

Report on an unannounced inspection of

HMP Brixton

by HM Chief Inspector of Prisons

1–12 July 2013

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Introduction

A common refrain from many prisons at the start of an inspection is 'if only you had come six months later'. In the case of HMP Brixton in summer 2013 this was, for once, said with some justice. The prison had, some 12 months before our inspection, been re-designated as a category C/D resettlement prison, ending the role it has had for many years as a category B local prison holding remand and short sentence prisoners. The inspection found the prison with plans well advanced – but not yet delivered – for the major improvement to its facilities required for its new role.

However, at the time of this inspection, although the prison had been re-designated and now held a mixture of category C and low risk category D prisoners, its regime and facilities were little changed from its former category B role.

The prison was operating at about 60% over its certified normal capacity. Many prisoners shared small, cramped cells and some had inadequately screened toilets and because, at the time of the inspection, there was far too little activity for the size of the population, many were locked in their cells for more than 20 hours a day. The quality of the learning, skills and work activities was too often inadequate and although there were some notable exceptions – the bakery, prison radio, enthusiastic PE staff and external placements for category D prisoners, for example – the overall quantity and quality of activity would have been unacceptable in any prison, but particularly so in a resettlement prison.

Work was well underway to provide new and refurbished activity buildings that should provide 500 or so activity places – sufficient for the entire population – and a new learning and skills manager had begun to address issues of quality and prisoner achievement. Exciting plans for a restaurant in the prison, staffed by prisoners but open to the public, also had the potential to provide valuable opportunities. Nevertheless, there was a danger of too much reliance being placed on the new provision to resolve all the prison's problems and not enough was being done to get on with making improvements that were needed and feasible now. More needed to be done to build the new culture and ways of working that would be just as important as new buildings for the prison's changed role.

Prisoners had not been told enough about what to expect when they were transferred to Brixton and were frustrated by the poor environment and lack of activities they found on arrival. Offender management arrangements were also poor and serious delays in completing risk assessments, lack of consistent contact with offender supervisors and the placement of prisoners in Brixton far too late in their sentence, meant it was difficult for many to progress their sentence plans. Most practical resettlement services were reasonable but their effectiveness was undermined by inadequate assessments of prisoners' needs and too many prisoners told us they did not know where to go for help. As is often the case, many prisoners relied on their families and friends for help with essentials such as accommodation, but work to encourage the development of positive family relationships was too limited. Prisoners' frustrations were compounded by security restrictions that were much more appropriate for the prison's old role as a category B local than its new role as a resettlement prison for category C and D prisoners.

In view of all this, it was not surprising that our survey findings about prisoners' relationships with staff were very poor and it may have explained prisoners reporting high levels of victimisation by staff. The interactions between staff and prisoners we saw were, at best, mixed. Diversity issues had been neglected, particularly for older prisoners and those with disabilities. Many prisoners found it difficult to get basic needs met, such as the provision of clean clothing and underwear. Prisoners had little confidence in the complaints system as a mechanism to resolve legitimate concerns. However, the chaplaincy provided a good service, the food was reasonable and health services were generally good.

Prisoners were generally physically safe but processes to sustain and underpin this were often weak. Levels of violence were low, although interventions to support victims and tackle perpetrators required improvement. Levels of self-harm were also low and those at risk felt well supported. Recommendations arising from recent investigations into deaths in custody by the Prisons and Probation Ombudsman needed to be pursued with greater rigour. There was little use of force but it was poorly recorded. Few prisoners were segregated but some were segregated on the vulnerable prisoners' wing without the management oversight that should have been in place. Reception arrangements were very poor and we were concerned to find that prisoners had been left in vans for up to two hours in the middle of the hottest days in the summer and they were in a poor state when we insisted they were taken out. Substance misuse services were good but these were undermined by the availability of drugs in the prison and supply reduction measures needed strengthening; the obvious smell of cannabis on the wings was not challenged.

Brixton prison is at a turning point. It is fair to say that this inspection came at a very bad time for the prison – when all the disadvantages of major building works were apparent but none of the advantages of the new provision had yet been realised. However, the fact was that the prison was not yet ready for the category C and D prisoners it now held and too many lacked the opportunities for purposeful activity and rehabilitation they needed. Too much was on hold waiting for the new facilities to be ready and some elements of prisoners' treatment and conditions were unacceptable – and had remained so for too long. We have indicated to the prison that we will return for the next inspection in 2014 to make sure that the potential of the new facilities has been realised and that a shift in culture – which is needed just as much as new buildings to ensure the prison can deliver its new role effectively – has been achieved.

Nick Hardwick
HM Chief Inspector of Prisons

October 2013

Fact page

Task of the establishment

HMP Brixton is a category C and D resettlement prison.

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

Public

Region/Department

London

Number held

751

Certified normal accommodation

505

Operational capacity

798

Date of last full inspection

1 –10 December 2010

Brief history

HMP Brixton opened in 1819 as the Surrey House of Correction, subsequently becoming a prison for women, and then a military prison. In 1898 it became an adult male local prison, serving the whole of the London area and particularly focusing on South London. In July 2012, it was re-roled again, becoming a category C and D resettlement prison for the local area. It also receives a large population of sexual offenders.

Short description of residential units

A wing holds 215 category C prisoners and also has the drug recovery wing

B wing holds 150 category C prisoners

C and D wings accommodate a total of 188 category D prisoners

G wing is the vulnerable prisoner wing and holds a total of 250 category C men.

Name of governor/director

Edmond Tullett

Escort contractor

Serco

Health service provider

Public Health England

Learning and skills providers

A4e Justice

Independent Monitoring Board chair

Amanda Williams

About this inspection and report

- A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.
- A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- A3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

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

- A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by 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.

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
 - **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.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection, unless these have already been reviewed by a short follow-up inspection.

