

Report on an unannounced inspection of

HMYOI Aylesbury

by HM Chief Inspector of Prisons

2–12 April 2013

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Introduction

HMYOI Aylesbury holds about 400 young men aged between 18 and 21, all of whom are serving long sentences. They come from right across the country and many are a long way from home and family.

Our last full inspection of Aylesbury was in 2009 when we found outcomes for prisoners were reasonably good in most areas, apart from the provision of purposeful activity. However, when we checked progress in a short follow-up inspection in 2011, we were concerned that the establishment was slipping backwards and outcomes were deteriorating. This inspection found that the downward slide had been reversed in most areas, although the quality and quantity of purposeful activity remained unacceptably poor.

Aylesbury has a grim reputation, perhaps not helped by a recent TV documentary, and prisoners told us they had been very anxious when they first arrived. These anxieties appeared to have been stoked by staff and prisoners in their sending establishment, and were not assuaged by the grubby, restrictive and unwelcoming first night and induction wing.

However, the week before the inspection began a new, much better, reception area had opened. Reception and first night processes themselves were efficient and, although the environment was poor, the care provided for prisoners when they first arrived was good. Induction took too long and prisoners spent much of it locked in their cells; some vulnerable prisoners missed it altogether.

Aylesbury held some young men whose behaviour was very challenging and others who were very vulnerable - and plenty who were both. Holding them all safely was a challenge. Most prisoners did feel safe at the time of the inspection, and levels of violence had reduced since the short-follow up inspection and were now comparable with other similar establishments – although that is by no means low enough. However, when assaults did occur they were often serious, and levels of violence against staff were concerning and higher than elsewhere. The overall reduction reflected good strategies and processes but we identified examples where the handling of individual incidents and perpetrators was weak.

Prisoners who were identified as poor copers and who might be particularly vulnerable to bullying were held on F wing where they were well looked after and their interactions with other prisoners managed safely. There were a high number of self-harm incidents and there had been two self-inflicted deaths since the last inspection. Care for prisoners at risk of suicide and self-harm was now generally good, and action plans that had been developed after the two deaths were being actively implemented.

There needed to be a better grip on some security and discipline measures. The use of force by officers was a little higher than in similar establishments but the use of batons, although reduced since the last inspection, was much higher than the comparator. We were not confident that there was sufficient scrutiny of baton use to ensure it was always necessary. The number of adjudications had also reduced since the last inspection but the use of 'minor reports', which did not have the same levels of governance, was high, some appeared to be for petty reasons and some punishments were severe. In a similar vein, we found one prisoner who had been placed on the 'escape list', with the very severe consequences that entails, as a result of what appeared to be some childish behaviour that could have been dealt with in a more proportionate way. The regime for segregated prisoners was too limited. More prisoners than in comparable establishments told us it was easy to get drugs in the prison and the positive drug testing rate was high' but the suspicion testing process was weak. There was good support for prisoners with a substance misuse problem.

Safety, of course, is not just a matter of locks, bars and procedures but is inextricably linked to the quality of relationships between prisoners and staff. These had much improved since the last inspection and staff routinely used prisoners' first names. A few staff still had an indifferent and

unhelpful attitude. Prisoners from black and minority ethnic groups reported much less favourably about their interactions with staff than other prisoners but, on the whole, prisoners with protected characteristics were positive about their treatment. The environment was poor and many areas were dirty and shabby. Health care was good.

Relationships may have been generally friendly enough but they were too often characterised by low expectations. This was reflected in the quantity and quality of purposeful activity available – which was a gaping chasm in the overall trend of improvement. Aylesbury held young men long enough to give many of them good skills and experience, as well as the habits and attitudes that would help them get and hold down a job when they were released – essential if they were to stay out of trouble. Instead, young men spent much too long locked in grubby cells, and when they did go to activity, it was too often of poor quality, with inexperienced staff and bad behaviour. This has been the case too long at Aylesbury and needs to improve quickly.

The other work the prison was doing to help its prisoners stay out of trouble was generally good. Offender management work, in particular, was never less than adequate, but excellent if you had a probation officer as an offender supervisor. It should all have been of that high quality. Most practical resettlement services were good, with the exceptions of work to help prisoners manage their money better and the education, training and employment pathway, which compounded the failures of activity provision more generally. The development of a specific resettlement wing was a good initiative but it had yet to deliver its potential and there was some confusion about its purpose. For many of the young men held, their family would be the most important resettlement agency. There was some good family work but visit arrangements were poor and restricted actual visiting time. As many visitors had to travel long distances to reach Aylesbury because of its national remit, that was a serious problem.

Overall, it was encouraging that HMYOI Aylesbury was improving and we saw concrete evidence of plans to develop that improvement further. However, the prison is very much on a journey and some significant weaknesses remain. The most concerning of these was the poor quantity and quality of activity – unacceptable in any prison but particularly so in one holding young men for such long periods. This should now be the priority for improvement.

Nick Hardwick
HM Chief Inspector of Prisons

June 2013

Fact page

Task of the establishment

HMYOI Aylesbury holds long-term sentenced young adult males, aged between 18 and 21, serving from two years to life imprisonment.

Prison status

Public

Region

South Central

Number held

409

Certified normal accommodation

437

Operational capacity

444

Date of last full inspection

9–13 March 2009

Date of last short follow-up inspection

3–6 May 2011

Brief history

The current site opened as a county gaol in 1847 and became a women's prison in 1890. Two additional wings built in 1902 served initially as an 'inebriates' centre' and, from the mid-1930s, as a borstal for girls. In 1959, the gaol was converted to accommodate adult male prisoners, and its role was changed in 1961 to accommodate young men between 17 and 21. In 1969, Aylesbury was designated as a prison for long-term male offenders aged 17 to 21 serving sentences up to life. Since October 1989, Aylesbury has been designated as a long-term young offender institution.

Short description of residential units

A, B and C wings have a Victorian-style radial design, with the inner ends blocked off. A and B wings are generic wings holding 68 prisoners each, and C wing is the induction wing holding 66 prisoners. D and E wings are generic wings holding 61 and 81 prisoners, respectively. F wing holds 52 'poor copers' and prisoners undertaking the sex offender treatment programme. G wing is the resettlement unit and holds 48 prisoners.

Name of governor

Kevin Leggett

Escort contractor

GEOAmey

Health service commissioner and provider

Commissioner: NHS England

Provider: Care UK

Learning and skills provider

Milton Keynes College

Independent Monitoring Board chair
Junior Lennon

About this inspection and report

Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

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

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

- **outcomes for prisoners are good.**
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- **outcomes for prisoners are reasonably good.**
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **outcomes for prisoners are not sufficiently good.**
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **outcomes for prisoners are poor.**
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.

Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

Since April 2013, the majority of our inspections have been full follow-ups of previous inspections, with most unannounced. Previously, inspections were either full (a new inspection of the establishment), full follow-ups (a new inspection of the establishment with an assessment of whether recommendations at the previous inspection had been achieved and investigation of any areas of serious concern previously identified) or short follow-ups (where there were comparatively fewer concerns and establishments were assessed as making either sufficient or insufficient progress against the previous recommendations).

This report

This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.

Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.

Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only quote statistically significant¹ comparisons between establishments and their comparators in the main body of the report.

¹ The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

Summary

Safety

- S1** *The escort, transfer and reception experience of prisoners was positive and first night assessments were good. Efforts had been made to reduce high levels of violence but the number of serious assaults was high. Although levels of self-harm were high, the care and support of prisoners in crisis were good. Vulnerable prisoners were supported. Security arrangements were generally proportionate. The use of batons had decreased considerably but was still too high. Use of minor reports was high and ungoverned. The segregation unit regime was inadequate but staff offered good support and individualised care. Substance misuse was problematic but substance users received good psychosocial support. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S2** *At the last short follow-up inspection in 2011 we found that HMYOI Aylesbury was making insufficient progress against our previous recommendations. We made 25 further/repeated recommendations about safety. At this follow-up inspection we found that nine of the recommendations had been achieved, four had been partially achieved, 10 had not been achieved and two were no longer relevant.*
- S3** Most journey times were short but vehicles were often dirty. Reception was a positive experience for most prisoners and an impressive new reception facility had just opened.
- S4** First night risk interviews were appropriate but fewer prisoners than at comparator establishments felt safe on their first night. C wing the (induction and first night wing) was a poor environment. Many first night cells were dirty and we were not assured that all new arrivals received a shower or telephone call. Handover arrangements and care on the first night were good.
- S5** C wing prisoners spent too much time locked up with nothing to do. Induction was drawn out and many prisoners felt that they had not been provided with sufficient information about life at the prison. We were not assured that vulnerable prisoners on F wing received a full induction.
- S6** Many prisoners told us they had felt unsafe at some point at the establishment, although most felt safe at the time of the inspection. Levels of violence had reduced since our last inspection but, although the number of incidents involving prisoners was comparable to that at similar prisons, the number of assaults on staff was high. A number of assaults on staff and prisoners involved weapons. There was some under-reporting of bullying incidents and the case management approach to managing bullying and violence lacked rigour. There were too few interventions for perpetrators of violence.
- S7** The number of incidents of self-harm was much higher than the comparator but a small number of prolific self-harmers accounted for a high percentage of them. Care for prisoners subject to assessment, care in custody and teamwork (ACCT) self-harm monitoring procedures was good and there was good access to Samaritans and Listeners (prisoners trained by the Samaritans to support those at risk of self-harm). Safer custody meetings were well attended, although Listeners' attendance was limited. Analysis of data to provide information about patterns and trends in violent and self-harming behaviour was well developed but too little was done when trends were identified.

- S8 Safeguarding arrangements were in the early stages of development, moving in the right direction and better than at other prisons.
- S9 Security arrangements were generally proportionate. Intelligence was processed efficiently but required actions concerning searching and drug testing were not completed quickly enough and yielded poor results. The security committee set and monitored appropriate objectives focused on trying to maintain a safe environment. Too many prisoners said that it was easy to get drugs in the prison; the mandatory drug testing positive rate had been over target for the previous six months and suspicion drug testing arrangements were inadequate.
- S10 Prisoners were not always told when they had been issued with an incentives and earned privileges (IEP) warning and many were given for petty reasons. Targets and reviews were often perfunctory and quality assurance was not sufficiently robust. The regime for prisoners on the basic level of the scheme was poor, with reduced access to showers and telephones.
- S11 The number of adjudications was higher than the comparator and, despite regular quality assurance, some sampled records did not reflect a full exploration before a finding of guilt. There was no quality assurance or governance for the additional high number of minor reports, many of which appeared to be for petty reasons, were insufficiently explored and often resulted in severe punishments.
- S12 The number of recorded incidents involving the use of force was slightly higher than in similar prisons. Efforts to reduce the number of occasions in which batons were drawn and/or used had been successful but usage was still too high, and we found some under-reporting; we were not assured that there was sufficient scrutiny to ensure that all usage was proportionate. There was little use of special accommodation but we were not assured that all uses were necessary or for the shortest time.
- S13 Throughput on the segregation unit was high, but low for prisoners seeking sanctuary. The communal environment was reasonable but many cells were covered with graffiti and toilets were generally dirty. The regime was poor for most residents. The smoking ban caused some anxiety among residents. Although relatively informal, reintegration planning was developing well and some efforts to address challenging behaviour had been successful. Staff on the unit engaged well with the prisoners in their care.
- S14 More prisoners than at comparator prisons said that they had developed a drug problem at the prison and fewer said that they had received help with a drug problem. However, the drug and alcohol recovery team (DART) was a well-run and effective psychosocial service.

Respect

- S15** *Residential accommodation was poor, with most areas being dirty and shabby. Interactions between staff and prisoners were mixed. Most staff were positive role models but some displayed an unhelpful attitude to prisoners. There were pockets of very good practice, and preferred names were used. Formal arrangements for equality and diversity were underdeveloped but most prisoners felt supported. Responses to most complaints were satisfactory but prisoners had little confidence in the process. Faith and religious provision was good and the chaplaincy was well respected by prisoners. Overall, the health care service was good. Prisoners were positive about the food provided and the prison shop offered a satisfactory service. **Outcomes for prisoners were reasonably good against this healthy prison test.***

- S16 At the last short follow-up inspection in 2011 we found that HMYOI Aylesbury was making insufficient progress against our previous recommendations. We made 37 further/repeated recommendations about respect.² At this follow-up inspection we found that 10 of the recommendations had been achieved, nine had been partially achieved, 17 had not been achieved and one was no longer relevant.*
- S17 Most communal areas were dirty and the fabric was shabby and unkempt. Cell cleaning arrangements were inadequate and many cells were filthy and covered in graffiti. Most in-cell toilets were badly scaled and some showers were grimy. Access to showers was poor, compounded by the excessive cancelling of association.
- S18 Relationships between staff and prisoners were much improved but in our survey prisoners were still less positive than the comparator about having a member of staff they could approach if they had a problem. We observed mixed interactions, with most staff engaged positively but some being indifferent to prisoners. Use of preferred names was the norm, and entries in case history notes were balanced and regular. Consultation arrangements were positive and meaningful.
- S19 Formal structures and support for the development of equality and diversity provision required improvement but recent management changes had begun to re-focus attention in this area. Identification of prisoners from some protected characteristic groups was inadequate and promotion of equality was underdeveloped, although prisoners we spoke to felt well supported and did not complain of unfair treatment or discrimination. Consultation arrangements with those from minority groups were limited. Relatively few discrimination incident reporting forms were submitted and we found many prisoners who were either unaware of or had no confidence in the system.
- S20 Provision for foreign national and Muslim prisoners was reasonably well developed. We were not assured that all prisoners who declared a disability were properly followed up to ensure appropriate support and care. There was good support for transgender prisoners but not for gay or bisexual prisoners.
- S21 Prisoners were extremely positive about the chaplaincy, and faith provision was good
- S22 The number of complaints submitted was almost half that at comparator prisons and prisoners had limited confidence in the system. Sampled responses were mostly timely and addressed the issue raised, but a small number were poor and there was no quality assurance process.
- S23 Access to legal visits and the environment in which they took place were poor but legal services provision was good and the legal services officer was trained.
- S24 Clinical governance arrangements were reasonably good. There was good access to the doctor, and nurse clinics were held regularly, with generally short waits. Engagement between prisoners and nursing staff was good.
- S25 Routine medicines administration continued not to conform to professional standards. The waiting list for the dentist was short but emergency provision was inadequate. Mental health services and access to counselling services were good.

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

- S26 Most prisoners were positive about the food provided and we found the quality and quantity to be good, but catering and shop consultation arrangements were inadequate.

Purposeful activity

S27 *Too many prisoners were locked up during the core day and association was cancelled too frequently. The management of learning and skills was unsatisfactory and strategic planning was weak. There were too few activity places and poor organisation resulted in those available being underutilised. The sequencing of labour allocation was inadequate. The quality of activity provision was generally poor, although there was some good practice. Educational and vocational achievements had improved. The library offered a good service. PE facilities were adequate but underused, we were not assured that access was equitable, and opportunities to gain qualifications were limited. **Outcomes for prisoners were poor against this healthy prison test.***

S28 *At the last short follow-up inspection in 2011 we found that HMYOI Aylesbury was making insufficient progress against our previous recommendations. We made 12 further/repeated recommendations about purposeful activity. At this follow-up inspection we found that three of the recommendations had been achieved, four had been partially achieved, five had not been achieved.*

S29 The average time out of cell on weekdays was around 7.5 hours a day for fully employed prisoners (which was less than the nine hours suggested by the published core day) and 2.5 hours for those who did not work. Association was cancelled too frequently and we found an average of a third of the population locked up during the working day.

S30 The management of learning and skills was inadequate. Plans to introduce a more coherent education programme were well advanced but the strategic planning of learning and skills was weak. Quality assurance systems did not result in sufficiently rapid improvements to the quality of provision. Labour allocation did not prioritise educational needs such as English and mathematics and, combined with the limited number of activity places, the high priority of offender behaviour programmes and security risk assessment, resulted in an inequitable system. Pay did not incentivise prisoners to engage in learning or to improve their level of English and mathematics.

S31 There were insufficient activity places for the prison population, and existing places were not fully utilised. The range of vocational training was appropriate but there was insufficient emphasis on English and mathematics in the education curriculum. Vulnerable prisoners were not disadvantaged and had access to an equivalent programme.

S32 The quality of teaching, learning and assessment was poor, although there were a few pockets of good practice. Classroom management was weak, teachers did not challenge poor behaviour and progress was slow. Teachers did not set sufficiently challenging targets or promote effective learning. Vocational training was good but the quality was too variable. There was insufficient support to help learners improve their literacy, numeracy and employability skills in workshops.

S33 Achievement of qualifications across most programmes had improved from a very low level to satisfactory over three years. Learners in bricklaying, catering, and painting and decorating developed particularly good skills. Attendance at most activities was satisfactory but punctuality was poor.

S34 Library provision was good but access was variable. Staff provided an efficient service which included the 'six book challenge', quizzes and the occasional workshop with a visiting reader.

- S35 Provision for recreational PE was good but underused. Facilities included a well-resourced gym but use was poorly promoted. There were too few opportunities to gain sports-related qualifications. The prison did not collect and analyse sufficient data to identify how many different prisoners used the facilities or manage access and use effectively.

Resettlement

S36 *Strategic management arrangements were appropriate but insufficiently integrated. Offender management work met the needs of the population and the work of probation staff was impressive. Public protection arrangements were good. The role of G wing as a resettlement unit was not sufficiently clear. Resettlement pathway support was generally good, with positive outcomes in respect of accommodation, health and substance misuse, but less provision for finance and debt, and education, training and employment. Work with children and families was good but visits arrangements were poor. Offending behaviour work was good. **Outcomes for prisoners were good against this healthy prison test.***

S37 *At the last short follow-up inspection in 2011 we found that HMYOI Aylesbury was making sufficient progress against our previous recommendations. We made 17 further/repeated recommendations about resettlement. At this follow-up inspection we found that five of the recommendations had been achieved, six had been partially achieved, five had not been achieved and one was no longer relevant.*

- S38** The strategic direction of resettlement was appropriate for the population, with the primary focus on offender management and public protection. The work carried out on the resettlement unit, the offender management unit and in other resettlement pathway provision was insufficiently integrated.
- S39** All prisoners were allocated an offender supervisor, but the split in the team between officer grades and probation staff resulted in a two-tier provision. The work undertaken by probation staff was, overall, of a very high standard, with effective engagement, a focus on risk and orientated to managing and changing behaviour. The work undertaken by prison officers was acceptable but of a lower standard, more likely to be reactive and less likely to focus on individual needs. These differences were compounded by the number of hours lost by the regular redeployment of uniformed staff elsewhere in the prison, along with a differential supervision, quality assurance and casework management approach.
- S40** Ninety-one per cent of prisoners were subject to multi-agency public protection arrangements (MAPPA), and there were robust procedures for their assessment and management at the prison. Screening processes and reviews were comprehensive and there was good interdepartmental engagement. Pre-release reports were well managed, although the quality of these was variable.
- S41** The resettlement team saw all prisoners before release but there was some duplication of work with other departments. The role of G wing as a resettlement unit was unclear and there was nothing available to prisoners there that could not be accessed elsewhere in the prison.
- S42** Support for prisoners with accommodation issues was managed by resettlement staff, although there was no specialist provision. Despite this, virtually all prisoners left with accommodation.

- S43 There was no structured pre-release programme to support prisoners into work and there was insufficient development of employability skills. Pre-discharge health care and substance use arrangements were well organised. Some basic support for debt and money management was available and prisoners were able to see a Jobcentre Plus worker to obtain advice about benefits.
- S44 The organisation of visits was poor; there were difficulties in getting through to the visits booking line, and long delays in getting into the visits hall. The hall was reasonable but cramped. The parenting and relationships course, fathers' days and lifer days had been well received. Work to address offending behaviour was good.

Main concerns and recommendations

- S45 Concern: Prisoners often arrived at Aylesbury with very negative preconceptions about how they would be treated. These fears were compounded when they were greeted with little information and long periods locked up in dirty cells with little to do.

Recommendation: The prison should ensure that prisoners receive accurate information about Aylesbury as soon as possible after they are told they will be going there. New arrivals should be placed in clean accommodation in good repair, and given accessible information about the prison.

- S46 Concern: The number of incidents of drawing and use of batons continued to be high, and we were not assured that they were used as a last resort or that all incidents were recorded and investigated.

Recommendation: Drawing/use of batons should be properly recorded and all incidents should be formally scrutinised to ensure proportionality.

- S47 Concern: Too many prisoners were not engaged in meaningful activity and existing activity places were not managed efficiently. Ofsted judged the quality and leadership of learning and skills activities to be inadequate.

Recommendation: The prison should increase the quantity and quality of work and training opportunities available for prisoners and maximise the use of these to increase the number of prisoners involved in substantive purposeful activity.

- S48 Concern: The start of visits continued to be delayed regularly. As a consequence, not all prisoners and visitors had access to the full advertised period. This was a particular problem as Aylesbury had a national remit and many visitors travelled long distances to attend visits.

Recommendation: Visits should start at the advertised time. (Repeated recommendation 2.153)

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Journey times were short and prisoners felt safe. Escort staff were respectful but vans were often dirty.*

I.2 In our survey, prisoners responded more positively than the comparators across a number of indicators about being escorted to the prison. Most journey times were short and most prisoners indicated that they felt safe during transit; however, escort vans were dirty and uncomfortable.

