAs two, 14 were MAPPAs three and 431 were either MAPPAs one or MAPPAs X. All new arrivals subject to MAPPAs were reviewed immediately by the weekly safeguarding children committee. This was primarily, but not exclusively, centred on child protection. The meetings were generally well attended and all departments were invited to contribute. Prisoners identified as a risk, or potential risk, to children (179 at the time of the inspection) were categorised for their level of contact with children: 115 had some form of restriction, and 35 of these had full restrictions.
- 9.23 There was also an interdepartmental risk management meeting that met monthly, and which reviewed all prisoners due to be released within six months. Offender supervisors had recently taken a more significant role in these meetings and generally contributed most information. Reports were usually comprehensive and well managed. Meetings were well attended and often included offender managers. Copies of reports were routinely forwarded to community offender managers and MAPPAs chairs.

Indeterminate-sentenced prisoners

- 9.24 Over 37% of the population were indeterminate-sentenced prisoners – 193 IPP prisoners and 42 mandatory or discretionary lifers. All IPP prisoners were managed by the 2.5 probation officers in the OMU who were offender supervisors. There was one vacancy at the time of the inspection and, as a consequence, caseloads were high, at about 90 per full-time worker. There was evidence of some occasional one-to-one work with these prisoners, particularly on victim awareness and domestic violence, although it was infrequent.

- 9.25 The 42 lifers were managed by officer offender supervisors. No OMU staff had yet undertaken the managing indeterminate sentences and risk (MISAR) training course, although some were scheduled to do so.
- 9.26 There was no specific regime for indeterminate-sentenced prisoners, who were managed in the same way as other prisoners. The majority of young adults subject to indeterminate sentences were on B wing. This was among the worst accommodation in the prison (see paragraph 2.3), and was also the young adult first night centre. Several prisoners there told us that they found the transitory nature of this population unsettling. Staff also indicated that the mix of two separate but demanding populations sometimes proved problematic. Adult prisoners serving indeterminate sentences were distributed across the establishment, although the majority of these were IPPs and only two adult prisoners were serving life sentences. All wings had identified indeterminate liaison officers but this role had yet to be clearly defined and implemented.
- 9.27 There were no lifer or IPP forums at the time of the inspection and there was a lifer day only once a year. Indeterminate-sentenced prisoners were appropriately prioritised for the good range of offending behaviour programmes (see paragraph 9.101).

Recommendations

- 9.28 All departments that engage with prisoners in offending behaviour work and sentence planning should use the *Road to resettlement* model to reinforce learning points.
- 9.29 The role of offender supervisor should be clarified, as should the level and frequency of contact with prisoners.
- 9.30 The offender management unit should be allocated the agreed staffing to meet its work objectives.
- 9.31 There should be a quality assurance scheme to cover all aspects of offender management work as well as OASys (offender assessment system) assessments.
- 9.32 The psychology department should further develop work on offence paralleling, and offender supervisors should be included in assessments.
- 9.33 A range of work placements should be available through release on temporary licence (ROTL) to support resettlement.
- 9.34 Category D prisons should offer more flexible acceptance criteria for indeterminate sentence for public protection (IPP) prisoners to facilitate their effective progression through sentence.
- 9.35 All staff identified to work with indeterminate-sentenced prisoners should undertake managing indeterminate sentences and risk (MISAR) training.
- 9.36 Young adult indeterminate-sentenced prisoners should not be accommodated on the first night centre.
- 9.37 The role of wing indeterminate-sentenced prisoner liaison officers should be clearly defined, and they should have appropriate training.

- 9.38 There should be forums for indeterminate-sentenced prisoners that focus specifically on their needs.

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

- 9.39 Accommodation provision was broadly appropriate to the needs of the population and the service had helped those identified as having no housing on release. No prisoner had been released without accommodation in the last three years. Information, advice and guidance were available to most prisoners pre-release and well coordinated with resettlement. Prisoners gained good employment skills, and some external links supported prisoners seeking employment on release. Health care staff saw prisoners on the day of their release and ensured continuity of care for those with mental health needs. Although debt had been identified as a factor in many prisoners' offending, work in this area was not shared with the offender management unit and there was currently no financial management course.

Accommodation

- 9.40 A full-time housing officer, employed through New Bridge, saw all new arrivals during induction. Despite this, in our survey only 33% of respondents, against a comparator of 40%, said they knew who to speak to at the prison about accommodation on release. In many cases there was relatively little contact at this point, and the worker's primary role was oriented to the last six months before the prisoner's release.
- 9.41 Given the age of the population and the number of prisoners subject to MAPPA (see paragraph 9.22), the majority of prisoners either returned to live with parents or were subject to restricted accommodation through the probation service. However, the service saw over 373 new prisoners in 2009, of whom 68 required accommodation help prior to their release. There were good links with the OMU and various community offender managers, with whom liaison was an integral part of the role. The housing worker routinely attended pre-release resettlement boards.
- 9.42 Since New Bridge had taken over the contract for housing services in 2006, no prisoner had been released without stable accommodation. In some cases, such accommodation was relatively temporary awaiting longer term provision to become available.
- 9.43 New Bridge also offered a mentoring service and nine volunteers currently came into the establishment to offer support to several prisoners. Where appropriate, links between the housing officer and mentoring service ensured ongoing support.

Education, training and employment

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

- 9.44 JHP provided good information, advice and guidance support and timely interventions during sentence and for resettlement. Individual interviews with prisoners reviewed their courses and qualifications gained during their sentence. Prisoners received good information on what would happen at their resettlement board interview and advice on what was available to help them to prepare for release.
- 9.45 There were three employability courses in education to support prisoners eligible for release. However, they were sequenced inappropriately with prisoners' sentence plan, and most prisoners attended them too early in the sentence. A two-week full-time resettlement course prepared prisoners well for release. About 50% of the population attended this course. A recent 'Ready for the road' course was shorter and delivered in modules, allowing prisoner to select the most suitable aspects for them.
- 9.46 A good pilot programme to develop, record and accredit employability skills was at an early stage of development. Links with external agencies, such as Jobcentre Plus and SOVA, to support prisoners on release had been problematic but two newly recruited staff had recently begun work in the prison. The virtual learning campus provided little to support job search, as the vacancies posted on the site were out of date. Links with two national employers, Nationwide Tyres and Timpson's, provided opportunities for work on release but links with employers were underdeveloped.
- 9.47 JHP workers provided good support to enable prisoners to continue training courses on release through national links within their company. They also offered business start-up advice through a business start-up awareness raising session followed up by individual support sessions. Some prisoners who had completed vocational training with South Birmingham College had progressed to higher level training at the college on release.

Mental and physical health

- 9.48 Discharge letters were provided for all prisoners. Health staff saw all prisoners on the morning of their release and ensured they had all relevant medicines and documentation, including names and addresses of GP practices in their area if appropriate. The community psychiatric nurse (CPN) saw all those under the care of the mental health in-reach team who, wherever possible, arranged a meeting with the community mental health team to ensure a smooth transition of care. Following release, the CPN attended initial care programme approach meetings in the community wherever possible.
- 9.49 There was a comprehensive palliative care policy, with access to a palliative care nurse consultant through the PCT.

Finance, benefit and debt

- 9.50 In the last resettlement needs analysis in August 2009, 34% of prisoners were identified as having problems with debt and financial management, which related to their offending behaviour. However, support under this pathway was limited to contact with the CAB on one day a week. Approximately 80 prisoners were on the CAB's caseload, and in the year to the end of March 2010 over £200,000 worth of debt had been identified. Despite the identified link between debt and offending for many prisoners, the service remained confidential and

outcomes were not shared with offender supervisors and managers. This affected the service's ability to assess and manage future risk. The CAB was not represented at pre-release resettlement boards.

- 9.51 A financial literacy course offered up until a few months before the inspection no longer ran. There had also been some work by the prison to help prisoners open bank accounts before release but this was also not currently available.

Recommendations

- 9.52 Prisoners should only attend the employability course run by education towards the end of their sentence when they can gain most benefit from it.
- 9.53 The pilot programme to record and accredit prisoners' employability skills should be further developed to enable all prisoners to access it.
- 9.54 Links with employers should be extended to provide more employment opportunities for prisoners on release.
- 9.55 Consent should be sought from prisoners receiving support for debt management to share work with the offender management unit.
- 9.56 Citizens Advice staff should be asked to attend pre-release meetings and/or provide written information on the prisoner's debt and its likely consequence on release.
- 9.57 The prison should provide prisoners with a financial management programme.
- 9.58 Prisoners should be able to open bank accounts before release.

Drugs and alcohol

- 9.59 The drug and alcohol strategy was well managed and the policy was informed by a recent needs analysis. Interventions for prisoners included one-to-one work, group work modules and a well-established P-ASRO programme; substance misuse peer supporters provided additional input. There were currently insufficient services for prisoners with primary alcohol problems.
- 9.60 Drug strategy meetings took place monthly and were chaired by the interventions and substance misuse services manager and attended by representatives from relevant departments. The head of interventions and psychology was the establishment drug coordinator (EDC). The strategy was well monitored and coordinated.
- 9.61 Both the drug and the alcohol policy documents had been reviewed recently. They were comprehensive and detailed targets and performance measures, as well as setting out an annual action plan. A local needs analysis, based on a prisoner survey with an 84% response rate, informed the policies.
- 9.62 In our survey, prisoners were positive about service provision: 91% of respondents knew who to contact for help with a drug/alcohol problem, against the comparator of 79%, 88%, against 74%, said they had received help and 87%, against 81%, had found the help or intervention useful.

- 9.63 Counselling, assessment, referral, advice and throughcare (CARAT) services were provided by a senior practitioner and 3.5 workers from Inclusion. Management was appropriate and there were staff training arrangements. The team had a good standard of accommodation in the health services building which also contained a group work room.
- 9.64 The team saw all new arrivals within three days and usually on the following day. It provided induction input on both a group and a one-to-one basis, and services were easily accessible to prisoners. By June 2010, 27 triage assessments had already been completed against an annual target of 40. Prisoners usually arrived with care plans already in place and the team conducted 90 care plan reviews on average a month.
- 9.65 In June 2010, the open caseload was 158, with another 224 files suspended. Most interventions were delivered during the first and the last three months of prisoners' stay. CARAT clients could engage in structured one-to-one work supplemented by work books, and a range of two-hour validated group work modules. There were 12 groups a month, including an alcohol awareness session. Prisoners could also receive information and additional support from a group of 14 substance misuse peer supporters, who had been trained and were supervised by the CARAT team.
- 9.66 The CARAT service was well integrated into the prison and represented at relevant multi-agency meetings. Workers shared care plans with the OMU and attended resettlement boards, where the local drug intervention programme (DIP) was also represented. Transfer and release plans were of good quality.
- 9.67 DIP post-release support was only available to class A drug users. The CARAT team identified and made contact with community drug and alcohol providers offering a service to cannabis and problem alcohol users. In our survey, 64% of respondents knew who in the prison could help them contact external drug or alcohol agencies, against the comparator of 50%.
- 9.68 The CARAT service's remit excluded one-to-one work with primary alcohol users, even though problem drinking was prevalent. The needs analysis found that 45% of prisoners linked their alcohol use to offending and in our survey, 33% of respondents said they had an alcohol problem on arrival, compared with 11% in 2005 and the comparator of 21%.
- 9.69 The interventions department had run a week-long locally validated alcohol and offending course three times in 2009 but this did not meet need. A bid to introduce the COVAID (control of violence for angry impulsive drinkers) programme into the prison had been successful.
- 9.70 The P-ASRO (prison addressing substance related offending) programme was well established and could also be accessed by prisoners who had been assessed for or had completed the sex offender treatment programme. In 2009, 80 prisoners had started and 73 completed the course, against a target of 80 starts and 52 completions. A designated building provided good facilities and the programme had a high level of establishment support.
- 9.71 The programme team, consisting of a civilian treatment manager and four facilitators (two officers and two civilians) had achieved a high audit rating for their work. Three of the peer supporters were P-ASRO graduates and offered input at the beginning of the course. There was no dedicated P-ASRO gym session and a 'Tackling drugs through PE' course had been stopped. Post-programme reviews were well attended, and there was evidence of good follow-up work from the CARAT team.
- 9.72 Compact-based drug testing (CBDT) was available to prisoners independent of location and run as non-punitive. The target of 150 compacts was met and testing took place monthly,

mostly on a mobile basis. However, a small testing suite in a Portakabin provided inadequate waiting facilities and was extremely cramped. There were separate compliance testing compact for P-ASRO participants and substance misuse peer supporters.

Recommendations

- 9.73 The remit of the counselling, assessment, referral, advice and throughcare (CARAT) service should include work with prisoners who are primary alcohol users.
- 9.74 The establishment should reintroduce dedicated gym sessions for CARAT service clients and P-ASRO (prison addressing substance related offending) programme participants.
- 9.75 Compact-based drug testing facilities should be refurbished and extended to create an adequate testing and waiting environment.

Children and families of offenders

9.76 The visitors' centre was reasonably clean but had no refreshment facilities or children's play area. Visitors could book a visit in person, and the telephone booking line was accessible. Visits now started on time. Family induction visits were an excellent initiative. Furniture in the visits hall was fixed and in a poor state of repair and the play area was not staffed for all sessions. There was no accredited parenting course but the chaplaincy facilitated family mediation visits. Other initiatives supporting prisoners to maintain family ties included family visits and Storybook Dads.

- 9.77 Visits were held on three weekday afternoons and weekend afternoons. All sessions were two hours. Visits could be booked by telephone and the line was staffed on every weekday morning, four afternoons and two evenings. When we tried the line we were able to speak to a booking clerk on our second attempt. Visitors could also book a visit in person at the visitors' centre, provided they had a valid visiting order. Transport arrangements to collect visitors from a range of local pick-up points were no longer in place.
- 9.78 The visitors' centre was open from 1pm to 4.30pm during every visits session. It was reasonably clean and equipped with toilets and lockers but there were no refreshment facilities or designated play area. There were a few books for children and relevant information for visitors, as well as a comments box. A survey of visitors through the visitors' centre was under way. The centre staff treated visitors courteously but were primarily responsible for the booking them in rather than providing a wider support service.
- 9.79 The prison had recognised that visits had not always started at the published time and had recently revised procedures and the deployment of staff to ensure that sessions began on time. The session we observed did begin on time, although managers said the new arrangements were still not fully embedded.
- 9.80 In our survey, 57% of respondents, significantly better than the comparator of 50%, said their family and friends were treated well by visits staff and the families we spoke to were positive about their treatment. Visitors were searched in an area that had appropriate privacy. Following a positive drug dog indication, all visitors to the prisoner, including those who had

not received a positive indication, were offered a closed visit, unless those indicated were willing to leave.