This report

- A8 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*. 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.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A10 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 refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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 *Reception processes were functional and unwelcoming. First night arrangements were inadequate, with insufficient attention paid to vulnerability and safety issues. Induction was uncoordinated and unstructured. More prisoners than at similar prison felt unsafe and reported relatively high levels of victimisation by staff. However, levels of violence were relatively low and prisoners did not feel physically unsafe. Levels of self-harm were relatively low and prisoners felt well supported. Illegal drug use was high. Security arrangements were incompatible with a category C/D regime. Adjudications were well managed. There was little use of force but it was poorly monitored. Segregation was not overused but some prisoners were inappropriately segregated on the vulnerable prisoner wing. Substance misuse services were good. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S2 *At the last inspection in December 2010 we found that outcomes for prisoners in HMP Brixton were reasonably good against this healthy prison test. We made 52 recommendations in the area of safety. At this follow-up inspection we found that 18 of the recommendations had been achieved, seven had been partially achieved, 22 had not been achieved and five were no longer relevant.*
- S3 Escort vans were clean and well equipped. Most journeys were reasonably short but during our visit, during the heat of the summer, some prisoners waited for several hours in very hot vans before disembarkation.
- S4 The reception process took too long and was functional and unwelcoming. New arrivals were not provided with a telephone call, shower, grocery packs, food or drinks on arrival. Holding rooms were clean but bare, with little information. A basic interview was undertaken with a member of staff but this was not done in private and vulnerability issues were not adequately addressed.
- S5 There was no dedicated first night provision. Prisoners were allocated to any available cell space and were not provided with information, peer advice, or additional risk assessments or support from staff. Fewer prisoners than at comparator prisons felt safe on their first night at the establishment.
- S6 The delivery of induction across the prison was uncoordinated, unstructured and inconsistent, with inadequate recording.
- S7 More prisoners than at comparator prisons felt unsafe. However, the levels of violence were relatively low and prisoners did not feel at risk of physical harm. Levels of reported bullying and victimisation by prisoners were similar to those at other category C prisons but more prisoners felt victimised by staff, particularly when they were new to the establishment.
- S8 There was some reasonable analysis of violent and antisocial behaviour but causes of such behaviour were not routinely collated and trend analysis was limited. Wing staff did not see it as their responsibility to implement the violence reduction strategy, resulting in poor-quality antisocial behaviour management books and support plans. Little was done to challenge perpetrators or support victims.
- S9 The number of self-harm incidents was relatively low and the number of assessment, care in custody and teamwork (ACCT) self-harm monitoring documents opened was similar to that

at other category C prisons. The quality of documents was generally good and prisoners felt well supported. The safer custody continuous improvement action plan was not actively reviewed and did not include all the relevant Prisons and Probation Ombudsman recommendations from recent deaths in custody. Fewer prisoners than at comparator prisons said that they could access a Listener (a prisoner trained by the Samaritans to support those at risk of self-harm). There was a lack of information about Listeners on arrival and they struggled to move freely around the prison. Listener care rooms were poorly furnished.

- S10 The monthly security meeting was well attended but the monitoring and strategic analysis of intelligence was unsophisticated. The general security conditions across the prison were excessive for category C prisoners, and especially so for category D prisoners. Illicit drug use was high and we routinely smelt cannabis during the inspection. Very few prisoners suspected of taking drugs were tested. A detailed supply reduction action plan had been developed and the prison was taking steps to deal with the problem.
- S11 Prisoners were frustrated by the incentives and earned privileges scheme and many were unaware of the benefits of being on the enhanced level, beyond getting an extra visit. Prisoners on the basic level of the scheme had a very poor regime. Records of some reviews were incomplete and targets were often general and lacked sufficient individual focus.
- S12 Adjudication processes were appropriately managed, monitoring was effective and the regular adjudication standardisation meetings considered a reasonable range of data.
- S13 There was little use of force. The quality of paperwork was poor, with many reports incomplete. Use of special accommodation was poorly recorded and prisoners remained there for too long. Video-recording of planned incidents was inadequate. The use of segregation was not high, although a number of prisoners were segregated on a separate landing on the vulnerable prisoner wing and were not subject to adequate management oversight and reviews. The small segregation unit was generally clean but the regime was inadequate. There was no formal reintegration planning.
- S14 Clinical treatment of drug and alcohol users was flexible and based on individual need, and regular joint reviews by clinical and psychosocial service providers took place. A range of psychosocial support services was available, with a large number of prisoners actively engaged in structured group- and one-to-one work. Support was particularly strong on the drug recovery unit, although mixing with prisoners who did not require treatment, and drug misuse on other landings, made it a difficult environment for recovery. Community groups also provided input into the drug recovery wing.

Respect

- S15 *The environment and living conditions were poor and the prison was very overcrowded. Our survey results in relation to interactions with and treatment by staff were very negative. We observed very mixed interactions. Diversity and equality had been neglected and the needs of some prisoners, particularly older prisoners and those with disabilities, were not being met. We found no evidence that black and minority ethnic or Muslim prisoners were discriminated against because of their race or religion, although they were more negative in our survey in some areas. Faith provision was very good. The number of complaints was low but there was inadequate quality assurance. Health provision was good. The food provided was acceptable. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S16 At the last inspection in December 2010 we found that outcomes for prisoners in HMP Brixton were not sufficiently good against this healthy prison test. We made 76 recommendations in the area of respect. At this follow-up inspection we found that 31 of the recommendations had been achieved, 14 had been partially achieved, 26 had not been achieved and five were no longer relevant.

- S17 Outside areas were generally clean. Wings and communal areas were worn and shabby, and sometimes dirty. Many prisoners were accommodated in cells designed for one and these were extremely cramped, uncomfortable and lacking in privacy. Some communal showers lacked privacy and some were poorly decorated and maintained. Responses to applications were not monitored for timeliness and too many prisoners said that they were often late or missing. Access to telephones was compromised by the lack of evening association on most wings, which limited prisoners' ability to contact family and friends. Rules were inconsistently applied across the prison.
- S18 Our survey results in relation to interactions with and treatment by staff were very negative. We observed mixed relationships, ranging from dismissive and abrasive to polite, engaged and helpful. Consultation with prisoners was generally good, with a range of prisoner forums being held. Prisoners complained about a lack of helpful personal officer contact but the case note entries were generally regular, qualitative and demonstrated a good knowledge of prisoners, and there was a good level of management oversight.
- S19 Equality and diversity lacked focus and direction. Formal structures and support for the development of equality and diversity provision were weak. Identification of prisoners from some protected characteristic groups was poor and the prison was unsighted on the scale and range of need. Some needs were not being met. Prisoners from several minority groups were more negative than their mainstream counterparts about their treatment across key areas in our survey but there was no monitoring of equality of treatment for any group other than race. There was limited consultation with those from minority groups. There were too few prisoner equality representatives and they had limited opportunity to provide feedback to equality staff.
- S20 Prisoners from a black and minority ethnic or Muslim background did not feel discriminated against or treated unfairly because of their race or religion.
- S21 Provision for many foreign national prisoners was reasonable, with the exception of those who understood little English, who felt isolated and anxious. Too many prisoners were held solely on immigration powers.
- S22 Not all older prisoners or those with a disability were followed up or had their needs met, although staff were aware of those who would need assistance in an emergency.
- S23 Support for transgender prisoners was good but less so for gay or bisexual prisoners; most of those we spoke to lacked confidence to disclose their sexuality.
- S24 Prisoners were extremely positive about the chaplaincy. Faith provision was good, with effective links with local faith communities. Ramadan started during the inspection, and the preparations were excellent.
- S25 The numbers of prisoner complaints submitted was lower than at similar prisons. Sampled responses were mostly timely, polite and addressed the issue raised. A small number, particularly those concerning staff, failed to investigate or respond to the issues appropriately. There was no formal quality assurance process and analysis of complaints data was limited.