I.3 Escort staff were courteous and friendly, and vans were well equipped with food and water. Escort vans entered the establishment quickly and disembarkation was usually swift. Reception was closed over lunch and prisoners arriving at that time were moved to the holding room in reception. Prisoners were not handcuffed between the vans and reception, which was proportionate to the risk. Late arrivals at the prison were rare.

Housekeeping point

I.4 Escort vans should be kept clean.

Early days in custody

Expected outcomes:

Prisoners are treated with respect and feel safe on their arrival into prison and for the first few days in custody. Prisoners' individual needs are identified and addressed, and they feel supported on their first night. During a prisoner's induction he/she is made aware of the prison routines, how to access available services and how to cope with imprisonment.

I.5 *Reception had recently moved and was a much more suitable environment and the process was swift. Fewer prisoners than the comparator said they felt safe on their first night, and first night cells were dirty. The care given on the first night was good. The induction programme took too long and prisoners spent too long locked up during this time. F wing prisoners did not always receive a full induction.*

I.6 In the week before the inspection the prison had moved its reception from the previous very unsatisfactory location to a bespoke area. The new facility was now a clean and welcoming environment. Throughput in reception was low, so the reception process for most prisoners was relatively short and had been further reduced in the new facility. Reception staff were friendly and displayed a caring approach.

- I.7** Strip-searching was undertaken only after a risk assessment. Most prisoners' property was processed on their day of arrival, but for the few who arrived later in the afternoon this took place the next day.
- I.8** In our survey, fewer respondents than at comparator establishments (71% versus 77%) said that they had felt safe on their first night. Prisoners told us they felt anxious on their first night because of their belief that Aylesbury would be a very harsh environment. They said that staff and prisoners at sending establishments had fuelled these misconceptions. C wing, the first night and induction wing, was grimy and the first night cells were dirty and unwelcoming, which compounded these concerns (see main recommendation S45).
- I.9** All new arrivals received a comprehensive first night risk interview with staff and this was carried out in a suitable and confidential environment. Health services staff saw all new receptions on the day they arrived.
- I.10** Association was often cancelled (see section on time out of cell), and this meant that prisoners arriving on the first night wing late in the afternoon were sometimes unable to have a shower or make a telephone call. This had been alleviated by the opening of the new reception facility, which had adequate shower facilities and two telephones.
- I.11** Handover arrangements between day and night staff were sound and worked well, and new arrivals were checked hourly, although the records suggested little interaction.
- I.12** The induction programme consisted of appropriate modules that could have been completed in one day; however, for most prisoners it took two weeks to complete, and in two cases we reviewed it had taken 25 and 28 days, respectively. Other than two one-hour daily association during this period, which was often cancelled, and half an hour of exercise daily, there was little to occupy prisoners undergoing the programme and they spent too long locked in their cells.
- I.13** The induction module that informed new arrivals about the rules and regime at the prison was usually the last to be completed, and was undertaken too long after prisoners' arrival. Vulnerable prisoners and poor copers were transferred to F wing and did not consistently receive a full induction programme. In our survey, only 43% of respondents, against the 55% comparator, said that the induction course covered everything they needed to know.
- I.14** Most prisoners received their property on the day they arrived but for the small number who arrived later in the day, they received their property on the day after arrival.

Recommendations

- I.15** **First night accommodation should be maintained to a clean and acceptable standard.**
- I.16** **Prisoners on induction should not be locked in their cells during the core day.** (Repeated recommendation 2.14)
- I.17** **Prisoners transferring to F wing should receive a full induction programme.**

Bullying and violence reduction

Expected outcomes:

Everyone feels and is safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Prisoners at risk/subject to victimisation are protected through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime.

1.18 *Overall violence had reduced but the level of violence against staff was high. Many prisoners had felt unsafe at some point at the establishment, although most felt safe at the time of the inspection. There was under-reporting of some incidents of bullying and violence. The personal intervention plan was ineffective. Poor copers were well managed. There were too few interventions for perpetrators of violence, and they were used infrequently.*

1.19 The prison had an up-to-date and comprehensive anti-bullying and violence reduction strategy. The safer custody committee met monthly and was well attended by staff from relevant departments. The meeting analysed trends and patterns of violence and related data from 2010 to the present day and this informed a continuous improvement plan. The data showed that there had been a downward trend in violence since the previous short follow-up inspection in 2011. Levels of violence between prisoners were now comparable with those at similar prisons. However, this was not the case for violence against staff, which in the previous reporting year had been higher than at comparable establishments. There had been 31 serious assaults in the previous 12 months, 11 against staff and 20 against prisoners, which was considerably higher than in previous years.

1.20 Although almost half of prisoners in our survey said that they had felt unsafe at some point while at the establishment, far fewer indicated that they felt unsafe currently, and most prisoners in our groups told us that they felt safe. The prison had conducted its own anti-bullying survey, which had had a good response rate and had also indicated that most prisoners felt safe.

1.21 Personal intervention plans (PIPs) were used to monitor and address incidents of bullying and violence. We found examples of incidents recorded in observation books and on unexplained injury forms where a PIP should have been opened but had not, indicating some under-reporting of incidents. Some investigations into incidents of bullying had been poor, and the setting of individualised targets and recording of daily interactions were perfunctory. There had been some attempts at conflict resolution and mediation but these had been infrequent, and too little was done to address violence when it occurred.

1.22 Prisoners identified on arrival as poor copers were located on F wing, in similar accommodation to that of prisoners on normal location. The two populations mixed in many activity areas, and this was well managed to ensure that prisoners felt safe. Prisoners on F wing generally reported feeling safe. A few such prisoners had been reintegrated to normal location, supported by good reintegration plans, and those we spoke to said that they felt supported and safe.

Recommendation

1.23 All incidents of violence should be accurately recorded.

Self-harm and suicide

Expected outcomes:

The prison provides a safe and secure environment which reduces the risk of self-harm and suicide. Prisoners are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

I.24 *Access to Listeners and the Samaritans was good. The number of incidents of self-harm and use of the constant observation cell were high but a small number of prolific self-harmers accounted for many of these. Assessment, care in custody and teamwork (ACCT) procedures were well managed.*

- I.25** The self-harm and suicide prevention strategy document was comprehensive and up to date, and detailed how prisoners in crisis should be cared for. The safer custody team met monthly (see section on bullying and violence reduction) but attendance by Listeners (prisoners trained by the Samaritans to support those at risk of self-harm) was limited.
- I.26** Patterns and trends of self-harming behaviour across the prison were analysed at the meeting, although this did not include the use of anti-ligature clothing. Only 54% of staff had received up-to-date safer custody training.
- I.27** All wings had a Samaritans telephone and the prison kept good records of its use. A trained Listener was employed in reception, on the first night wing and on each residential unit except F wing, where visiting Listeners could attend when necessary. A care suite was located on C wing. In our survey, 39% of respondents said that they had had access to a Listener on arrival at the prison, against the comparator of 26%.
- I.28** One constant watch cell was located on F wing and another in the new reception area. The prison had advanced plans to move this cell to C wing. There had been 31 uses of a constant watch cell in the previous six months, which was relatively high but mainly accounted for by a number of prolific self-harmers. The prison still had no safer cells but work was in progress to adapt two cells for this purpose.
- I.29** In the previous six months there had been 144 incidents of self-harm, which was higher than at comparator prisons, and 73 ACCT documents had been opened, although one prisoner accounted for over a quarter of these incidents. Our review of ACCT documents indicated that care for prisoners in crisis was generally good. Initial assessments and action plans were meaningful and addressed specific needs. Case reviews were multidisciplinary and prisoners' families were sometimes invited to them. Entries in case review documentation were good and demonstrated that positive interactions were taking place. Prisoners subject to ACCT arrangements who we spoke to told us that they felt supported by the prison. Ten prisoners subject to ACCT procedures in the previous six months had been located in the segregation unit but, for the cases we reviewed, this location had been justified.
- I.30** There had been two deaths in custody since the last full inspection. These had been investigated and action plans had been formulated; these were reviewed monthly to reduce the risk of further incidents. As a result, a weekly clinical meeting was held which analysed and addressed the needs of prisoners in crisis.

Recommendations

- I.31 All staff should receive a refresher course in safer custody training.**

- I.32** Some cells should be upgraded to meet the specification of a safer or reduced risk cell. (Repeated recommendation 2.38)

Housekeeping points

- I.33** Listeners should play a more prominent role in safer custody meetings.
- I.34** The use of anti-ligature clothing should be analysed at the safer custody meeting.

Safeguarding (protection of adults at risk)

Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.³

- I.35** *There were good links with the local safeguarding board. Not enough was being done to ensure that all prisoners at risk had their needs met.*

- I.36** There was no formal safeguarding policy covering adults at risk, although this was being developed at the time of the inspection. The prison was a member of the Buckinghamshire Safeguarding Adults Board and had made good links with other agencies.
- I.37** New arrivals were seen by a member of the health services team, who assessed safeguarding needs and, if required, passed on this information to offender supervisors, who could signpost such prisoners to appropriate services. A multidisciplinary clinical meeting was held weekly, where young adults who met the criteria were discussed and care plans opened. Most staff were aware of those at risk and were focused on their personal responsibility to protect them. Safeguarding arrangements should continue to be developed so that all prisoners identified as vulnerable have their needs adequately assessed and met.

Security

Expected outcomes:

Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence as well as positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse while in prison.

- I.38** *Security arrangements were, with a few anomalies, generally proportionate. There was an appropriate focus on trying to make the prison safe, and suitable security objectives were set and monitored. High numbers of security information reports were processed but required actions often*

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

took too long to complete. The mandatory drug testing positive rate was above target. The suspicion test positive rate was very low and testing procedures were not followed correctly.

- I.39** Security arrangements for most prisoners were proportionate and did not unnecessarily restrict access to the regime. Movement to activities was relaxed and some prisoners were risk assessed to move unescorted outside of main movement times. Strip-searching on reception and entry to the segregation unit were by risk assessment but 10% of prisoners were still strip-searched after visits, mostly in the absence of supporting intelligence. Closed visits were used infrequently (nine times in the previous six months) but were not always applied for reasons directly related to visits. Although reviews took place monthly, prisoners often stayed on these restrictions for too long when there was no further supporting information.
- I.40** At the time of the inspection, one prisoner was on the escape list (E list), apparently for hiding in another cell during roll check as a misplaced joke. The action and ensuing risk assessment, which had resulted in the prisoner being escorted around the prison in handcuffs at all time and required to wear lurid E list clothing, appeared to be a very punitive and disproportionate response to what was a childish misdemeanour.
- I.41** The security committee was focused on making the prison a safer place, and set and monitored appropriate objectives. The prison processed a high number of security information reports (SIRs) (2,084 in the previous six months) efficiently, but actions, such as target searching and suspicion drug testing, were mostly not completed quickly enough and often yielded poor results.
- I.42** Discussion of the drug supply reduction strategy was included in the monthly security meeting. In our survey, more prisoners than at comparator establishments said that it was easy to get drugs in the prison. Prisoners told us that cannabis was easy to obtain. The random mandatory drug testing (MDT) positive rate was 8.73% for the six months to February 2013, against a target of 3.5%, but there had been lows of 0% and a high spike of 19% within that period. Only 26% of suspicion tests were positive, which was very low. Suspicion testing was not conducted in line with Prison Service Order (PSO) 3601; tests were regularly, rather than exceptionally, conducted outside the required three-day window. A further 63 requested tests had not been completed in this period, mostly because of testing officer redeployment. The MDT suite holding room was poorly ventilated and had graffiti on the door frame but the main testing area was clean, tidy and appropriately equipped.
- I.43** The sharing of information between departments and the local police was good. There were active measures to reduce the availability of drugs in the prison. The security department was sighted on issues around gang affiliation and managed this in a measured and proportionate way.

Recommendations

- I.44** **Prisoners should only be strip-searched on the basis of intelligence or specific suspicion.**
- I.45** **Closed visits should be authorised only when there is significant risk justified by security intelligence.** (Repeated recommendation 2.154)

- I.46 Prisoners should only be placed on the escape list when there is sufficient intelligence to warrant it, and measures to monitor these prisoners should be proportionate to the risk posed.**
- I.47 Actions identified through security information reports, including target searches and suspicion drug testing, should be completed in a timely manner.**

Incentives and earned privileges⁴

Expected outcomes:

Prisoners understand the purpose of the incentives and earned privileges (IEP) scheme and how to progress through it. The IEP scheme provides prisoners with incentives and rewards for effort and behaviour. The scheme is applied fairly, transparently and consistently.

I.48 *The incentives and earned privileges scheme was not sufficiently tailored to the population. Prisoners on the basic level received an impoverished regime.*

- I.49** The incentives and earned privileges (IEP) scheme operated on a points system but was not sufficiently tailored to the population. The focus was on challenging negative rather than encouraging good behaviour, and there was no opportunity to regain lost points removed for negative behaviour or gain points for positive behaviour. Many warnings were issued for petty reasons, and some prisoners were not aware that a warning had been issued. Reviews and targets were often perfunctory, with ineffective quality assurance measures. There was little differential between levels of the scheme to encourage positive behaviour.
- I.50** At the time of the inspection, 54% of prisoners were on the enhanced level of the IEP scheme and 4% were on the basic level, which was broadly in line with comparators. New arrivals were placed on the standard level unless they had earned enhanced status at a previous establishment. Prisoners on the basic level could attend work but otherwise had an impoverished regime, with access to showers and telephone calls on alternate days and association, if not cancelled, provided only once a week.

Recommendations

- I.51 The incentives and earned privileges scheme should be tailored for the young adult population, and quality assurance measures put in place to ensure consistency of application.**
- I.52 Behaviour improvement targets should be individualised and monitoring by staff should support their delivery.**
- I.53 Prisoners on the basic level should have access to showers and telephone calls each day.**

⁴ In the previous report, incentives and earned privileges were covered under the healthy prison area of respect. In our updated *Expectations* (Version 4, 2012) they now appear under the healthy prison area of safety.

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.

I.54 *The application of all disciplinary procedures was high, mostly as a result of high levels of violence and antisocial behaviour in the prison. Comprehensive data on adjudications were collated and used well to identify trends and patterns. Some records of adjudications did not explore situations sufficiently before a finding of guilt. High use of minor reports was ungoverned and punishments were often harsh. Incidents involving the use of force were appropriately de-escalated and documentation was generally of a good standard. Although considerably reduced, the number of incidents of drawing and use of batons continued to be high. Cells in the segregation unit contained graffiti and the regime for most was inadequate but there was an appropriate focus on reintegration planning and staff engaged well with prisoners.*

Disciplinary procedures

- I.55** The number of adjudications (719 in the preceding six months) had reduced slightly since the previous short follow-up inspection but remained higher than the comparator, and most were for violent or antisocial behaviour. Prisoners had sufficient time to prepare their case and could seek legal advice when requested. The adjudication room in the segregation unit was austere, with a fixed, hard seat and desk for the prisoner.
- I.56** The governor checked 10% of adjudication paperwork monthly and adjudicators received regular feedback. However, some sampled records reflected insufficient exploration before a guilty finding. Data were collated and used to identify trends and patterns.
- I.57** A total of 198 minor reports had been completed during the previous six months, which was high. Sampled records reflected that many had been for petty reasons, they had been insufficiently explored and punishments had been severe. This system was ungoverned, with no quality assurance.

Recommendations

- I.58** **Adjudication records should demonstrate that charges have been fully explored before a finding of guilt.**
- I.59** **Managerial oversight of the minor reports system should be improved.**

The use of force

- I.60** In the previous six months, force had been used 141 times, which was slightly higher than the comparator, and had been mostly as a result of violence towards staff or prisoners (see also section on bullying and violence reduction). Documentation following use of force was of a good standard and reflected efforts to de-escalate, but F213 forms (used to report injuries to prisoners) were generally not fully completed. The use of handcuffs and location to the segregation unit were not used routinely.

- I.61** The few planned interventions were not filmed but closed-circuit television footage was regularly viewed to ascertain the circumstances leading to incidents and to take forward any learning points for staff.
- I.62** Use of force was given high priority through a monthly committee, supported by a comprehensive report that identified trends and patterns. Improved managerial oversight had reduced the high use of batons dramatically but use remained higher than at most comparator prisons. We found some discrepancies in the data collation; the prison had identified that batons had been drawn 13 times and used four times in 2012, but from randomly sampled records we found a further two incidents in which batons had been drawn. We were not assured that all incidents of drawing/use of batons were scrutinised sufficiently to assure necessity (see main recommendation S46).
- I.63** There was little use of special accommodation; in 2012 there had been four uses, and there had been one use of the body belt. Authorising documentation did not assure us that all uses had been necessary or for the minimum period.

Recommendations

- I.64** **Planned interventions should be routinely filmed and reviewed.**
- I.65** **Special accommodation and the body belt should only be used as a last resort in exceptional circumstances and for the shortest time, and authorising documentation and ongoing records should reflect this.**

Segregation

- I.66** The throughput of the segregation unit was high, with 118 prisoners segregated on 286 occasions for an average of almost seven days in the previous six months. Few sought sanctuary but violence and antisocial behaviour led to high numbers segregated for other reasons. Comprehensive data were collated and used to identify trends and patterns.
- I.67** The communal environment was reasonable but most cells contained graffiti and had dirty, unscreened toilets. Smoking was prohibited on the unit and this caused unnecessary anxiety among residents.
- I.68** The regime for most segregated prisoners was limited. Showers and telephone calls were generally offered only on alternate days. Education staff visited regularly and some prisoners were allowed to have a television, but most were not permitted to leave the unit for any reason and had little to keep them occupied constructively.
- I.69** Reintegration planning was relatively informal but developing well for some longer-term residents and there had been a number of successful experiences with some challenging individuals. There was good support from the mental health team, including staff training. Staff were knowledgeable about those in their care and engaged well with prisoners but this was not reflected in electronic case notes.

Recommendation

- I.70** **The regime and environment on the segregation unit should be improved.**

Substance misuse

Expected outcomes:

Prisoners with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their stay in custody.

I.71 *Survey results for treatment need and the helpfulness of substance use treatment were negative but psychosocial services were of high quality. Some prisoners were confused about the renaming of the psychosocial service. Drug and alcohol recovery team workers facilitated attendance at Alcoholics Anonymous meetings by escorting prisoners there. Recovery champions provided peer support.*

- I.72** Although the prison was adequately equipped to care for prisoners with opiate substitution treatment needs, no such individuals were present at the time of the inspection, and only two had presented in the preceding four years.
- I.73** In our survey, more respondents than at comparator prisons (7% versus 4%) had developed a drug problem at the prison, and fewer said that they had received help with a drug problem (65% versus 82%). Nevertheless, we found that the drug and alcohol recovery team (DART) provided a well-run and effective psychosocial intervention service. Interventions included a high-intensity group-work programme called the Inclusion Recovery Programme (IRP) and lower-intensity harm reduction group modules adapted from the integrated drug treatment system programme which were co-facilitated by a nurse from the health care dept. One-to-one case working was also widely implemented.
- I.74** Although included in the induction process, some prisoners were still confused about the renaming of the psychosocial service from 'CARAT' (counselling, assessment, referral, advice and throughcare) to 'DART', and others felt that the introduction of the word 'recovery' in the service description could be a disincentive to service engagement by those with lower-level needs.
- I.75** The DART team escorted prisoners to Alcoholics Anonymous meetings.
- I.76** Peer support was provided by two 'recovery champions', who had received a two session training course and had regular ongoing supervision. They also supported some IRP sessions.
- I.77** Issues of drug strategy were included in a monthly health commissioning meeting held at cluster level, including staff from HMP Grendon and Spring Hill. The drug strategy document was in the process of review, for imminent publication. It contained a dynamic action plan, although the needs analysis which informed it was two years old.

Recommendation

- I.78** **The drug and alcohol recovery team (DART) should ensure that prisoners are aware of the range and target groups for which their services are designed.**

Housekeeping point

- I.79** The establishment should repeat its substance use needs analysis annually to ensure that service provision matches the current need of the prisoner population.

Good practice

- I.80** *The DART team escorted prisoners to Alcoholics Anonymous meetings, facilitating their continued engagement with this agency.*

Section 2. Respect

Residential units

Expected outcomes:

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

2.1 *Most communal areas and cells were dirty. Many cells contained a lot of graffiti. Cell call bells took too long to answer. Access to showers was poor and many were dirty. Prisoners could wear their own clothes. Bedding was often shabby. Access to telephones was inadequate. General applications worked well.*

- 2.2** Apart from on G wing, all other communal areas were grubby and neglected, the fabric was unkempt and cell doors and communal walls were poorly painted. G wing was cleaner but contained some damaged flooring. Many bins on the landings were overflowing with rubbish. There was plenty of association equipment but much was in a poor state of repair.
- 2.3** Many cells designed to hold one prisoner were holding two. There was adequate cell furniture but double cells did not have lockable cabinets.
- 2.4** There was poor access to cell cleaning materials, and the once-weekly designated cell cleaning period was often cancelled by staff. Cells were particularly grimy and too many were covered in graffiti, much of which had been there for a long time. Toilets were badly scaled and rusting, and although those in single cells had adequate screening, this was not the case in double cells. The offensive display policy was enforced and adhered to by prisoners.
- 2.5** Some staff took a long time to answer cell call bells. In our survey, only 34% of respondents, against the comparator of 39%, said that their cell call bell was answered within five minutes, and our observations concurred with this.
- 2.6** In our survey, only 41% of respondents said that they could shower daily, against the comparator of 73%, and this was compounded by the excessive cancelling of association. Communal showers on A, F and G wings did not have any privacy screening and some showers were dirty and poorly maintained, with evidence of damaged fabric.
- 2.7** All prisoners could wear their own clothes but most chose not to. Each wing had its own laundry facility, which worked well. Bedding was exchanged weekly but we saw some old and dirty bedding, and in our survey only 47% of respondents said that they received clean sheets weekly, against the comparator of 74%.
- 2.8** In our survey, 43% of respondents said that they had problems getting access to the telephones, against the comparator of 35%. There were enough telephones for the population but the frequent cancellation, and short length, of association periods prevented some prisoners from using the telephone at a time that was suitable for them. There were no problems with incoming and outgoing mail. Rules and routines were explained during induction and available on wing noticeboards.
- 2.9** In our survey, 84% of respondents said that it was easy to make an application and 70% that general applications were dealt with fairly, against the comparators of 68% and 60%.

respectively. There was a carbon copy application system, and prisoners told us that most staff responded well and that their queries were answered. Access to stored property was good, with no backlog of applications in reception at the time of the inspection.