- 9.81 There were 38 open tables and 10 closed visits rooms. The visits room was clean but the furniture was fixed and in a poor state of repair. The visitor refreshment facility was limited to hot and cold drinks and confectionary. The play area was staffed by a volunteer from the Mothers' Union but not yet for all visits sessions as some volunteers were awaiting security clearance.
- 9.82 Closed visits rooms were appropriately screened from the main visits room. Although there were 10 rooms, and currently only seven prisoners on closed visits, sessions were limited to one hour, which was unnecessarily restrictive.
- 9.83 There were no prisoner toilets in the visits room, and prisoners told us that they had not been allowed to use the toilet during a visit. The visits manager we spoke to said that staff encouraged prisoners to use the toilet before they left their wing for a visit and that he allowed prisoners to use a toilet elsewhere in the prison without terminating the visit but he was unable to say what policy other visits senior officers followed.
- 9.84 In our survey, respondents were more negative about access to visits than in comparator prisons: only 29%, compared with 36%, said they had a visit in their first week, and 37%, against 44%, said they received one or more visits in the previous week. The offender management needs analysis showed that just over a third of prisoners were over 100 miles from their home address. There were no arrangements to enable prisoners to exchange unused visiting orders for telephone credit.
- 9.85 During induction, prisoners could invite family members to participate in an induction visit. This was an excellent initiative, although records maintained since March 2010 showed that only 42 of the 146 prisoners offered a family visit had taken this up. The visits gave families an opportunity to meet prison staff, have a tour of the prison and raise any concerns with prison staff. Chaplaincy staff provided information about the range of support available to prisoners and their families. The team had put together written information packs that were sent out to families.
- 9.86 In our survey, 50% of respondents, significantly better than the comparator of 44%, said they had been helped to maintain contact with family and friends while in Swinfen Hall. The coordinating chaplain was the children and families lead. The chaplaincy team was very active in assisting prisoners and their families and could facilitate a range of family visits in the chapel, including visits for family mediation, meeting newborn babies and following bereavement.
- 9.87 Prisoners did not have access to an accredited parenting or relationship course but there were monthly family visits in the visits hall. Priority for these was given to prisoners on the enhanced level of the IEP scheme. The sessions were more relaxed than usual visits sessions, and prisoners could accompany children into the play area and move around the visits hall. The library facilitated Storybook Dads and prisoners were positive about the benefits of the scheme.

Recommendations

- 9.88 The visitors' centre should have refreshment and properly staffed play facilities.

- 9.89 Managers should continue to monitor visits admissions procedures to ensure that sessions always begin at the published time.
- 9.90 Closed visits should be authorised only when there is a risk justified by security intelligence in addition to a drug dog indication.
- 9.91 The furniture in the visits room should be replaced as a matter of urgency.
- 9.92 The range of refreshments sold in the visits room should be increased and include healthy options.
- 9.93 The play area should be staffed for all visits sessions.
- 9.94 Closed visits should last for the full duration of the visits session.
- 9.95 There should be a clear policy for allowing prisoners to use the toilet during a visits session, which all visits managers should understand and adhere to.
- 9.96 Prisoners should be able to exchange unused visiting orders for telephone credit.
- 9.97 The prison should offer an accredited parenting and relationship course.
- 9.98 All prisoners should be able to participate in family visits, whatever their IEP status.

Good practice

- 9.99 *During induction, prisoners could invite their families to attend a family induction visit, which allowed them to have a tour of the prison and meet staff.*

Attitudes, thinking and behaviour

- 9.100 There was a range of accredited programmes that met the broad needs of the population, and completion rates were generally high. There was a good initiative to support prisoners convicted of a sexual offence and encourage them to engage in treatment but this model had not yet been extended to other programmes.
- 9.101 A substantial programmes team involved psychology and prison officer staff in delivering a range of accredited programmes. Several programmes were delivered under the broad title of the sex offender treatment programme (SOTP) and P-ASRO (prison addressing substance related offending) was provided for drug users (see paragraph 9.70). There was also the living skills programmes, incorporating the thinking skills programme (TSP) and CALM (controlling anger and learning to manage it). These programmes were appropriate for the population, given that the most recent resettlement needs analysis had identified that 80% had been convicted of a sexual or violent (including robbery) offence, and 42% as having a drug misuse problem linked to their offending.
- 9.102 A high number of prisoners completed these accredited programmes. In 2009-10, 101 prisoners had completed TSP (or the previous enhanced thinking skills programme), 31 completed CALM, and 45 completed one of the SOTP programmes. A further 45 prisoners had completed the cognitive skills booster programme, but this was no longer available. There

were plans to introduce the COVAID (control of violence for angry impulsive drinkers) alcohol programme (see paragraph 9.69).

- 9.103 SOTP facilitators reviewed and interviewed all prisoners convicted of a sex offence, who were then allocated a caseworker with the role to engage, support and motivate them in their treatment. Even prisoners who denied their offence or refused to engage with the programme (46 at the time of the inspection) were allocated a caseworker, although contact with this group was infrequent. There were good links with the OMU and information was shared appropriately. There had been an attempt to extend this model to other programmes – in particular, living skills – but this had yet to be fully implemented, primarily because of staff shortages. It was also not clear whether it was offender supervisors or caseworkers who should take responsibility for post-programme work with prisoners to reinforce and build on newly acquired self-management skills and offence insight.
- 9.104 There was a detailed database of all prisoners and their programme treatment needs. Waiting lists were appropriately managed, based on risk of reoffending and closeness to release, and IPP and life-sentenced prisoners were also prioritised.
- 9.105 In our survey, 82% of respondents said that they had been on an offending behaviour course, significantly better than the comparator of 54%; 75%, against only 49%, felt the programmes would help them on release.

Recommendation

- 9.106 The casework model of support for prisoners should be extended to all accredited programmes, link closely to the OMU, and clearly identify which department is responsible for what work.

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

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- 10.1 The prison should identify designated first night cells that are prepared for new occupants, and prisoners should not be routinely locked in cell for the first 24 hours after arrival. (HP47, see paragraph HP6)
 - 10.2 A, B and C wings should undergo a complete refurbishment to bring them up to modern standards. (HP48, see paragraph HP17)
 - 10.3 Every strand of diversity should be covered by an up-to-date policy and related action plan. (HP49, see paragraph HP23)
 - 10.4 The quality of the Offender Learning and Skills Service (OLASS) provision should be improved to provide a better experience for prisoners, and the provider should ensure that the contracted hours are fulfilled and that there is sufficient staffing to prevent cancellation of classes. (HP50, see paragraph HP30)
 - 10.5 The range of learning and skills provision should be broadened to meet prisoner need. (HP51, see paragraph HP31)
 - 10.6 The core day should be revised to ensure longer activity sessions during the working day. (HP52, see paragraph HP31)
 - 10.7 Allocation to activities should be improved to ensure that prisoners attend activities that are appropriate, sequenced correctly to respond to sentence planning requirements, and meet their educational and personal development needs. (HP53, see paragraph HP32)
 - 10.8 Prisoners should have more time unlocked each day. (HP54, see paragraph HP35)

Recommendations

To NOMS

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- 10.9 Category D prisons should offer more flexible acceptance criteria for indeterminate sentence for public protection (IPP) prisoners to facilitate their effective progression through sentence. (9.34, see paragraph 9.21)
 - 10.10 The remit of the counselling, assessment, referral, advice and throughcare (CARAT) service should include work with prisoners who are primary alcohol users. (9.73, see paragraph 9.69)

Courts, escorts and transfers

- 10.11 Planned transfers should be scheduled with a stopover if the travelling time is likely to be lengthy. (1.8, see paragraph 1.4)
- 10.12 Reception should remain open during the lunch period when planned transfers and /or court returns are due. Escort vans should not be left waiting outside the prison and prisoners should be disembarked immediately. (1.9, see paragraph 1.5)
- 10.13 Prisoners should be given written information about the prison before a planned transfer in. (1.10, see paragraph 1.6)

First days in custody

- 10.14 The prison should monitor and seek to improve prisoner perceptions of the reception process. (1.26, see paragraph 1.13)
- 10.15 The reception Insider should always be available to assist new arrivals. (1.27, see paragraph 1.14)
- 10.16 The first night risk assessments should be meaningful and fully address the risk factors for new arrivals. (1.28, see paragraph 1.15)
- 10.17 Prisoners should not spend prolonged periods in reception. (1.29, see paragraph 1.16)
- 10.18 Prisoners should always be offered the opportunity to have a shower on their day of arrival. (1.30, see paragraph 1.19)
- 10.19 Indeterminate-sentenced prisoners should not be located on the same wing as new arrivals. (1.31, see paragraph 1.21)
- 10.20 The induction programme should always start on the next working day after a prisoner has arrived, and prisoners on induction should spend less time locked in their cell. (1.32, see paragraph 1.24)

Residential units

- 10.21 Prisoners should be allowed unlimited stamps in possession. (2.14, see paragraph 2.5)
- 10.22 Prisoners should not be charged to alter their PIN telephone account. (2.15, see paragraph 2.6)
- 10.23 The own clothes policy should be revised so that it is easily understandable to staff and prisoners. (2.16, see paragraph 2.8)
- 10.24 Cell cleaning time should be built into the regime and all prisoners should have weekly access to appropriate cell cleaning materials. (2.17, see paragraph 2.10)

10.25 Prisoners should be allowed daily access to showers. (2.18, see paragraph 2.12)

Staff-prisoner relationships

10.26 The prison should develop a strategy that focuses on developing trust between staff and prisoners. (2.23, see paragraph 2.21)

10.27 Staff should address prisoners by their preferred name or title. (2.24, see paragraph 2.22)

Personal officers

10.28 Personal officers and/or back-up personal officers should make at least weekly case note entries on their prisoners. (2.29, see paragraph 2.28)

Bullying and violence reduction

10.29 There should be governance arrangements to ensure that the temporary removal from off-wing activities is managed correctly and does not include improper sanctions. (3.14, see paragraph 3.11)

10.30 Criteria for the use of temporary removal from activities should be introduced. (3.15, see paragraph 3.11)

10.31 There should be further consultation with prisoners to explore the reasons for their poor perceptions of safety. (3.16, see paragraph 3.13)

Self-harm and suicide

10.32 The prison should work with new arrivals to alleviate their initial concerns and follow up their own findings regarding the rise in the number of ACCT documents. (3.26, see paragraph 3.21)

10.33 The quality of care maps and post-closure reviews should be improved. (3.27, see paragraph 3.22)

10.34 Up-to-date ACCT training records should be maintained. (3.28, see paragraph 3.24)

10.35 The constant supervision policy should be amended to ensure that prisoners at risk are managed without the use of intrusive methods. (3.29, see paragraph 3.25)

10.36 Prisoners on normal ACCT procedures should not be located in a camera cell but should be managed through staff interaction. (3.30, see paragraph 3.25)

10.37 Governance arrangements for the use of cell cameras should be improved. (3.31, see paragraph 3.25)

Applications and complaints

10.38 Managers should ensure prisoners receive a prompt response to submitted applications and the timeliness and quality of responses should be monitored formally. (3.42, see paragraph 3.35)

- 10.39 Complaints boxes should only be opened by staff responsible for processing complaints. (3.43, see paragraph 3.36)
- 10.40 Prisoners should receive a response to their complaint within three days, or 10 days in exceptional circumstances. (3.44, see paragraph 3.38)
- 10.41 The quality of complaint responses should be improved and formal quality assurances procedures should be introduced, with findings recorded and shared with managers. (3.45, see paragraph 3.39)
- 10.42 Managers should monitor the reasons why complaints are withdrawn, and should ensure that all prisoners who wish to complain are able to do so. (3.46, see paragraph 3.40)

Legal rights

- 10.43 Designated legal visits booths should be installed. (3.50, see paragraph 3.49)

Substance use

- 10.44 Joint work between counselling, assessment, referral, advice and throughcare (CARAT) and health services should be formalised to improve care planning and coordination. (3.68, see paragraph 3.62)
- 10.45 The mandatory drug testing (MDT) programme should be adequately resourced to undertake the required level of suspicion testing. (3.69, see paragraph 3.65)

Diversity

- 10.46 Prisoner monitoring should include all elements of diversity, including disability, age and religion. (4.9, see paragraph 4.5)
- 10.47 There should be equality impact assessments for all areas of diversity. (4.10, see paragraph 4.5)
- 10.48 The prison should ensure there are appropriate support mechanisms for prisoners from Gypsy, Romany or Traveller backgrounds. (4.11, see paragraph 4.6)

Diversity: race equality

- 10.49 The race equality action team (REAT) should analyse submitted racist incident report forms to identify and respond to any patterns or trends. (4.29, see paragraph 4.19)
- 10.50 The equalities manager should routinely analyse completed racist incident report form (RIRF) feedback forms, and the REAT should regularly discuss the information and, where necessary, act upon it. (4.30, see paragraph 4.20)
- 10.51 Reports of racist incidents should be fully investigated, including interviews with all those involved, and completed investigations should clearly evidence how conclusions were reached. (4.31, see paragraph 4.21)

- 10.52 There should be records of action taken in response to queries and concerns raised by the REAT chair when countersigning racist incident report forms. (4.32, see paragraph 4.22)
- 10.53 Investigations of complaints raised by staff defending themselves against an accusation of racism should explore the original reason for the accusation. (4.33, see paragraph 4.23)
- 10.54 There should be a programme to challenge racist and discriminatory prisoner behaviour. (4.34, see paragraph 4.26)
- 10.55 The equalities manager should ensure the appropriate and consistent use of formal measures, such as incentives and earned privileges reviews and adjudications, to challenge prisoners found to have engaged in racist behaviour. (4.35, see paragraph 4.26)
- 10.56 There should be regular consultation with black and minority prisoners. (4.36, see paragraph 4.27)

Diversity: religion

- 10.57 The prison should explore the reasons why Muslim prisoners hold more negative perceptions than non-Muslims. (4.40, see paragraph 4.38)

Diversity: foreign nationals

- 10.58 The foreign national policy should be informed by an annual needs assessment. (4.54, see paragraph 4.43)
- 10.59 All members of the foreign national team should receive specific training for the role. (4.55, see paragraph 4.44)
- 10.60 Initial interview forms should be completed for all prisoners identified as foreign nationals, and the completed forms should be shared with foreign national liaison officers and wing staff to ensure they are aware of prisoners' individual needs. (4.56, see paragraph 4.45)
- 10.61 The foreign national team should consult all foreign national prisoners to explore the reasons for poor attendance at monthly meetings and the negative findings in our survey. (4.57, see paragraph 4.47)
- 10.62 The foreign national coordinator should ensure all members of the foreign national committee regularly attend quarterly meetings, and that the membership includes prisoner representatives. (4.58, see paragraph 4.48)
- 10.63 Action points from the quarterly foreign national committee should be shared with the REAT. (4.59, see paragraph 4.48)
- 10.64 There should be appropriate priority and support to prisoner foreign national representatives, who should be promoted and readily identifiable to foreign national prisoners. (4.60, see paragraph 4.48)
- 10.65 The prison should work with the UK Border Agency to ensure that foreign national prisoners have regular access to UKBA representatives who are familiar with their individual cases and circumstances. (4.61, see paragraph 4.49)

- 10.66 Foreign national prisoners should have access to accredited independent immigration advice. (4.62, see paragraph 4.49)
- 10.67 The prison should work with the UK Border Agency to ensure that decisions on whether to proceed to deportation or removal are made as early as possible in a prisoner's sentence, and at least six months before the earliest date of release. (4.63, see paragraph 4.50)
- 10.68 Foreign national prisoners should not be charged a connection fee to make international calls, and the value of telephone card they receive should be based on their individual circumstances. (4.64, see paragraph 4.51)
- 10.69 Prisoners should have access to accredited translation and interpreting services, particular when there are issues of confidentiality. (4.65, see paragraph 4.52)

Diversity: disability and older prisoners

- 10.70 The REAT meeting should regularly review and update the disability action plan, and progress against identified action points should be clearly recorded. (4.75, see paragraph 4.68)
- 10.71 The disability liaison officer should receive appropriate training. (4.76, see paragraph 4.69)
- 10.72 There should be regular consultation with prisoners with disabilities to identify and respond to any areas of concern. (4.77, see paragraph 4.74)
- 10.73 A formal carer scheme should be introduced. (4.78, see paragraph 4.74)

Diversity: sexual orientation

- 10.74 Support groups for transgender, gay and bisexual prisoners should be introduced. (4.81, see paragraph 4.80)