- S26 The overall quality of health services was good. Not all prisoners were appropriately health screened on arrival and there was no routine secondary health assessment. Chronic diseases were reasonably well managed and access to GPs, nursing staff and the dentist was good. The use of prisoner health care representatives on the wings helped prisoners to access health services appropriately. Generally good administration of medicines was compromised by a lack of privacy and of supervision on the wings. Primary and secondary mental health services were well integrated and provided a responsive range of services; this included a well-used improving access to psychological therapies (IAPT) service including individual and group workshops.
- S27 We received few complaints about the food provided and we found it to be of a reasonable quality. Prisoners were regularly consulted about it and some changes had been made as a result.

Purposeful activity

S28 *The amount of time out of cell was inconsistent and insufficient. The published core day was not always followed. Plans for new and improved learning and skills provision were well advanced but current provision was poorly managed. There were far too few activity places available and not all of these were utilised. The range of education and vocational activities was poor and there were few opportunities for progression. Opportunities to accredit work and vocational skills gained were missed. Few prisoners took qualifications but, for those who did, achievements were mostly good. Library provision was poor and underused. Despite inadequate facilities, recreational PE provision was good. **Outcomes for prisoners were poor against this healthy prison test.***

S29 *At the last inspection in December 2010 we found that outcomes for prisoners in HMP Brixton were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of purposeful activity. At this follow-up inspection we found that three of the recommendations had been achieved, four had been partially achieved and six had not been achieved.*

- S30 The amount of time unlocked varied considerably across the prison, ranging from just under 12 hours for most category D prisoners to around three hours for the many unemployed category C prisoners. Most category C prisoners were unlocked for only one evening per week, and many had their period of unlock reduced by staff who locked prisoners up before the published time.
- S31 There was a well-reasoned and achievable long-term learning and skills strategy and the soon-to-be-completed new and refurbished activities buildings could provide sufficient and high-quality activities. However, the management of current learning and skills provision was inadequate. There were far too few activity places available and not all were used. Most activities were only part time and many prisoners were employed in wing jobs which were low skilled and did not fully occupy them. Approximately 40% of prisoners were unemployed and we found over half the population on the wings during the day with nothing to do. Quality improvement processes were weak and the observation of teaching and learning were underdeveloped. Data analysis and use were generally satisfactory.
- S32 The activities allocation process was weak, with insufficient use of sentence plans to inform it. The variety of education programmes and vocational training courses was poor and there were insufficient progression opportunities. The provision of additional learning support was inadequate. The range and amount of activities available for vulnerable prisoners were exceptionally poor, with approximately 20% involved in any learning and skills activity.

- S33 Few prisoners took qualifications but for those who did, achievements were mostly good. There was no accreditation of employability skills. Only 12 prisoners were undertaking a vocational qualification. Particularly good skills were demonstrated by prisoners in the bakery, and those in the kitchen developed appropriate catering skills, although no qualifications were available. Attendance and punctuality were poor.
- S34 The library was small and few prisoners used it. Resources were scant and there were insufficient materials for foreign national prisoners.
- S35 In spite of poor facilities, a reasonable variety of recreational PE was available, including provision for older prisoners. There was good promotion of healthy living and there were effective links with the health care department for prisoners who were unfit or required remedial PE.

Resettlement

- S36 *Strategic planning of resettlement services was reasonably good. The use of release on temporary licence was developing well but there was little additional resettlement support for category D prisoners. Offender management was weak. Too many prisoners lacked an offender assessment system (OASys) assessment or up-to-date sentence plan, and offender supervisors had very limited contact with prisoners. Prisoners were frustrated by their inability to progress and too many waited too long for transfer. Home detention curfew procedures and public protection arrangements were sound. Reintegration planning was compromised by the lack of a comprehensive initial assessment and few prisoners knew where to go to for help. Resettlement pathway work was reasonable.*
Outcomes for prisoners were not sufficiently good against this healthy prison test.
- S37 *At the last inspection in December 2010 we found that outcomes for prisoners in HMP Brixton were reasonably good against this healthy prison test. We made 32 recommendations in the area of resettlement. At this follow-up inspection we found that seven of the recommendations had been achieved, six had been partially achieved, 10 had not been achieved and nine were no longer relevant.*
- S38 There was a comprehensive strategy for reducing reoffending which addressed the resettlement pathways, with basic action plans to guide their development.
- S39 The use of release on temporary licence (ROTL) to help resettle category D prisoners was developing well but reintegration assessment and planning was not sufficiently developed for most prisoners.
- S40 The offender management unit did not provide an effective service or take the leading role in guiding the provision of services and interventions. Too many prisoners lacked an offender assessment system (OASys) assessment or up-to-date sentence plan and this frustrated prisoners' opportunities to progress. This was caused by poor resourcing of the department and prisoners arriving without an assessment. High-risk prisoners were allocated an offender supervisor but much of their contact was not sufficiently focused on risk, progress or achievement of their sentence plan targets. Lower-risk prisoners were not allocated an offender supervisor and had no offender supervisor contact or support. Many prisoners were frustrated by the lack of opportunities available in the prison and their inability to progress through their sentence.
- S41 Home detention curfew assessments were mostly on time and delays were due to factors outside the prison's control.