Recommendations

- 2.10 Communal areas and association equipment should be maintained to an acceptable standard, and prisoners encouraged to keep their cells clean.**
- 2.11 Cells designed to hold one prisoner should not be used to hold two.** (Repeated recommendation 2.15)
- 2.12 All prisoners should be able to shower and use the telephone every day.**
- 2.13 Communal showers should be fitted with privacy screens, maintained in good condition and be well ventilated, and in-cell toilets should be de-scaled and properly screened.**
- 2.14 Emergency cell call bells should be answered within five minutes.**
- 2.15 Prisoners should receive clean and suitable bedding weekly.**

Housekeeping point

- 2.16** All double cells should have lockable cabinets so that prisoners' personal possessions can be stored safely.

Staff–prisoner relationships

Expected outcomes:

Prisoners are treated with respect by staff throughout the duration of their time in custody, and are encouraged to take responsibility for their own actions and decisions.

2.17 *Survey results regarding relationships with staff were mostly negative. We observed some positive and caring staff, but also too many who were indifferent. Personal officers focused mainly on prisoners' behaviour rather than on a holistic approach to their sentence. Preferred names were used and consultation was meaningful.*

- 2.18** In our survey, only 63% of respondents, against the comparator of 72%, said that there was a member of staff they could turn to for help, and 35%, against the comparator of 27%, said that they had been victimised by staff.
- 2.19** We saw some relationships that were distant, with some staff displaying an indifferent attitude to prisoners. Prisoners in all our groups said that staff were disinterested. However, we observed many positive and caring staff, specifically in important areas such as early days in custody and segregation. Staff used prisoners' preferred names, both in documentation and during interactions.
- 2.20** In our survey, three-quarters of respondents said that they had a personal officer, although only 53% found them helpful. Case history notes were balanced and contained regular

entries by all staff, although personal officers tended to focus predominantly on custodial behaviour rather than a holistic approach to the prisoner's sentence. There were limited management checks.

- 2.21** The prison operated an elected prisoners' council. Monthly consultation meetings were well attended by staff and prisoners from this council, and the minutes demonstrated that this was a meaningful platform for prisoners to express their views.

Recommendations

- 2.22 Prisoners' negative perceptions about staff should be addressed, and staff who appear to be indifferent to prisoners should be required to take a more pro-social approach.**
- 2.23 Personal officers should evidence in weekly wing file entries that the information about prisoners obtained during the introductory interview forms the basis of future interactions and engagement.** (Repeated recommendation 2.26)
- 2.24 There should be management checks to assess the quality of staff record keeping and encourage a more meaningful staff engagement with prisoners.** (Repeated recommendation 2.25)

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic⁵ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

- 2.25** *The strategic management and promotion of equality were poor but there were plans to improve this. Despite the lack of formal structures, and some mixed survey results, prisoners from minority groups we spoke to felt well treated. Prisoners from a black and minority ethnic background told us that they were not treated unfairly. Provision for foreign national prisoners was reasonably well developed. Muslim prisoners we spoke to were generally positive about their experience. Initial identification of prisoners with disabilities was inconsistent but individual support was appropriate.*

Strategic management

- 2.26** Provision for equality was undeveloped and poorly promoted. There was no overarching strategy that provided details of how equality was to be managed locally. There was no equality committee and, although equality was a standing agenda item at the senior management team meeting, discussion on provision in this area was cursory. The equality

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

action plan was limited and did not cover all protected characteristics. Only half of staff had received any diversity/equality awareness training in the previous three years.

- 2.27** There were no formal support groups for prisoners from any minority groups. There was limited monitoring of incentives and earned privileges (IEP) levels, segregation and the use of force but only by race. Apparent inequalities were explored and were rarely out of range, and never for a sustained period.
- 2.28** The eight identified prisoner equality representatives were unclear about their role and met infrequently to discuss issues. Discrimination incident reporting forms (DIRFs) were not always freely available and many prisoners told us that they were either unaware of or had no confidence in the system. Only 22 DIRFs had been submitted in the previous 12 months. Those that were received were not investigated thoroughly and were not subject to review by either a senior manager or external source.

Recommendations

- 2.29** **The strategic management of all aspects of equality should be improved.**
- 2.30** **All discrimination incident report forms should be subject to senior management or external review.**

Protected characteristics

- 2.31** Around 53% of the population were from a black and minority ethnic background. Our survey results from these prisoners were mixed; they reported more negatively than white prisoners across a range of indicators, including food, the prison shop, IEP, having a member of staff to turn to for help and victimisation by staff, but positively across other indicators, including feeling safe and access to exercise, mail and telephones. Black and minority ethnic prisoners we spoke to were generally positive about their experience at the establishment and made no specific complaints about unfair treatment or discrimination.
- 2.32** In our survey, 5% identified themselves as Gypsy/Romany/Traveller but there was no mechanism for identifying them at the prison and no specific support was available.
- 2.33** Foreign national prisoners represented about 12% of the population. Initial identification was good and all were seen within a month of arrival by the equality officer. In our survey, all respondents said that they understood English but during the inspection we encountered some prisoners who told us that they had spoken/understood limited English on their arrival and that staff did not use professional interpreting services or materials in languages other than English to assist their understanding. Although there was no English for speakers of other languages (ESOL) provision, individual support was offered through the education department. UK Border Agency (UKBA) staff visited the prison each month and surgeries were well attended. There was no independent immigration advice in the prison but the equality officer sent the contact details of the Detention Advice Service (DAS) to foreign national prisoners each month. Prisoners were allowed to make a free telephone call monthly if they did not receive visits, and this was accessed regularly by around 15 prisoners.
- 2.34** Almost 30% of the population were Muslim. Survey results from Muslim prisoners were mixed. They were positive that their religious beliefs were respected but more negative than other prisoners about respect and victimisation by staff and feeling unsafe. However, those we spoke to directly were generally satisfied with their treatment. There was no monitoring

of religion other than by number. The Muslim chaplain reported that provision for this group was appropriate.

- 2.35** In our survey, 15% of respondents reported a disability, which was considerably more than the two prisoners who were identified to us by the prison. Initial identification was by self-declaration to health services staff on reception or by questionnaire during induction. We found a number of prisoners who had declared a disability during induction who had not received a follow-up assessment. There was some evidence of individualised support and adaptations/adjustments and all prisoners with disabilities that we spoke to felt well supported. At the time of the inspection, six prisoners had a personal emergency evacuation plan but staff we spoke to were not aware of these or of prisoners who would need assistance in an emergency.
- 2.36** In our survey, around 5% of prisoners identified themselves as gay or bisexual but there was no means of identification or specific support for them. There was a good policy for transgender prisoners and we were told about two prisoners who were exploring their gender identity and who were appropriately supported.

Recommendations

- 2.37** **There should be regular support groups/forums for prisoners from each protected characteristic.**
- 2.38** **Professional interpreting services should be used as necessary.**
- 2.39** **The initial identification of prisoners with disabilities and other protected characteristics and subsequent support should be improved.**

Housekeeping point

- 2.40** Staff should be made aware of personal emergency evacuation plans and their contents.

Faith and religious activity

Expected outcomes:

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

2.41 *Faith provision was good and prisoners were positive about the support offered by the chaplaincy.*

- 2.42** Faith facilities were adequate and included a well-resourced chapel, small multi-faith area and small, slightly cramped mosque with a separate ablutions area. The chaplaincy included ministers of all faiths, was well integrated into prison life and contributed to a range of key meetings. Prisoners and staff were complimentary about the faith provision and the support offered by the chaplaincy, and our survey results echoed this.
- 2.43** Corporate worship services were well attended. A range of other classes and groups were facilitated, and supported by a large number of volunteers.

Complaints

Expected outcomes:

Effective complaints procedures are in place for prisoners, which are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.

2.44 *Prisoners were negative about, and had limited confidence in, the complaints process. Most responses were adequate but some were poor. There was no quality assurance.*

2.45 In our survey, fewer prisoners than at comparator prisons said that complaints were dealt with fairly or quickly. Complaint forms were not always freely available and prisoners told us that they had limited confidence in the system. The number of complaints submitted, at 274 in the previous six months, was around half that at similar prisons.

2.46 There was no quality assurance of complaint responses. The standard of sampled responses varied; although most had been timely and satisfactory, we found a number that were not personally addressed, did not answer the issue raised and were rude. There was no evidence that complaints were consistently discussed by senior managers to identify or act on any trends or patterns.

Recommendation

2.47 **The prison should explore the limited confidence in the complaints process and take action to address it.**

Housekeeping point

2.48 There should be a formal quality assurance process for complaints.

Legal rights

Expected outcomes:

Prisoners are fully aware of, and understand their sentence or remand, both on arrival and release. Prisoners are supported by the prison staff to freely exercise their legal rights.

2.49 *Legal services provision was good but the availability and facilities for legal visits were poor.*

2.50 A trained legal services officer offered advice on the Criminal Case Review Commission, appeals, solicitors and immigration issues. The availability of these services was promoted during induction and through displays throughout the prison.

2.51 Legal visits were conducted on only two mornings a week in the main visits area. Legal advisers said that this affected availability and confidentiality. In our survey, only 37% of respondents, against the comparator of 49%, said that it was easy to attend legal visits.

- 2.52** Prisoners in our survey and our groups said that staff had opened their legal correspondence when they were not present, although we found only four recorded incidents of mail being opened in these circumstances over a 12-month period.

Recommendation

- 2.53** **Legal visits provision should be improved, to ensure confidentiality and provide more opportunities for prisoners to speak to their legal adviser.**

Health services

Expected outcomes:

Prisoners are cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which prisoners could expect to receive elsewhere in the community.

- 2.54** *Clinical governance arrangements were reasonably good. However, since the implementation of national changes at the beginning of April 2013, health services had been provided by different organisations and there was insufficient day-to-day collaborative working. Primary care clinics were held regularly and waits were generally short. There were long waits in the holding area. Medication administration did not conform to professional standards. Waiting times for the dentist were short but there was no out-of-hours emergency access. Mental health services were good but there was no out-of-hours advice available.*

Governance arrangements

- 2.55** Since April 2013, health services had been commissioned by the NHS Commissioning Board. Primary health services and GPs were provided by Care UK, and mental health services by Oxford Health NHS Foundation Trust. In our survey, fewer respondents than at the time of the last full inspection (in 2009) were satisfied with the quality of health care (49% versus 59%). During the inspection, the prisoners we spoke to were generally satisfied with the services and nursing care they received. We noticed that there were no overall management agreements or coordination between the different service providers. This impacted on patient care (see pharmacy section) and was creating an ‘us and them’ culture.
- 2.56** All of the clinical rooms were easily accessible on the ground floor and were generally clean. There was an infection control audit. The holding area was untidy and there was graffiti on the walls and windows. The television supplying health promotion information was broken. There was insufficient reading material or health promotion information. Prisoners complained of long waits in this area and it was not always supervised by a discipline officer.
- 2.57** There was a good physical health needs assessment, and a mental health needs assessment was in progress. The service manager led a small team of nurses and one administrator. There were good working relationships between the prison staff and the senior management team. Care UK nursing and medical staff worked as part of a cluster with HMPs Spring Hill and Grendon.
- 2.58** There was access to health care cover from 7.30am to 8.15pm, with one nurse being available during the evening. Three GPs provided medical services three times a week. Out-

of-hours services were provided by Bucks Urgent Care, although in practice this was rarely used. Nurses had attended short courses in their lead areas to enhance their knowledge. Staff training was well managed and all were in date for their mandatory training. Opportunities for clinical supervision were available.

- 2.59** The electronic patient record, SystemOne, was used effectively to manage patients. The clinical records that we sampled were reasonably well written and included care for mental health and dental patients. However, the day-to-day working between the different teams was sporadic. Paper records were stored appropriately when required.
- 2.60** Emergency resuscitation equipment, including one automated external defibrillator (AED), was located in the health centre and was accessible to all. A total of 57 prison staff had been trained in first aid or emergency first aid at work, including training in the use of AEDs; however, not all of them were up to date. There were plans to purchase three more defibrillators for other areas in the prison. We saw records of daily checks to health care equipment only.
- 2.61** There were health care representatives on each wing and they had regular meetings with the senior nurse. There was a health promotion lead member of staff for the cluster, but limited work had been done to date at Aylesbury; there had been no health fairs and there was no action plan that included the production of more widespread information throughout the prison, although we found some evidence of health promotion material on the wings.
- 2.62** Policies and procedures were available for the management and control of communicable diseases. There were few complaints about health care but there was not a separate health care complaints system, which meant that confidential health-related information was available in the prison. There were joint death-in-custody action plans between the health services team and the wider prison but nursing staff were not aware of the progress of actions from the two deaths in custody since the last full inspection (see section on self-harm and suicide).

Recommendations

- 2.63** **The environment in holding area of the healthcare department should be improved.**
- 2.64** **A dedicated discipline officer should be deployed to assist health care functions and improve overall patient care.** (Repeated recommendation 2.60)
- 2.65** **Day-to-day working between all health services teams should be collaborative, to achieve good care for prisoners.**

Housekeeping points

- 2.66** The governor should ensure that sufficient officers are up to date with their first-aid and defibrillator training.
- 2.67** All health care complaints should be made in confidence, directly to health services staff.

Delivery of care (physical health)

- 2.68** All prisoners received an initial health care screen within 24 hours of arrival, followed by a comprehensive secondary screen as part of the Wellman Clinic, within seven days. However, there was no access to a computer in the health centre, so records were completed on paper and subsequently transferred to the electronic system. At the time of the inspection, the reception area had been moved above the health centre and there was no identified room for health services staff to assess patients confidentially. Prisoners could request health care appointments via applications that were placed in confidential boxes on the units or by speaking directly to health services staff. Those needing to be seen by a GP were allocated an appointment within 48 hours. Patients were not always made aware of their appointments until a member of the discipline staff called them.
- 2.69** The range of clinics included diabetes, asthma and sexual health, in addition to vaccination clinics as required. Attendance rates were generally good and waiting times were short for all clinics except the sexual health and immunisation clinics. Prisoners on the segregation unit were seen daily by a nurse and three times a week by a GP. Condoms were available from the health centre.
- 2.70** External hospital appointments were rarely cancelled.

Recommendation

- 2.71** **The number of immunisation clinics and sexual health clinics should be increased to reduce the waiting time for appointments.**

Housekeeping point

- 2.72** Prisoners should be made aware of their health care appointments unless risks indicate otherwise.

Pharmacy

- 2.73** The medicines were supplied by an external pharmacy provider; this had changed about three weeks before the inspection and the new pharmacist had not yet visited the prison. The pharmacy technician visited the establishment each week, and monitored stock levels in the emergency cupboard. Medicines were stored appropriately in locked cupboards in the main pharmacy room. However, there was a large bag on the floor in the dental surgery containing prescribed medications dating back around two weeks which had not been given to patients. There was disagreement between the nursing and dental teams as to who should administer these medicines.
- 2.74** The medicines and therapeutics committee met quarterly, with generally good attendance, and discussed prescribing data. The Care UK formulary (a list of medications used to inform prescribing) was available on SystmOne. Standard operating procedures were used, but were generally overdue for review, and we could not find staff signatures for most of them.
- 2.75** Controlled drugs were stored in a locked cabinet, but the key for this cabinet was in a key safe to which non-medical staff had access. The controlled drug stock register did not comply with current regulations. Heat-sensitive products were stored in refrigerators for which the temperatures were out of range.

- 2.76** Medicines were administered twice a day, with the last administration of the day taking place at around 7.15pm. They were supplied in named patient boxes, but nursing staff transferred them into Henley bags (bags used for medications) for distribution to the wings. There were no dedicated treatment rooms on the wings for storing medicines. They were administered from the wing offices or directly to patients in their cells, with officer supervision. We found some gaps on the medication charts, where it was not clear whether or not the patient had received their medication. There were no patient group directions (PGDs) but the service manager told us that a PGD for immunisations was being developed.
- 2.77** There were risk assessments for in-possession medication, based on both the drug and the patient. However, we found several patient records for which there was no corresponding risk assessment on SystemOne; some of these patients had separate paper risk assessments, others did not. The in-possession policy had not been reviewed since 2008, and the policy did not fully reflect the procedure that was followed; the medicines list in the policy did not correlate with SystemOne.

Recommendations

- 2.78 Medicines should be prescribed, dispensed, stored and administered in line with professional standards, and administration of medication on the wings should take place in conditions of confidentiality and security.**
- 2.79 The medicines and therapeutics committee should formally review all procedures and policies to ensure that they cover all aspects of the pharmacy service, and all staff should read and sign the agreed procedures.**
- 2.80 Patient group directions should be developed to enable nurses to supply more potent medicines.**

Housekeeping points

- 2.81** All medicines, including those prescribed by the dentist, should be stored appropriately in medicine cupboards, and administered promptly.
- 2.82** Only authorised staff should have access to the key to the controlled drugs cabinet and the controlled drugs stock register should comply with current regulations.
- 2.83** Full and complete records of medicines administration should be made.
- 2.84** Maximum and minimum temperatures for the drug refrigerators in the pharmacy room should be recorded daily, to ensure that heat-sensitive items are stored within the 2–8°C range. Corrective action should be taken where necessary and should be monitored by nursing staff.

Dentistry

- 2.85** The dental suite was generally clean and reasonably equipped. However, decontamination equipment had been ordered but not fitted and tape had been applied to the floor, which made the department non-compliant with infection control guidance. Plans to relocate the suite had not progressed. Prisoners were prioritised according to the treatment required and were seen within two weeks of making an application. However, the process for accessing emergency dental services was unclear and we did not see a protocol. Patients

received treatment with sufficient levels of privacy. Oral health promotion was provided during treatment sessions but prisoners had limited access to dental hygiene care. The dentist was in discussion with kitchen staff to ensure that there were fewer meals with a high sugar content.

Recommendation

- 2.86 The dental suite should be fully compliant with infection control guidance, which includes access to functioning decontamination equipment.**

Housekeeping points

- 2.87** There should be a documented process for out-of-hours access to emergency dental services.
- 2.88** Prisoners should have access to a range of items to promote dental hygiene.

Delivery of care (mental health)

- 2.89** A small team of mental health nurses delivered in-reach services, and there was one primary care mental health nurse. There was access to a clinical psychologist, who was a consultant with expertise in both adult and forensic mental health. The caseload consisted of approximately 40 patients. There was an open referral system and the team was available during weekdays. There was no access to out-of-hours advice in the evening and at weekends. Mental health nurses attended all assessment, care in custody and teamwork (ACCT) self-harm monitoring reviews and prisoners also had access to a team of three professional counsellors through the psychology department.
- 2.90** Patients were involved in their own care and there was a multi-agency approach to their management. SystemOne was not used during the multidisciplinary team meeting and care plans were not reviewed using a multidisciplinary approach.
- 2.91** One prisoner had been transferred to a secure mental health unit within the previous year. At the time of the inspection, a prisoner with learning disabilities was on constant watch as he was being referred for inpatient care at HMYOI Feltham. There was limited access to expertise for prisoners with learning disabilities. Mental health awareness training for discipline staff had been delivered in 2012 but there was no programme planned for 2013.

Recommendations

- 2.92 Record keeping should reflect the multidisciplinary team decision making and care planning should be reviewed at the meetings.**
- 2.93 Mental health awareness training should be provided for all discipline staff, including information about learning disabilities and personality disorders.**

Catering

Expected outcomes:

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

2.94 *Most prisoners were positive about the food provided. Serveries were poorly maintained and not regularly cleaned. Food was served too early. Consultation arrangements were inadequate.*

2.95 In our survey, 36% of prisoners said that the food was good or very good, against the comparator of 24%, but those we spoke to during the inspection said that portion sizes were too small. We found the quality and quantity generally to be of a decent standard, although the breakfast packs, which were issued on the day before their intended consumption, were inadequate. The menu operated over a four-week cycle and was varied, with fruit and vegetables available daily. The menu accommodated vegan, vegetarian, religious, healthy and medical diets. New arrivals could choose their menu options for the following day. There was no opportunity for prisoners to prepare their own food or dine in association.