Health services

- 10.75 The dental surgery should have dedicated resuscitation equipment. (5.11, see paragraph 5.6)
- 10.76 There should be more administrative support, and nurses should not perform unnecessary administrative tasks. (5.28, see paragraph 5.19)
- 10.77 The responsibility for financing operational support grade staff support to health care should be reviewed. (5.29, see paragraph 5.20)
- 10.78 Any non-attendance by the out of hours medical service should be reported to the health care manager and fully investigated. (5.30, see paragraph 5.21)
- 10.79 There should be a dedicated health care prisoner forum so that prisoner representatives can speak directly to senior health care staff about general health care issues. (5.31, see paragraph 5.25)
- 10.80 The appointment system should be revised to release nurses from non-clinical administrative duties. (5.42, see paragraph 5.35)
- 10.81 There should be a documented nurse triage system. (5.43, see paragraph 5.38)

- 10.82 There should be dedicated pharmacy-led clinics. (5.51, see paragraph 5.45)
- 10.83 The pharmacist should date-check all medicines. (5.52, see paragraph 5.45)
- 10.84 Medicine trolleys should be fixed to the wall. (5.53, see paragraph 5.47)
- 10.85 Prisoners should be able to access simple medication when the health care department is closed. (5.54, see paragraph 5.49)
- 10.86 Medicine administration records should always be completed and include whether prisoners have attended or not and if they have refused medication. Prisoners failing to comply with their medication should be routinely followed up. (5.55, see paragraph 5.50)
- 10.87 Dental clinical records should be entered into the patient clinical record. (5.60, see paragraph 5.57)
- 10.88 There should be dental triage to reduce waiting time for patients with problems. (5.61, see paragraph 5.58)
- 10.89 There should be an additional hygienist session to increase clinic time and enhance oral health promotion. (5.62, see paragraph 5.58)
- 10.90 The prison should provide regular mental health training for officers. (5.76, see paragraph 5.68)

Learning and skills and work activities

- 10.91 The quality of the education provision should be improved through better management of curriculum planning and implementation of quality improvement processes. (6.23, see paragraph 6.5)
- 10.92 The collection and analysis of data should be improved to give accurate information on learner performance. (6.24, see paragraph 6.7)
- 10.93 The prison should provide nationally recognised catering qualifications for prisoners working in the kitchens. (6.25, see paragraph 6.10)
- 10.94 The prison should further develop courses in reprographics, Prisons Information Communication Technology Academy (PICTA), CISCO (Computer Information System Company) and barbering to provide more activity opportunities. (6.26, see paragraph 6.11)
- 10.95 The equipment and resources in the motor vehicle and car valeting workshops should be improved. (6.27, see paragraph 6.12)
- 10.96 The range of personal and social development programmes should be extended. (6.28, see paragraph 6.13)
- 10.97 The quality of teaching and learning should be improved, including better use of information learning technology in classes. (6.29, see paragraph 6.15)
- 10.98 There should be better setting and monitoring of learner targets to improve the management of learner progress. (6.30, see paragraph 6.16)

- 10.99 Training and accredited qualifications should be provided for the library supervisors and assistants. (6.31, see paragraph 6.18)
- 10.100 The library accommodation should be extended to meet the needs of the population. (6.32, see paragraph 6.18)
- 10.101 Attendance at the library should be recorded and analysed by individuals to ensure equity of access. (6.33, see paragraph 6.19)
- 10.102 The library should develop links with education to support education courses. (6.34, see paragraph 6.20)
- 10.103 There should be a trolley book service for prisoners who cannot access the library. (6.35, see paragraph 6.20)
- 10.104 There should be promotional activities to encourage more prisoners to use the library. (6.36, see paragraph 6.20)

Physical education and health promotion

- 10.105 Records of PE attendance should be improved to monitor individual attendance and ensure fairer allocations from the wings. (6.44, see paragraph 6.41)
- 10.106 The use of the PE facilities should be increased to allow prisoners more access. (6.45, see paragraph 6.41)

Time out of cell

- 10.107 An hour's outdoor exercise should be provided for all prisoners. (6.52, see paragraph 6.47)
- 10.108 There should be a period of general unlock in the morning before activity. (6.53, see paragraph 6.48)
- 10.109 All prisoners should receive evening association every day. (6.54, see paragraph 6.49)
- 10.110 Core day routines should be adhered to. (6.55, see paragraph 6.50)
- 10.111 Prisoner movement to activity should start earlier and be concluded more quickly. (6.56, see paragraph 6.50)

Security and rules

- 10.112 The regime for prisoners should not be impeded by unnecessarily restrictive rules and security measures. (7.10, see paragraph 7.7)
- 10.113 Rules and routines should be widely publicised on all wings and their application should be consistent. (7.11, see paragraph 7.9)

Discipline

- 10.114 There should be regular management checks of use of force documentation to ensure that it is completed correctly. (7.34, see paragraph 7.21)
- 10.115 Special accommodation should only be used as a last resort and because of the most extreme circumstances. (7.35, see paragraph 7.24)
- 10.116 The special cell in the segregation unit is unfit for purpose and its use should be discontinued. (7.36, see paragraph 7.25)
- 10.117 Living conditions in the segregation unit should be improved, and graffiti should be removed from all areas. (7.37, see paragraph 7.27)
- 10.118 All prisoners in the segregation unit should be able to have exercise, showers and access to a telephone every day, and the regime should be developed, including purposeful activity for longer stay prisoners. (7.38, see paragraph 7.30)
- 10.119 There should be reintegration and care planning for prisoners in the segregation unit. (7.39, see paragraph 7.31)

Incentives and earned privileges

- 10.120 Prisoners on the basic regime should be reviewed at least every week. (7.47, see paragraph 7.43)

Catering

- 10.121 There should be more opportunities for prisoners to dine communally. (8.7, see paragraph 8.5)

Prison shop

- 10.122 The prison should investigate and take action on the views of black and minority ethnic prisoners about the prison shop. (8.13, see paragraph 8.10)
- 10.123 Shop consultation meetings should be held routinely and at least quarterly. (8.14, see paragraph 8.12)

Strategic management of resettlement

- 10.124 The quarterly resettlement committee meetings should be attended by all committee members or their representatives. (9.6, see paragraph 9.4)
- 10.125 The monthly offender management and resettlement meetings should be attended by all members and representatives of each resettlement pathway, or their representatives. (9.7, see paragraph 9.4)

Offender management and planning

- 10.126 All departments that engage with prisoners in offending behaviour work and sentence planning should use the *Road to resettlement* model to reinforce learning points. (9.28, see paragraph 9.10)
- 10.127 The role of offender supervisor should be clarified, as should the level and frequency of contact with prisoners. (9.29, see paragraph 9.13)
- 10.128 The offender management unit should be allocated the agreed staffing to meet its work objectives. (9.30, see paragraph 9.13)
- 10.129 There should be a quality assurance scheme to cover all aspects of offender management work as well as OASys (offender assessment system) assessments. (9.31, see paragraph 9.14)
- 10.130 The psychology department should further develop work on offence paralleling, and offender supervisors should be included in assessments. (9.32, see paragraph 9.15)
- 10.131 A range of work placements should be available through release on temporary licence (ROTL) to support resettlement. (9.33, see paragraph 9.19)
- 10.132 All staff identified to work with indeterminate-sentenced prisoners should undertake managing indeterminate sentences and risk (MISAR) training. (9.35, see paragraph 9.25)
- 10.133 Young adult indeterminate-sentenced prisoners should not be accommodated on the first night centre. (9.36, see paragraph 9.26)
- 10.134 The role of wing indeterminate-sentenced prisoner liaison officers should be clearly defined, and they should have appropriate training. (9.37, see paragraph 9.26)
- 10.135 There should be forums for indeterminate-sentenced prisoners that focus specifically on their needs. (9.38, see paragraph 9.27)

Resettlement pathways

- 10.136 Prisoners should only attend the employability course run by education towards the end of their sentence when they can gain most benefit from it. (9.52, see paragraph 9.45)
- 10.137 The pilot programme to record and accredit prisoners' employability skills should be further developed to enable all prisoners to access it. (9.53, see paragraph 9.46)
- 10.138 Links with employers should be extended to provide more employment opportunities for prisoners on release. (9.54, see paragraph 9.46)
- 10.139 Consent should be sought from prisoners receiving support for debt management to share work with the offender management unit. (9.55, see paragraph 9.50)
- 10.140 Citizens Advice staff should be asked to attend pre-release meetings and/or provide written information on the prisoner's debt and its likely consequence on release. (9.56, see paragraph 9.50)

- 10.141 The prison should provide prisoners with a financial management programme. (9.57, see paragraph 9.51)
- 10.142 Prisoners should be able to open bank accounts before release. (9.58, see paragraph 9.51)
- 10.143 The establishment should reintroduce dedicated gym sessions for CARAT service clients and P-ASRO (prison addressing substance related offending) programme participants. (9.74, see paragraph 9.71)
- 10.144 Compact-based drug testing facilities should be refurbished and extended to create an adequate testing and waiting environment. (9.75, see paragraph 9.72)
- 10.145 The visitors' centre should have refreshment and properly staffed play facilities. (9.88, see paragraph 9.78)
- 10.146 Managers should continue to monitor visits admissions procedures to ensure that sessions always begin at the published time. (9.89, see paragraph 9.79)
- 10.147 Closed visits should be authorised only when there is a risk justified by security intelligence in addition to a drug dog indication. (9.90, see paragraph 9.80)
- 10.148 The furniture in the visits room should be replaced as a matter of urgency. (9.91, see paragraph 9.81)
- 10.149 The range of refreshments sold in the visits room should be increased and include healthy options. (9.92, see paragraph 9.81)
- 10.150 The play area should be staffed for all visits sessions. (9.93, see paragraph 9.81)
- 10.151 Closed visits should last for the full duration of the visits session. (9.94, see paragraph 9.82)
- 10.152 There should be a clear policy for allowing prisoners to use the toilet during a visits session, which all visits managers should understand and adhere to. (9.95, see paragraph 9.83)
- 10.153 Prisoners should be able to exchange unused visiting orders for telephone credit. (9.96, see paragraph 9.84)
- 10.154 The prison should offer an accredited parenting and relationship course. (9.97, see paragraph 9.87)
- 10.155 All prisoners should be able to participate in family visits, whatever their IEP status. (9.98, see paragraph 9.87)
- 10.156 The casework model of support for prisoners should be extended to all accredited programmes, link closely to the OMU, and clearly identify which department is responsible for what work. (9.106, see paragraph 9.103)

Housekeeping points

First days in custody

10.157 Prisoners should be offered a drink and a meal in reception. (1.33, see paragraph 1.17)

Personal officers

10.158 Managers should quality check P-Nomis entries, and record this. (2.30, see paragraph 2.28)

Diversity

10.159 Job descriptions for diversity staff and prisoner representatives should clearly outline the full range of duties across all diversity strands. (4.12, see paragraph 4.3)

Diversity: foreign nationals

10.160 Information about international telephone cards should be clearly communicated to foreign national prisoners. (4.66, see paragraph 4.51)

Health services

10.161 The washer/disinfector should be functional and re-sited to provide compliance with essential dental practice guidelines. (5.12, see paragraph 5.5)

10.162 Health promotion publications should be available in a range of languages. (5.13, see paragraph 5.9)

10.163 All edges of the dental surgery floor should be sealed. (5.14, see paragraph 5.5)

10.164 An amalgam separator should be provided in the dental surgery. (5.15, see paragraph 5.5)

10.165 There should be sufficient three-in-one syringe tips for single use only. (5.16, see paragraph 5.5)

10.166 An aluminium foil-lined spillage tray should be provided. (5.17, see paragraph 5.5)

10.167 Copies of waste disposal contracts should be held in the dental surgery. (5.18, see paragraph 5.6)

10.168 Personal dental treatment plan forms FP17DC should be used in accordance with General Dental Council Regulations 2005. (5.63, see paragraph 5.57)

10.169 The prison dental service should have an individual contract with the commissioner to facilitate contract monitoring. (5.64, see paragraph 5.57)

10.170 Oral health promotion sessions and literature should be available. (5.65, see paragraph 5.59)

10.171 Good quality toothbrushes should be available for sale in the prison shop. (5.66, see paragraph 5.59)

Learning and skills and work activities

10.172 The availability of legal material in the library should be better advertised. (6.37, see paragraph 6.21)

Examples of good practice

10.173 Personal officers visited the care and separation unit each week to see their prisoners. (2.31, see paragraph 2.27)

10.174 The employment of operational support grade staff in the health care department enhanced its smooth running. (5.32, see paragraph 5.20)

10.175 During induction, prisoners could invite their families to attend a family induction visit, which allowed them to have a tour of the prison and meet staff. (9.99, see paragraph 9.85)

Appendix I: Inspection team

| | |
|-------------------|------------------|
| Anne Owers | Chief inspector |
| Martin Lomas | Team leader |
| Keith McInnis | Inspector |
| Kevin Parkinson | Inspector |
| Gordon Riach | Inspector |
| Andrea Walker | Inspector |
| Adam Altoft | Researcher |
| Olayinka Macauley | Research trainee |

Specialist inspectors

| | |
|------------------|---------------------------|
| Sigrid Engelen | Drugs inspector |
| Bridget McEvilly | Health services inspector |
| Helen Jackson | Pharmacist |
| Jen Davies | Dentist |
| Sheila Willis | Ofsted inspector |
| John Grimmer | Ofsted inspector |
| Alan Shaw | Ofsted inspector |
| Tony Rolley | Probation inspector |
| Martin Jolley | Probation inspector |

Appendix II: Prison population profile

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

| Status | 18-20yr olds | 21 and over | % |
|------------------|--------------|-------------|------------|
| Sentenced | 256 | 332 | 94.1 |
| Recall detainees | 16 | 21 | 5.9 |
| Total | 272 | 355 | 100 |

| Sentenced | 18-20yr olds | 21 and over | % |
|-------------------------------|--------------|-------------|------------|
| 12 mths to less than 2 years | 93 | 94 | 29.8 |
| 2 years to less than 4 years | 13 | 21 | 5.4 |
| 4 years to less than 10 years | 48 | 123 | 27.3 |
| 10 years and over (not life) | | | |
| ISPP | 78 | 115 | 30.8 |
| Life | 40 | 2 | 6.7 |
| Total | 272 | 355 | 100 |

| Age | Number of prisoners | % |
|----------------------|---------------------|------------|
| Under 21 | 272 | 43.4 |
| 21 years to 29 years | 355 | 56.6 |
| Total | 627 | 100 |

| Nationality | 18-20 yr olds | 21 and over | % |
|-------------------|---------------|-------------|------------|
| British | 247 | 325 | 91.2 |
| Foreign nationals | 25 | 30 | 8.8 |
| Total | 272 | 355 | 100 |

| Security | 18-20 yr olds | 21 and over | % |
|--------------|---------------|-------------|------------|
| Cat B | | 2 | 0.3 |
| Cat C | | 352 | 56.1 |
| Cat D | | 1 | 0.2 |
| Other YOI L | 272 | | 43.4 |
| Total | 272 | 355 | 100 |

| Ethnicity | 18-20yr olds | 21 and over | % |
|--------------------------------|--------------|-------------|------|
| <i>White:</i> | | | |
| British | 161 | 234 | 62.9 |
| Irish | 2 | 4 | 0.9 |
| Other white | 6 | 6 | 1.9 |
| <i>Mixed:</i> | | | |
| White and black Caribbean | 16 | 15 | 4.9 |
| White and black African | 4 | 2 | 1.0 |
| White and Asian | 3 | 2 | 0.8 |
| Other mixed | 2 | 11 | 2.1 |
| <i>Asian or Asian British:</i> | | | |
| Indian | 1 | 8 | 1.4 |
| Pakistani | 9 | 13 | 3.5 |
| Bangladeshi | 1 | 1 | 0.3 |
| Other Asian | 7 | 4 | 1.7 |

| | | | |
|--------------------------------|------------|------------|-------------|
| <i>Black or black British:</i> | | | |
| Caribbean | 35 | 30 | 10.4 |
| African | 20 | 12 | 5.2 |
| Other black | 5 | 9 | 2.2 |
| <i>Other ethnic group</i> | | 2 | 0.3 |
| Not stated | | 2 | 0.3 |
| Total | 272 | 355 | 99.8 |

| Religion | 18-20 yr olds | 21 and over | % |
|-------------------------------|---------------|-------------|------------|
| Baptist | 2 | 5 | 1.1 |
| Church of England | 52 | 63 | 18.3 |
| Roman Catholic | 57 | 60 | 18.7 |
| Other Christian Denominations | 13 | 10 | 3.7 |
| Muslim | 48 | 56 | 16.6 |
| Sikh | 1 | 1 | 0.3 |
| Hindu | | 1 | 0.1 |
| Buddhist | 2 | | 0.3 |
| Jewish | 2 | | 0.3 |
| Other | 9 | 13 | 3.5 |
| No Religion | 86 | 146 | 37.0 |
| Total | 272 | 355 | 100 |