- S42 Public protection arrangements were sound and prisoners were informed of restrictions and how they could challenge them or apply for visits from children.
- S43 Reviews of categorisation were not always on time, although, with the exception of sex offenders, decisions were defensible. There were too many prisoners waiting for a transfer, the longest wait being six months. The transfer of prisoners was held up by the backlog of OASys assessments, few spaces in suitable establishments or lack of transport.
- S44 There was a small number of indeterminate-sentenced prisoners, and services for them were limited, although there were regular consultation meetings and some opportunities for town visits.
- S45 There was insufficient systematic assessment and planning on arrival to meet prisoners' immediate resettlement needs, although an effective check on last minute needs was undertaken before release.
- S46 St Giles Trust provided an effective accommodation service, with the assistance of trained peer advisers.
- S47 Arrangements for resettlement into education, training and work were reasonably good. Appropriate advice and guidance were given by staff on arrival and before release. There was good use of ROTL for employment. Good links had been established with a variety of employers and outside agencies, although these were not effectively coordinated by the prison.
- S48 Prisoners were not seen routinely by health services staff before release and there had been regular instances of prescribed medication supplies not given to men on discharge. Prisoners with mental health needs were effectively linked with community mental health teams.
- S49 There were effective links with community drug and alcohol service providers.
- S50 Help with debt problems was limited but a local debt support project for Lambeth residents visited the prison and gave limited advice to prisoners from other areas. Prisoners were able to open bank accounts and a money management module was provided within the 'Faith in the Future' programme.
- S51 Staff in the visitors centre provided only limited advice and information. The visits hall was small and crowded, providing little privacy. There were limited refreshments facilities and the children's play area was not always supervised. Although there were adequate visits slots for most prisoners, the number of designated vulnerable prisoner sessions were insufficient, especially at weekends. There were no family and children support services or programmes available.
- S52 Accredited interventions were not oversubscribed but the high number of prisoners without a sentence plan may have masked unmet need. There were 40 sex offenders who had been assessed who would not have time, or were refusing, to undertake the sex offender treatment programme and have their offending behaviour addressed before release. A good counselling service for sex offenders complemented the accredited programme.

Main concerns and recommendations

- S53 Concern: Too many prisoners felt anxious and unsafe on arrival. Reception processes were unwelcoming. There were no arrangements to give advice and support to prisoners on their first night, and issues of risk and vulnerability were not addressed.

Recommendation: Thorough reception and first night procedures should be applied, to ensure that accommodation is prepared, a shower and a telephone call are available, and appropriate information, support and checks are carried out during prisoners' early days at the establishment.

- S54 Concern: Security arrangements were over-restrictive and inconsistent with the needs of a category C and D regime, leaving prisoners with limited access around the prison and restricted association and time out of cell.

Recommendation: The physical security and regime arrangements should be reviewed and amended to reflect conditions which are appropriate to category C and D prisoners, respectively.

- S55 Concern: Prisoners reported very negatively about relationships and treatment by staff and felt that staff had not adjusted towards managing them as longer stay category C prisoners. We observed some poor interactions.

Recommendation: Staff training and supervision processes should support staff in developing relationships with prisoners appropriate to a category C regime.

- S56 Concern: Equality and diversity provision was neglected and underdeveloped. In our survey, fewer prisoners from minority groups than their mainstream counterparts reported favourably about their treatment across a range of areas. There was evidence that the needs of prisoners from minority groups, particularly older prisoners and those with disabilities, were not being identified or met.

Recommendation: Management oversight of diversity should be prioritised to ensure that the needs of all prisoners from minority groups are identified, assessed and met and that any negative perceptions of particular groups are understood.

- S57 Concern: There were far too few activity places available, so over half the population were unoccupied or under-occupied in low-skilled wing work.

Recommendation: The total number of high-quality activity places should be increased to allow more prisoners to be purposefully employed.

- S58 Concern: The offender management unit did not effectively assess prisoners and guide progress through their sentence, which blocked their progress and access to transfers and ROTL. Too many prisoners did not have a current sentence plan, most did not have regular meaningful contact with an offender supervisor, and the interventions provided were not predicated on an assessment of risk and likelihood of reoffending.

Recommendation: All prisoners should have an up-to-date risk assessment and sentence plan which is overseen by regular and meaningful contact with an allocated offender supervisor.

Section 1. Safety

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.

Courts, escorts and transfers

Expected outcomes:

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

- 1.1** *Most journeys were short but arrival was uncoordinated and prisoners remained for far too long on escort vehicles. Vans were clean and well equipped. Few prisoners were given sufficient notice of their transfer or information about the establishment.*
- 1.2** Most journeys to the establishment were from other London prisons and were therefore relatively short. However, they were uncoordinated and we saw prisoners arriving at lunchtime being held on vehicles waiting in the street outside the prison for up to an hour as reception was closed over this period. We further observed prisoners waiting for up to two hours to disembark once they had entered the prison. In the heat of the summer, these prisoners were held in stifling vehicle cells without air conditioning. The vehicles we checked were clean and in good order and carried appropriate equipment and refreshments.
- 1.3** Some arriving prisoners had been given little or no notice of transfer, with some having been taken out of workshops and classrooms on the morning of transfer. None of those we spoke to had been given any formal information about Brixton at their sending establishment.

Recommendations

- 1.4** **Transfers should be coordinated to arrive at Brixton during reception working hours.**
- 1.5** **Prisoners should not be held on escort vehicles for extended periods after arrival.**

Early days in custody

Expected outcomes:

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

- 1.6** *Reception was unwelcoming and processes took too long. Initial safety screening was perfunctory and did not sufficiently explore potential vulnerabilities. First night arrangements were weak and did not*

provide sufficient support. Cells were largely unprepared for occupancy. Too many prisoners did not feel safe on their first night. Induction processes were uncoordinated and haphazard.

- I.7** Prisoners in our survey and our focus groups were very negative about their treatment on arrival at the prison. Processes were unwelcoming and took far too long, causing long delays between arrival and location on residential units. There was no offer of a telephone call, shower or grocery packs (see section on purchases) in reception. There was no provision of food or a drink, and on one particularly hot day, we were told that, 'if they want a drink, there is a [dirty] sink by the urinal'. Holding rooms were clean but bare and contained very little information (see main recommendation S53).
- I.8** Initial safety screening was perfunctory and did not sufficiently explore potential vulnerabilities. Interviews were conducted in the general office areas and were not sufficiently private to enable prisoners to disclose concerns they might have had (see main recommendation S53).
- I.9** In our survey, fewer prisoners than at comparator prisons said that they had felt safe on arrival. There was no dedicated first night provision and prisoners were allocated to any available cell without additional support and advice. With the exception of a different coloured name card in wing (but not individual landing) offices, there was no recognition that prisoners were new to the establishment, and staff we spoke to were unaware that there might be concerns as, 'all prisoners have been locked up elsewhere before coming to Brixton'. One prisoner we spoke to told us that, 'it doesn't matter how many prisons you've been in, arrival at a new nick is one of the most stressful things you can go through' (see main recommendation S53).
- I.10** Cells were generally unprepared for occupancy and we saw dirty and damaged mattresses, insufficient lockers and no televisions in some.
- I.11** There were three separate inductions, depending on location. The process started on the day after arrival on A and B wings, on the following Saturday on C and D wings and within two days on G wing. Delivery was haphazard and in our survey only 62% of prisoners said that they had been on an induction course. There was no regular recording or monitoring of the prisoner-led process, and some inappropriate information was shared with new prisoners. There was some written information available (including translated information on C wing) but this was not available to all, and some of it was out of date. Many newly arrived prisoners were unaware that they had undergone any form of induction beyond a 'chat' with an orderly.