2.96 Although the kitchen was clean and well maintained, the serveries were in a poor state of repair, with broken flooring and hygiene screen covers missing. Halal and non-halal food was not separated on some serveries and cross-contamination was an issue. We found some serveries which had not been cleaned after the evening meal, and food waste was left overnight. Servery workers were correctly attired but much of this clothing was dirty and needed replacing. Lunch was served at 11.45am and the evening meal at 4.45pm, which were too early.

2.97 Sixteen prisoners worked in the kitchen but there was no opportunity for them to gain qualifications, whereas prisoners in the staff mess could achieve a National Vocational Qualification in catering up to level 2 (see also section on learning and skills and work activities).

2.98 There was a twice-yearly food survey and we saw evidence of changes made in response to this. Food comments books were available on each wing but very few comments had been made. The catering manager attended prisoner consultation meetings only when requested and there was no specific forum for prisoners to discuss issues about food.

Recommendations

2.99 **Prisoners should be able to dine in association.** (Repeated recommendation 2.122)

2.100 **Serveries should be clean and maintained.**

2.101 **Halal food should be separated from non-halal food on serveries.**

2.102 **Meals should be provided at appropriate times. Lunch and dinner should not be served before noon and 5pm, respectively, and breakfast should be served on the day of consumption.**

Housekeeping point

2.103 Consultation arrangements should be improved.

Purchases

Expected outcomes:

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

2.104 *The shop arrangements were appropriately managed and the range of goods sold was adequate. Consultation arrangements were poor.*

2.105 Depending on their day of arrival, new prisoners could wait up to 10 days for their first prison shop order, although this was mitigated by the opportunity to buy either a smokers' or non-smokers' pack during this period.

2.106 More prisoners than at comparator establishments said that the prison shop sold enough items to meet their needs. However, black and minority ethnic and Muslim prisoners responded less positively. We found that the range of goods sold broadly met the needs of the population. Prisoners told us that they had not had the opportunity to change the products listed for sale in the prison shop and there were no consultation arrangements.

2.107 Prisoners could make purchases from a number of catalogues but these incurred a 50 pence handling charge. Newspapers and magazines could be bought through a local newsagent.

Recommendation

2.108 **Prisoners should be routinely consulted about the shop.**

Housekeeping point

2.109 Prisoners should not be charged for ordering from catalogues.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁶

3.1 *Too many prisoners were locked up for long periods and association was cancelled too often.*

3.2 The published core day indicated that a fully employed prisoner could achieve about nine hours unlocked during the working day. In reality, we calculated that the average time out of cell was nearer to 7.5 hours a day for employed prisoners and as little as two and half hours for those who did not work. We found daily slippage in the regime, and observed that prisoners were often unlocked late.

3.3 At a roll check during mornings and afternoons, when prisoners should have been unlocked, we found between 30% and 34% of the population locked in their cells.

3.4 Association was scheduled daily during the working day for unemployed prisoners and during the evening, from Monday to Thursday, for all prisoners. Weekend association was scheduled for four periods over the two days. There was excessive cancellation of association, which had a severe impact on the amount of time that prisoners could spend out of their cells, interacting with other prisoners, having a shower or making a telephone call. We saw many staff not interacting with prisoners during association or exercise. Exercise took place during the core day for prisoners on the wing, but there was no opportunity for fully employed prisoners to undertake a period of exercise, other than moving to and from work.

Recommendations

3.5 **There should be a clear strategy to significantly increase the amount of time out of cell so that first, all prisoners achieve the prison's own target of eight hours a day and then, as the amount of purposeful activity increases and association becomes more reliable, move to achieving an average of 10 hours a day.**

(Repeated recommendation 2.6)

3.6 **Unemployed prisoners should be allowed out of their cell each day for a shower and a telephone call.** (Repeated recommendation 2.86)

3.7 **Exercise should be timed to maximise prisoner uptake.** (Repeated recommendation 2.87)

3.8 **Staff should interact with prisoners during exercise and association sessions.** (Repeated recommendation 2.89)

⁶ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

Learning and skills and work activities

Expected outcomes:

All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The learning and skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.

3.9 *The management of learning and skills was weak and had failed to improve the quality of teaching and learning, which had been inadequate for some time. The range of vocational training was appropriate but education classes did not sufficiently prioritise the development of prisoners' English and mathematics. The achievement of qualifications by prisoners had improved over the previous three years but required further improvement. Library services were good but opportunities for prisoners to attend from the residential wings were not always used.*

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

<i>Achievements of prisoners engaged in learning and skills and work:</i>	<i>Requires improvement</i>
<i>Quality of learning and skills and work provision:</i>	<i>Inadequate</i>
<i>Leadership and management of learning and skills and work:</i>	<i>Inadequate</i>

Management of learning and skills and work

3.11 The management of learning and skills was weak. The prison had identified through its self-assessment reports that the quality of teaching, learning and assessment had been inadequate for a long time. Although the new education provider, Milton Keynes College, had begun to resolve some of the significant failings in the provision, we saw little improvement in the quality of teaching, learning and assessment. Plans to introduce a more coherent education programme were well advanced but the strategic planning of learning and skills was underdeveloped and the prison had not established clear targets for an improved service.

3.12 Quality assurance arrangements were not sufficiently effective to bring about the rapid improvements required in the quality of teaching and learning. Managers had undertaken a few observations of teaching and learning, supported by a 'walk through', but the results of these had not been used to produce a clear action plan for teacher development. Managers did not provide the relatively new and inexperienced teaching team with the support and development they needed to develop their teaching skills. Too few teachers had a sufficiently advanced teaching qualification.

3.13 The prison had established a quality improvement group, but this had not set out clear and specific targets for improvement and expected levels of quality, such as the quality of teaching and learning, or targets for success rates.

3.14 Pay levels did not provide an incentive for prisoners to engage in learning or to improve their level of English and mathematics.

⁷ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

Recommendations

- 3.15** The prison should set clear targets and expectations for the quality of education and learning and skills, monitor these through the quality improvement group and take appropriate actions to meet them.
- 3.16** The prison should implement effective quality assurance arrangements, to improve the quality of teaching and learning, particularly in the education department.
- 3.17** Teachers and trainers should be provided with effective support and professional development.
- 3.18** There should be a review of the pay system, to provide an incentive for prisoners to gain the skills that will improve their employment prospects and improve their English and mathematics.

Provision of activities

- 3.19** There were too few activity places for the prison population. Around 16% of the population were unemployed and many of the activities provided were only part time, resulting in around a third of prisoners remaining on the wings during the day (see also section on time out of cell). Each morning there were 152 training and education places and 159 work places; in the afternoon there were 128 training and education places and 159 work activities. About 80% of the approved employment and training positions, and only 64% of education places, were filled at the time of the inspection (see main recommendation S47).
- 3.20** The allocation of prisoners to work and to education did not sufficiently prioritise educational needs such as English and mathematics, and, combined with the limited number of places available, the high priority given to offender behaviour programmes, and security risk assessments, this resulted in a clumsy and inequitable system.
- 3.21** The range of vocational training was appropriate for the population but there was insufficient emphasis on English and mathematics in the education curriculum. Plans for a new and more appropriate education curriculum were well advanced, but would further reduce the number of activity places. The programmes delivered included English, mathematics, information and communications technology, business enterprise, art, motor vehicle maintenance, bricklaying, painting and decorating, catering and radio production. Programmes were offered from entry level to level 2, with some opportunities for prisoners to study to level 3 and undertake distance learning and Open University programmes. Vulnerable prisoners had access to an appropriate range of work, vocational training and education.

Recommendation

- 3.22** Prisoners should be allocated to activities that take appropriate account of their educational needs, are equitable and make best use of their time.

Quality of provision

- 3.23** The quality of teaching, training, learning and assessment was inadequate, with too much poor teaching. Too many sessions were dull, uninspiring, unchallenging and failed to engage the prisoners, some of whom failed to participate at all. There was too much reliance on

paper-based exercises, some of which were not relevant to the subject matter of the session. Some of the materials used were inappropriate and more suited to teaching children than young adults. There were insufficient links to commercial practice or activities which related to day-to-day life.

- 3.24** In too many cases, prisoners made insufficient progress in lessons, with too many not understanding what they were required to do. Slow progress towards the planned qualification was evident in some sessions, where some prisoners were retained longer on the programme than was necessary, delaying the start of other learners. There was much poor behaviour in lessons, including the use of unacceptable language, which was not sufficiently challenged by tutors.
- 3.25** In the very few sessions which were good, tutors used their skills well to engage and encourage prisoners to participate. Learning tasks were negotiated with prisoners and were relevant, challenging and enabled all prisoners to participate, despite any differences in ability. Good use was made of additional activities to enrich and extend the learning experience. In these sessions, feedback was useful and helped prisoners to improve further.
- 3.26** Vocational training in catering was excellent. Prisoners working in the staff mess trained in a real work environment and developed good employability skills, as well as the skills necessary to achieve their level 2 qualification, although similar qualifications were not available in the main prison kitchen (see also section on catering). Seventeen prisoners had gained the full qualification and several were working towards release on temporary licence to work in local businesses. Vocational training in the laundry was also very good, with all prisoners gaining a qualification and 75% qualified as laundry technicians.
- 3.27** Resources were generally adequate to meet the needs of the prisoners, although in some classes prisoners had to share textbooks. The range of learning resources for some subjects was narrow, such as in literacy classes. Tutors made insufficient use of the interactive learning technology available to them to help make sessions more interesting and motivating. Resources for vocational training were good.

Recommendations

- 3.28** **The prison should rapidly improve the quality of teaching and learning in all lessons, ensuring that prisoners are sufficiently engaged.**
- 3.29** **The range and use of resources in the education department should be improved to fully support the courses available.**

Housekeeping point

- 3.30** Poor behaviour should be challenged and teachers should be given the confidence and skills to do so.

Education and vocational achievements

- 3.31** Achievement of qualifications across most programmes had improved over the previous three years, from a very low level to 77% in 2011/12. However, there were wide variations across courses, with high achievements in a few subjects and very low achievements in others. The number of prisoners achieving qualifications in English and mathematics was increasing but remained low relative to the identified need.

- 3.32** There was insufficient focus on developing prisoners' employability skills. In most lessons and workshops, there was insufficient development and reinforcement of the levels of punctuality, teamwork, customer awareness, attention to detail and self-motivation that would be expected by employers. Vocational training in barbering was poor and did not promote industry professional standards or support prisoners to understand how to use the correct tools for the task. There were, however, some pockets of good practice. Prisoners in the bricklaying, catering, and painting and decorating workshops demonstrated a good standard of technical work, with high success rates. Prisoners in the recycling workshop developed good employability skills and a good understanding of all aspects of waste management but no qualification was available to them.
- 3.33** In the previous 12 months, the average attendance in classes had been 83%. However, during the inspection attendance was low in too many classes, with absences due to prisoners' attendance at offending behaviour programmes and having been recruited onto other courses, workshops and activities. Punctuality was poor, with most classes starting up to 15 minutes late, and further teaching time wasted as tutors tried to identify absent prisoners. Too many classes were cancelled due to staff absence.

Recommendations

- 3.34** **Success rates of prisoners on all courses should be improved.**
- 3.35** **The prison should ensure that prisoners develop and understand the employability skills and attitude required by employers.**
- 3.36** **The prison should ensure that lessons start on time, and attendance at lessons should be improved by minimising disruptions and cancellations.**

Housekeeping point

- 3.37** Prisoners working in the recycling workshop should have access to an appropriate qualification.

Library

- 3.38** The library was subcontracted to the Buckinghamshire County Council library service. It was located centrally in the education department and was adequately furnished, with some soft seating and desk space with access to two computers. Prisoners attending education and vocational workshops could attend regularly but access from the residential wings was haphazard; each wing had a scheduled time to visit but wing staff did not always take the time to escort prisoners to the library. Eighty-five per cent of the prison population were registered users, and an average of around 40 prisoners attended the library each day.
- 3.39** The library was well managed by two part-time librarians and staffed by two prison orderlies. The stock was modern, adequate for the size of the population (at around 6,000 books) and refreshed each week by Buckinghamshire County Council, with new purchases made each month. The loss rate was high, at around 8%, but efforts had been made to reduce this. The stock included books in a suitable range of languages and there was an efficient inter-library loan service. Newspapers were not kept in the library as these were made available on the wings (see section on purchases) and there was an adequate range of magazines. There was a good selection of legal texts, reference books and relevant Prison Service Orders clearly displayed.

- 3.40** The library offered the 'six book challenge', which had been sponsored by the Buckinghamshire Association for the Care of Offenders (BACO), which had donated packs of dictionaries and thesauri as prizes. The library also ran a Christmas quiz, with over 70 participants, and other events such as a celebration of Black History Week. It was supported by a local visiting author and had received a grant from a local publishing house to purchase books.

Recommendation

- 3.41** The prison should ensure that access to the library from the residential wings is promoted well and that all those wishing to visit are given the opportunity to do so.

Physical education and healthy living

Expected outcomes:

All prisoners understand the importance of healthy living, and are encouraged and enabled to participate in physical education in safe and decent surroundings.

3.42 *PE facilities were good but underused. The gym timetable offered an appropriate range of activities and prisoners received a good induction before using the equipment. There were few opportunities for prisoners to gain a sports-related qualification. Although the prison collected attendance data for the gym, this was not sufficient to identify the proportion of the population using the facilities or to monitor and manage fair and equitable access.*

- 3.43** PE activities were appropriate for the prison population but underused. The gym was open for two sessions everyday, except on Friday when there was an extra afternoon session. It was also open in the evenings to cater for prisoners who worked. Sessions were available for vulnerable prisoners and for those with health-related issues. On Wednesday and Saturday afternoons, an external organisation provided support for rugby coaching and games. Timetabling provided adequate opportunities for prisoners to attend the gym but we were not convinced that this was sufficiently well promoted or managed to ensure fair and equitable use by all prisoners.
- 3.44** Equipment and facilities were good. There was a well-equipped weights room and cardiovascular suite, a modern multi-purpose gym and two outside pitches and a training area. Activities included weight training, exercise, football, badminton, rugby and basketball.
- 3.45** Prisoners received an appropriate induction before using the gym and exercise equipment. Checks and self-declarations were in place to ensure that prisoners were safe, and suitable records of initial assessment and declared health records were maintained.
- 3.46** Although the provision for recreational PE was good, few courses and qualifications had been offered in the previous 18 months, with the exception of the Duke of Edinburgh's Bronze Award. There were plans for football training to be introduced in the near future but these had been delayed because of recent staff absences.
- 3.47** Although the prison recorded attendance levels for the gym, it did not collect and analyse sufficient data to identify how many different prisoners used the facilities or manage access and use effectively.

Recommendation

- 3.48** The prison should collect and use data to evaluate the impact of the PE facilities, assess whether the needs of all groups of prisoners are being met and ensure fair and equitable use.

Housekeeping point

- 3.49** A broader range of PE qualifications should be available.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

Planning for a prisoner's release or transfer starts on their arrival at the prison.

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

Good planning ensures a seamless transition into the community.

4.1 *The reducing reoffending policy and action plan were up to date and supported by a comprehensive needs analysis and offender management and public protection policies. The resettlement function was undergoing a major reorganisation which was causing some confusion and duplication. The separate and different management structures for officer and probation offender supervisors resulted in a two-tier service to prisoners.*

4.2 The reducing reoffending policy document was up to date and covered all aspects of both offender management and resettlement. An accompanying reducing reoffending and resettlement action plan included objectives for each of the resettlement pathways, informed by a comprehensive needs analysis assessing the offending behaviour requirements of the population. With 91% of the population subject to public protection arrangements and almost 70% assessed as high or very high risk of harm, this focus was appropriate.

4.3 At the time of the inspection, the prison was in the process of reorganising offender management and resettlement services following the creation of the resettlement unit on G wing (see section on offender management and planning) and the movement of resettlement staff from the offender management unit (OMU) to the new unit in July 2012. Further changes were expected in May 2013, with new staff about to join the OMU to replace the five uniformed offender supervisors. Although the physical reorganisation was being managed reasonably well, the role of the resettlement unit remained unclear and there was some duplication in the roles undertaken by staff in the OMU and resettlement team.

4.4 The five and a half probation offender supervisors were managed through a separate structure from that for uniformed offender supervisors and there were considerable differences in the level of management support, supervision, training and quality assurance offered to the two groups of staff. This resulted in a two-tier service, in effect, and it was apparent from the quality of engagement by the two groups of staff that it also resulted in a two-tier provision to prisoners. While some of these differences and shortfalls in service provision had been recognised by the prison, there was no clear strategy to rectify the situation. This problem was compounded by the relatively low profile of the overarching reducing reoffending strategy group, whose attendance at the reducing reoffending meeting was often poor; in January 2013, the meeting had been cancelled as only the head of the OMU had been available to attend.

Recommendations

4.5 **There should be greater clarity and lack of duplication in the work of departments responsible for delivering the prison's resettlement function.**

- 4.6 The prison should develop and implement a clear offender management structure, to offer a consistent and equitable service to all prisoners.**

Housekeeping point

- 4.7** Offender supervisors should be offered the same level of management support, irrespective of their respective backgrounds.

Offender management and planning

Expected outcomes:

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

4.8 *All prisoners were allocated an offender supervisor. Although a number of offender assessment system (OASys) assessments were missing or out of date, this did not appear to have a significant impact on the levels of work undertaken. The work of probation offender supervisors tended to be more proactive and focused on risk than that of their prison officer counterparts. Officers were regularly redeployed elsewhere in the prison. Public protection arrangements were of a good standard.*

4.9 All prisoners were allocated an offender supervisor, and in our survey 84% of respondents, against the comparator of 54%, said that they had one. Although prisoners sentenced to indeterminate sentences for public protection (IPP) were allocated to probation officers, and life-sentenced prisoners to probation and prison officers, all other allocations were determined primarily on the basis of caseloads, which averaged around 45 per offender supervisor and included those assessed as high or very high risk of harm.

4.10 Most prisoners were seen by an offender supervisor within 10 days of arrival at the establishment, although this was not consistently recorded in induction logs. Responsibility for initially screening prisoners against resettlement pathways was supposed to have shifted from resettlement staff to induction officers but in practice this was not always the case. It was also often duplicated by offender supervisors, who usually reviewed offender assessment system (OASys) documentation and/or undertook public protection screening assessments during their initial contact.

4.11 We undertook a detailed assessment of 20 high and very high risk of harm cases. Around 30 further cases, involving mostly those out of scope for offender management (prisoners assessed as low or medium risk of harm), were also reviewed, but in less detail. Most prisoners arrived at the prison with a reasonable amount of documentation from which offender supervisors made assessments and set sentence planning targets. Despite this, there continued to be a large backlog in the completion of OASys assessments: 57 were out of date and a further 45 were missing at the time of the inspection. There was a strategy to manage this backlog but it was having limited effect. However, this did not appear to have a significant impact on levels of engagement and we saw one case which, in spite of the OASys assessment being over 12 months out of date, remained relevant and with appropriate targets being pursued.

- 4.12** Sentence planning arrangements and plans overall were reasonable, with some that were extremely good. However, community offender managers did not always attend sentence planning meetings or contribute through video or telephone conferencing, and contributions from other departments across the prison were also variable in both availability and quality. The role of personal officers in offender management was unclear; some focused on sentence and release planning but others did not. In our survey, only 9% of prisoners, against a comparator of 24%, said that their personal officer was working with them to achieve their sentence planning targets.
- 4.13** Although the work of offender supervisors beyond OASys assessments and sentence planning was, overall, of an acceptable standard, there was a considerable difference between the provision offered by officers and that by probation staff. We saw a number of examples where probation offender supervisors had been proactive in their involvement, focusing attention on issues of risk reduction and engaging in work aimed at reinforcing skills learnt on offending behaviour programmes and/or drawing on 'probation toolkit' work, including 'targets for effective change' and 'think victim'; some of this work was excellent. By contrast, uniformed offender supervisors tended to be reactive, responding to specific queries from prisoners or merely checking on general progress against identified targets. This was compounded by the regular redeployment of officers to other duties when staffing levels elsewhere were low. We were told that an average of around 150 hours a month was lost on cross-deployment. Some officers told us that their contacts with prisoners, although regular, were often undertaken only in passing, while they were redeployed on the wings.
- 4.14** All probation staff were subject to six-weekly casework supervision, which included quality assurance of much of their work, whereas uniformed officers were not subject to this and much of their work was not evaluated or checked.
- 4.15** In July 2012, G wing had been re-roled as a resettlement unit. However, there was little resettlement provision available there for these prisoners that they could not access elsewhere in the prison. Release on temporary licence was available for a small number of prisoners on the unit; eight had accessed it in the previous six months, and at the time of the inspection four prisoners were working out on community projects for part of the week. Further placements were expected to be available in the near future.
- 4.16** Home detention curfew arrangements were reasonable, although the number of prisoners qualifying for consideration was relatively low. Of 20 applications over the previous six months, 18 had been considered, and four had been successful. Information was appropriately considered and prisoners could submit their own information/evidence and pursue appeal procedures.

Recommendations

- 4.17 Initial assessments of need should be undertaken consistently and without duplication.**
- 4.18 There should be a clear strategy to ensure completion of missing and out-of-date offender assessment system (OASys) documents.** (Repeated recommendation 2.8)
- 4.19 All offender supervisors should undergo quality assurance and casework supervision, to ensure a consistent level of service provision.**
- 4.20 The prison should clarify the role of the resettlement unit and ensure that it meets the resettlement needs of the prisoners on it.**

4.21 The role of personal officers in their work with the offender management unit should be clarified and applied consistently.