Sentenced prisoners only

| Length of stay | 18-20 yrs olds | | 21 and over | |
|----------------------|----------------|------------|-------------|------------|
| | Number | % | Number | % |
| Less than 1 month | 13 | 4.8 | - | |
| 1 month to 3 months | 21 | 7.8 | 41 | 11.5 |
| 3 months to 6 months | 55 | 20.2 | 35 | 9.9 |
| 6 months to 1 year | 93 | 34.1 | 18 | 5.1 |
| 1 year to 2 years | 50 | 18.4 | 53 | 14.9 |
| 2 years to 4 years | 13 | 4.8 | 21 | 5.9 |
| 4 years or more | 27 | 9.9 | 187 | 52.7 |
| Total | 272 | 100 | 355 | 100 |

| Main offence | 18-20 year old | 21 and over | % |
|---------------------------------------|----------------|-------------|------------|
| Violence against the person | 109 | 89 | 31.6 |
| Sexual offences | 48 | 52 | 16.0 |
| Burglary | 5 | 21 | 4.1 |
| Robbery | 44 | 92 | 21.7 |
| Theft and handling | | 4 | 0.6 |
| Drugs offences | 7 | 16 | 3.7 |
| Other offences | 22 | 37 | 9.4 |
| Civil offences | | | |
| Offences not recorded/holding warrant | 37 | 44 | 12.9 |
| Total | 272 | 355 | 100 |

Appendix III: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

A voluntary, confidential and anonymous survey of a representative proportion of the young adult 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 4 May 2010, the population at HMP/YOI Swinfen Hall was 609. The sample size was 198. Overall, this represented 33% of the prisoner population.

Selecting the sample

Respondents were randomly selected from a LIDS young adult population printout using a stratified systematic sampling method. This basically means every second person is selected from a LIDS 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. Four respondents refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. Three 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, 187 respondents completed and returned their questionnaires. This represented 31% of the prison population. The response rate was 94%. In addition to the four respondents who refused to complete a questionnaire, three questionnaires were not returned and four were returned blank.

Comparisons

The following documents detail 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 young adults surveyed in young offender institutions. This comparator is based on all responses from young adult surveys carried out in 20 young offender institutions since April 2003.
- The current survey responses in 2010 against the responses of young adults surveyed at HMP/YOI Swinfen Hall in 2005.
- A comparison within the 2010 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2010 survey between the responses of prisoners who are British nationals and those who are foreign nationals.
- A comparison within the 2010 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2010 survey between the responses of those prisoners under the age of 21 and those prisoners aged 21 and over.

In addition to the main young adult survey, an offender management survey was distributed to a small sample of prisoners, randomly selected from the total population of prisoners who fall in scope under offender management. The following analyses have been conducted:

- The current survey responses against comparator figures for all (in-scope) young adults surveyed in young offender institutions. This comparator is based on all responses from offender management surveys carried out in four YOIs.
- The current survey responses against comparator figures for all (in-scope) respondents surveyed across all prisons. This comparator is based on all responses from surveys carried out in 37 prisons of varying functional type.

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 young adults' 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.

Section 1: About you

| | | |
|-------------|--|-----------|
| Q1.2 | How old are you? | |
| | <i>Under 21</i> | 96 (51%) |
| | <i>21-29</i> | 91 (49%) |
| | <i>30-39</i> | 0 (0%) |
| | <i>40-49</i> | 0 (0%) |
| | <i>50-59</i> | 0 (0%) |
| | <i>60-69</i> | 0 (0%) |
| | <i>70 and over</i> | 0 (0%) |
| Q1.3 | Are you sentenced? | |
| | <i>Yes</i> | 181 (97%) |
| | <i>Yes - on recall</i> | 6 (3%) |
| | <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? | |
| | Not sentenced | 0 (0%) |
| | <i>Less than six months</i> | 1 (1%) |
| | <i>Six months to less than one year</i> | 1 (1%) |
| | <i>One year to less than two years</i> | 3 (2%) |
| | <i>Two years to less than four years</i> | 17 (9%) |
| | <i>Four years to less than 10 years</i> | 78 (42%) |
| | <i>Ten years or more</i> | 7 (4%) |
| | <i>IPP (indeterminate sentence for public protection)</i> | 66 (36%) |
| | <i>Life</i> | 11 (6%) |
| 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)? | |
| | Not sentenced | 0 (0%) |
| | <i>Six months or less</i> | 36 (23%) |
| | <i>More than six months</i> | 120 (77%) |
| Q1.6 | How long have you been in this prison? | |
| | <i>Less than one month</i> | 4 (2%) |
| | <i>One to less than three months</i> | 11 (6%) |
| | <i>Three to less than six months</i> | 19 (10%) |
| | <i>Six to less than 12 months</i> | 26 (14%) |
| | <i>Twelve months to less than two years</i> | 38 (21%) |
| | <i>Two to less than four years</i> | 73 (39%) |
| | <i>Four years or more</i> | 14 (8%) |
| Q1.7 | Are you a foreign national (i.e. do not hold UK citizenship)? | |
| | <i>Yes</i> | 25 (14%) |
| | <i>No</i> | 155 (86%) |

Q1.8 Is English your first language?
 Yes 164 (91%)
 No 16 (9%)

Q1.9 What is your ethnic origin?

| | | | |
|---|-----------|---|---------|
| <i>White - British</i> | 108 (58%) | <i>Asian or Asian British - Bangladeshi</i> | 1 (1%) |
| <i>White - Irish</i> | 4 (2%) | <i>Asian or Asian British - other...</i> | 2 (1%) |
| <i>White - other</i> | 8 (4%) | <i>Mixed heritage - white and black Caribbean</i> | 13 (7%) |
| <i>Black or black British - Caribbean</i> | 20 (11%) | <i>Mixed heritage - white and black African</i> | 2 (1%) |
| <i>Black or black British - African</i> | 11 (6%) | <i>Mixed heritage - white and Asian</i> | 1 (1%) |
| <i>Black or black British - other ...</i> | 2 (1%) | <i>Mixed heritage - other</i> | 1 (1%) |
| <i>Asian or Asian British - Indian</i> | 2 (1%) | <i>Chinese</i> | 0 (0%) |
| <i>Asian or Asian British - Pakistani</i> | 8 (4%) | <i>Other ethnic group</i> | 2 (1%) |

Q1.10 Do you consider yourself to be Gypsy/Romany/Traveller?
 Yes 10 (6%)
 No 167 (94%)

Q1.11 What is your religion?

| | | | |
|-------------------------------------|----------|---------------------|----------|
| <i>None</i> | 66 (36%) | <i>Hindu</i> | 0 (0%) |
| <i>Church of England</i> | 35 (19%) | <i>Jewish</i> | 0 (0%) |
| <i>Catholic</i> | 31 (17%) | <i>Muslim</i> | 30 (17%) |
| <i>Protestant</i> | 7 (4%) | <i>Sikh</i> | 1 (1%) |
| <i>Other Christian denomination</i> | 7 (4%) | <i>Other</i> | 4 (2%) |
| <i>Buddhist</i> | 0 (0%) | | |

Q1.12 How would you describe your sexual orientation?

| | |
|------------------------------------|-----------|
| <i>Heterosexual/straight</i> | 173 (97%) |
| <i>Homosexual/gay</i> | 2 (1%) |
| <i>Bisexual</i> | 3 (2%) |
| <i>Other</i> | 0 (0%) |

Q1.13 Do you consider yourself to have a disability?
 Yes 16 (9%)
 No 168 (91%)

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> |
| 82 (45%) | 39 (21%) | 52 (28%) | 11 (6%) |

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

| | | |
|----------|---------------|--------------------|
| <i>1</i> | <i>2 to 5</i> | <i>More than 5</i> |
| 14 (8%) | 152 (84%) | 15 (8%) |

| | | |
|--------------|--|-----------|
| Q1.16 | Do you have any children under the age of 18? | |
| | Yes | 34 (19%) |
| | No | 149 (81%) |

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? | 8 (4%) | 60 (34%) | 29 (16%) | 46 (26%) | 21 (12%) | 12 (7%) | 2 (1%) |
| | Your personal safety during the journey? | 22 (13%) | 84 (49%) | 35 (20%) | 15 (9%) | 7 (4%) | 7 (4%) | 1 (1%) |
| | The comfort of the van? | 2 (1%) | 16 (9%) | 14 (8%) | 55 (31%) | 84 (48%) | 4 (2%) | 1 (1%) |
| | The attention paid to your health needs? | 6 (3%) | 59 (33%) | 48 (27%) | 20 (11%) | 19 (11%) | 15 (8%) | 10 (6%) |
| | The frequency of toilet breaks? | 3 (2%) | 22 (12%) | 26 (15%) | 31 (18%) | 71 (40%) | 9 (5%) | 15 (8%) |

| | | | | | | |
|-------------|---|-------------------------|-------------------------------|--------------------------------|--------------------------|-----------------------|
| 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> |
| | | 26 (14%) | 70 (38%) | 59 (32%) | 19 (10%) | 8 (4%) |

| | | | | | | | |
|-------------|---|------------------|-------------|----------------|--------------|-------------------|-----------------------|
| 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> |
| | | 26 (14%) | 94 (52%) | 42 (23%) | 12 (7%) | 2 (1%) | 6 (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? | 147 (81%) | 31 (17%) | 4 (2%) |
| | Before you arrived here did you receive any written information about what would happen to you? | 29 (16%) | 142 (78%) | 10 (6%) |
| | When you first arrived here did your property arrive at the same time as you? | 164 (92%) | 12 (7%) | 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.) | | |
| | <i>Didn't ask about any of these.....</i> | 27 (16%) | <i>Money worries.....</i> 27 (16%) |
| | <i>Loss of property.....</i> | 30 (17%) | <i>Feeling depressed or suicidal..</i> 78 (45%) |
| | <i>Housing problems.....</i> | 42 (24%) | <i>Health problems.....</i> 96 (55%) |
| | <i>Contacting employers</i> | 17 (10%) | <i>Needing protection from other prisoners</i> 40 (23%) |

| | | | |
|---|----------|------------------------------|----------|
| Contacting family..... | 97 (56%) | Accessing phone numbers..... | 69 (40%) |
| Ensuring dependants were being looked after | 20 (11%) | Other..... | 5 (3%) |

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 | 62 (39%) | Money worries..... | 35 (22%) |
| Loss of property..... | 29 (18%) | Feeling depressed or suicidal.. | 30 (19%) |
| Housing problems..... | 17 (11%) | Health problems..... | 20 (13%) |
| Contacting employers | 7 (4%) | Needing protection from other prisoners | 16 (10%) |
| Contacting family..... | 33 (21%) | Accessing phone numbers..... | 35 (22%) |
| Ensuring dependants were looked after | 7 (4%) | Other..... | 5 (3%) |

Q3.3 Please answer the following questions about reception:

| | Yes | No | Don't remember |
|---|-----------|----------|----------------|
| Were you seen by a member of health services? | 160 (87%) | 11 (6%) | 12 (7%) |
| When you were searched, was this carried out in a respectful way? | 117 (65%) | 57 (31%) | 7 (4%) |

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

| Very well | Well | Neither | Badly | Very badly | Don't remember |
|-----------|----------|----------|----------|------------|----------------|
| 17 (9%) | 88 (48%) | 41 (23%) | 20 (11%) | 14 (8%) | 2 (1%) |

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

| | |
|---|-----------|
| Information about what was going to happen to you | 101 (57%) |
| Information about what support was available for people feeling depressed or suicidal | 94 (53%) |
| Information about how to make routine requests | 90 (51%) |
| Information about your entitlement to visits..... | 105 (59%) |
| Information about health services | 118 (66%) |
| Information about the chaplaincy | 113 (63%) |
| Not offered anything | 29 (16%) |

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

| | |
|--|-----------|
| A smokers/non-smokers pack..... | 168 (92%) |
| The opportunity to have a shower..... | 44 (24%) |
| The opportunity to make a free telephone call..... | 130 (71%) |
| Something to eat..... | 120 (66%) |
| Did not receive anything | 3 (2%) |

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

| | |
|------------------------------------|-----------|
| Chaplain or religious leader | 110 (63%) |
| Someone from health services | 141 (80%) |
| A Listener/Samaritans..... | 36 (20%) |

| | | |
|--------------|---|-----------|
| | Did not meet any of these people | 14 (8%) |
| Q3.8 | Did you have access to the prison shop/canteen within the first 24 hours of your arrival at this prison? | |
| | Yes | 23 (13%) |
| | No..... | 156 (87%) |
| Q3.9 | Did you feel safe on your first night here? | |
| | Yes | 146 (80%) |
| | No..... | 27 (15%) |
| | Don't remember..... | 10 (5%) |
| Q3.10 | How soon after your arrival did you go on an induction course? | |
| | Have not been on an induction course | 14 (8%) |
| | Within the first week | 101 (55%) |
| | More than a week | 56 (31%) |
| | Don't remember..... | 11 (6%) |
| Q3.11 | Did the induction course cover everything you needed to know about the prison? | |
| | Have not been on an induction course | 14 (8%) |
| | Yes | 111 (63%) |
| | No..... | 37 (21%) |
| | Don't remember..... | 13 (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> |
| | | N/A | | | | |
| | Communicate with your solicitor or legal representative? | 17 (9%) | 62 (35%) | 37 (21%) | 37 (21%) | 18 (10%) |
| | Attend legal visits? | 20 (11%) | 71 (41%) | 43 (25%) | 9 (5%) | 9 (5%) |
| | Obtain bail information? | 6 (4%) | 18 (11%) | 44 (26%) | 18 (11%) | 12 (7%) |
| | | | | | | 70 (42%) |
| Q4.2 | Have staff here ever opened letters from your solicitor or your legal representative when you were not with them? | | | | | |
| | Not had any letters | | | | | 27 (15%) |
| | Yes | | | | | 84 (48%) |
| | No..... | | | | | 64 (37%) |
| 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? | 92 (52%) | 82 (46%) | 2 (1%) | 2 (1%) | |

| | | | | |
|--|--------------|-------------|-------------|------------|
| Are you normally able to have a shower every day? | 109 (61%) | 69 (39%) | 0 (0%) | 0 (0%) |
| Do you normally receive clean sheets every week? | 129 (73%) | 32 (18%) | 4 (2%) | 11 (6%) |
| Do you normally get cell cleaning materials every week? | 88 (50%) | 83 (47%) | 3 (2%) | 2 (1%) |
| Is your cell call bell normally answered within five minutes? | 78 (45%) | 62 (35%) | 33 (19%) | 2 (1%) |
| Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 103 (59%) | 70 (40%) | 2 (1%) | 0 (0%) |
| Can you normally get your stored property, if you need to? | 86 (49%) | 54 (31%) | 31 (18%) | 5 (3%) |