Recommendation

- I.12 Induction should start on the day after arrival and should provide prisoners with all the information necessary to access services and the regime.**

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.

I.13 *The safer custody meeting was well attended but the reasons behind anti-social behaviour were not collated and there was no trend analysis. Prisoners did not feel physically unsafe but too many felt victimised by staff. Prisoners on the vulnerable prisoner wing for issues relating to debt and bullying were separated from others on that wing, and there was insufficient consultation with and integration of the two populations of vulnerable prisoners. Some wing staff did not consider it their responsibility to implement the anti-bullying and antisocial behaviour strategy. There was no constructive work to challenge perpetrators or support victims.*

I.14 The safer custody group met monthly and attendance had improved over recent months. Prisoner representatives were appropriately included in the first part of the meeting and there was good discussion of the management of individual prisoners in the second part. Links with the security department were good and information sharing was adequate. Data analysis was undertaken each month but no trend analysis had been completed since the re-rolling of the prison. This, in addition to the lack of analysis of the reasons for bullying and violence, limited the level of understanding of issues unique to the prison.

I.15 In our survey, more prisoners than at comparator prisons said that they had ever felt unsafe at the establishment, and also that they felt unsafe at the time of the inspection (40% versus 32% and 22% versus 13%, respectively). This was considerably worse for some minority groups, including prisoners with disabilities, of whom 47% had ever felt unsafe and 36% currently felt unsafe, compared with 37% and 19%, respectively, of their able-bodied counterparts. More black and minority ethnic prisoners than their white counterparts had felt unsafe at the establishment at some time (see section on equality and diversity, and main recommendation S55). Category D prisoners located on C and D wings were much more positive, with only 18% saying they had ever felt unsafe.

I.16 However, data showed that the levels of violence were relatively low. Prisoners we spoke to informally and in groups did not report feeling physically unsafe and the environment around the prison was relatively calm. However, poor provision of information and care on arrival, sharing small cells with little time unlocked, and some disengaged staff contributed to a number of prisoners feeling anxious and unsettled. Levels of reported bullying and victimisation by prisoners were similar to those at other category C prisons. However, more prisoners in our survey than at comparator establishments said that they felt victimised by staff (31% versus 26%). This perception was particularly prevalent among those who were new to the establishment.

I.17 Vulnerable prisoners, most of whom had been convicted of a sexual offence, were accommodated on G wing. Their feelings of safety were similar to those of the main population. About a dozen men were located on G4, the top landing of G wing, for their own protection owing to debt and gang-related issues. This small population had more limited time out of cell and poorer access to the regime than the other vulnerable prisoners, without the necessary management oversight (see section on segregation). Concerns about potential bullying and victimisation of sexual offenders had not been proactively addressed and there was insufficient consultation with and integration of the two populations of vulnerable prisoners.

I.18 Identification of bullying and violence was undertaken by the two safer custody officers, who examined wing files each day and undertook investigations into incidents. Some wing staff did not consider it their responsibility to implement the anti-bullying and antisocial behaviour strategy, and as a result the quality of management and victim support plans was poor. Too many management plans were in place without the knowledge of the perpetrator, which undermined the potential usefulness of the approach, and others were not reviewed often enough. Many victim support plans were incomplete and ineffective. Few constructive

approaches were available to challenge perpetrators or support victims, other than moving location. Too few wing staff had received training in the management of bullying and violence.

Recommendations

- I.19 The reasons for bullying and antisocial behaviour should be collated and trend analysis should be reintroduced to inform the local strategy.**
- I.20 The prison should investigate and take action on prisoners' negative perceptions of their safety.** (Repeated recommendation 3.10)
- I.21 Managers should hold consultative meetings with vulnerable prisoners to gauge their perceptions on issues such as safety and access to the regime.** (Repeated recommendation 3.11)
- I.22 Wing staff should deliver the bullying and antisocial behaviour strategy, and the quality of management and support plans should be improved.**
- I.23 There should be interventions for bullies, such as tackling antisocial behaviour, and support for victims.** (Repeated recommendation 3.7)

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 *Progress against Prisons and Probation Ombudsman recommendations following deaths in custody was not actively monitored or reviewed. There was no analysis of trends in suicide and self-harm and the prevention strategy was not specific to the needs of the prison. The number of self-harm incidents was relatively low. The management of those in crisis was adequate and the quality of self-harm monitoring documents was, on the whole, good. Listeners were adequately supported but there were inadequacies in access to them and their use. Too few staff were trained in suicide and self-harm awareness.*

- I.25** There had been four deaths in custody since the previous inspection (although none since the re-role), three of which had been due to natural causes. Action plans had been developed for all four deaths but there had been no oversight of these following a change in the functional lead manager. The continuous improvement plan included some, but not all, of the Prisons and Probation Ombudsman findings, and it was not actively reviewed each month by the safer custody meeting.
- I.26** The number of self-harm incidents was relatively low, with 16 incidents, involving 11 individuals, in the previous six months. Oversight and management of suicide and self-harm prevention were provided by the safer custody meeting but there had been no trend analysis in the previous year. The strategy was not specific to the current population at the establishment and lacked focus on the potential issues presented on arrival and just before release.

- I.27** The number of assessment, care in custody and teamwork (ACCT) self-harm monitoring documents opened was similar to that at other category C prisons. The quality of documents had improved and was generally good. Most reflected an adequate level of engagement and a supportive approach. However, the quality of daily entries, and the level and effectiveness of management oversight were not sufficiently good. Care maps were sometimes not updated at reviews but were generally detailed and relevant. Prisoners we spoke to who were being managed through the ACCT process felt well supported and we attended a constructive and well-managed review.
- I.28** The number of Listeners (prisoners trained by the Samaritans to support those at risk of self-harm) had increased and was now adequate. However, in our survey fewer prisoners than at comparator prisons (34% versus 57%) said that they could access one when needed. There was a lack of information about Listeners on arrival and they struggled to move freely around the prison. Not all wings had a functioning Listener care room, and some were poorly furnished. G wing had dedicated Listeners and the others worked to a rota. They had been called out only 21 times in the previous six months. Listeners were adequately supported by the local branch of the Samaritans, representatives of which attended the prison every two weeks.
- I.29** According to the training database, only 40% of staff had completed the safer custody awareness training. The chaplaincy provided good support to prisoners and families following bereavement or during periods of personal crisis.