Housekeeping point

4.22 Offender supervisors assessing prisoners during induction should ensure that this is recorded on induction files.

Public protection

4.23 With 91% of all prisoners subject to multi-agency public protection arrangements (MAPPA), public protection procedures were comprehensive and robust. Prisoners were screened on arrival at the prison and any identified as public protection cases were reviewed at the next interdepartmental risk management team (IDRMT) meeting, which took place fortnightly. Offender supervisors managed the cases they were responsible for throughout these prisoners' time at the establishment. Minutes from the IDRMT meeting demonstrated comprehensive discussions and appropriate interdepartmental contributions.

4.24 Review reports ('annex Fs') were prepared on all prisoners due for release and subject to MAPPA, even those assessed as level 1, which was unnecessary but ensured that appropriate attention was given to risk management before, and in anticipation of, release. Reports were generally prepared to a good standard but those completed by probation staff tended to be far more analytical than those by uniformed offender supervisors.

Categorisation

4.25 Young adults did not undergo a formal categorisation review until they approached transfer to the adult estate. In most cases, prisoners were sent to adult category B or C prisons; transfers to open conditions were rare. Offender supervisors were able to advocate for prisoners to be transferred to specific prisons to complete offending behaviour courses, and in our survey 26% of prisoners, against the comparator of 16%, said that there were plans for them to meet sentence planning targets at other prisons.

Indeterminate sentence prisoners

4.26 At the time of the inspection, the establishment held 41 IPP and 33 life-sentenced prisoners. These groups were managed in fundamentally the same way as other long-term prisoners. Two lifer days had been provided for the families of these prisoners in the preceding 12 months.

Reintegration planning

Expected outcomes:

Prisoners' resettlement needs are addressed prior to release. An effective multi-agency response is used to meet the specific needs of each individual prisoner in order to maximise the likelihood of successful reintegration into the community.

4.27 *Prisoners were seen by the resettlement department before release and basic assessments of need were undertaken. Although most needs were met, there remained some duplication of assessment. We were not assured that all necessary community referrals were shared with offender managers. Virtually all prisoners were released to appropriate housing, in spite of limited specialist support at the prison. Support for debt and finance management and the development of employability skills were weak. Pre-release health care and drug use services were generally good and a wide range of offending behaviour work was undertaken. Support for the families and friends of prisoners was reasonable but access to visits was inadequate.*

4.28 The prison released an average of 12 prisoners a month. All prisoners were seen by one of the four resettlement officers based on the resettlement wing approximately two months before release, in order to complete pre-release assessments against pathway needs. These pre-release assessments were forwarded to offender supervisors but it was not clear what they did with them, and if no issues were identified there was no further follow-up by resettlement staff before release. There was also some duplication of work, as the specialist education, training and employment provider, the National Careers Service (NCS), also saw prisoners before release. We were not assured that all aspects of pre-release resettlement planning were coordinated and forwarded to the offender manager responsible for post-release supervision, even though prisoners' needs were generally met.

Recommendation

4.29 **Pre-release resettlement assessments should be coordinated effectively, to ensure that all pre-release needs are assessed and met and that work is not replicated. Community follow-on referrals and further identified needs should be clearly communicated to offender managers before release.**

Accommodation

4.30 There was no specialist housing service but resettlement staff saw all prisoners before their release to assess their housing needs. Support for housing was limited and focused almost exclusively on applications to the Local Authority in the area to which the prisoner was planning to return. Some links had been made with national housing providers, including the Langley House Trust and St Mungo's.

4.31 Despite these limitations, most prisoners, because of their age and/or the nature of their offence, either returned home to live with a parent or were accommodated in probation-approved premises. There were generally good links between the prison and offender managers when accommodation was identified as a potential problem for release. In the previous 12 months, only one prisoner had been released with no accommodation and he had been found a temporary place.

Education, training and employment

4.32 There was an appropriate range of accredited vocational training available to prepare prisoners for work; however, the development of employability skills was weak (see section on learning and skills and work activities).

4.33 The NCS interviewed all prisoners due for release but provided a variable level of support. Some prisoners were helped to produce a CV and had appointments arranged with external

providers. However, most were provided only with telephone numbers for the local NCS office in their release area, and some with printed information about potential courses and job opportunities. There was no structured pre-release programme to support them to search for jobs, produce a high-quality CV or contact potential employers or training organisations. The use of the virtual campus to assist with this process was underdeveloped.

Recommendation

- 4.34 The National Careers Service (NCS) should develop the use of the virtual campus to help prisoners produce high-quality CVs and prepare them better for release.**

Housekeeping point

- 4.35** All prisoners leaving the establishment should have a clear contact point in their local NCS office.

Health care

- 4.36** There were good health care arrangements before release, with sufficient time to make preparations for continued care and treatment if required. All prisoners attended a well-run discharge clinic, where any continued medicines were arranged and they were provided with information for their GP, in addition to a range of health promotion material and condoms. The care programme approach was used for any with enduring mental health problems and there were good links with community mental health teams. Policies and protocols for palliative care had been developed as part of the cluster arrangements.

Drugs and alcohol

- 4.37** The drug and alcohol recovery team (DART) provided high-quality interventions for prisoners with substance use issues before release. DART workers also organised referrals and contact with community support services where possible.

Finance, benefit and debt

- 4.38** Although prisoners were asked about any finance, benefit and debt concerns during induction, and referrals were made to the resettlement team, the extent of debt problems at the prison was not accurately known. The resettlement team offered some support in writing letters to creditors and suspending debt where possible but there was no specialist debt advice. A money management course was available through the education department.
- 4.39** All prisoners were able to see a Jobcentre Plus worker before their release and obtain advice about benefits.

Recommendation

- 4.40 Specialist debt and finance support and help should be available to all prisoners.** (Repeated recommendation 2.144)

Children, families and contact with the outside world

- 4.41** A parenting and relationships course had recently been started at the establishment, in conjunction with Buckinghamshire Council. As well as engaging prisoners, the programme also involved their families, at key points in their sentence. The first programme had been evaluated positively, and at the time of the inspection the prison was delivering the second course. Three fathers' days had been provided in the previous year and had been popular with those attending. A range of support for prisoners and their families was also available via the chaplaincy, and a number of visitors we spoke to were very positive about the support they had received.
- 4.42** The prison had a small, but adequate, visitors centre, staffed by volunteers. Information and snacks were available. Although visits were scheduled to start at 2.15pm on five days a week, including weekends, this was often not the case, and this had been a long-term issue (see repeated main recommendation S48). On one day during the inspection, some visitors did not reach the visits hall until just before 3.00pm. On this occasion, the process and management were chaotic, with visitors being given contradictory information, and long waits to get through the main gate. Although senior staff resolved these problems well, these visitors did not attend until 3pm, 45 minutes after visits had started. As Aylesbury had a national catchment area, many visitors travelled considerable distances to attend visits and many we spoke to indicated that such delays were a common occurrence. In our survey, fewer prisoners than at comparator establishments said that it was easy for their family or friends to get to see them (27% versus 36%) and that staff had supported them in maintaining contact with their family and friends (32% versus 42%). There were also difficulties in getting through to the visits booking line, which remained the only way of booking visits.
- 4.43** The visits hall provided a reasonable, fairly relaxed environment, although it was cramped because of the new seating that had been installed. The closed visits booths offered little privacy. The children's play area and a snack bar were staffed by the same volunteers who ran the visitors centre, but delays in processing visits meant that there were also often delays in offering these services.

Recommendations

- 4.44** **There should be sufficient staffing available on the visits booking line to ensure that visitors can get through during advertised times.**
- 4.45** **Closed visits facilities should be screened from the main visits room and offer privacy.** (Repeated recommendation 2.156)

Attitudes, thinking and behaviour

- 4.46** The prison offered a wide range of accredited offending behaviour programmes, which broadly matched the identified needs of the prison population. The thinking skills programme was delivered 11 times a year and the 'controlling anger and learning to manage it' programme four times a year, with a combined completion target of 116. The core sex offender treatment programme had a target of 17, with a further five for the adapted programme ('becoming new me') delivered jointly with staff from HMP Bullingdon. Waiting lists were well managed and there were no significant delays in attendance.
- 4.47** Good links had been established with the OMU, and offender supervisors undertook the role of resettlement manager for each main programme. Offender supervisors consistently

attended post-programme reviews and we saw examples of family members also attending these meetings.

- 4.48** The Prison Fellowship delivered the Sycamore Tree victim awareness programme four times a year, and a range of one-to-one programmes were available and could be delivered by probation offender supervisors.

Section 5. Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points 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, or in the previous report where recommendations have been repeated.

Main recommendations

To the governor

- 5.1 The prison should ensure that prisoners receive accurate information about Aylesbury as soon as possible after they are told they will be going there. New arrivals should be placed in clean accommodation in good repair, and given accessible information about the prison. (S45)
- 5.2 Drawing/use of batons should be properly recorded and all incidents should be formally scrutinised to ensure proportionality. (S46)
- 5.3 The prison should increase the quantity and quality of work and training opportunities available for prisoners and maximise the use of these to increase the number of prisoners involved in substantive purposeful activity. (S47)
- 5.4 Visits should start at the advertised time. (S48, repeated recommendation 2.153)

Recommendations

To the governor

Early days in custody

- 5.5 First night accommodation should be maintained to a clean and acceptable standard. (1.15)
- 5.6 Prisoners on induction should not be locked in their cells during the core day. (1.16, repeated recommendation 2.14)
- 5.7 Prisoners transferring to F wing should receive a full induction programme. (1.17)

Bullying and violence reduction

- 5.8 All incidents of violence should be accurately recorded. (1.23)

Self-harm and suicide

- 5.9 All staff should receive a refresher course in safer custody training. (1.31)
- 5.10 Some cells should be upgraded to meet the specification of a safer or reduced risk cell. (1.32, repeated recommendation 2.38)

Security

- 5.11** Prisoners should only be strip-searched on the basis of intelligence or specific suspicion. (1.44)
- 5.12** Closed visits should be authorised only when there is significant risk justified by security intelligence. (1.45, repeated recommendation 2.154)
- 5.13** Prisoners should only be placed on the escape list when there is sufficient intelligence to warrant it, and measures to monitor these prisoners should be proportionate to the risk posed. (1.46)
- 5.14** Actions identified through security information reports, including target searches and suspicion drug testing, should be completed in a timely manner. (1.47)

Incentives and earned privileges

- 5.15** The incentives and earned privileges scheme should be tailored for the young adult population, and quality assurance measures put in place to ensure consistency of application. (1.51)
- 5.16** Behaviour improvement targets should be individualised and monitoring by staff should support their delivery. (1.52)
- 5.17** Prisoners on the basic level should have access to showers and telephone calls each day. (1.53)

Discipline

- 5.18** Adjudication records should demonstrate that charges have been fully explored before a finding of guilt. (1.58)
- 5.19** Managerial oversight of the minor reports system should be improved. (1.59)
- 5.20** Planned interventions should be routinely filmed and reviewed. (1.64)
- 5.21** Special accommodation and the body belt should only be used as a last resort in exceptional circumstances and for the shortest time, and authorising documentation and ongoing records should reflect this. (1.65)
- 5.22** The regime and environment on the segregation unit should be improved. (1.70)

Substance misuse

- 5.23** The drug and alcohol recovery team (DART) should ensure that prisoners are aware of the range and target groups for which their services are designed. (1.78)

Residential units

- 5.24** Communal areas and association equipment should be maintained to an acceptable standard, and prisoners encouraged to keep their cells clean. (2.10)
- 5.25** Cells designed to hold one prisoner should not be used to hold two. (2.11, repeated recommendation 2.15)

- 5.26** All prisoners should be able to shower and use the telephone every day. (2.12)
- 5.27** Communal showers should be fitted with privacy screens, maintained in good condition and be well ventilated, and in-cell toilets should be de-scaled and properly screened. (2.13)
- 5.28** Emergency cell call bells should be answered within five minutes. (2.14)
- 5.29** Prisoners should receive clean and suitable bedding weekly. (2.15)

Staff–prisoner relationships

- 5.30** Prisoners' negative perceptions about staff should be addressed, and staff who appear to be indifferent to prisoners should be required to take a more pro-social approach. (2.22)
- 5.31** Personal officers should evidence in weekly wing file entries that the information about prisoners obtained during the introductory interview forms the basis of future interactions and engagement. (2.23, repeated recommendation 2.26)
- 5.32** There should be management checks to assess the quality of staff record keeping and encourage a more meaningful staff engagement with prisoners. (2.24, repeated recommendation 2.25)

Equality and diversity

- 5.33** The strategic management of all aspects of equality should be improved. (2.29)
- 5.34** All discrimination incident report forms should be subject to senior management or external review. (2.30)
- 5.35** There should be regular support groups/forums for prisoners from each protected characteristic. (2.37)
- 5.36** Professional interpreting services should be used as necessary. (2.38)
- 5.37** The initial identification of prisoners with disabilities and other protected characteristics and subsequent support should be improved. (2.39)

Complaints

- 5.38** The prison should explore the limited confidence in the complaints process and take action to address it. (2.47)

Legal rights

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

Health services

- 5.40** The environment in holding area of the healthcare department should be improved. (2.63)
- 5.41** A dedicated discipline officer should be deployed to assist health care functions and improve overall patient care. (2.64, repeated recommendation 2.60)

- 5.42** Day-to-day working between all health services teams should be collaborative, to achieve good care for prisoners. (2.65)
- 5.43** The number of immunisation clinics and sexual health clinics should be increased to reduce the waiting time for appointments. (2.71)
- 5.44** Medicines should be prescribed, dispensed, stored and administered in line with professional standards, and administration of medication on the wings should take place in conditions of confidentiality and security. (2.78)
- 5.45** The medicines and therapeutics committee should formally review all procedures and policies to ensure that they cover all aspects of the pharmacy service, and all staff should read and sign the agreed procedures. (2.79)
- 5.46** Patient group directions should be developed to enable nurses to supply more potent medicines. (2.80)
- 5.47** The dental suite should be fully compliant with infection control guidance, which includes access to functioning decontamination equipment. (2.86)
- 5.48** Record keeping should reflect the multidisciplinary team decision making and care planning should be reviewed at the meetings. (2.92)
- 5.49** Mental health awareness training should be provided for all discipline staff, including information about learning disabilities and personality disorders. (2.93)

Catering

- 5.50** Prisoners should be able to dine in association. (2.99, repeated recommendation 2.122)
- 5.51** Serveries should be clean and maintained. (2.100)
- 5.52** Halal food should be separated from non-halal food on serveries. (2.101)
- 5.53** Meals should be provided at appropriate times. Lunch and dinner should not be served before noon and 5pm, respectively, and breakfast should be served on the day of consumption. (2.102)

Purchases

- 5.54** Prisoners should be routinely consulted about the shop. (2.108)

Time out of cell

- 5.55** There should be a clear strategy to significantly increase the amount of time out of cell so that first, all prisoners achieve the prison's own target of eight hours a day and then, as the amount of purposeful activity increases and association becomes more reliable, move to achieving an average of 10 hours a day. (3.5, repeated recommendation 2.6)
- 5.56** Unemployed prisoners should be allowed out of their cell each day for a shower and a telephone call. (3.6, repeated recommendation 2.86)
- 5.57** Exercise should be timed to maximise prisoner uptake. (3.7, repeated recommendation 2.87)

- 5.58** Staff should interact with prisoners during exercise and association sessions. (3.8, repeated recommendation 2.89)

Learning and skills and work activities

- 5.59** The prison should set clear targets and expectations for the quality of education and learning and skills, monitor these through the quality improvement group and take appropriate actions to meet them. (3.15)
- 5.60** The prison should implement effective quality assurance arrangements, to improve the quality of teaching and learning, particularly in the education department. (3.16)
- 5.61** Teachers and trainers should be provided with effective support and professional development. (3.17)
- 5.62** There should be a review of the pay system, to provide an incentive for prisoners to gain the skills that will improve their employment prospects and improve their English and mathematics. (3.18)
- 5.63** Prisoners should be allocated to activities that take appropriate account of their educational needs, are equitable and make best use of their time. (3.22)
- 5.64** The prison should rapidly improve the quality of teaching and learning in all lessons, ensuring that prisoners are sufficiently engaged. (3.28)
- 5.65** The range and use of resources in the education department should be improved to fully support the courses available. (3.29)
- 5.66** Success rates of prisoners on all courses should be improved. (3.34)
- 5.67** The prison should ensure that prisoners develop and understand the employability skills and attitude required by employers. (3.35)
- 5.68** The prison should ensure that lessons start on time, and attendance at lessons should be improved by minimising disruptions and cancellations. (3.36)
- 5.69** The prison should ensure that access to the library from the residential wings is promoted well and that all those wishing to visit are given the opportunity to do so. (3.41)

Physical education and healthy living

- 5.70** The prison should collect and use data to evaluate the impact of the PE facilities, assess whether the needs of all groups of prisoners are being met and ensure fair and equitable use. (3.48)

Strategic management of resettlement

- 5.71** There should be greater clarity and lack of duplication in the work of departments responsible for delivering the prison's resettlement function. (4.5)
- 5.72** The prison should develop and implement a clear offender management structure, to offer a consistent and equitable service to all prisoners. (4.6)

Offender management and planning

- 5.73** Initial assessments of need should be undertaken consistently and without duplication. (4.17)
- 5.74** There should be a clear strategy to ensure completion of missing and out-of-date offender assessment system (OASys) documents. (4.18, repeated recommendation 2.8)
- 5.75** All offender supervisors should undergo quality assurance and casework supervision, to ensure a consistent level of service provision. (4.19)
- 5.76** The prison should clarify the role of the resettlement unit and ensure that it meets the resettlement needs of the prisoners on it. (4.20)
- 5.77** The role of personal officers in their work with the offender management unit should be clarified and applied consistently. (4.21)

Reintegration planning

- 5.78** Pre-release resettlement assessments should be coordinated effectively, to ensure that all pre-release needs are assessed and met and that work is not replicated. Community follow-on referrals and further identified needs should be clearly communicated to offender managers before release. (4.29)
- 5.79** The National Careers Service (NCS) should develop the use of the virtual campus to help prisoners produce high-quality CVs and prepare them better for release. (4.34)
- 5.80** Specialist debt and finance support and help should be available to all prisoners. (4.40, repeated recommendation 2.144)
- 5.81** There should be sufficient staffing available on the visits booking line to ensure that visitors can get through during advertised times. (4.44)
- 5.82** Closed visits facilities should be screened from the main visits room and offer privacy. (4.45, repeated recommendation 2.156)

Housekeeping points

Courts, escorts and transfers [To Prison Escort and Custody Services]

- 5.83** Escort vans should be kept clean. (1.4)

Self-harm and suicide

- 5.84** Listeners should play a more prominent role in safer custody meetings. (1.33)
- 5.85** The use of anti-ligature clothing should be analysed at the safer custody meeting. (1.34)

Substance misuse

- 5.86** The establishment should repeat its substance use needs analysis annually to ensure that service provision matches the current need of the prisoner population. (1.79)

Residential units

- 5.87** All double cells should have lockable cabinets so that prisoners' personal possessions can be stored safely. (2.16)

Equality and diversity

- 5.88** Staff should be made aware of personal emergency evacuation plans and their contents. (2.40)

Complaints

- 5.89** There should be a formal quality assurance process for complaints. (2.48)

Health services

- 5.90** The governor should ensure that sufficient officers are up to date with their first-aid and defibrillator training. (2.66)
- 5.91** All health care complaints should be made in confidence, directly to health services staff. (2.67)
- 5.92** Prisoners should be made aware of their health care appointments unless risks indicate otherwise. (2.72)
- 5.93** All medicines, including those prescribed by the dentist, should be stored appropriately in medicine cupboards, and administered promptly. (2.81)
- 5.94** Only authorised staff should have access to the key to the controlled drugs cabinet and the controlled drugs stock register should comply with current regulations. (2.82)
- 5.95** Full and complete records of medicines administration should be made. (2.83)
- 5.96** Maximum and minimum temperatures for the drug refrigerators in the pharmacy room should be recorded daily, to ensure that heat-sensitive items are stored within the 2–8°C range. Corrective action should be taken where necessary and should be monitored by nursing staff. (2.84)
- 5.97** There should be a documented process for out-of-hours access to emergency dental services. (2.87)
- 5.98** Prisoners should have access to a range of items to promote dental hygiene. (2.88)

Catering

- 5.99** Consultation arrangements should be improved. (2.103)

Purchases

- 5.100** Prisoners should not be charged for ordering from catalogues. (2.109)

Learning and skills and work activities

- 5.101** Poor behaviour should be challenged and teachers should be given the confidence and skills to do so. (3.30)
- 5.102** Prisoners working in the recycling workshop should have access to an appropriate qualification. (3.37)

Physical education and healthy living

- 5.103** A broader range of PE qualifications should be available. (3.49)

Strategic management of resettlement

- 5.104** Offender supervisors should be offered the same level of management support, irrespective of their respective backgrounds. (4.7)

Offender management and planning

- 5.105** Offender supervisors assessing prisoners during induction should ensure that this is recorded on induction files. (4.22)

Reintegration planning

- 5.106** All prisoners leaving the establishment should have a clear contact point in their local NCS office. (4.35)

Example of good practice

- 5.107** The DART team escorted prisoners to Alcoholics Anonymous meetings, facilitating their continued engagement with this agency. (1.80)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector
Kieron Taylor	Team leader
Keith McInnis	Inspector
Kevin Parkinson	Inspector
Kellie Reeve	Inspector
Andy Lund	Inspector
Helen Ranns	Researcher
Alissa Redmond	Researcher
Alice Reid	Researcher

Specialist inspectors

Paul Roberts	Substance misuse inspector
Helen Carter	Health services inspector
Simon Denton	Pharmacist
Phil Romain	Ofsted inspector
Charles Clark	Ofsted inspector
Ian Smith	Ofsted inspector
Ian Simpkins	Offender management inspector
Paddy Doyle	Offender management inspector
Iolo Madoc-Jones	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last short follow-up inspection in 2011, the prison was making insufficient progress against our recommendations for this healthy prison test.