Q4.4 What is the food like here?

| | | | | |
|------------------|-------------|----------------|------------|-----------------|
| <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very bad</i> |
| 3 (2%) | 43 (24%) | 45 (25%) | 45 (25%) | 45 (25%) |

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

| | |
|---|----------|
| <i>Have not bought anything yet</i> | 0 (0%) |
| Yes | 80 (45%) |
| No..... | 99 (55%) |

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

| | | | | | | |
|----------------------|------------------|-------------|----------------|------------------|-----------------------|-------------------|
| | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> | <i>Don't know</i> |
| A complaint form? | 100 (56%) | 65 (37%) | 6 (3%) | 4 (2%) | 0 (0%) | 2 (1%) |
| An application form? | 100 (58%) | 64 (37%) | 8 (5%) | 0 (0%) | 0 (0%) | 0 (0%) |

Q4.7 Have you made an application?

| | |
|-----------|-----------|
| Yes | 163 (92%) |
| No..... | 14 (8%) |

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? | 14 (8%) | 94 (54%) | 67 (38%) |
| Do you feel <i>applications</i> are dealt with promptly (within seven days)? | 14 (8%) | 67 (38%) | 94 (54%) |

Q4.9 Have you made a complaint?

| | |
|-----------|-----------|
| Yes | 109 (61%) |
| No..... | 71 (39%) |

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? | 71 (40%) | 36 (20%) | 71 (40%) |
| Do you feel <i>complaints</i> are dealt with promptly (within seven days)? | 71 (40%) | 40 (22%) | 68 (38%) |
| Were you given information about how to make an appeal? | 51 (30%) | 55 (32%) | 65 (38%) |

Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?

| | |
|-----------------------------------|----------|
| <i>Not made a complaint</i> | 71 (39%) |
| Yes | 37 (20%) |
| No | 73 (40%) |

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> | Very easy | Easy | Neither | Difficult | Very difficult |
|--------------------------------|-----------|----------|----------|-----------|----------------|
| 37 (21%) | 12 (7%) | 37 (21%) | 49 (28%) | 24 (14%) | 16 (9%) |

Q4.13 What level of the IEP scheme are you on now?

| | |
|--|----------|
| <i>Don't know what the IEP scheme is</i> | 5 (3%) |
| <i>Enhanced</i> | 97 (54%) |
| <i>Standard</i> | 77 (43%) |
| <i>Basic</i> | 2 (1%) |
| <i>Don't know</i> | 0 (0%) |

Q4.14 Do you feel you have been treated fairly in your experience of the IEP scheme?

| | |
|--|----------|
| <i>Don't know what the IEP scheme is</i> | 5 (3%) |
| Yes | 95 (54%) |
| No | 69 (39%) |
| <i>Don't know</i> | 7 (4%) |

Q4.15 Do the different levels of the IEP scheme encourage you to change your behaviour?

| | |
|--|-----------|
| <i>Don't know what the IEP scheme is</i> | 5 (3%) |
| Yes | 112 (63%) |
| No | 53 (30%) |
| <i>Don't know</i> | 7 (4%) |

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)? | 20 (11%) | 159 (89%) |
| In the last six months have you spent a night in the segregation/care and separation unit? | 33 (18%) | 146 (82%) |

| | | | | |
|--------------|--|--------------|-------------|-----------------------|
| Q4.17 | Please answer the following questions about your religious beliefs: | Yes | No | <i>Don't know/N/A</i> |
| | Do you feel your religious beliefs are respected? | 94 (52%) | 25 (14%) | 61 (34%) |
| | Are you able to speak to a religious leader of your faith in private if you want to? | 112 (63%) | 8 (5%) | 57 (32%) |

| | | | | |
|--------------|--|-----------|----------|-------------------|
| Q4.18 | Can you speak to a Listener at any time if you want to? | Yes | No | <i>Don't know</i> |
| | | 102 (57%) | 20 (11%) | 58 (32%) |

| | | | |
|--------------|--|-----------|----------|
| 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? | 134 (76%) | 43 (24%) |
| | Do most staff treat you with respect? | 120 (67%) | 58 (33%) |

Section 5: Safety

| | |
|-------------|--|
| Q5.1 | Have you ever felt unsafe in this prison? |
| | Yes 65 (36%) |
| | No 116 (64%) |

| | |
|-------------|---|
| Q5.2 | Do you feel unsafe in this prison at the moment? |
| | Yes 32 (18%) |
| | No 148 (82%) |

| | |
|-------------|---|
| Q5.3 | In which areas of this prison do you/have you ever felt unsafe? (Please tick all that apply to you.) |
| | <i>Never felt unsafe</i> 116 (66%) |
| | <i>At meal times</i> 9 (5%) |
| | <i>Everywhere</i> 9 (5%) |
| | <i>At health services</i> 11 (6%) |
| | <i>Segregation unit</i> 8 (5%) |
| | <i>Visits area</i> 13 (7%) |
| | <i>Association areas</i> 23 (13%) |
| | <i>In wing showers</i> 24 (14%) |
| | <i>Reception area</i> 5 (3%) |
| | <i>In gym showers</i> 21 (12%) |
| | <i>At the gym</i> 26 (15%) |
| | <i>In corridors/stairwells</i> 13 (7%) |
| | <i>In an exercise yard</i> 24 (14%) |
| | <i>On your landing/wing</i> 21 (12%) |
| | <i>At work</i> 20 (11%) |
| | <i>In your cell</i> 10 (6%) |
| | <i>During movement</i> 32 (18%) |
| | <i>At religious services</i> 4 (2%) |
| | <i>At education</i> 27 (15%) |

| | |
|-------------|---|
| Q5.4 | Have you been victimised by another prisoner or group of prisoners here? |
| | Yes 49 (28%) |
| | No 128 (72%) 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> | 30 (17%) | <i>Because of your sexuality.....</i> | 4 (2%) |
| <i>Physical abuse (being hit, kicked or assaulted).....</i> | 24 (14%) | <i>Because you have a disability.</i> | 3 (2%) |
| <i>Sexual abuse.....</i> | 4 (2%) | <i>Because of your religion/religious beliefs.....</i> | 6 (3%) |
| <i>Because of your race or ethnic origin.....</i> | 8 (5%) | <i>Because of your age.....</i> | 4 (2%) |
| <i>Because of drugs.....</i> | 2 (1%) | <i>Being from a different part of the country than others.....</i> | 15 (8%) |
| <i>Having your canteen/property taken.....</i> | 16 (9%) | <i>Because of your offence/crime</i> | 19 (11%) |
| <i>Because you were new here...</i> | 8 (5%) | <i>Because of gang related issues.....</i> | 7 (4%) |

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

| | | |
|----------|-----------|----------------------------------|
| Yes..... | 48 (27%) | |
| No..... | 128 (73%) | 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> | 28 (16%) | <i>Because you have a disability.</i> | 3 (2%) |
| <i>Physical abuse (being hit, kicked or assaulted).....</i> | 13 (7%) | <i>Because of your religion/religious beliefs.....</i> | 7 (4%) |
| <i>Sexual abuse.....</i> | 4 (2%) | <i>Because of your age.....</i> | 4 (2%) |
| <i>Because of your race or ethnic origin.....</i> | 12 (7%) | <i>Being from a different part of the country than others.....</i> | 13 (7%) |
| <i>Because of drugs.....</i> | 8 (5%) | <i>Because of your offence/crime</i> | 8 (5%) |
| <i>Because you were new here...</i> | 12 (7%) | <i>Because of gang related issues.....</i> | 7 (4%) |
| <i>Because of your sexuality.....</i> | 2 (1%) | | |

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

| | |
|----------------------------------|-----------|
| Not been victimised | 101 (59%) |
| Yes..... | 31 (18%) |
| No..... | 38 (22%) |

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

| | |
|----------|-----------|
| Yes..... | 53 (30%) |
| No..... | 122 (70%) |

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

| | |
|----------|-----------|
| Yes..... | 41 (23%) |
| No..... | 134 (77%) |

| | | | | | | |
|--------------|---|-------------|----------------|------------------|-----------------------|-------------------|
| 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> |
| | 21 (12%) | 19 (11%) | 13 (7%) | 9 (5%) | 22 (13%) | 92 (52%) |

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 | 13 (7%) | 15 (8%) | 81 (46%) | 21 (12%) | 32 (18%) | 15 (8%) |
| The nurse | 12 (7%) | 40 (23%) | 94 (53%) | 12 (7%) | 12 (7%) | 6 (3%) |
| The dentist | 16 (9%) | 7 (4%) | 26 (15%) | 20 (11%) | 57 (33%) | 49 (28%) |
| The optician | 41 (24%) | 6 (3%) | 31 (18%) | 24 (14%) | 38 (22%) | 34 (20%) |

| | | |
|-------------|--|----------|
| Q6.2 | Are you able to see a pharmacist? | |
| | Yes | 79 (49%) |
| | No | 81 (51%) |

| | | | | | | |
|--------------|--|------------------|-------------|----------------|------------|-----------------|
| 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 | 23 (13%) | 26 (15%) | 66 (37%) | 30 (17%) | 20 (11%) | 12 (7%) |
| The nurse | 18 (10%) | 40 (23%) | 74 (42%) | 23 (13%) | 12 (7%) | 9 (5%) |
| The dentist | 39 (23%) | 20 (12%) | 54 (31%) | 29 (17%) | 19 (11%) | 12 (7%) |
| The optician | 72 (42%) | 13 (8%) | 40 (23%) | 29 (17%) | 11 (6%) | 7 (4%) |

| | | | | | | |
|-------------|--|------------------|-------------|----------------|------------|-----------------|
| Q6.4 | What do you think of the overall quality of the health services here? | | | | | |
| | <i>Not been</i> | <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very bad</i> |
| | 15 (9%) | 29 (17%) | 70 (40%) | 24 (14%) | 26 (15%) | 9 (5%) |

| | | |
|-------------|---|-----------|
| Q6.5 | Are you currently taking medication? | |
| | Yes | 48 (27%) |
| | No | 129 (73%) |

| | | |
|-------------|--|-----------|
| 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> | 129 (73%) |
| | Yes | 37 (21%) |
| | No | 10 (6%) |

| | | |
|-------------|--|-----------|
| Q6.7 | Do you feel you have any emotional well-being/mental health issues? | |
| | Yes | 43 (24%) |
| | No | 133 (76%) |

| | | |
|-------------|---|-----------|
| 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> | 148 (88%) |
| | <i>Doctor</i> | 10 (6%) |
| | <i>Nurse</i> | 10 (6%) |
| | <i>Psychiatrist</i> | 9 (5%) |

| | |
|--|--------|
| <i>Mental health in-reach team</i> | 8 (5%) |
| <i>Counsellor</i> | 4 (2%) |
| <i>Other</i> | 8 (5%) |

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

| | Yes | No |
|---------|----------|-----------|
| Drugs | 58 (34%) | 114 (66%) |
| Alcohol | 55 (33%) | 111 (67%) |

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

| | |
|-----------|-----------|
| Yes | 6 (3%) |
| No..... | 168 (97%) |

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

| | |
|---|-----------|
| Yes | 63 (36%) |
| No..... | 6 (3%) |
| <i>Did not/do not have a drug or alcohol problem</i> | 105 (60%) |

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

| | |
|---|-----------|
| Yes | 63 (36%) |
| No..... | 9 (5%) |
| <i>Did not/do not have a drug or alcohol problem</i> | 105 (59%) |

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

| | |
|---|-----------|
| Yes | 54 (31%) |
| No..... | 8 (5%) |
| <i>Did not have a problem/have not received help</i> | 114 (65%) |

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 | 13 (8%) | 134 (79%) | 22 (13%) |
| Alcohol | 12 (7%) | 130 (79%) | 22 (13%) |

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

| | |
|-----------|-----------|
| Yes | 27 (16%) |
| No..... | 15 (9%) |
| N/A..... | 129 (75%) |

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 | 81 (47%) |
| Vocational or skills training | 48 (28%) |
| Education (including basic skills)..... | 78 (45%) |
| Offending behaviour programmes..... | 32 (19%) |
| Not involved in any of these | 16 (9%) |
- 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 | Don't know |
|------------------------------------|--------------------------|-----------|----------|------------|
| Prison job | 20 (14%) | 73 (51%) | 32 (22%) | 18 (13%) |
| Vocational or skills training | 21 (15%) | 98 (72%) | 13 (10%) | 4 (3%) |
| Education (including basic skills) | 6 (4%) | 110 (76%) | 18 (13%) | 10 (7%) |
| Offending behaviour programmes | 23 (18%) | 80 (62%) | 20 (15%) | 7 (5%) |
- Q7.3 How often do you go to the library?**
- | | |
|------------------------------------|----------|
| <i>Don't want to go</i> | 33 (20%) |
| <i>Never</i> | 33 (20%) |
| <i>Less than once a week</i> | 38 (22%) |
| <i>About once a week</i> | 47 (28%) |
| <i>More than once a week</i> | 8 (5%) |
| <i>Don't know</i> | 10 (6%) |
- 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 |
|-------------------------|----------|----------|----------|----------|-------------|------------|
| 40 (24%) | 16 (10%) | 30 (18%) | 48 (29%) | 25 (15%) | 2 (1%) | 7 (4%) |
- 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 |
|-------------------------|--------|----------|----------|-------------|------------|
| 18 (11%) | 8 (5%) | 32 (19%) | 29 (17%) | 82 (48%) | 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.)**
- | | |
|------------------------------------|----------|
| Less than two hours | 16 (9%) |
| Two to less than four hours..... | 28 (16%) |
| Four to less than six hours | 55 (32%) |
| Six to less than eight hours | 42 (25%) |
| Eight to less than 10 hours..... | 11 (6%) |
| Ten hours or more | 8 (5%) |
| <i>Don't know</i> | 10 (6%) |
- 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 |
|-------------------------|--------|--------|----------|-------------|------------|
| 3 (2%) | 0 (0%) | 6 (4%) | 68 (40%) | 91 (53%) | 3 (2%) |

| | | |
|-------------|--|----------|
| Q7.8 | How often do staff normally speak to you during association time? | |
| | <i>Do not go on association</i> | 2 (1%) |
| | <i>Never</i> | 22 (13%) |
| | <i>Rarely</i> | 40 (24%) |
| | <i>Some of the time</i> | 63 (37%) |
| | <i>Most of the time</i> | 22 (13%) |
| | <i>All of the time</i> | 21 (12%) |

Section 8: Resettlement

| | | |
|-------------|---|-----------|
| Q8.1 | When did you first meet your personal officer? | |
| | <i>Still have not met him/her</i> | 7 (4%) |
| | <i>In the first week</i> | 104 (60%) |
| | <i>More than a week</i> | 37 (21%) |
| | <i>Don't remember</i> | 26 (15%) |

| | | | | | |
|-------------|--|---------------------|----------------|----------------|-------------------------|
| 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> |
| | 7 (4%) | 39 (23%) | 61 (35%) | 27 (16%) | 20 (12%) |
| | | | | | 19 (11%) |

| | | |
|-------------|---|-----------|
| Q8.3 | Do you have a sentence plan/OASys? | |
| | <i>Not sentenced</i> | 0 (0%) |
| | <i>Yes</i> | 153 (89%) |
| | <i>No</i> | 19 (11%) |

| | | |
|-------------|--|----------|
| Q8.4 | How involved were you in the development of your sentence plan? | |
| | <i>Do not have a sentence plan/OASys</i> | 19 (11%) |
| | <i>Very involved</i> | 37 (22%) |
| | <i>Involved</i> | 51 (30%) |
| | <i>Neither</i> | 15 (9%) |
| | <i>Not very involved</i> | 22 (13%) |
| | <i>Not at all involved</i> | 26 (15%) |

| | | |
|-------------|--|-----------|
| 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> | 19 (11%) |
| | <i>Yes</i> | 120 (71%) |
| | <i>No</i> | 29 (17%) |

| | | |
|-------------|---|----------|
| 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> | 19 (11%) |
| | <i>Yes</i> | 64 (38%) |
| | <i>No</i> | 85 (51%) |

| | | |
|-------------|--|--------|
| 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%) |