Recommendations

- I.30** **Trend analysis should be used to inform the localised suicide and self-harm prevention strategy.**
- I.31** **Access to and the use of Listeners should be reviewed, and identified improvements implemented.**

Housekeeping points

- I.32** The continuous improvement plan should include all recommendations from Prisons and Probation Ombudsman reports and should be reviewed at the monthly safer custody meeting.
- I.33** Daily entries in assessment, care in custody and teamwork (ACCT) documents and management oversight should be improved.
- I.34** All staff should complete the safer custody awareness training.

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.²

² We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

I.35 *A local safeguarding adults policy had been developed and was in the process of being implemented.*

I.36 There was a safeguarding adults policy but it had not yet been fully embedded in practice. Staff awareness training had not yet been provided and links with the local safeguarding adults board had not yet been established.

Recommendation

I.37 **The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes.**

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 *Physical security measures were excessive for a category C/D prison. The flow of intelligence was limited. The availability of drugs was similar to that at other category C prisons but mandatory drug testing positive rates were high.*

I.39 The re-rolling of the prison to a category C/D prison meant that its general infrastructure was over-secure, especially for those on the category D wings. Insufficient regime changes had been made since the re-rolling; for example, category C prisoners were locked up for most of the day if unemployed (see section on time out of cell), category C and D prisoners were escorted everywhere outside of free-flow movement, and category D prisoners had no free access to exercise yards (see main recommendation S54).

I.40 The number of security information reports (SIRs) was low, which suggested a lack of engagement by the wider staff group. Analysis of SIRs was unsophisticated and relied on one of the security managers extracting individual issues for presentation to the monthly security meeting. The processing of the (electronic) SIRs was sometimes slow and we found some dating back over a week that had not been opened.

I.41 The security department was reliant on the residential staff group to carry out requested target searching. There was a good record of any subsequent finds but there was no way to quantify how many of the requested searches had actually taken place and therefore no further analysis of problems.

I.42 In our survey, 30% of prisoners, similar to the comparator, said that it was easy to get drugs but fewer than at comparator prisons (15% versus 18%) said that it was easy to get alcohol. A detailed supply reduction action plan had been developed but not all measures had yet been implemented. There was good information sharing between security and drug strategy managers, and measures such as strip-searching prisoners returning from release on temporary licence (ROTL) were being piloted. The prison had discussed the reasons for this with prisoners who understood the rationale and also felt that it gave prisoners being

temporarily released a measure of protection from coercion by others. However, there was clear evidence (and reports) of cannabis use during the inspection which was not challenged by staff.

- I.43** The random mandatory drug testing (MDT) positive rate averaged 17% for the previous six months, which was higher than at similar prisons. Little suspicion testing took place (one test had been conducted in the previous two months) because of delays in the processing of intelligence reports and the redeployment of MDT officers. The security department did not monitor the number of requested tests completed.
- I.44** There were no prisoners subject to closed visits at the time of the inspection, which was surprising, and there had been only three prisoners on closed visits in the year to date. Four visitors were banned at the time of the inspection.

Recommendation

- I.45** The prison should ensure that all measures identified in the supply reduction strategy are in place.
- I.46** The apparent low number of security information reports should be investigated and measures taken to ensure whole-prison involvement in security.

Incentives and earned privileges³

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.47 *Prisoners had little confidence in the incentives and earned privileges scheme. Conditions for the few on the basic regime were poor.*

- I.48** In our survey, only 50% of prisoners (against the 54% comparator) said that they had been treated fairly under the incentives and earned privileges (IEP) scheme. Many prisoners we spoke to were not aware of the benefits of being on the enhanced level.
- I.49** We observed many notices (especially on G wing) focusing on the negative side of the scheme – for example, warning that a red entry would be issued if prisoners did not wear the appropriate clothing on the wing (see Appendix V) – but no positive motivational signs or displays.
- I.50** At the time of the inspection, there were seven prisoners on the basic level of the scheme. Recording of day-to-day management was inconsistent; we were unable to find completed review records for some, and for most the daily records identified in the policy were not always completed. The targets set for prisoners on the basic level of the scheme were not sufficiently individualised. The basic regime was very poor and allowed only an hour out of

³ In the 2010 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.

cell per day. Their half-hour exercise was taken individually and there were few opportunities to demonstrate improvements (or otherwise) in behaviour.

Recommendation

- 1.51 The regime and management of the basic level of the IEP scheme should be improved. Prisoners should have achievable individual targets and the opportunity to demonstrate progress which should be recorded consistently and regularly reviewed.**

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.

- 1.52** *The number of adjudications was low and procedures were well managed. There was little use of force but management oversight was poor. Use of segregation was not high but the regime was poor and unofficial segregation in other areas of the prison was not sufficiently well managed.*

Disciplinary procedures

- 1.53** The number of adjudications was low compared with that at comparator prisons (52 per 100 of the population compared with 90 elsewhere). The adjudications we observed were carried out well, with the prisoners involved at all stages.
- 1.54** Management oversight was good and a quarterly adjudication standardisation meeting quality assured 10% of adjudications, reviewed an appropriate range of statistics and made changes where needed to the awards tariff.

The use of force

- 1.55** There was little use of force, with only 31 incidents in the year to date; this equated to four per 100 prisoners, compared with six per 100 in comparator prisons. However, recording of use of force was very poor, and only 12 out of the 31 dossiers had been completed to a satisfactory standard. Many had important documentation missing and one record was missing entirely. Recording of the four uses of special accommodation in the year to date was also poor and showed a lack of management oversight. The average length of stay in this accommodation was high, at over 19 hours, and there was documentary evidence to show that prisoners could have been removed much earlier than was actually the case. There had been no uses of batons in 2013 but we were unable to identify any investigation into 2012 incidents.
- 1.56** Basic statistics on use of force were presented to the security committee but there had been no use of force committee meeting since January 2013 and no scrutiny of the records since then. Not all planned incidents had been recorded. One of the five planned incidents that had been video-recorded showed excessive force being applied. This had been witnessed by a governor grade at the time and appropriate action subsequently taken.