Recommendations

Reception should be staffed to receive, process and locate new arrivals on to the induction unit without delay. (2.9)

Achieved

Conditions in all reception holding rooms should be improved. (2.10)

Achieved

Initial risk assessments and safety screening should be carried out with sensitivity and privately in appropriate surroundings. (2.11)

Achieved

Prisoners' property should be processed on the day of their arrival. (2.12)

Partially achieved

All new arrivals should receive all elements of the induction programme and attend all scheduled sessions. (2.13)

Partially achieved

Prisoners on induction should not be locked in their cells during the core day. (2.14)

Partially achieved (recommendation repeated, 1.16)

The safer custody team should provide targeted training to improve the quality of anti-bullying monitoring. (2.28)

Not achieved

There should be annual anti-bullying surveys, which include questions on where and when prisoners feel at risk, and an analysis of the findings should be presented to the safer custody meeting. (2.29)

Achieved

Staff should routinely check on the welfare of prisoners who request the Samaritans telephone (2.37)

Achieved

Some cells should be upgraded to meet the specification of a safer or reduced risk cell. (2.38)

Not achieved (recommendation repeated, 1.32)

The mandatory drug testing suite should be refurbished, and an additional holding room provided. (2.43)

Achieved

The almost complete ban on property being handed or posted in should be relaxed. (2.105)

Achieved

The role and purpose of H wing should be clearly stated in the incentives and earned privileges (IEP) policy. (2.114)

No longer relevant

Prisoners on the enhanced level should have consistent access to the full range of privileges stated in the policy. (2.115)

Not achieved

Managers should check the monthly behaviour report system to ensure that points are deducted fairly and that prisoners are not penalised more than once for a single incident or behaviour. (2.117)

No longer relevant

Behaviour improvement targets for prisoners on the basic level should address and challenge the underlying causes of their behaviour. (2.116)

Not achieved.

Daily entries in basic monitoring logs should evidence engagement with prisoners and record progress against behaviour improvement targets. (2.117)

Not achieved

All charges should be fully investigated and this should be evidenced in adjudication records. (2.106)

Partially achieved

Senior managers should thoroughly investigate the increase in use of force figures, identify the causes, and implement procedures to reduce incidents. (2.107)

Not achieved

Details of de-escalation techniques where used should be recorded in use of force documentation. (2.108)

Achieved

Planned use of force incidents should be video recorded. (2.109)

Not achieved

All staff in the segregation unit should receive mental health awareness training. (2.110)

Achieved

Prisoners in the segregation unit should have daily access to showers. (2.111)

Not achieved

Good order or discipline (GOOD) reviews should be more detailed and provide a full summary of the main points discussed and agreed. (2.112)

Not achieved

Staff entries in segregation unit history files should provide evidence of positive engagement with prisoners. (2.113)

Not achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last short follow-up inspection in 2011, the prison was making insufficient progress against our recommendations for this healthy prison test.

Recommendations

Cells designed to hold one prisoner should not be used to hold two. (2.15)

Not achieved (recommendation repeated, 2.11)

All in-cell toilets should be properly screened. (2.17)

Not achieved

The published offensive displays policy should be consistently enforced. (2.18)

Achieved

All prisoners should have the opportunity to wear their own clothes. (2.19)

Achieved

All prisoners should be able to access their stored property within one week of making an application. (2.20)

Achieved

Communal showers should be fitted with privacy screens, maintained in good condition and be well ventilated. (2.21)

Partially achieved

Prisoners should be able to shower daily and immediately after work and before visits. (2.22)

Not achieved

Staff should encourage all prisoners to keep their cells clean and should record such encouragement in wing files. (2.23)

Not achieved

Staff should address prisoners by their preferred name or title. (2.24)

Achieved

There should be management checks to assess the quality of staff record keeping and encourage a more meaningful staff engagement with prisoners. (2.25)

Partially achieved (recommendation repeated, 2.24)

Personal officers should evidence in weekly wing file entries that the information about prisoners obtained during the introductory interview forms the basis of future interactions and engagement. (2.26)

Not achieved (recommendation repeated, 2.23)

There should be a strategy to address the perceptions of unfair treatment among black and minority ethnic prisoners. (2.44)

Not achieved

All staff, particularly in prisoner contact roles, should receive up-to-date diversity training. (2.47)

Not achieved

There should be a distinct foreign national prisoners' policy with clear objectives and targets. (2.49)

Achieved

There should be a specific foreign nationals committee, chaired by a senior manager. (2.50)

Not achieved

The establishment should invite an independent immigration advisory service to visit the prison to provide information and advocacy for foreign national prisoners. (2.52)

Not achieved

Legal visits should be available on afternoons when social visits do not take place. (2.41)

Not achieved.

All health care accommodation, including the meeting room, should be for the exclusive use of health care staff. (2.54)

Achieved

There should be regular professional cleaning of the health care department so that standards of cleanliness meet NHS requirements for infection control. (2.55)

Partially achieved

Clinical supervision should be introduced and protected time given to staff to allow their participation. (2.59)

Partially achieved

A dedicated discipline officer should be deployed to assist health care functions and improve overall patient care. (2.60)

Partially achieved (recommendation repeated, 2.64)

There should be a health forum for prisoners to meet with senior clinical managers and discuss health services. (2.63)

Achieved

The health care reception room should be refurbished to include handwashing facilities and an alarm bell, and it should be cleaned regularly. (2.66)

Not achieved.

Triage algorithms should be used to ensure consistency of advice and treatment. (2.67)

Not achieved

The primary care trust should commission a decontamination survey and provide a washer disinfectant. (2.70)

Partially achieved

The pharmacist should make monthly visits to the prison to check the systems in operation, including professional control of the stock supplied and checks of faxed prescriptions against the originals. (2.73)

Achieved

When a dual-labelled pre-pack is dispensed against a prescription, the chart should be faxed to the pharmacy for the pharmacist to check that the prescription was appropriate and the correct item supplied. (2.74)

No longer relevant

Secondary dispensing of daily medication by nursing staff should stop immediately. Daily medication should be dispensed by the pharmacy supplier in appropriately labelled containers for staff to administer directly to patients. (2.75)

Not achieved

The administration of medication on the wings should take place in conditions of confidentiality and security. (2.76)

Not achieved

The medicines and therapeutics committee should formally review all procedures and policies to ensure they cover all aspects of the pharmacy service, and all staff should read and sign the agreed procedures. (2.77)

Partially achieved

The medicines and therapeutics committee should revise the special sick policy to enable the supply of all appropriate medicines. (2.78)

Partially achieved

Paracetamol soluble tablets for supply under the special sick policy should be stored appropriately in medicine cupboards. (2.79)

Achieved

Patient group directions should be developed to enable nurses to supply more potent medicines. (2.80)

Not achieved.

There should be a programme of regular mental health awareness training for all prison staff. (2.84)

Partially achieved

Generic counselling services should be introduced. (2.85)

Achieved

Breakfast should be served on the morning it is eaten. (2.121)

Not achieved

Prisoners should be able to dine in association. (2.122)

Not achieved (recommendation repeated, 2.99)

Purposeful activity

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

At the last short follow-up inspection in 2011, the prison was making insufficient progress against our recommendations for this healthy prison test.

Main recommendations

There should be a clear strategy to significantly increase the amount of time out of cell so that first, all prisoners achieve the prison's own target of eight hours a day and then, as the amount of purposeful activity increases and association becomes more reliable, move to achieving an average of 10 hours a day. (2.6)

Not achieved (recommendation repeated, 3.5)

The quantity, range and quality of work, education and vocational training should be increased. (2.3)

Partly achieved

Recommendations

Unemployed prisoners should be allowed out of their cell each day for a shower and a telephone call. (2.86)

Partially achieved (recommendation repeated, 3.6)

Exercise should be timed to maximise prisoner uptake. (2.87)

Partially achieved (recommendation repeated, 3.7)

Exercise areas should be clean and contain benches and landscaping. (2.88)

Achieved

Staff should interact with prisoners during exercise and association sessions. (2.89)

Partially achieved (recommendation repeated, 3.8)

There should be sufficient seating in association areas for prisoners not participating in games. (2.90)

Achieved

The range of education and vocational training opportunities above level I should be improved. (2.94)

Achieved

There should be appropriate programmes of literacy, numeracy and ESOL support and development to meet the needs of prisoners in vocational training or work. (2.96)

Not achieved

There should be sufficient appropriate education and training staff, and the amount of education, training and work that is cancelled, closed or operating below capacity should be reduced significantly. (2.99)

Not achieved

The personal and employability skills that prisoners acquire should be recognised and recorded through accreditation or other means. (2.100)

Not achieved

The proportion of the population who are unemployed should be significantly reduced, and opportunities for useful work increased. (2.102)

Not achieved

Resettlement

Prisoners are prepared for their release back into the community and effectively helped to reduce the likelihood of reoffending.

At the last short follow-up inspection in 2011, the prison was making sufficient progress against our recommendations for this healthy prison test.

Main recommendation

There should be a clear strategy to ensure completion of missing and out-of-date offender assessment system (OASys) documents. (2.8)

Partially achieved (recommendation repeated, 4.18)

Recommendations

Objectives identified in the reducing reoffending action plan should relate directly to the strategy document and be reviewed through the resettlement committee. (2.126)

Achieved

Officer offender supervisors should be dedicated to work in the offender management unit. (2.128)

Partially achieved

The level of offender supervisor contact with prisoners should be clearly defined and monitored, and the level and quality of their input should be subject to quality assurance. (2.129)

Partially achieved

The role of personal officers in offender management should be clarified and implemented. (2.130)

Partially achieved

The pre-release assessment interview should be linked to the work of offender supervisors and offender managers. (2.132)

Achieved

The basic offender resettlement questionnaire should ensure information collated is not replicated elsewhere. (2.134)

Not achieved

Specialist debt and finance support and help should be available to all prisoners. (2.144)

Not achieved (recommendation repeated, 4.40)

The alcohol strategy should be developed and focus on service provision rather than testing. (2.146)

Achieved

There should be a peer support scheme to offer ongoing support to prisoners who complete the P-ASRO programme. (2.150)

Achieved

All prisoners should have access to voluntary drug testing, and testing capacity should be increased. (2.151)

No longer relevant

Visitors should be able to book their next visit while they are at the establishment. (2.152)

Partially achieved

Visits should start at the advertised time. (2.153)

Not achieved (recommendation repeated, main recommendation S48)

Closed visits should be authorised only when there is significant risk justified by security intelligence. (2.154)

Not achieved (recommendation repeated, 1.45)

Prisoners should not have to wear a bib in the visits room. (2.155)

Partially achieved

Closed visits facilities should be screened from the main visits room and offer privacy. (2.156)

Not achieved (recommendation repeated, 4.45)

The fixed seating in the visits room should be replaced. (2.157)

Achieved

The reducing reoffending policy and action plan should include clear targets for the delivery of objectives relevant to the children and families pathway. (2.158)

Partially achieved

Appendix III: Prison population profile

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

Status	18–20 year olds	21 and over	%
Sentenced	288	112	97
Recall	9	3	3
Convicted un sentenced	0	0	
Remand	0	0	
Civil prisoners	0	0	
Detainees	0	0	
Total	297	115	100

Sentence	18–20 year olds	21 and over	%
Unsentenced	0	0	
Less than 6 months	0	0	
6 months to less than 12 months	0	0	
12 months to less than 2 years	7	2	2.2
2 years to less than 4 years	70	15	20.7
4 years to less than 10 years	158	59	52.6
10 years and over (not life)	20	7	6.5
ISPP	25	16	10
Life	17	16	8
Total	297	115	100

Age	Number of prisoners	%
Please state minimum age	18	-
Under 21 years	297	72.1
21 years to 29 years	115	27.9
Total	412	100

Nationality	18–20 year olds	21 and over	%
British	262	101	88.1
Foreign nationals	35	14	11.9
Total	297	115	100

Security category	18–20 year olds	21 and over	%
Cat B	0	4	1
Cat C	1	11	3
Cat D	0	0	
Other	296	100	96
Total	297	115	100

Ethnicity	18–20 year olds	21 and over	%
<i>White</i>			
British	129	53	44.2
Irish	1		0.2
Other white	7	5	2.9
<i>Mixed</i>			
White and Black Caribbean	15	3	4.4
White and Black African	4		1
White and Asian	1	1	0.5

Other mixed	6	2	1.9
<i>Asian or Asian British</i>			
Indian	4	1	1.2
Pakistani	2	6	1.9
Bangladeshi	7	5	2.9
Other Asian	8	5	3.2
<i>Black or black British</i>			
Caribbean	51	13	15.5
African	44	13	18.3
Other black	14	4	4.4
<i>Chinese or other ethnic group</i>			
Chinese	0	0	
Arab	0	0	
Other ethnic group	3	4	1.7
Total	296	115	100

Religion	18–20 year olds	21 and over	%
Baptist	1	0	0.2
Church of England	41	10	12.4
Roman Catholic	47	13	14.6
Other Christian denominations	48	23	17.2
Muslim	80	33	27.5
Sikh	1	1	0.5
Hindu	1	0	0.2
Buddhist	1	2	0.7
Jewish	0	0	
Other	1	0	0.2
No religion	76	33	26.5
Total	297	115	100

Other demographics	18–20 year olds	21 and over	%
Gypsy/Romany/ traveller	1	0	100
Total	1	0	100

Sentenced prisoners only

Length of stay	18–20 year olds		21 and over	
	Number	%	Number	%
Less than 1 month	31	7.5	0	
1 month to 3 months	51	12.4	7	1.7
3 months to 6 months	52	12.6	7	1.7
6 months to 1 year	93	22.6	22	5.3
1 year to 2 years	63	15.3	43	10.4
2 years to 4 years	7	1.7	33	8
4 years or more	0		3	0.7
Total	297	72.1	115	27.9

Sentenced prisoners only

	18–20 year olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	
Public protection cases	297	115	100
Total	297	115	100

Main offence	18–20 year olds	21 and over	%
Violence against the person	99	37	33
Sexual offences	76	38	27.6
Burglary	22	2	6
Robbery	69	26	23
Theft and handling	2	0	0.4
Fraud and forgery	0	0	
Drugs offences	21	8	7
Other offences	8	4	3
Civil offences	0	0	
Offence not recorded / holding warrant	0	0	
Total	297	115	100

Appendix IV: Summary of prisoner questionnaires and interviews

Young adult survey methodology

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

Sampling

The young adult survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment.⁸ Respondents were then randomly selected from a P-Nomis young adult population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

Distributing and collecting questionnaires

Every attempt was made to distribute the questionnaires to respondents individually. This gave researchers an opportunity to explain the purpose of the survey and to answer respondents' questions. We also stressed the voluntary nature of the survey and provided assurances about confidentiality and the independence of the Inspectorate. This information is also provided in writing on the front cover of the questionnaire.

Our questionnaire is available in a number of different languages and via a telephone translation service for respondents who do not read English. Respondents with literacy difficulties were offered the option of an interview.

Respondents were not asked to put their names on their questionnaire. In order to ensure confidentiality, respondents were asked to seal their completed questionnaire in the envelope provided and either hand it back to a member of the research team at a specified time or leave it in their room for collection.

Refusals were noted and no attempts were made to replace them.

Survey response

At the time of the survey on 2 April 2013 the prisoner population at HMYOI Aylesbury was 403. Using the method described above, questionnaires were distributed to a sample of 178 young adults.

We received a total of 161 completed questionnaires, a response rate of 91%. This included two questionnaires completed via interview. Nine respondents refused to complete a questionnaire, four questionnaires were not returned and four were returned blank.

A wing = 26 respondents

B wing = 25 respondents

C wing = 22 respondents

D wing = 21 respondents

E wing = 25 respondents

⁸ 95% confidence interval with a sampling error of 3%. The formula assumes an 80% response rate (70% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

F wing = 19 respondents
G wing = 18 respondents
Segregation unit = 5 respondents

Presentation of survey results and analyses

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

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant⁹ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant, there is no shading. Orange shading has been used to show a statistically significant difference in young adults' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMYOI Aylesbury in 2013 compared with responses from young adults surveyed in all other young offender institutions. This comparator is based on all responses from young adult surveys carried out in 12 young offender institutions since April 2009.
- The current survey responses from HMYOI Aylesbury in 2013 compared with the responses of young adults surveyed at HMYOI Aylesbury in 2009.
- A comparison within the 2013 survey between the responses of white young adults and those from a black and minority ethnic group.
- A comparison within the 2013 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2013 survey between the responses of Muslim young adults and non-Muslim young adults.
- A comparison within the 2013 survey between the responses of young adults who consider themselves to have a disability and those who do not consider themselves to have a disability.

⁹ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

Survey summary

Section I: About you

QI.3	Are you sentenced?		
	Yes		151 (94%)
	Yes - on recall		9 (6%)
	No - awaiting trial		0 (0%)
	No - awaiting sentence		0 (0%)
	No - awaiting deportation		0 (0%)
QI.4	How long is your sentence?		
	Not sentenced		0 (0%)
	Less than 6 months		1 (1%)
	6 months to less than 1 year		0 (0%)
	1 year to less than 2 years		7 (4%)
	2 years to less than 4 years		33 (21%)
	4 years to less than 10 years		80 (51%)
	10 years or more		12 (8%)
	IPP (indeterminate sentence for public protection)		11 (7%)
	Life		14 (9%)
QI.5	Are you a foreign national? (i.e. do not have UK citizenship)		
	Yes		17 (11%)
	No		142 (89%)
QI.6	Do you understand spoken English?		
	Yes		160 (100%)
	No		0 (0%)
QI.7	Do you understand written English?		
	Yes		158 (99%)
	No		2 (1%)
QI.8	What is your ethnic origin?		
	White - British (English/ Welsh/ Scottish/ Northern Irish)	70 (44%)	Asian or Asian British - Chinese 0 (0%)
	White - Irish	2 (1%)	Asian or Asian British - other 5 (3%)
	White - other	4 (3%)	Mixed race - white and black Caribbean 7 (4%)
	Black or black British - Caribbean	21 (13%)	Mixed race - white and black African 3 (2%)
	Black or black British - African	23 (14%)	Mixed race - white and Asian 1 (1%)
	Black or black British - other	5 (3%)	Mixed race - other 2 (1%)
	Asian or Asian British - Indian	1 (1%)	Arab 2 (1%)
	Asian or Asian British - Pakistani	6 (4%)	Other ethnic group 3 (2%)
	Asian or Asian British - Bangladeshi	4 (3%)	
QI.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes		7 (5%)
	No		147 (95%)
QI.10	What is your religion?		
	None	41 (26%)	Hindu 1 (1%)

<i>Church of England</i>	29 (18%)	<i>Jewish</i>	1 (1%)
<i>Catholic</i>	22 (14%)	<i>Muslim</i>	46 (29%)
<i>Protestant</i>	1 (1%)	<i>Sikh</i>	1 (1%)
<i>Other Christian denomination</i>	10 (6%)	<i>Other</i>	5 (3%)
<i>Buddhist</i>	2 (1%)		

Q1.11	How would you describe your sexual orientation?	
	<i>Heterosexual/ Straight</i>	151 (95%)
	<i>Homosexual/Gay</i>	1 (1%)
	<i>Bisexual</i>	7 (4%)
Q1.12	Do you consider yourself to have a disability? (i.e. do you need help with any long-term physical, mental or learning needs)	
	<i>Yes</i>	24 (15%)
	<i>No</i>	135 (85%)
Q1.13	Are you a veteran (ex-armed services)?	
	<i>Yes</i>	1 (1%)
	<i>No</i>	157 (99%)
Q1.14	Is this your first time in prison?	
	<i>Yes</i>	92 (57%)
	<i>No</i>	68 (43%)
Q1.15	Do you have children under the age of 18?	
	<i>Yes</i>	30 (19%)
	<i>No</i>	130 (81%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?	
	<i>Less than 2 hours</i>	51 (32%)
	<i>2 hours or longer</i>	87 (54%)
	<i>Don't remember</i>	22 (14%)
Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	51 (32%)
	<i>Yes</i>	68 (43%)
	<i>No</i>	30 (19%)
	<i>Don't remember</i>	8 (5%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	51 (32%)
	<i>Yes</i>	15 (9%)
	<i>No</i>	87 (55%)
	<i>Don't remember</i>	5 (3%)
Q2.4	On your most recent journey here, was the van clean?	
	<i>Yes</i>	81 (51%)
	<i>No</i>	56 (35%)
	<i>Don't remember</i>	23 (14%)
Q2.5	On your most recent journey here, did you feel safe?	
	<i>Yes</i>	138 (88%)
	<i>No</i>	14 (9%)
	<i>Don't remember</i>	5 (3%)

Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	24 (15%)
	<i>Well</i>	77 (48%)
	<i>Neither</i>	46 (29%)
	<i>Badly</i>	5 (3%)
	<i>Very badly</i>	4 (3%)
	<i>Don't remember</i>	4 (3%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (please tick all that apply)	
	<i>Yes, someone told me</i>	88 (55%)
	<i>Yes, I received written information</i>	31 (19%)
	<i>No, I was not told anything</i>	43 (27%)
	<i>Don't remember</i>	2 (1%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	<i>Yes</i>	143 (89%)
	<i>No</i>	14 (9%)
	<i>Don't remember</i>	3 (2%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?			
	<i>Less than 2 hours</i>	123 (77%)		
	<i>2 hours or longer</i>	19 (12%)		
	<i>Don't remember</i>	18 (11%)		
Q3.2	When you were searched, was this carried out in a respectful way?			
	<i>Yes</i>	130 (83%)		
	<i>No</i>	16 (10%)		
	<i>Don't remember</i>	11 (7%)		
Q3.3	Overall, how were you treated in reception?			
	<i>Very well</i>	27 (17%)		
	<i>Well</i>	87 (54%)		
	<i>Neither</i>	36 (23%)		
	<i>Badly</i>	5 (3%)		
	<i>Very badly</i>	3 (2%)		
	<i>Don't remember</i>	2 (1%)		
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply)			
	<i>Loss of property</i>	31 (21%)	<i>Physical health</i>	6 (4%)
	<i>Housing problems</i>	12 (8%)	<i>Mental health</i>	15 (10%)
	<i>Contacting employers</i>	0 (0%)	<i>Needing protection from other prisoners</i>	19 (13%)
	<i>Contacting family</i>	36 (24%)	<i>Getting phone numbers</i>	38 (25%)
	<i>Childcare</i>	1 (1%)	<i>Other</i>	6 (4%)
	<i>Money worries</i>	17 (11%)	<i>Did not have any problems</i>	53 (35%)
	<i>Feeling depressed or suicidal</i>	18 (12%)		
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?			
	<i>Yes</i>	35 (22%)		
	<i>No</i>	68 (44%)		

	<i>Did not have any problems</i>	53 (34%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply)	
	<i>Tobacco</i>	122 (76%)
	<i>A shower</i>	72 (45%)
	<i>A free telephone call</i>	52 (33%)
	<i>Something to eat</i>	78 (49%)
	<i>PIN phone credit</i>	84 (53%)
	<i>Toiletries/ basic items</i>	88 (55%)
	<i>Did not receive anything</i>	12 (8%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply)	
	<i>Chaplain</i>	125 (79%)
	<i>Someone from health services</i>	107 (67%)
	<i>A Listener/Samaritans</i>	62 (39%)
	<i>Prison shop/ canteen</i>	52 (33%)
	<i>Did not have access to any of these</i>	17 (11%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply)	
	<i>What was going to happen to you</i>	77 (50%)
	<i>What support was available for people feeling depressed or suicidal</i>	71 (46%)
	<i>How to make routine requests (applications)</i>	81 (52%)
	<i>Your entitlement to visits</i>	73 (47%)
	<i>Health services</i>	95 (61%)
	<i>Chaplaincy</i>	102 (66%)
	<i>Not offered any information</i>	26 (17%)
Q3.9	Did you feel safe on your first night here?	
	<i>Yes</i>	113 (71%)
	<i>No</i>	32 (20%)
	<i>Don't remember</i>	15 (9%)
Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	11 (7%)
	<i>Within the first week</i>	58 (36%)
	<i>More than a week</i>	66 (41%)
	<i>Don't remember</i>	25 (16%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	11 (7%)
	<i>Yes</i>	63 (40%)
	<i>No</i>	56 (35%)
	<i>Don't remember</i>	28 (18%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	29 (18%)
	<i>Within the first week</i>	16 (10%)
	<i>More than a week</i>	76 (48%)
	<i>Don't remember</i>	36 (23%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		Very easy	Easy	Neither	Difficult	Very difficult N/A
	Communicate with your solicitor or legal representative?	17 (11%)	34 (22%)	21 (14%)	31 (20%)	25 (16%) 27 (17%)
	Attend legal visits?	16 (11%)	39 (26%)	34 (23%)	11 (7%)	6 (4%) 43 (29%)
	Get bail information?	4 (3%)	11 (8%)	23 (16%)	15 (10%)	15 (10%) 77 (53%)
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					36 (23%)
	Yes					68 (43%)
	No					53 (34%)
Q4.3	Can you get legal books in the library?					
	Yes					61 (39%)
	No					13 (8%)
	Don't know					84 (53%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		Yes	No	Don't know		
	Do you normally have enough clean, suitable clothes for the week?	103 (66%)	52 (33%)	2 (1%)		
	Are you normally able to have a shower every day?	64 (41%)	94 (59%)	0 (0%)		
	Do you normally receive clean sheets every week?	75 (47%)	77 (48%)	7 (4%)		
	Do you normally get cell cleaning materials every week?	62 (39%)	96 (60%)	1 (1%)		
	Is your cell call bell normally answered within five minutes?	54 (34%)	93 (58%)	12 (8%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	82 (52%)	74 (47%)	1 (1%)		
	If you need to, can you normally get your stored property?	55 (35%)	72 (45%)	32 (20%)		
Q4.5	What is the food like here?					
	Very good					4 (3%)
	Good					54 (34%)
	Neither					56 (35%)
	Bad					25 (16%)
	Very bad					20 (13%)
Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?					
	Have not bought anything yet/ don't know					0 (0%)
	Yes					74 (47%)
	No					83 (53%)
Q4.7	Can you speak to a Listener at any time, if you want to?					
	Yes					69 (43%)
	No					14 (9%)
	Don't know					76 (48%)
Q4.8	Are your religious beliefs respected?					
	Yes					102 (65%)
	No					19 (12%)
	Don't know/ N/A					37 (23%)
Q4.9	Are you able to speak to a chaplain of your faith in private if you want to?					
	Yes					114 (72%)
	No					11 (7%)

Don't know/ N/A 33 (21%)

Q4.10 How easy or difficult is it for you to attend religious services?

I don't want to attend 27 (17%)
 Very easy 57 (36%)
 Easy 41 (26%)
 Neither 11 (7%)
 Difficult 4 (3%)
 Very difficult 9 (6%)
 Don't know 10 (6%)

Section 5: Applications and complaints

Q5.1 Is it easy to make an application?

Yes 133 (84%)
 No 21 (13%)
 Don't know 4 (3%)

Q5.2 Please answer the following questions about applications (If you have not made an application please tick the 'not made one' option)

	Not made one	Yes	No
Are applications dealt with fairly?	4 (3%)	103 (68%)	45 (30%)
Are applications dealt with quickly (within seven days)?	4 (3%)	59 (40%)	84 (57%)

Q5.3 Is it easy to make a complaint?

Yes 82 (53%)
 No 37 (24%)
 Don't know 37 (24%)

Q5.4 Please answer the following questions about complaints (If you have not made a complaint please tick the 'not made one' option)

	Not made one	Yes	No
Are complaints dealt with fairly?	58 (38%)	24 (16%)	71 (46%)
Are complaints dealt with quickly (within seven days)?	58 (38%)	24 (16%)	69 (46%)

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

Yes 34 (22%)
 No 121 (78%)

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

Don't know who they are 42 (27%)
 Very easy 10 (6%)
 Easy 33 (21%)
 Neither 39 (25%)
 Difficult 22 (14%)
 Very difficult 9 (6%)

Section 6: Incentives and earned privileges scheme

Q6.1 Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels)

Don't know what the IEP scheme is 4 (3%)
 Yes 77 (48%)
 No 69 (43%)

	<i>Don't know</i>	9 (6%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels)	
	<i>Don't know what the IEP scheme is</i>	4 (3%)
	Yes	75 (48%)
	No	66 (42%)
	<i>Don't know</i>	11 (7%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	24 (15%)
	No	135 (85%)
Q6.4	If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?	
	<i>I have not been to segregation in the last 6 months</i>	102 (65%)
	<i>Very well</i>	11 (7%)
	<i>Well</i>	12 (8%)
	<i>Neither</i>	9 (6%)
	<i>Badly</i>	13 (8%)
	<i>Very badly</i>	9 (6%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	109 (69%)
	No	49 (31%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	99 (63%)
	No	58 (37%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	44 (28%)
	No	114 (72%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	8 (5%)
	<i>Never</i>	40 (25%)
	<i>Rarely</i>	43 (27%)
	<i>Some of the time</i>	38 (24%)
	<i>Most of the time</i>	20 (13%)
	<i>All of the time</i>	8 (5%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	39 (25%)
	<i>In the first week</i>	42 (26%)
	<i>More than a week</i>	51 (32%)
	<i>Don't remember</i>	27 (17%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	39 (25%)
	<i>Very helpful</i>	31 (20%)
	<i>Helpful</i>	32 (20%)
	<i>Neither</i>	26 (17%)

Not very helpful	12 (8%)
Not at all helpful	17 (11%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	Yes	73 (46%)
	No	85 (54%)
Q8.2	Do you feel unsafe now?	
	Yes	27 (18%)
	No	127 (82%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply)	
	Never felt unsafe	85 (56%)
	Everywhere	16 (11%)
	Segregation unit	9 (6%)
	Association areas	24 (16%)
	Reception area	2 (1%)
	At the gym	24 (16%)
	In an exercise yard	20 (13%)
	At work	16 (11%)
	During movement	29 (19%)
	At education	26 (17%)
	At meal times	10 (7%)
	At health services	22 (14%)
	Visits area	21 (14%)
	In wing showers	19 (13%)
	In gym showers	15 (10%)
	In corridors/stairwells	16 (11%)
	On your landing/wing	17 (11%)
	In your cell	10 (7%)
	At religious services	10 (7%)
Q8.4	Have you been victimised by other prisoners here?	
	Yes	44 (28%)
	No	114 (72%)
Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply)	
	Insulting remarks (about you or your family or friends)	27 (17%)
	Physical abuse (being hit, kicked or assaulted)	22 (14%)
	Sexual abuse	3 (2%)
	Feeling threatened or intimidated	27 (17%)
	Having your canteen/property taken	15 (10%)
	Medication	1 (1%)
	Debt	7 (4%)
	Drugs	6 (4%)
	Your race or ethnic origin	6 (4%)
	Your religion/religious beliefs	8 (5%)
	Your nationality	6 (4%)
	You are from a different part of the country than others	9 (6%)
	You are from a traveller community	0 (0%)
	Your sexual orientation	3 (2%)
	Your age	0 (0%)
	You have a disability	5 (3%)
	You were new here	14 (9%)
	Your offence/ crime	18 (11%)
	Gang related issues	15 (10%)
Q8.6	Have you been victimised by staff here?	
	Yes	55 (35%)
	No	102 (65%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply)	
	Insulting remarks (about you or your family or friends)	23 (15%)

<i>Physical abuse (being hit, kicked or assaulted)</i>	11 (7%)
<i>Sexual abuse</i>	2 (1%)
<i>Feeling threatened or intimidated</i>	19 (12%)
<i>Medication</i>	0 (0%)
<i>Debt</i>	0 (0%)
<i>Drugs</i>	1 (1%)
<i>Your race or ethnic origin</i>	11 (7%)
<i>Your religion/religious beliefs</i>	8 (5%)
<i>Your nationality</i>	4 (3%)
<i>You are from a different part of the country than others</i>	3 (2%)
<i>You are from a traveller community</i>	1 (1%)
<i>Your sexual orientation</i>	3 (2%)
<i>Your age</i>	3 (2%)
<i>You have a disability</i>	2 (1%)
<i>You were new here</i>	8 (5%)
<i>Your offence/ crime</i>	13 (8%)
<i>Gang related issues</i>	8 (5%)

Q8.8 If you have been victimised by prisoners or staff, did you report it?

<i>Not been victimised</i>	92 (63%)
<i>Yes</i>	17 (12%)
<i>No</i>	37 (25%)

Section 9: Health services**Q9.1 How easy or difficult is it to see the following people?:**

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
The doctor	13 (8%)	12 (8%)	49 (32%)	34 (22%)	27 (18%)	19 (12%)
The nurse	13 (9%)	32 (21%)	62 (41%)	28 (18%)	10 (7%)	7 (5%)
The dentist	22 (15%)	6 (4%)	21 (14%)	29 (19%)	28 (19%)	45 (30%)

Q9.2 What do you think of the quality of the health service from the following people?:

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
The doctor	20 (13%)	12 (8%)	43 (29%)	31 (21%)	22 (15%)	22 (15%)
The nurse	16 (11%)	30 (20%)	55 (36%)	27 (18%)	14 (9%)	10 (7%)
The dentist	54 (36%)	11 (7%)	31 (21%)	23 (15%)	13 (9%)	18 (12%)

Q9.3 What do you think of the overall quality of the health services here?

<i>Not been</i>	12 (8%)
<i>Very good</i>	15 (10%)
<i>Good</i>	55 (36%)
<i>Neither</i>	34 (22%)
<i>Bad</i>	23 (15%)
<i>Very bad</i>	15 (10%)

Q9.4 Are you currently taking medication?

<i>Yes</i>	36 (23%)
<i>No</i>	120 (77%)

Q9.5 If you are taking medication, are you allowed to keep some/ all of it in your own cell?

<i>Not taking medication</i>	120 (77%)
<i>Yes, all my meds</i>	9 (6%)
<i>Yes, some of my meds</i>	8 (5%)
<i>No</i>	18 (12%)

Q9.6	Do you have any emotional or mental health problems?	
	Yes	35 (23%)
	No	120 (77%)
Q9.7	Are you being helped/ supported by anyone in this prison? (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)	
	<i>Do not have any emotional or mental health problems</i>	120 (79%)
	Yes	23 (15%)
	No	9 (6%)
Section 10: Drugs and alcohol		
Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	36 (23%)
	No	119 (77%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	22 (14%)
	No	132 (86%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	24 (16%)
	Easy	18 (12%)
	Neither	10 (7%)
	Difficult	5 (3%)
	Very difficult	14 (9%)
	Don't know	80 (53%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	7 (5%)
	Easy	9 (6%)
	Neither	15 (10%)
	Difficult	7 (5%)
	Very difficult	21 (14%)
	Don't know	94 (61%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	11 (7%)
	No	144 (93%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	5 (3%)
	No	150 (97%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	114 (74%)
	Yes	26 (17%)
	No	14 (9%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	<i>Did not / do not have an alcohol problem</i>	132 (85%)
	Yes	21 (14%)
	No	2 (1%)

Q10.9 Was the support or help you received, whilst in this prison, helpful?

<i>Did not have a problem/ did not receive help</i>	120 (78%)
Yes	27 (18%)
No	7 (5%)

Section II: Activities**Q11.1 How easy or difficult is it to get into the following activities, in this prison?**

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
Prison job	12 (8%)	8 (5%)	27 (18%)	23 (15%)	48 (32%)	34 (22%)
Vocational or skills training	24 (16%)	7 (5%)	34 (23%)	38 (26%)	30 (20%)	15 (10%)
Education (including basic skills)	19 (13%)	10 (7%)	51 (34%)	38 (26%)	20 (14%)	10 (7%)
Offending behaviour programmes	28 (19%)	6 (4%)	33 (22%)	33 (22%)	30 (20%)	21 (14%)

Q11.2 Are you currently involved in the following? (Please tick all that apply)

<i>Not involved in any of these</i>	53 (35%)
Prison job	63 (41%)
Vocational or skills training	26 (17%)
Education (including basic skills)	39 (25%)
Offending behaviour programmes	26 (17%)

Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?

	<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
Prison job	40 (29%)	50 (36%)	31 (22%)	19 (14%)
Vocational or skills training	38 (30%)	55 (43%)	15 (12%)	20 (16%)
Education (including basic skills)	33 (25%)	56 (42%)	29 (22%)	14 (11%)
Offending behaviour programmes	38 (29%)	51 (39%)	26 (20%)	15 (12%)

Q11.4 How often do you usually go to the library?

<i>Don't want to go</i>	18 (12%)
<i>Never</i>	35 (23%)
<i>Less than once a week</i>	34 (23%)
<i>About once a week</i>	52 (34%)
<i>More than once a week</i>	12 (8%)

Q11.5 Does the library have a wide enough range of materials to meet your needs?

<i>Don't use it</i>	34 (23%)
Yes	68 (46%)
No	47 (32%)

Q11.6 How many times do you usually go to the gym each week?

<i>Don't want to go</i>	35 (23%)
0	27 (18%)
1 to 2	73 (49%)
3 to 5	14 (9%)
<i>More than 5</i>	0 (0%)

Q11.7 How many times do you usually go outside for exercise each week?

<i>Don't want to go</i>	26 (17%)
0	13 (9%)
1 to 2	42 (28%)
3 to 5	44 (29%)
<i>More than 5</i>	26 (17%)

Q11.8	How many times do you usually have association each week?	
	<i>Don't want to go</i>	2 (1%)
	<i>0</i>	1 (1%)
	<i>1 to 2</i>	40 (27%)
	<i>3 to 5</i>	84 (57%)
	<i>More than 5</i>	21 (14%)
Q11.9	How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc)	
	<i>Less than 2 hours</i>	48 (32%)
	<i>2 to less than 4 hours</i>	25 (17%)
	<i>4 to less than 6 hours</i>	33 (22%)
	<i>6 to less than 8 hours</i>	23 (15%)
	<i>8 to less than 10 hours</i>	7 (5%)
	<i>10 hours or more</i>	9 (6%)
	<i>Don't know</i>	6 (4%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	47 (32%)
	<i>No</i>	102 (68%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	87 (58%)
	<i>No</i>	64 (42%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	64 (43%)
	<i>No</i>	85 (57%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	8 (5%)
	<i>Very easy</i>	5 (3%)
	<i>Easy</i>	36 (24%)
	<i>Neither</i>	22 (15%)
	<i>Difficult</i>	34 (23%)
	<i>Very difficult</i>	41 (27%)
	<i>Don't know</i>	5 (3%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	132 (88%)
	<i>No</i>	18 (12%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (please tick all that apply)	
	<i>Not sentenced/ NA</i>	18 (12%)
	<i>No contact</i>	55 (37%)
	<i>Letter</i>	28 (19%)
	<i>Phone</i>	23 (15%)
	<i>Visit</i>	38 (26%)

Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	124 (84%)
	No	23 (16%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	0 (0%)
	Yes	104 (71%)
	No	42 (29%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/ not sentenced	42 (28%)
	Very involved	20 (14%)
	Involved	34 (23%)
	Neither	10 (7%)
	Not very involved	21 (14%)
	Not at all involved	21 (14%)
Q13.6	Who is working with you to achieve your sentence plan targets? (please tick all that apply)	
	Do not have a sentence plan/ not sentenced	42 (29%)
	Nobody	45 (31%)
	Offender supervisor	45 (31%)
	Offender manager	21 (14%)
	Named/ personal officer	9 (6%)
	Staff from other departments	21 (14%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/ not sentenced	42 (28%)
	Yes	77 (52%)
	No	15 (10%)
	Don't know	14 (9%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	Do not have a sentence plan/ not sentenced	42 (28%)
	Yes	28 (19%)
	No	54 (36%)
	Don't know	26 (17%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	Do not have a sentence plan/ not sentenced	42 (28%)
	Yes	31 (21%)
	No	39 (26%)
	Don't know	38 (25%)
Q13.10	Do you have a needs based custody plan?	
	Yes	7 (5%)
	No	51 (35%)
	Don't know	89 (61%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes	27 (18%)
	No	120 (82%)

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

	<i>Do not need help</i>	<i>Yes</i>	<i>No</i>
Employment	29 (20%)	34 (24%)	81 (56%)
Accommodation	30 (21%)	32 (22%)	81 (57%)
Benefits	28 (20%)	30 (21%)	82 (59%)
Finances	27 (20%)	25 (18%)	85 (62%)
Education	28 (20%)	36 (26%)	77 (55%)
Drugs and alcohol	46 (33%)	33 (24%)	59 (43%)

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

<i>Not sentenced</i>	0 (0%)
<i>Yes</i>	75 (51%)
<i>No</i>	72 (49%)

Main comparator and comparator to last time



Prisoner survey responses HMYOI Aylesbury 2013

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

Key to tables

		HMYOI Aylesbury 2013	Young adult prisons comparator	HMYOI Aylesbury 2013	HMYOI Aylesbury 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		161	1825	161	119
SECTION 1: General information					
1.2	Are you under 21 years of age?	72%	83%	72%	86%
1.3	Are you sentenced?	100%	86%	100%	100%
1.3	Are you on recall?	6%	7%	6%	1%
1.4	Is your sentence less than 12 months?	1%	33%	1%	1%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	7%	6%	7%	19%
1.5	Are you a foreign national?	11%	12%	11%	12%
1.6	Do you understand spoken English?	100%	98%	100%	
1.7	Do you understand written English?	99%	97%	99%	
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	52%	37%	52%	49%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	4%	5%	
1.1	Are you Muslim?	29%	18%	29%	23%
1.11	Are you homosexual/gay or bisexual?	5%	2%	5%	1%
1.12	Do you consider yourself to have a disability?	15%	10%	15%	5%
1.13	Are you a veteran (ex-armed services)?	1%	4%	1%	
1.14	Is this your first time in prison?	58%	44%	58%	51%
1.15	Do you have any children under the age of 18?	19%	23%	19%	17%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	54%	37%	54%	47%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	64%	35%	64%	
2.3	Were you offered a toilet break?	14%	7%	14%	
2.4	Was the van clean?	51%	48%	51%	
2.5	Did you feel safe?	88%	76%	88%	
2.6	Were you treated well/very well by the escort staff?	63%	61%	63%	74%
2.7	Before you arrived here were you told that you were coming here?	55%	74%	55%	
2.7	Before you arrived here did you receive any written information about coming here?	20%	4%	20%	
2.8	When you first arrived here did your property arrive at the same time as you?	89%	88%	89%	85%