Yes 86 (51%)
 No 81 (49%)

Q8.8 Do you feel that any member of staff has helped you to prepare for your release?
 Yes 40 (24%)
 No 129 (76%)

Q8.9 Have you had any problems with sending or receiving mail?
 Yes 77 (46%)
 No 77 (46%)
 Don't know 15 (9%)

Q8.10 Have you had any problems getting access to the telephones?
 Yes 43 (25%)
 No 122 (72%)
 Don't know 5 (3%)

Q8.11 Did you have a visit in the first week that you were here?
Not been here a week yet 4 (2%)
 Yes 50 (29%)
 No 108 (63%)
 Don't remember 9 (5%)

Q8.12 How many visits did you receive in the last week?

| Not been in a week | 0 | 1 to 2 | 3 to 4 | 5 or more |
|---------------------------|----------|---------------|---------------|------------------|
| 4 (3%) | 94 (61%) | 52 (34%) | 4 (3%) | 0 (0%) |

Q8.13 How are you and your family/friends usually treated by visits staff?
Not had any visits 32 (19%)
 Very well 29 (17%)
 Well 50 (29%)
 Neither 31 (18%)
 Badly 7 (4%)
 Very badly 6 (4%)
 Don't know 15 (9%)

Q8.14 Have you been helped to maintain contact with your family/friends while in this prison?
 Yes 83 (50%)
 No 84 (50%)

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 .. 75 (49%) | Help with your finances in preparation for release 39 (25%) |
| Maintaining good relationships 34 (22%) | Claiming benefits on release ... 39 (25%) |
| Avoiding bad relationships 32 (21%) | Arranging a place at college/continuing education on release 45 (29%) |

| | | | |
|--|----------|--|----------|
| <i>Finding a job on release</i> | 57 (37%) | <i>Continuity of health services on release.....</i> | 28 (18%) |
| <i>Finding accommodation on release.....</i> | 51 (33%) | <i>Opening a bank account.....</i> | 35 (23%) |

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..... | 63 (38%) | <i>Help with your finances in preparation for release</i> | 48 (29%) |
| <i>Maintaining good relationships</i> | 29 (17%) | <i>Claiming benefits on release...</i> | 38 (23%) |
| <i>Avoiding bad relationships</i> | 29 (17%) | <i>Arranging a place at college/continuing education on release.....</i> | 57 (34%) |
| <i>Finding a job on release</i> | 87 (52%) | <i>Continuity of health services on release.....</i> | 23 (14%) |
| <i>Finding accommodation on release.....</i> | 51 (31%) | <i>Opening a bank account.....</i> | 34 (20%) |

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..... | 0 (0%) |
| Yes | 108 (62%) |
| No..... | 65 (38%) |



Prisoner survey responses HMP/YOI Swinfen Hall 2010

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

Key to tables

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| Number of completed questionnaires returned | | 187 | 1,858 | 187 | 118 |
| SECTION 1: General information | | | | | |
| 2 | Are you under 21 years of age? | 51% | 92% | 51% | 51% |
| 3a | Are you sentenced? | 100% | 82% | 100% | 100% |
| 3b | Are you on recall? | 3% | 5% | 3% | 0% |
| 4a | Is your sentence less than 12 months? | 1% | 18% | 1% | 1% |
| 4b | Are you here under an indeterminate sentence for public protection (IPP)? | 36% | 4% | 36% | 0% |
| 5 | Do you have six months or less to serve? | 23% | 39% | 23% | 15% |
| 6 | Have you been in this prison less than a month? | 2% | 17% | 2% | |
| 7 | Are you a foreign national? | 14% | 11% | 14% | 10% |
| 8 | Is English your first language? | 91% | 92% | 91% | 95% |
| 9 | Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)? | 35% | 30% | 35% | 31% |
| 10 | Do you consider yourself to be Gypsy/Romany/Traveller? | 6% | 4% | 6% | |
| 11 | Are you Muslim? | 17% | 15% | 17% | |
| 12 | Are you homosexual/gay or bisexual? | 3% | 2% | 3% | |
| 13 | Do you consider yourself to have a disability? | 9% | 11% | 9% | |
| 14 | Is this your first time in prison? | 45% | 43% | 45% | 43% |
| 15 | Have you been in more than five prisons this time? | 8% | 3% | 8% | |
| 16 | Do you have any children under the age of 18? | 19% | 23% | 19% | 31% |
| 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? | 38% | 40% | 38% | 28% |
| 1b | Was your personal safety during the journey good/very good? | 62% | 61% | 62% | 54% |
| 1c | Was the comfort of the van good/very good? | 10% | 12% | 10% | 8% |
| 1d | Was the attention paid to your health needs good/very good? | 37% | 35% | 37% | 25% |
| 1e | Was the frequency of toilet breaks good/very good? | 14% | 14% | 14% | 7% |
| 2 | Did you spend more than four hours in the van? | 11% | 6% | 11% | 11% |
| 3 | Were you treated well/very well by the escort staff? | 66% | 65% | 66% | 68% |
| 4a | Did you know where you were going when you left court or when transferred from another prison? | 81% | 81% | 81% | 86% |
| 4b | Before you arrived here did you receive any written information about what would happen to you? | 16% | 24% | 16% | 14% |
| 4c | When you first arrived here did your property arrive at the same time as you? | 92% | 84% | 92% | 91% |

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| 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% | |
| 1c | Housing problems? | 24% | 30% | 24% | |
| 1d | Problems contacting employers? | 10% | 12% | 10% | |
| 1e | Problems contacting family? | 56% | 60% | 56% | |
| 1f | Problems ensuring dependants were looked after? | 12% | 12% | 12% | |
| 1g | Money problems? | 16% | 15% | 16% | |
| 1h | Problems of feeling depressed/suicidal? | 45% | 49% | 45% | |
| 1i | Health problems? | 55% | 61% | 55% | |
| 1j | Problems in needing protection from other prisoners? | 23% | 18% | 23% | |
| 1k | Problems accessing phone numbers? | 40% | 44% | 40% | |
| 2 | When you first arrived: | | | | |
| 2a | Did you have any problems? | 61% | 57% | 61% | 48% |
| 2b | Did you have any problems with loss of property? | 18% | 12% | 18% | 7% |
| 2c | Did you have any housing problems? | 11% | 18% | 11% | 5% |
| 2d | Did you have any problems contacting employers? | 4% | 5% | 4% | 0% |
| 2e | Did you have any problems contacting family? | 21% | 21% | 21% | 21% |
| 2f | Did you have any problems ensuring dependants were being looked after? | 4% | 3% | 4% | 3% |
| 2g | Did you have any money worries? | 22% | 21% | 22% | 13% |
| 2h | Did you have any problems with feeling depressed or suicidal? | 19% | 13% | 19% | 7% |
| 2i | Did you have any health problems? | 13% | 10% | 13% | 9% |
| 2j | Did you have any problems with needing protection from other prisoners? | 10% | 7% | 10% | 2% |
| 2k | Did you have problems accessing phone numbers? | 22% | 17% | 22% | |
| 3a | Were you seen by a member of health services in reception? | 87% | 93% | 87% | 85% |
| 3b | When you were searched in reception, was this carried out in a respectful way? | 65% | 79% | 65% | 58% |
| 4 | Were you treated well/very well in reception? | 58% | 62% | 58% | 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? | 57% | 56% | 57% | 53% |
| 5b | Information about what support was available for people feeling depressed or suicidal? | 53% | 56% | 53% | 45% |
| 5c | Information about how to make routine requests? | 51% | 47% | 51% | 41% |
| 5d | Information about your entitlement to visits? | 59% | 59% | 59% | 49% |
| 5e | Information about health services? | 66% | 62% | 66% | |
| 5f | Information about the chaplaincy? | 63% | 56% | 63% | |
| 6 | On your day of arrival, were you offered any of the following: | | | | |
| 6a | A smokers/non-smokers pack? | 92% | 91% | 92% | 75% |
| 6b | The opportunity to have a shower? | 24% | 44% | 24% | 34% |
| 6c | The opportunity to make a free telephone call? | 71% | 72% | 71% | 89% |
| 6d | Something to eat? | 66% | 82% | 66% | 75% |
| 7 | Within the first 24 hours did you meet any of the following people: | | | | |
| 7a | The chaplain or a religious leader? | 63% | 45% | 63% | 60% |
| 7b | Someone from health services? | 80% | 75% | 80% | 74% |

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| 7c | A Listener/Samaritans? | 20% | 18% | 20% | 26% |
| 8 | Did you have access to the prison shop/canteen within the first 24 hours? | 13% | 15% | 13% | 8% |
| 9 | Did you feel safe on your first night here? | 80% | 79% | 80% | 81% |
| 10 | Have you been on an induction course? | 92% | 88% | 92% | 97% |
| For those who have been on an induction course: | | | | | |
| 11 | Did the course cover everything you needed to know about the prison? | 69% | 61% | 69% | 76% |
| 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? | 44% | 47% | 44% | 81% |
| 1b | Attend legal visits? | 52% | 58% | 52% | 77% |
| 1c | Obtain bail information? | 14% | 30% | 14% | 60% |
| 2 | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 48% | 37% | 48% | 41% |
| 3 | For the wing/unit you are currently on: | | | | |
| 3a | Are you normally offered enough clean, suitable clothes for the week? | 52% | 52% | 52% | 65% |
| 3b | Are you normally able to have a shower every day? | 61% | 69% | 61% | 65% |
| 3c | Do you normally receive clean sheets every week? | 73% | 82% | 73% | 83% |
| 3d | Do you normally get cell cleaning materials every week? | 50% | 57% | 50% | 45% |
| 3e | Is your cell call bell normally answered within five minutes? | 45% | 42% | 45% | 48% |
| 3f | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 59% | 56% | 59% | 64% |
| 3g | Can you normally get your stored property, if you need to? | 49% | 34% | 49% | 33% |
| 4 | Is the food in this prison good/very good? | 25% | 26% | 25% | 25% |
| 5 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 45% | 46% | 45% | 35% |
| 6a | Is it easy/very easy to get a complaints form? | 93% | 80% | 93% | 84% |
| 6b | Is it easy/very easy to get an application form? | 95% | 84% | 95% | 89% |
| 7 | Have you made an application? | 92% | 80% | 92% | 95% |
| For those who have made an application: | | | | | |
| 8a | Do you feel applications are dealt with fairly? | 58% | 63% | 58% | 63% |
| 8b | Do you feel applications are dealt with promptly (within seven days)? | 42% | 50% | 42% | 50% |
| 9 | Have you made a complaint? | 61% | 40% | 61% | 58% |
| For those who have made a complaint: | | | | | |
| 10a | Do you feel complaints are dealt with fairly? | 34% | 37% | 34% | 44% |
| 10b | Do you feel complaints are dealt with promptly (within seven days)? | 37% | 44% | 37% | 30% |
| 11 | Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison? | 34% | 21% | 34% | 35% |
| 10c | Were you given information about how to make an appeal? | 32% | 28% | 32% | 33% |
| 12 | Is it easy/very easy to see the Independent Monitoring Board? | 28% | 22% | 28% | 42% |
| 13 | Are you on the enhanced (top) level of the IEP scheme? | 54% | 30% | 54% | |
| 14 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 54% | 47% | 54% | |
| 15 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 63% | 56% | 63% | |
| 16a | In the last six months, have any members of staff physically restrained you (C & R)? | 11% | 16% | 11% | |
| 16b | In the last six months, have you spent a night in the segregation/care and separation unit? | 19% | 13% | 19% | |
| 13a | Do you feel your religious beliefs are respected? | 52% | 50% | 52% | 45% |
| 13b | Are you able to speak to a religious leader of your faith in private if you want to? | 63% | 55% | 63% | 54% |

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| 14 | Are you able to speak to a Listener at any time if you want to? | 57% | 42% | 57% | 61% |
| 15a | Is there a member of staff, in this prison, that you can turn to for help if you have a problem? | 76% | 73% | 76% | 77% |
| 15b | Do most staff, in this prison, treat you with respect? | 67% | 67% | 67% | 72% |
| SECTION 5: Safety | | | | | |
| 1 | Have you ever felt unsafe in this prison? | 36% | 34% | 36% | 35% |
| 2 | Do you feel unsafe in this prison at the moment? | 18% | 14% | 18% | |
| 4 | Have you been victimised by another prisoner? | 28% | 21% | 28% | 26% |
| 5 | Since you have been here, has another prisoner: | | | | |
| 5a | Made insulting remarks about you, your family or friends? | 17% | 11% | 17% | 16% |
| 5b | Hit, kicked or assaulted you? | 13% | 9% | 13% | 15% |
| 5c | Sexually abused you? | 2% | 1% | 2% | 3% |
| 5d | Victimised you because of your race or ethnic origin? | 5% | 4% | 5% | 4% |
| 5e | Victimised you because of drugs? | 1% | 2% | 1% | 3% |
| 5f | Taken your canteen/property? | 9% | 5% | 9% | 5% |
| 5g | Victimised you because you were new here? | 4% | 7% | 4% | 6% |
| 5h | Victimised you because of your sexuality? | 2% | 1% | 2% | |
| 5i | Victimised you because you have a disability? | 2% | 1% | 2% | |
| 5j | Victimised you because of your religion/religious beliefs? | 3% | 2% | 3% | |
| 5k | Victimised you because of your age? | 2% | 2% | 2% | |
| 5l | Victimised you because you were from a different part of the country? | 9% | 6% | 9% | 6% |
| 5m | Victimised you because of your offence/crime? | 11% | 4% | 11% | |
| 5n | Victimised you because of gang related issues? | 4% | 7% | 4% | |
| 6 | Have you been victimised by a member of staff? | 28% | 23% | 28% | 22% |
| 7 | Since you have been here, has a member of staff: | | | | |
| 7a | Made insulting remarks about you, your family or friends? | 16% | 12% | 16% | 16% |
| 7b | Hit, kicked or assaulted you? | 7% | 4% | 7% | 3% |
| 7c | Sexually abused you? | 2% | 1% | 2% | 0% |
| 7d | Victimised you because of your race or ethnic origin? | 7% | 4% | 7% | 4% |
| 7e | Victimised you because of drugs? | 5% | 1% | 5% | 0% |
| 7f | Victimised you because you were new here? | 7% | 7% | 7% | 4% |
| 7g | Victimised you because of your sexuality? | 1% | 1% | 1% | |
| 7h | Victimised you because you have a disability? | 2% | 2% | 2% | |
| 7i | Victimised you because of your religion/religious beliefs? | 4% | 3% | 4% | |
| 7j | Victimised you because of your age? | 2% | 2% | 2% | |
| 7k | Victimised you because you were from a different part of the country? | 7% | 5% | 7% | 7% |
| 7l | Victimised you because of your offence/crime? | 5% | 4% | 5% | |
| 7m | Victimised you because of gang related issues? | 4% | 4% | 4% | |
| For those who have been victimised by staff or other prisoners: | | | | | |
| 8 | Did you report any victimisation that you have experienced? | 45% | 30% | 45% | 32% |
| 9 | Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here? | 30% | 27% | 30% | |
| 10 | Have you ever felt threatened or intimidated by a member of staff in here? | 24% | 19% | 24% | |