Recommendations

- I.57 Recording and management oversight of the use of force, including special accommodation, should be effective.**
- I.58 Any use of a baton should be investigated to give assurance that its use was appropriate and proportionate.** (Repeated recommendation 7.32)

Housekeeping point

- I.59** Planned control and restraint interventions should be routinely video-recorded. (Repeated recommendation 7.33)

Segregation

- I.60** The segregation unit could hold up to six prisoners in normal accommodation and one in special accommodation. The unit usually held around four or five prisoners but was mostly empty during the inspection. The regime on the unit was very poor, with no on-unit activity and no opportunity to attend any off-unit activity. We were told that prisoners could attend corporate worship but could find no evidence of this. Monitoring of the use of the unit was good and the quarterly segregation monitoring and review group met regularly to consider an appropriate range of data.
- I.61** Cells on the unit were mainly clean and in good order. All meals were served at cell doors and exercise on the large and very bare yard was taken individually. The shower area was being refurbished during the inspection.
- I.62** Daily observational records were minimal and only reflected whether or not prisoners had undergone 'regime', which meant a having a shower, exercise and a telephone call. Reintegration planning was weak and we saw no evidence of a considered approach to managing longer-term stays.
- I.63** A number of prisoners were segregated on the G4 landing because of suspected bullying incidents. There had been a decision to place all 'non-offence-related' vulnerable prisoners on this landing, with a restricted regime. This unit was not subjected to the management oversight that would automatically be applied to an official segregation unit.

Recommendations

- I.64 The regime for prisoners in the care and separation unit should be improved.** (Repeated recommendation 7.46)
- I.65 Prisoners should not be segregated without the appropriate level of authority and management oversight.**

Housekeeping point

- I.66** Daily case entries for prisoners on the segregation unit should be qualitative and demonstrate interaction with segregated prisoners, reflecting current issues or concerns.

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.67** *Clinical treatment regimes were based on individual need, and prisoners with drug and/or alcohol problems could access good levels of psychosocial support. However, the high number of prisoners not requiring substance misuse interventions on the drug recovery unit, and the evident drug use on A wing, compromised the aims of the unit.*
- I.68** The number of prisoners receiving opiate substitute treatment had reduced since the prison's re-role. Treatment regimes were flexible and clinical reviews took place regularly, with both clinical and psychosocial service providers present. We had concerns about the practice of watering down methadone, which was currently under review (see section on health services).
- I.69** The drug strategy was up to date and an action plan, based on a recent comprehensive needs analysis, was in place. A separate alcohol strategy lacked detail and was not informed by the needs analysis. Substance misuse strategy meetings were held monthly, attended by representatives of relevant departments, and a designated drug strategy manager was in post.
- I.70** Psychosocial support was provided by the Rehabilitation of Addicted Prisoners trust (RAPt) and appropriately resourced. The RAPt team was well integrated into the prison, attended relevant multi-agency meetings, and contributed to ACCT self-harm monitoring reviews, ROTL, home detention curfew and multi-agency public protection arrangements (MAPPA) boards. However, staff had to rely mainly on peer supporters to make new arrivals aware of these services. The service information leaflet was out of date.
- I.71** RAPt had developed a wide range of interventions, including family support, for prisoners, independent of location, and 320 prisoners were engaged in group- or one-to-one work at the time of the inspection. Thirteen peer supporters provided valuable additional input and, although 12-step Narcotics Anonymous and Cocaine Anonymous meetings only took place on the drug recovery unit, peer-led recovery meetings were held on all wings. A prisoner survey on substance use services had been conducted but there were no regular focus groups for service users.
- I.72** A high level of support had been developed for prisoners residing on the drug recovery unit, including the presence of RAPt workers, a four-week 'stepping stones' programme, activities delivered by community service groups, a drop-in service provided by substance misuse nurses, peer support and fellowship meetings, and drug testing. The unit was located at the top of A wing and provided 60 spaces. However, a third of prisoners there did not require treatment, and the evident and blatant use of cannabis on A wing had a negative impact on prisoners wishing to remain drug free.
- I.73** A wide range of drug intervention programme (DIP) workers visited the prison regularly and local DIP teams also offered activities such as yoga and acupuncture to prisoners on the drug recovery unit.

Recommendation

- I.74** Prisoners committed to recovery and located on the drug recovery unit should not be exposed to high levels of drug use.

Housekeeping points

- I.75** There should be one overall substance misuse strategy document and action plan for drug and alcohol services.
- I.76** Prisoners should receive up-to-date information about drug and alcohol services at the beginning of, and throughout, their time in custody.
- I.77** The Rehabilitation of Addicted Prisoners trust (RAPt) team should develop a mechanism for regular service user feedback to inform future service provision.

Good practice

- I.78** *Prisoners on the drug recovery unit could access a wide range of support, including one-to-one work, courses, a structured programme, self-help groups and activities provided by community organisations.*

Section 2. Respect

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.

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** *Small cells designed for one were used for two, resulting in very cramped conditions which lacked privacy. Outside areas were clean but some wings were shabby and dirty and some showers lacked privacy. Responses to applications were fair but not timely. Some prison rules were inconsistently applied. Access to telephones was hindered by limited time out of cell.*
- 2.2** Half of the cells designed for one prisoner were occupied by two. These men lived in extremely cramped and uncomfortable conditions with very little privacy. Some of the cells did not have adequate screening around the toilet, some furniture was in disrepair and many cells did not have a lockable cupboard (see Appendix V).
- 2.3** Prisoners were issued with only one clean sheet a week and on some wings underwear was limited to two pairs per man each week, despite the clothing exchange policy allowing seven pairs of socks and seven pairs of underpants each week. Laundry facilities were adequate.
- 2.4** Outside areas were generally clean and well maintained. Wings and communal areas were worn and shabby, and sometimes dirty, especially after the evening meal. Although respondents to our survey suggested that it was not quiet enough on the wings to sleep at night, we did not find the noise levels at night to be unacceptable.
- 2.5** Some communal showers lacked privacy and some were poorly decorated and maintained, with peeling paint, damaged flooring and poor ventilation.
- 2.6** We found application forms to be readily available on all of the wings. Some prisoners said that it was difficult to get staff to complete basic tasks on their behalf and had to resort to making a formal application. Most prisoners felt that applications were dealt with fairly but only 41%, compared with 49% elsewhere, said that they were replied to within seven days. We were told by staff that responses to applications were not tracked or monitored for timeliness, and some prisoners said that they had not received a reply to applications they had submitted.
- 2.7** Access to telephones was compromised by the lack of evening association on most wings (see also section on time out of cell). This limited prisoners' ability to contact family and friends. Telephones were not always private enough as some did not have a hood.
- 2.8** Prisoners told us that the prison rules were not always fully explained to them and there was evidence of inconsistent application across the wings. For example, the offensive display policy was not enforced on every wing. In addition, prisoners on G wing were not allowed to wear shorts and vest tops while exercising outside, whereas those on other wings were.