Main comparator and comparator to last time

Key to tables

		HMYOI Aylesbury 2013	Young adult prisons comparator	HMYOI Aylesbury 2013	HMYOI Aylesbury 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	77%	84%	77%	
3.2	When you were searched in reception, was this carried out in a respectful way?	83%	77%	83%	83%
3.3	Were you treated well/very well in reception?	71%	60%	71%	56%
	When you first arrived:				
3.4	Did you have any problems?	65%	61%	65%	51%
3.4	Did you have any problems with loss of property?	21%	14%	21%	15%
3.4	Did you have any housing problems?	8%	18%	8%	10%
3.4	Did you have any problems contacting employers?	0%	5%	0%	6%
3.4	Did you have any problems contacting family?	24%	24%	24%	16%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	3%	1%	2%
3.4	Did you have any money worries?	11%	19%	11%	19%
3.4	Did you have any problems with feeling depressed or suicidal?	12%	12%	12%	8%
3.4	Did you have any physical health problems?	4%	5%	4%	
3.4	Did you have any mental health problems?	10%	5%	10%	
3.4	Did you have any problems with needing protection from other prisoners?	13%	8%	13%	9%
3.4	Did you have problems accessing phone numbers?	25%	22%	25%	11%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	34%	26%	34%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	76%	89%	76%	92%
3.6	A shower?	45%	43%	45%	34%
3.6	A free telephone call?	33%	64%	33%	73%
3.6	Something to eat?	49%	73%	49%	74%
3.6	PIN phone credit?	53%	39%	53%	
3.6	Toiletries/ basic items?	55%	42%	55%	

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction continued					
When you first arrived here did you have access to the following people:					
3.7	The chaplain or a religious leader?	79%	52%	79%	
3.7	Someone from health services?	67%	65%	67%	
3.7	A Listener/Samaritans?	39%	26%	39%	
3.7	Prison shop/ canteen?	33%	11%	33%	20%
When you first arrived here were you offered information about any of the following:					
3.8	What was going to happen to you?	50%	49%	50%	46%
3.8	Support was available for people feeling depressed or suicidal?	46%	47%	46%	49%
3.8	How to make routine requests?	52%	39%	52%	52%
3.8	Your entitlement to visits?	47%	50%	47%	53%
3.8	Health services?	61%	59%	61%	65%
3.8	The chaplaincy?	66%	50%	66%	56%
3.9	Did you feel safe on your first night here?	71%	77%	71%	80%
3.10	Have you been on an induction course?	93%	88%	93%	91%
For those who have been on an induction course:					
3.11	Did the course cover everything you needed to know about the prison?	43%	55%	43%	62%
3.12	Did you receive an education (skills for life) assessment?	81%	65%	81%	
SECTION 4: Legal rights and respectful custody					
In terms of your legal rights, is it easy/very easy to:					
4.1	Communicate with your solicitor or legal representative?	33%	38%	33%	46%
4.1	Attend legal visits?	37%	49%	37%	46%
4.1	Get bail information?	11%	20%	11%	11%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	43%	38%	43%	32%
4.3	Can you get legal books in the library?	39%	35%	39%	
For the wing/unit you are currently on:					
4.4	Are you normally offered enough clean, suitable clothes for the week?	66%	53%	66%	54%
4.4	Are you normally able to have a shower every day?	41%	73%	41%	25%
4.4	Do you normally receive clean sheets every week?	47%	74%	47%	91%
4.4	Do you normally get cell cleaning materials every week?	39%	58%	39%	63%
4.4	Is your cell call bell normally answered within five minutes?	34%	39%	34%	54%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	52%	56%	52%	67%
4.4	Can you normally get your stored property, if you need to?	35%	35%	35%	30%
4.5	Is the food in this prison good/very good?	36%	24%	36%	33%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	47%	41%	47%	35%
4.7	Are you able to speak to a Listener at any time, if you want to?	44%	43%	44%	36%
4.8	Are your religious beliefs are respected?	65%	51%	65%	57%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	72%	56%	72%	66%
4.10	Is it easy/very easy to attend religious services?	62%	61%	62%	

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SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	84%	68%	84%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	70%	60%	70%	60%
5.2	Do you feel applications are dealt with quickly (within seven days)?	41%	48%	41%	25%
5.3	Is it easy to make a complaint?	53%	57%	53%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	25%	33%	25%	37%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	26%	40%	26%	41%
5.5	Have you ever been prevented from making a complaint when you wanted to?	22%	17%	22%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	28%	23%	28%	33%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	49%	47%	49%	
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	53%	48%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	15%	17%	15%	
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	43%	36%	43%	
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	69%	66%	69%	61%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	63%	72%	63%	59%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	28%	29%	28%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	18%	22%	18%	16%
7.5	Do you have a personal officer?	75%	70%	75%	90%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	53%	60%	53%	44%

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SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	46%	37%	46%	34%
8.2	Do you feel unsafe now?	18%	15%	18%	11%
8.4	Have you been victimised by other prisoners here?	28%	21%	28%	19%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	17%	11%	17%	8%
8.5	Hit, kicked or assaulted you?	14%	7%	14%	8%
8.5	Sexually abused you?	2%	2%	2%	2%
8.5	Threatened or intimidated you?	17%	10%	17%	
8.5	Taken your canteen/property?	10%	6%	10%	4%
8.5	Victimised you because of medication?	1%	2%	1%	
8.5	Victimised you because of debt?	5%	3%	5%	
8.5	Victimised you because of drugs?	4%	3%	4%	0%
8.5	Victimised you because of your race or ethnic origin?	4%	4%	4%	3%
8.5	Victimised you because of your religion/religious beliefs?	5%	2%	5%	2%
8.5	Victimised you because of your nationality?	4%	6%	4%	
8.5	Victimised you because you were from a different part of the country?	6%	6%	6%	6%
8.5	Victimised you because you are from a Traveller community?	0%	1%	0%	
8.5	Victimised you because of your sexual orientation?	2%	1%	2%	0%
8.5	Victimised you because of your age?	0%	1%	0%	
8.5	Victimised you because you have a disability?	3%	1%	3%	1%
8.5	Victimised you because you were new here?	9%	7%	9%	2%
8.5	Victimised you because of your offence/crime?	11%	4%	11%	10%
8.5	Victimised you because of gang related issues?	10%	5%	10%	

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	35%	27%	35%	24%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	15%	13%	15%	8%
8.7	Hit, kicked or assaulted you?	7%	5%	7%	2%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	12%	14%	12%	
8.7	Victimised you because of medication?	0%	2%	0%	
8.7	Victimised you because of debt?	0%	1%	0%	
8.7	Victimised you because of drugs?	1%	2%	1%	2%
8.7	Victimised you because of your race or ethnic origin?	7%	7%	7%	5%
8.7	Victimised you because of your religion/religious beliefs?	5%	4%	5%	4%
8.7	Victimised you because of your nationality?	3%	5%	3%	
8.7	Victimised you because you were from a different part of the country?	2%	5%	2%	6%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.7	Victimised you because of your sexual orientation?	2%	1%	2%	0%
8.7	Victimised you because of your age?	2%	2%	2%	
8.7	Victimised you because you have a disability?	1%	2%	1%	3%
8.7	Victimised you because you were new here?	5%	6%	5%	5%
8.7	Victimised you because of your offence/crime?	8%	4%	8%	8%
8.7	Victimised you because of gang related issues?	5%	4%	5%	
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	32%	35%	32%	35%

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SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	40%	42%	40%	45%
9.1	Is it easy/very easy to see the nurse?	62%	60%	62%	74%
9.1	Is it easy/very easy to see the dentist?	18%	18%	18%	16%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	42%	60%	42%	55%
9.2	The nurse?	63%	65%	63%	63%
9.2	The dentist?	44%	44%	44%	53%
9.3	The overall quality of health services?	49%	53%	49%	59%
9.4	Are you currently taking medication?	23%	23%	23%	19%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	49%	70%	49%	
9.6	Do you have any emotional well being or mental health problems?	23%	21%	23%	19%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	72%	37%	72%	
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	23%	29%	23%	19%
10.2	Did you have a problem with alcohol when you came into this prison?	14%	24%	14%	14%
10.3	Is it easy/very easy to get illegal drugs in this prison?	28%	17%	28%	21%
10.4	Is it easy/very easy to get alcohol in this prison?	10%	11%	10%	
10.5	Have you developed a problem with drugs since you have been in this prison?	7%	4%	7%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	4%	3%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	65%	82%	65%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	91%	85%	91%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	79%	82%	79%	94%

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SECTION 11: Activities				
Is it very easy/ easy to get into the following activities:				
11.1 A prison job?	23%	32%	23%	
11.1 Vocational or skills training?	28%	34%	28%	
11.1 Education (including basic skills)?	41%	49%	41%	
11.1 Offending behaviour programmes?	26%	27%	26%	
Are you currently involved in any of the following activities:				
11.2 A prison job?	41%	34%	41%	40%
11.2 Vocational or skills training?	17%	19%	17%	28%
11.2 Education (including basic skills)?	26%	39%	26%	42%
11.2 Offending behaviour programmes?	17%	9%	17%	19%
11.3 Have you had a job while in this prison?	71%	73%	71%	
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	50%	51%	50%	
11.3 Have you been involved in vocational or skills training while in this prison?	70%	70%	70%	
For those who have had vocational or skills training while in this prison:				
11.3 Do you feel the vocational or skills training will help you on release?	61%	65%	61%	
11.3 Have you been involved in education while in this prison?	75%	84%	75%	
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	57%	69%	57%	
11.3 Have you been involved in offending behaviour programmes while in this prison?	71%	65%	71%	
For those who have been involved in offending behaviour programmes while in this prison:				
11.3 Do you feel the offending behaviour programme(s) will help you on release?	55%	54%	55%	
11.4 Do you go to the library at least once a week?	42%	37%	42%	47%
11.5 Does the library have a wide enough range of materials to meet your needs?	46%	46%	46%	
11.6 Do you go to the gym three or more times a week?	9%	26%	9%	6%
11.7 Do you go outside for exercise three or more times a week?	46%	47%	46%	28%
11.8 Do you go on association more than five times each week?	14%	52%	14%	12%
11.9 Do you spend ten or more hours out of your cell on a weekday?	6%	7%	6%	7%
SECTION 12: Friends and family				
12.1 Have staff supported you and helped you to maintain contact with family/friends while in this prison?	32%	42%	32%	43%
12.2 Have you had any problems with sending or receiving mail?	58%	53%	58%	41%
12.3 Have you had any problems getting access to the telephones?	43%	35%	43%	23%
12.4 Is it easy/ very easy for your friends and family to get here?	27%	36%	27%	

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SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	88%	79%	88%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	42%	37%	42%	
13.2	Contact by letter?	21%	28%	21%	
13.2	Contact by phone?	18%	19%	18%	
13.2	Contact by visit?	29%	35%	29%	
13.3	Do you have a named offender supervisor in this prison?	84%	54%	84%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	71%	62%	71%	75%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	51%	61%	51%	63%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	43%	38%	43%	
13.6	Offender supervisor?	43%	43%	43%	
13.6	Offender manager?	20%	30%	20%	
13.6	Named/ personal officer?	9%	24%	9%	
13.6	Staff from other departments?	20%	15%	20%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	73%	79%	73%	83%
13.8	Are there plans for you to achieve any of your targets in another prison?	26%	16%	26%	
13.9	Are there plans for you to achieve any of your targets in the community?	29%	27%	29%	
13.10	Do you have a needs based custody plan?	5%	10%	5%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	19%	20%	19%	13%
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	30%	45%	30%	
13.12	Accommodation?	28%	44%	28%	
13.12	Benefits?	27%	32%	27%	
13.12	Finances?	23%	24%	23%	
13.12	Education?	32%	40%	32%	
13.12	Drugs and alcohol?	36%	47%	36%	
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	51%	56%	51%	66%

Diversity analysis



Key question responses (ethnicity, nationality and religion) HMYOI Aylesbury 2013

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

Key to tables

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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		83	76	17	142	46	113
1.3	Are you sentenced?	100%	100%	100%	100%	100%	100%
1.5	Are you a foreign national?	17%	4%			13%	9%
1.6	Do you understand spoken English?	100%	100%	100%	100%	100%	100%
1.7	Do you understand written English?	100%	97%	100%	99%	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			81%	48%	89%	37%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	9%	0%	5%	0%	7%
1.1	Are you Muslim?	50%	7%	38%	28%		
1.12	Do you consider yourself to have a disability?	9%	23%	19%	15%	9%	18%
1.13	Are you a veteran (ex-armed services)?	0%	2%	7%	0%	0%	1%
1.14	Is this your first time in prison?	62%	54%	70%	56%	57%	58%
2.6	Were you treated well/very well by the escort staff?	57%	70%	65%	63%	52%	67%
2.7	Before you arrived here were you told that you were coming here?	53%	58%	42%	57%	50%	57%
3.2	When you were searched in reception, was this carried out in a respectful way?	79%	86%	58%	86%	78%	86%
3.3	Were you treated well/very well in reception?	65%	79%	58%	74%	67%	74%
3.4	Did you have any problems when you first arrived?	57%	74%	75%	63%	60%	67%
3.7	Did you have access to someone from health care when you first arrived here?	64%	71%	65%	67%	61%	70%
3.9	Did you feel safe on your first night here?	75%	68%	65%	72%	74%	71%
3.10	Have you been on an induction course?	94%	92%	93%	93%	93%	93%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	33%	32%	50%	31%	39%	30%

Diversity analysis

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Any percentage highlighted in blue is significantly worse							
Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
4.4	Are you normally offered enough clean, suitable clothes for the week?	72%	58%	88%	63%	75%	61%
4.4	Are you normally able to have a shower every day?	38%	45%	25%	42%	39%	42%
4.4	Is your cell call bell normally answered within five minutes?	26%	42%	30%	34%	24%	38%
4.5	Is the food in this prison good/very good?	31%	44%	30%	38%	26%	41%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	41%	56%	58%	46%	33%	54%
4.7	Are you able to speak to a Listener at any time, if you want to?	32%	55%	38%	43%	29%	49%
4.8	Do you feel your religious beliefs are respected?	68%	60%	70%	63%	82%	58%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	77%	67%	75%	71%	84%	68%
5.1	Is it easy to make an application?	81%	88%	65%	86%	83%	86%
5.3	Is it easy to make a complaint?	53%	52%	65%	50%	53%	51%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	38%	61%	30%	51%	35%	55%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	52%	45%	58%	48%	48%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	16%	15%	12%	16%	16%	14%
7.1	Do most staff, in this prison, treat you with respect?	66%	72%	65%	69%	61%	73%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	58%	68%	77%	61%	58%	66%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	11%	26%	12%	19%	13%	20%
7.4	Do you have a personal officer?	77%	74%	93%	73%	80%	73%
8.1	Have you ever felt unsafe here?	35%	58%	47%	46%	48%	46%
8.2	Do you feel unsafe now?	18%	18%	23%	17%	24%	15%
8.3	Have you been victimised by other prisoners?	15%	42%	30%	28%	20%	32%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	10%	25%	12%	18%	13%	19%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	3%	7%	4%	7%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	7%	7%	5%	4%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	3%	7%	4%	7%	3%
8.5	Have you been victimised because you have a disability? (By prisoners)	2%	5%	7%	3%	0%	5%

Diversity analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British 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						
8.6	Have you been victimised by a member of staff?	31%	40%	35%	35%	38%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	12%	12%	7%	12%	16%	11%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	12%	2%	19%	6%	13%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	4%	0%	6%	12%	3%
8.7	Have you been victimised because of your nationality? (By staff)	5%	0%	12%	1%	4%	1%
8.7	Have you been victimised because you have a disability? (By staff)	0%	3%	0%	1%	0%	2%
9.1	Is it easy/very easy to see the doctor?	35%	44%	42%	40%	30%	43%
9.1	Is it easy/ very easy to see the nurse?	61%	62%	65%	61%	58%	64%
9.4	Are you currently taking medication?	14%	34%	12%	25%	13%	28%
9.6	Do you feel you have any emotional well being/mental health issues?	12%	34%	19%	23%	11%	28%
10.3	Is it easy/very easy to get illegal drugs in this prison?	14%	44%	23%	29%	20%	32%
11.2	Are you currently working in the prison?	41%	41%	35%	42%	38%	43%
11.2	Are you currently undertaking vocational or skills training?	18%	16%	12%	17%	25%	14%
11.2	Are you currently in education (including basic skills)?	25%	26%	42%	23%	20%	28%
11.2	Are you currently taking part in an offending behaviour programme?	18%	16%	35%	15%	16%	18%
11.4	Do you go to the library at least once a week?	46%	39%	63%	40%	37%	44%
11.6	Do you go to the gym three or more times a week?	12%	7%	8%	10%	17%	7%
11.7	Do you go outside for exercise three or more times a week?	63%	29%	68%	43%	65%	38%
11.8	On average, do you go on association more than five times each week?	9%	20%	7%	15%	12%	15%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	7%	6%	7%	6%	9%	5%
12.2	Have you had any problems sending or receiving mail?	52%	63%	56%	57%	54%	59%
12.3	Have you had any problems getting access to the telephones?	32%	54%	50%	42%	29%	48%

Diversity analysis



Key question responses (disability) HMYOI Aylesbury 2013

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		24	135
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	13%	10%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	92%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	30%	57%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	25%	1%
1.1	Are you Muslim?	17%	31%
1.12	Do you consider yourself to have a disability?		
1.13	Are you a veteran (ex-armed services)?	0%	1%
1.14	Is this your first time in prison?	50%	59%
2.6	Were you treated well/very well by the escort staff?	71%	62%
2.7	Before you arrived here were you told that you were coming here?	58%	54%
3.2	When you were searched in reception, was this carried out in a respectful way?	83%	83%
3.3	Were you treated well/very well in reception?	79%	70%
3.4	Did you have any problems when you first arrived?	73%	63%
3.7	Did you have access to someone from health care when you first arrived here?	67%	67%
3.9	Did you feel safe on your first night here?	58%	73%
3.10	Have you been on an induction course?	87%	94%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	41%	31%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	82%	63%
4.4	Are you normally able to have a shower every day?	64%	37%
4.4	Is your cell call bell normally answered within five minutes?	35%	33%
4.5	Is the food in this prison good/very good?	55%	34%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	64%	44%
4.7	Are you able to speak to a Listener at any time, if you want to?	52%	42%
4.8	Do you feel your religious beliefs are respected?	83%	62%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	78%	71%
5.1	Is it easy to make an application?	86%	84%
5.3	Is it easy to make a complaint?	53%	52%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	43%	49%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	26%	52%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	21%	14%
7.1	Do most staff, in this prison, treat you with respect?	75%	68%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	62%	63%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	18%	18%
7.4	Do you have a personal officer?	75%	75%
8.1	Have you ever felt unsafe here?	71%	41%
8.2	Do you feel unsafe now?	22%	17%
8.3	Have you been victimised by other prisoners?	50%	23%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	30%	15%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	13%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	13%	2%
8.5	Have you been victimised because of your age? (By prisoners)	0%	0%
8.5	Have you been victimised because you have a disability? (By prisoners)	21%	0%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	50%	33%
8.7	Have you ever felt threatened or intimidated by staff here?	13%	12%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	9%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	5%
8.7	Have you been victimised because of your nationality? (By staff)	0%	3%
8.7	Have you been victimised because of your age? (By staff)	5%	2%
8.7	Have you been victimised because you have a disability? (By staff)	8%	0%
9.1	Is it easy/very easy to see the doctor?	53%	37%
9.1	Is it easy/ very easy to see the nurse?	72%	60%
9.4	Are you currently taking medication?	60%	17%
9.6	Do you feel you have any emotional well being/mental health issues?	66%	15%
10.3	Is it easy/very easy to get illegal drugs in this prison?	50%	25%
11.2	Are you currently working in the prison?	52%	39%
11.2	Are you currently undertaking vocational or skills training?	17%	17%
11.2	Are you currently in education (including basic skills)?	31%	25%
11.2	Are you currently taking part in an offending behaviour programme?	5%	19%
11.4	Do you go to the library at least once a week?	35%	43%
11.6	Do you go to the gym three or more times a week?	9%	10%
11.7	Do you go outside for exercise three or more times a week?	26%	50%
11.8	On average, do you go on association more than five times each week?	23%	13%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	9%	6%
12.2	Have you had any problems sending or receiving mail?	50%	59%
12.3	Have you had any problems getting access to the telephones?	52%	41%