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| 11 | Is it easy/very easy to get illegal drugs in this prison? | 23% | 20% | 23% | 18% |
| SECTION 6: Health services | | | | | |
| 1a | Is it easy/very easy to see the doctor? | 54% | 39% | 54% | |
| 1b | Is it easy/very easy to see the nurse? | 76% | 55% | 76% | |
| 1c | Is it easy/very easy to see the dentist? | 19% | 15% | 19% | |
| 1d | Is it easy/very easy to see the optician? | 21% | 15% | 21% | |
| 2 | Are you able to see a pharmacist? | 49% | 49% | 49% | |
| 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? | 60% | 62% | 60% | 46% |
| 3b | The nurse? | 72% | 66% | 72% | 67% |
| 3c | The dentist? | 55% | 43% | 55% | 51% |
| 3d | The optician? | 53% | 44% | 53% | 40% |
| 4 | The overall quality of health services? | 63% | 54% | 63% | 52% |
| 5 | Are you currently taking medication? | 27% | 21% | 27% | |
| For those currently taking medication: | | | | | |
| 6 | Are you allowed to keep possession of your medication in your own cell? | 79% | 67% | 79% | |
| 7 | Do you feel you have any emotional well-being/mental health issues? | 24% | 23% | 24% | |
| For those with emotional well-being/mental health issues, are these being addressed by any of the following: | | | | | |
| 8a | Not receiving any help? | 42% | 40% | 42% | |
| 8b | A doctor? | 28% | 26% | 28% | |
| 8c | A nurse? | 28% | 22% | 28% | |
| 8d | A psychiatrist? | 25% | 23% | 25% | |
| 8e | The mental health in-reach team? | 22% | 35% | 22% | |
| 8f | A counsellor? | 11% | 12% | 11% | |
| 9a | Did you have a drug problem when you came into this prison? | 34% | 24% | 34% | 8% |
| 9b | Did you have an alcohol problem when you came into this prison? | 33% | 21% | 33% | 11% |
| 10a | Have you developed a drug problem since you have been in this prison? | 4% | 5% | 4% | |
| For those with drug or alcohol problems: | | | | | |
| 11 | Do you know who to contact in this prison for help? | 91% | 79% | 91% | |
| 12 | Have you received any help or intervention while in this prison? | 88% | 74% | 88% | |
| For those who have received help or intervention with their drug or alcohol problem: | | | | | |
| 13 | Was this intervention or help useful? | 87% | 81% | 87% | |
| 14a | Do you think you will have a problem with drugs when you leave this prison (yes/don't know)? | 21% | 25% | 21% | 15% |
| 14b | Do you think you will have a problem with alcohol when you leave this prison (yes/don't know)? | 21% | 25% | 21% | 19% |
| For those who may have a drug or alcohol problem on release: | | | | | |
| 15 | Do you know who in this prison can help you contact external drug or alcohol agencies on release? | 64% | 50% | 64% | 50% |

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| SECTION 7: Purposeful activity | | | | | |
| 1 | Are you currently involved in any of the following activities: | | | | |
| 1a | A prison job? | 47% | 39% | 47% | |
| 1b | Vocational or skills training? | 28% | 17% | 28% | |
| 1c | Education (including basic skills)? | 45% | 35% | 45% | |
| 1d | Offending behaviour programmes? | 19% | 11% | 19% | |
| 2ai | Have you had a job while in this prison? | 86% | 69% | 86% | |
| For those who have had a prison job while in this prison: | | | | | |
| 2aii | Do you feel the job will help you on release? | 59% | 47% | 59% | |
| 2bi | Have you been involved in vocational or skills training while in this prison? | 85% | 58% | 85% | |
| 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? | 85% | 56% | 85% | |
| 2ci | Have you been involved in education while in this prison? | 96% | 73% | 96% | |
| For those who have been involved in education while in this prison: | | | | | |
| 2cii | Do you feel the education will help you on release? | 80% | 60% | 80% | |
| 2di | Have you been involved in offending behaviour programmes while in this prison? | 82% | 54% | 82% | |
| 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? | 75% | 49% | 75% | |
| 3 | Do you go to the library at least once a week? | 33% | 32% | 33% | 14% |
| 4 | On average, do you go to the gym at least twice a week? | 45% | 52% | 45% | 34% |
| 5 | On average, do you go outside for exercise three or more times a week? | 65% | 38% | 65% | 70% |
| 6 | On average, do you spend 10 or more hours out of your cell on a weekday? | 5% | 9% | 5% | 8% |
| 7 | On average, do you go on association more than five times each week? | 53% | 51% | 53% | 50% |
| 8 | Do staff normally speak to you most of the time/all of the time during association? | 25% | 24% | 25% | 27% |
| SECTION 8: Resettlement | | | | | |
| 1 | Do you have a personal officer? | 96% | 69% | 96% | 92% |
| For those with a personal officer: | | | | | |
| 2 | Do you think your personal officer is helpful/very helpful? | 60% | 63% | 60% | 68% |
| For those who are sentenced: | | | | | |
| 3 | Do you have a sentence plan? | 89% | 54% | 89% | 67% |
| For those with a sentence plan? | | | | | |
| 4 | Were you involved/very involved in the development of your plan? | 58% | 66% | 58% | 76% |
| 5 | Can you achieve some/all of your sentence plan targets in this prison? | 81% | 81% | 81% | |
| 6 | Are there plans for you to achieve some/all your targets in another prison? | 43% | 48% | 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? | 52% | 34% | 52% | |
| 8 | Do you feel that any member of staff has helped you to prepare for release? | 24% | 18% | 24% | |
| 9 | Have you had any problems with sending or receiving mail? | 46% | 42% | 46% | 36% |
| 10 | Have you had any problems getting access to the telephones? | 25% | 32% | 25% | 22% |
| 11 | Did you have a visit in the first week that you were here? | 29% | 36% | 29% | 41% |
| 12 | Did you receive one or more visits in the last week? | 37% | 44% | 37% | |
| For those who have had visits: | | | | | |
| 13 | How are you and your family/ friends usually treated by visits staff (very well/well)? | 57% | 50% | 57% | |

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| 14 | Have you been helped to maintain contact with family/friends while in this prison? | 50% | 44% | 50% | |
| 15 | Do you know who to contact within this prison to get help with the following: | | | | |
| 15b | Maintaining good relationships? | 22% | 15% | 22% | |
| 15c | Avoiding bad relationships? | 21% | 11% | 21% | |
| 15d | Finding a job on release? | 37% | 38% | 37% | 36% |
| 15e | Finding accommodation on release? | 33% | 40% | 33% | 45% |
| 15f | With money/finances on release? | 25% | 26% | 25% | 25% |
| 15g | Claiming benefits on release? | 25% | 34% | 25% | 35% |
| 15h | Arranging a place at college/continuing education on release? | 29% | 31% | 29% | 36% |
| 15i | Accessing health services on release? | 18% | 25% | 18% | 37% |
| 15j | Opening a bank account on release? | 23% | 18% | 23% | |
| 16 | Do you think you will have a problem with any of the following on release from prison? | | | | |
| 16b | Maintaining good relationships? | 17% | 14% | 17% | |
| 16c | Avoiding bad relationships? | 17% | 16% | 17% | |
| 16d | Finding a job? | 52% | 48% | 52% | |
| 16e | Finding accommodation? | 31% | 30% | 31% | |
| 16f | Money/finances? | 29% | 29% | 29% | |
| 16g | Claiming benefits? | 23% | 25% | 23% | |
| 16h | Arranging a place at college/continuing education? | 34% | 26% | 34% | |
| 16i | Accessing health services? | 14% | 12% | 14% | |
| 16j | Opening a bank account? | 20% | 18% | 20% | |
| | 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? | 62% | 61% | 62% | 67% |



Prisoner offender management survey responses HMP/YOI Swinfen Hall 2010

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

Key to tables

| | | HMP/YOI Swinfen Hall | Young adults comparator | HMP/YOI Swinfen Hall | Overall 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 | | 24 | 57 | 24 | 676 |
| SECTION 1: General information | | | | | |
| 1 | Are you under 21 years of age? | 50% | 77% | 50% | 11% |
| 2 | Are you a foreign national? | 13% | 7% | 13% | 9% |
| 3 | Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)? | 35% | 41% | 35% | 25% |
| 4 | Do you consider yourself to have a disability? | 13% | 12% | 13% | 18% |
| 5 | Is this prison in your home probation area? | 4% | 32% | 4% | 26% |
| 6 | Are you on recall? | 4% | 29% | 4% | 18% |
| 7 | Were you sentenced to less than two years? | 0% | 18% | 0% | 12% |
| 8 | Do you have six months or less to serve? | 33% | 40% | 33% | 28% |
| SECTION 2: Reception and induction | | | | | |
| 9 | Did you have any of the following problems when you first arrived here: | | | | |
| 9a | Housing problems? | 17% | 16% | 17% | 24% |
| 9b | Problems contacting employers? | 4% | 9% | 4% | 8% |
| 9c | Problems contacting family? | 13% | 12% | 13% | 16% |
| 9d | Problems of feeling depressed/suicidal? | 25% | 21% | 25% | 20% |
| 9e | None of the above problems? | 67% | 63% | 67% | 57% |
| For those who have been on an induction course: | | | | | |
| 10 | Did you go on an induction within the first week? | 86% | 77% | 86% | 77% |
| 11 | If you have been on an induction, did it cover everything you needed to know about the prison? | 76% | 64% | 76% | 65% |
| For those who have received a basic skills assessment: | | | | | |
| 12 | Did you receive a basic skills assessment within the first week? | 75% | 42% | 75% | 43% |
| 13 | After arrival into this prison did you have an interview with staff to ask if you needed help (e.g. for housing problems, contacting family, feeling depressed or suicidal) | 61% | 48% | 61% | 56% |
| SECTION 3: Sentence planning | | | | | |
| 14 | Do you have a sentence plan? | 83% | 49% | 83% | 70% |
| For those who have a sentence plan: | | | | | |
| 15 | Were you involved in the development of your sentence plan? | 80% | 89% | 80% | 75% |
| 16 | Has your sentence plan taken into account your individual needs? | 68% | 59% | 68% | 63% |
| 17 | Can you achieve all or some of your sentence plan targets in this prison? | 85% | 75% | 85% | 71% |

Key to tables

| | | HMP/YOI Swinfen Hall | Young adults comparator | HMP/YOI Swinfen Hall | Overall comparator |
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| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 18 | Are there plans for you to achieve some/all your targets in another prison? | 30% | 32% | 30% | 34% |
| 19 | Are there plans for you to achieve some/all your targets while on licence in the community? | 60% | 50% | 60% | 43% |
| 20 | Have you had any meetings to discuss your sentence plan while in custody? | 85% | 78% | 85% | 83% |
| 21 | If you have had sentence planning meetings did any of the following attend: | | | | |
| 21a | Offender supervisor? | 65% | 71% | 65% | 61% |
| 21b | Prison staff from other departments? | 35% | 19% | 35% | 31% |
| 21c | Offender manager? | 65% | 62% | 65% | 53% |
| 21d | Anyone from other agencies? | 0% | 33% | 0% | 20% |
| 22 | Were these meetings useful to you? | 77% | 52% | 77% | 68% |
| SECTION 4: Offender manager | | | | | |
| 23 | Do you have a named offender manager in the probation service? | 96% | 89% | 96% | 89% |
| For those who have an offender manager: | | | | | |
| 24 | Has your offender manager been in contact with you since you have been in custody? | 78% | 79% | 78% | 79% |
| 25 | If you have had contact from your offender manager, what type of contact was it: | | | | |
| 25a | Contact by letter? | 47% | 37% | 47% | 48% |
| 25b | Contact by phone? | 24% | 13% | 24% | 26% |
| 25c | A visit to the prison? | 71% | 87% | 71% | 69% |
| 26 | Has your offender manager changed since you have been in custody? | 62% | 38% | 62% | 42% |
| For those who have a sentence plan: | | | | | |
| 27 | Has your offender manager discussed your sentence plan with you? | 79% | 68% | 79% | 73% |
| 28 | Do you think you have been supported by your offender manager while in prison? | 41% | 38% | 41% | 43% |
| SECTION 5: Offender supervisor | | | | | |
| 29 | Do you have an offender supervisor within this prison? | 79% | 67% | 79% | 70% |
| For those who have an offender supervisor: | | | | | |
| 30 | Do you meet with your offender supervisor every month? | 42% | 82% | 42% | 77% |
| 31 | Do you think you have been supported by your offender supervisor while in prison? | 32% | 47% | 32% | 54% |
| SECTION 6: Your time in custody | | | | | |
| 32 | Have any of the following made it more difficult to take full part in the activities in custody: | | | | |
| 32a | No issues? | 71% | 68% | 71% | 69% |
| 32b | Difficulties with religion? | 10% | 8% | 10% | 7% |
| 32b | Difficulties with race? | 0% | 8% | 0% | 6% |
| 32c | Difficulties with a disability? | 10% | 11% | 10% | 9% |
| 32d | Difficulties with language? | 5% | 3% | 5% | 3% |
| 32e | Difficulties with reading/writing skills? | 5% | 11% | 5% | 11% |

Key to tables

| | | HMP/YOI Swinfen Hall | Young adults comparator | HMP/YOI Swinfen Hall | Overall 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 | | | | |
| 32f | Difficulties with other issues? | 5% | 11% | 5% | 10% |
| 33 | While in custody have you been helped with any of the following: | | | | |
| 33a | Housing? | 17% | 10% | 17% | 11% |
| 33b | Eductaion/training/employment? | 67% | 58% | 67% | 56% |
| 33c | Money and debt? | 25% | 0% | 25% | 8% |
| 33d | Relationships (e.g. family/partner)? | 29% | 6% | 29% | 13% |
| 33e | Lifestyle (e.g. friendships)? | 21% | 8% | 21% | 14% |
| 33f | Drug use? | 50% | 48% | 50% | 37% |
| 33g | Alcohol use? | 46% | 36% | 46% | 26% |
| 33h | Emotional well-being? | 25% | 12% | 25% | 22% |
| 33i | Thinking skills? | 46% | 22% | 46% | 38% |
| 33j | Attitude to offending? | 38% | 26% | 38% | 32% |
| 33k | Health? | 54% | 38% | 54% | 34% |
| 33l | Not had any help? | 13% | 12% | 13% | 15% |
| 34 | Has anyone done any work with you on basic skills? | 53% | 33% | 53% | 53% |
| 35 | Has anyone done any work with you on victim awareness? | 25% | 36% | 25% | 34% |
| 36 | Has any member of staff helped you to address your offending behaviour while in custody? | 54% | 26% | 54% | 37% |
| SECTION 7: Resettlement | | | | | |
| 37 | Has any member of staff helped to prepare for your release while in custody? | 25% | 9% | 25% | 15% |
| 38 | Do you think you will have a problem with the following on release from custody: | | | | |
| 38a | Problems maintaining/avoiding good relationships? | 30% | 16% | 30% | 18% |
| 38b | Problems finding a job? | 70% | 81% | 70% | 62% |
| 38c | Finding accommodation? | 39% | 37% | 39% | 45% |
| 38d | Problems with money/finances? | 35% | 58% | 35% | 38% |
| 38e | Problems claiming benefits? | 35% | 35% | 35% | 34% |
| 38f | Problems arranging a place at college/continuing education? | 48% | 37% | 48% | 22% |
| 38g | Problems contacting external drug or alcohol agencies? | 17% | 12% | 17% | 10% |
| 38h | Problems accessing health services? | 26% | 9% | 26% | 14% |
| 38i | Problems opening a bank account? | 17% | 26% | 17% | 29% |
| 38j | None of the above problems? | 22% | 7% | 22% | 21% |
| 39 | Have you done anything, or has anything happened to you during custody, that you think will make you less likely to offend in future? | 70% | 42% | 70% | 65% |



Key question responses (ethnicity, nationality and religion) HMP/YOI Swinfen Hall 2010

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

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Foreign national prisoners | British national prisoners | Muslim prisoners | Non-Muslim 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 | | 65 | 120 | 25 | 155 | 30 | 151 |
| 1.3 | Are you sentenced? | 100% | 100% | 100% | 100% | 100% | 100% |
| 1.7 | Are you a foreign national? | 24% | 9% | | | 36% | 10% |
| 1.8 | Is English your first language? | 82% | 96% | 44% | 99% | 71% | 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)? | | | 60% | 31% | 93% | 24% |
| 1.1 | Do you consider yourself to be Gypsy/Romany/Traveller? | 2% | 8% | 0% | 6% | 3% | 6% |
| 1.11 | Are you Muslim? | 44% | 2% | 40% | 12% | | |
| 1.12 | Do you consider yourself to have a disability? | 3% | 12% | 16% | 7% | 11% | 8% |
| 1.13 | Is this your first time in prison? | 48% | 43% | 60% | 43% | 52% | 44% |
| 2.1d | Was the attention paid to your health needs good/very good on your journey here? | 33% | 39% | 44% | 35% | 25% | 40% |
| 2.3 | Were you treated well/very well by the escort staff? | 69% | 65% | 50% | 69% | 59% | 69% |
| 2.4a | Did you know where you were going when you left court or when transferred from another prison? | 82% | 80% | 69% | 83% | 82% | 82% |
| 3.1e | Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours? | 50% | 58% | 48% | 57% | 59% | 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? | 44% | 45% | 56% | 44% | 41% | 46% |
| 3.1i | Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours? | 52% | 58% | 61% | 56% | 56% | 56% |
| 3.2a | Did you have any problems when you first arrived? | 58% | 62% | 71% | 58% | 71% | 60% |
| 3.3a | Were you seen by a member of health care staff in reception? | 90% | 86% | 79% | 89% | 89% | 87% |
| 3.3b | When you were searched in reception, was this carried out in a respectful way? | 64% | 65% | 56% | 66% | 63% | 65% |
| 3.4 | Were you treated well/very well in reception? | 63% | 55% | 41% | 60% | 59% | 57% |
| 3.7b | Did you have access to someone from health care within the first 24 hours? | 81% | 80% | 80% | 80% | 76% | 80% |
| 3.9 | Did you feel safe on your first night here? | 80% | 80% | 68% | 82% | 77% | 81% |
| 3.10 | Have you been on an induction course? | 94% | 91% | 87% | 93% | 93% | 92% |
| 4.1a | Is it easy/very easy to communicate with your solicitor or legal representative? | 47% | 43% | 48% | 45% | 41% | 44% |

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Foreign national prisoners | British national prisoners | Muslim prisoners | Non-Muslim 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 | | | | | | |
| 4.3a | Are you normally offered enough clean, suitable clothes for the week? | 55% | 50% | 56% | 51% | 67% | 48% |
| 4.3b | Are you normally able to have a shower every day? | 62% | 62% | 56% | 64% | 60% | 62% |
| 4.3e | Is your cell call bell normally answered within five minutes? | 47% | 43% | 52% | 44% | 58% | 42% |
| 4.4 | Is the food in this prison good/very good? | 26% | 26% | 21% | 27% | 17% | 27% |
| 4.5 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 34% | 49% | 50% | 42% | 43% | 43% |
| 4.6a | Is it easy/very easy to get a complaints form? | 92% | 94% | 86% | 95% | 88% | 95% |
| 4.6b | Is it easy/very easy to get an application form? | 95% | 97% | 90% | 97% | 96% | 96% |
| 4.9 | Have you made a complaint? | 57% | 62% | 39% | 63% | 65% | 60% |
| 4.13 | Are you on the enhanced (top) level of the IEP scheme? | 52% | 55% | 30% | 59% | 42% | 57% |
| 4.14 | Do you feel you have been treated fairly in your experience if the IEP scheme? | 48% | 58% | 33% | 58% | 48% | 55% |
| 4.15 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 67% | 61% | 61% | 64% | 64% | 63% |
| 4.16a | In the last six months have any members of staff physically restrained you (C&R)? | 10% | 11% | 13% | 11% | 14% | 10% |
| 4.16b | In the last six months have you spent a night in the segregation/care and separation unit? | 20% | 17% | 21% | 17% | 30% | 15% |
| 4.17a | Do you feel your religious beliefs are respected? | 64% | 47% | 63% | 52% | 65% | 50% |
| 4.17b | Are you able to speak to a religious leader of your faith in private if you want to? | 75% | 57% | 80% | 61% | 97% | 57% |
| 4.18 | Are you able to speak to a Listener at any time, if you want to? | 49% | 60% | 37% | 61% | 43% | 58% |
| 4.19a | Is there a member of staff you can turn to for help if you have a problem in this prison? | 76% | 76% | 73% | 76% | 71% | 76% |
| 4.19b | Do most staff, in this prison, treat you with respect? | 63% | 70% | 65% | 69% | 60% | 69% |
| 5.1 | Have you ever felt unsafe in this prison? | 27% | 40% | 58% | 31% | 31% | 37% |
| 5.2 | Do you feel unsafe in this prison at the moment? | 17% | 19% | 25% | 17% | 14% | 19% |
| 5.4 | Have you been victimised by another prisoner? | 14% | 35% | 44% | 24% | 21% | 29% |
| 5.5d | Have you been victimised because of your race or ethnic origin since you have been here (by prisoners)? | 6% | 3% | 17% | 2% | 7% | 4% |
| 5.5i | Have you been victimised because you have a disability (by prisoners)? | 0% | 3% | 9% | 1% | 3% | 2% |
| 5.5j | Have you been victimised because of your religion/religious beliefs (by prisoners)? | 0% | 4% | 0% | 3% | 0% | 3% |
| 5.6 | Have you been victimised by a member of staff? | 28% | 27% | 31% | 27% | 35% | 26% |
| 5.7d | Have you been victimised because of your race or ethnic origin since you have been here (by staff)? | 10% | 4% | 9% | 6% | 14% | 5% |

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Foreign national prisoners | British national prisoners | Muslim prisoners | Non-Muslim 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)? | 2% | 2% | 4% | 1% | 7% | 1% |
| 5.7i | Have you been victimised because of your religion/religious beliefs (by staff)? | 7% | 2% | 4% | 3% | 14% | 2% |
| 5.9 | Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here? | 17% | 37% | 46% | 27% | 11% | 35% |
| 5.10 | Have you ever felt threatened or intimidated by a member of staff in here? | 24% | 23% | 30% | 22% | 31% | 21% |
| 5.11 | Is it easy/very easy to get illegal drugs in this prison? | 8% | 31% | 25% | 22% | 14% | 25% |
| 6.1a | Is it easy/very easy to see the doctor? | 57% | 53% | 58% | 53% | 57% | 53% |
| 6.1b | Is it easy/very easy to see the nurse? | 78% | 75% | 78% | 76% | 82% | 74% |
| 6.2 | Are you able to see a pharmacist? | 44% | 52% | 50% | 49% | 37% | 51% |
| 6.5 | Are you currently taking medication? | 17% | 32% | 9% | 30% | 8% | 31% |
| 6.7 | Do you feel you have any emotional well-being/mental health issues? | 22% | 26% | 48% | 22% | 28% | 25% |
| 7.1a | Are you currently working in the prison? | 39% | 51% | 33% | 49% | 31% | 49% |
| 7.1b | Are you currently undertaking vocational or skills training? | 35% | 24% | 25% | 28% | 35% | 26% |
| 7.1c | Are you currently in education (including basic skills)? | 53% | 41% | 71% | 41% | 59% | 42% |
| 7.1d | Are you currently taking part in an offending behaviour programme? | 17% | 19% | 25% | 17% | 17% | 19% |
| 7.3 | Do you go to the library at least once a week? | 29% | 35% | 46% | 31% | 33% | 32% |
| 7.4 | On average, do you go to the gym at least twice a week? | 56% | 38% | 46% | 43% | 64% | 39% |
| 7.5 | On average, do you go outside for exercise three or more times a week? | 73% | 62% | 54% | 67% | 77% | 63% |
| 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.) | 8% | 3% | 10% | 4% | 3% | 5% |
| 7.7 | On average, do you go on association more than five times each week? | 54% | 54% | 41% | 57% | 57% | 53% |
| 7.8 | Do staff normally speak to you at least most/all of the time during association? | 18% | 30% | 23% | 26% | 15% | 27% |
| 8.1 | Do you have a personal officer? | 97% | 96% | 96% | 96% | 93% | 97% |
| 8.9 | Have you had any problems sending or receiving mail? | 44% | 46% | 36% | 47% | 42% | 46% |
| 8.10 | Have you had any problems getting access to the telephones? | 17% | 30% | 21% | 26% | 23% | 26% |



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

Key to tables

| | | Prisoners under the age of 21 | Prisoners aged 21 and over |
|--|---|-------------------------------|----------------------------|
| | 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 | | 96 | 91 |
| 1.3 | Are you sentenced? | 100% | 100% |
| 1.7 | Are you a foreign national? | 13% | 14% |
| 1.8 | Is English your first language? | 92% | 90% |
| 1.9 | Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)? | 34% | 36% |
| 1.1 | Do you consider yourself to be Gypsy/Romany/Traveller? | 8% | 3% |
| 1.11 | Are you Muslim? | 19% | 14% |
| 1.13 | Do you consider yourself to have a disability? | 10% | 8% |
| 1.14 | Is this your first time in prison? | 43% | 47% |
| 2.1d | Was the attention paid to your health needs good/very good? | 35% | 39% |
| 2.3 | Were you treated well/very well by the escort staff? | 68% | 64% |
| 2.4a | Did you know where you were going when you left court or when transferred from another prison? | 74% | 88% |
| 3.1e | Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours? | 62% | 49% |
| 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% | 46% |
| 3.1i | Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours? | 52% | 58% |
| 3.2a | Did you have any problems when you first arrived? | 62% | 61% |
| 3.3a | Were you seen by a member of health care staff in reception? | 85% | 90% |
| 3.3b | When you were searched in reception, was this carried out in a respectful way? | 67% | 62% |

Key to tables

| | | | |
|--------------|--|--------------------------------------|-----------------------------------|
| | Any percentage highlighted in green is significantly better | Prisoners under the age of 21 | Prisoners aged 21 and over |
| | Any percentage highlighted in blue is significantly worse | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | |
| | Percentages which are not highlighted show there is no significant difference | | |
| 3.4 | Were you treated well/very well in reception? | 59% | 56% |
| 3.7b | Did you have access to someone from health care within the first 24 hours? | 82% | 78% |
| 3.9 | Did you feel safe on your first night here? | 78% | 82% |
| 3.10 | Have you been on an induction course? | 90% | 95% |
| 4.1a | Is it easy/very easy to communicate with your solicitor or legal representative? | 47% | 42% |
| 4.3a | Are you normally offered enough clean, suitable clothes for the week? | 58% | 46% |
| 4.3b | Are you normally able to have a shower every day? | 43% | 79% |
| 4.3e | Is your cell call bell normally answered within five minutes? | 48% | 41% |
| 4.4 | Is the food in this prison good/very good? | 33% | 18% |
| 4.5 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 48% | 41% |
| 4.6a | Is it easy/very easy to get a complaints form? | 93% | 93% |
| 4.6b | Is it easy/very easy to get an application form? | 95% | 95% |
| 4.9 | Have you made a complaint? | 55% | 66% |
| 4.13 | Are you on the enhanced (top) level of the IEP scheme? | 50% | 57% |
| 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? | 65% | 62% |
| 4.16a | In the last six months have any members of staff physically restrained you (C&R)? | 14% | 8% |
| 4.16b | In the last six months have you spent a night in the segregation/care and separation unit? | 20% | 17% |
| 4.17a | Do you feel your religious beliefs are respected? | 58% | 47% |
| 4.17b | Are you able to speak to a religious leader of your faith in private if you want to? | 74% | 52% |

Key to tables

Diversity Analysis - Age

| | | Prisoners under the age of 21 | Prisoners aged 21 and over |
|-------|---|-------------------------------|----------------------------|
| | Any percentage highlighted in green is significantly better | Prisoners under the age of 21 | Prisoners aged 21 and over |
| | Any percentage highlighted in blue is significantly worse | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | |
| | Percentages which are not highlighted show there is no significant difference | | |
| 4.18 | Are you able to speak to a Listener at any time, if you want to? | 58% | 55% |
| 4.15a | Is there a member of staff you can turn to for help if you have a problem in this prison? | 74% | 77% |
| 4.15b | Do most staff, in this prison, treat you with respect? | 74% | 61% |
| 5.1 | Have you ever felt unsafe in this prison? | 33% | 39% |
| 5.2 | Do you feel unsafe in this prison at the moment? | 14% | 21% |
| 5.4 | Have you been victimised by another prisoner? | 27% | 29% |
| 5.5d | Have you been victimised because of your race or ethnic origin since you have been here (by prisoners)? | 2% | 7% |
| 5.5i | Victimised you because you have a disability (by prisoners)? | 2% | 1% |
| 5.5j | Have you been victimised because of your religion/religious beliefs (by prisoners)? | 3% | 2% |
| 5.5k | Have you been victimised because of your age (by prisoners)? | 3% | 0% |
| 5.6 | Have you been victimised by a member of staff (by prisoners)? | 27% | 29% |
| 5.7d | Have you been victimised because of your race or ethnic origin since you have been here (by staff)? | 7% | 7% |
| 5.7h | Victimised you because you have a disability? | 2% | 1% |
| 5.7i | Have you been victimised because of your religion/religious beliefs (by staff) | 3% | 5% |
| 5.7j | Have you been victimised because of your age (by staff) | 3% | 1% |
| 5.9 | Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here? | 30% | 30% |
| 5.10 | Have you ever felt threatened or intimidated by a member of staff in here? | 18% | 29% |
| 5.11 | Is it easy/very easy to get illegal drugs in this prison? | 20% | 25% |
| 6.1a | Is it easy/very easy to see the doctor? | 59% | 50% |
| 6.1b | Is it easy/ very easy to see the nurse? | 79% | 73% |
| 6.2 | Are you able to see a pharmacist? | 47% | 52% |

Key to tables

| | | | |
|------|---|-------------------------------|----------------------------|
| | Any percentage highlighted in green is significantly better | Prisoners under the age of 21 | Prisoners aged 21 and over |
| | Any percentage highlighted in blue is significantly worse | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | |
| | Percentages which are not highlighted show there is no significant difference | | |
| 6.5 | Are you currently taking medication? | 29% | 25% |
| 6.7 | Do you feel you have any emotional well-being/mental health issues? | 23% | 26% |
| 7.1a | Are you currently working in the prison? | 39% | 56% |
| 7.1b | Are you currently undertaking vocational or skills training? | 31% | 25% |
| 7.1c | Are you currently in education (including basic skills)? | 50% | 41% |
| 7.1d | Are you currently taking part in an offending behaviour programme? | 15% | 23% |
| 7.3 | Do you go to the library at least once a week? | 35% | 30% |
| 7.4 | On average, do you go to the gym at least twice a week? | 52% | 37% |
| 7.5 | On average, do you go outside for exercise three or more times a week? | 59% | 72% |
| 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.) | 7% | 3% |
| 7.7 | On average, do you go on association more than five times each week? | 38% | 70% |
| 7.8 | Do staff normally speak to you at least most/all of the time during association time? | 28% | 23% |
| 8.1 | Do you have a personal officer? | 99% | 93% |
| 8.9 | Have you had any problems sending or receiving mail? | 46% | 45% |
| 8.10 | Have you had any problems getting access to the telephones? | 25% | 25% |