Lock-up times varied from wing to wing and were not always in line with the published regime.

Recommendations

- 2.9 Cells designed for single occupancy should not be used for two prisoners.** (Repeated recommendation 2.4)
- 2.10 Toilets in cells on A, B and G wings should be appropriately screened.** (Repeated recommendation 2.2)
- 2.11 All showers should be screened to allow full privacy.** (Repeated recommendation 2.30)
- 2.12 Prisoners who receive prison-issue clothing should have sufficient sets of underwear each week.** (Repeated recommendation 2.20)
- 2.13 Prison managers should ensure the consistent application of wing rules.** (Repeated recommendation 7.18)

Housekeeping points

- 2.14** Telephones should be placed in booths. (Repeated recommendation 2.7)
- 2.15** Rules should be thoroughly explained to prisoners. (Repeated recommendation 7.20)

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.

2.16 *Our survey results in relation to interactions with and treatment by staff were poor, with some prisoners feeling victimised by staff. Some staff had not adjusted to the need to develop the long term and constructive relationships appropriate to a category C regime. The quality of staff–prisoner interactions observed during the inspection was mixed. Consultation arrangements were good. Personal officers were not involved in sentence planning boards or offender assessment system (OASys) reviews but case note entries were good.*

- 2.17** Our survey results in relation to interactions with and treatment by staff were very negative and considerably worse than in similar prisons, particularly in regard to victimisation by staff (see section on bullying and violence reduction). The quality of staff–prisoner interactions observed during the inspection was mixed, and ranged from abrasive and unhelpful to caring and very supportive. Some staff had not adjusted to the need to develop the long term and constructive relationships required by a category C regime. (See main recommendation S55.)
- 2.18** Consultation arrangements were good. In addition to regular wing meetings, there had been a series of transition meetings, and the governor chaired a monthly wing representatives meeting.

- 2.19** The personal officer scheme had been relaunched in 2012 and was location based. Although many prisoners could not readily identify their personal officer, and in our survey fewer than in comparator prisons said that there was a member of staff they could turn to if they had a problem, many told us that they knew whom to approach for practical issues. Electronic case note entries were regular, qualitative and demonstrated a good knowledge of prisoners, with evidence of effective management oversight. However, personal officers were not involved in sentence planning boards or offender assessment system (OASys) reviews.

Recommendation

- 2.20** Personal officers should contribute to sentence planning boards and offender assessment system (OASys) reviews where appropriate.

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic⁴ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

- 2.21** *The strategic management of equality and diversity lacked focus and direction. Identification of some protected characteristics was poor and the prison was unsighted on the scale and range of need, particularly for older and gay/bisexual prisoners and those with disabilities. We found no evidence to suggest that black and minority ethnic or Muslim prisoners were treated unfairly because of their race or religion. Provision for foreign national prisoners was generally good but those who spoke little or no English had a more negative experience.*

Strategic management

- 2.22** Leadership of, and formal structures for, equality and diversity had lapsed in the previous six months. A concise overarching policy mentioned all protected characteristics, and separate policies for older and foreign national prisoners were adequately specific. The equality action team (EAT) had not met for six months; although not reviewed by the EAT since then, the equality action plan was comprehensive. Most staff had completed some diversity awareness training and were reasonably knowledgeable about equality issues. However, they were more sighted on issues around race and religion than on older prisoners, foreign nationals or those with disabilities (see main recommendation S55).
- 2.23** Other than nationality-specific support groups, there were no other groups or forums for prisoners from any minority groups. Monitoring of equality of access to key aspects of the regime was adequate for race but there was no monitoring for other protected characteristics (see main recommendation S55).

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

- 2.24** There were too few prisoner equality representatives and they were inadequately trained and supported, with little opportunity to meet equality staff. Discrimination incident report forms (DIRFs) were freely available but many prisoners were unaware of them or had limited confidence in the system. Only 13 DIRFs had been submitted in the year to date. In the same period, a large number of general complaint forms citing discrimination had been submitted but had not been shared with the equality team. Investigation into some DIRFs was not rigorous enough and there were sometimes long delays in responding. There was no senior management or external scrutiny of the responses to DIRFs (see recommendation 2.42).

Housekeeping point

- 2.25** The prison should take measures to improve prisoners' understanding, knowledge of and confidence in the discrimination incident report form system.

Protected characteristics

- 2.26** Over half of the population were from a black and minority ethnic background. In our survey, black and minority ethnic prisoners reported more negatively than their white counterparts across a range of important indicators, including safety, staff respect, victimisation/intimidation by staff and their experience in reception. However, those that we spoke to were generally positive about their experience at the establishment and made no specific complaints about unfair treatment or discrimination because of their race. In our survey, 3% of respondents identified themselves as Gypsy/Romany/Traveller but there was no mechanism for identifying them and no specific support (see main recommendation S55).
- 2.27** Foreign national prisoners represented over 14% of the population. Initial identification was good; Home Office staff visited the prison weekly and surgeries were well attended.
- 2.28** There was no independent immigration advice. Prisoners were allowed to make a free telephone call monthly if they did not receive visits, and this was used regularly. During the inspection, 12 detainees were being held solely on immigration powers, one of whom had been held for over a year.
- 2.29** In our survey, foreign national prisoners reported more negatively than their British counterparts across a range of indicators, including being treated with dignity. We met a number of prisoners who spoke/understood little English who felt isolated and anxious. Staff rarely used professional interpreting services or materials in languages other than English. There were insufficient materials in foreign languages in the library (see section on learning and skills and work activities).
- 2.30** There was a variety of support groups for prisoners of different nationalities. For example, Diaspora, a charitable organisation, held monthly support groups for Jamaican and, very recently, Nigerian prisoners; the Irish Chaplaincy visited every six weeks to support Irish prisoners; and a Polish minister visited Polish and many other Eastern European prisoners monthly. Other foreign national prisoners received no specific support.
- 2.31** Over 25% of the population were Muslim. In our survey, more Muslim than non-Muslim prisoners said that their religious beliefs were respected (67% versus 52%) but this group was more negative about some important indicators, including respect and victimisation by staff and their experience in reception. There was no monitoring of religion other than by number but we found no evidence to suggest that Muslim prisoners were discriminated against or treated unfairly because of their religion.

- 2.32** Although 22% of respondents to our survey reported a disability, data were not routinely collated by the EAT. Initial identification was by self-declaration to health services or reception staff on arrival. When prisoners told staff that they would need help in an emergency, a personal emergency evacuation plan (PEEP) was drawn up but there was no other follow-up care. At the time of the inspection, 11 prisoners had a PEEP; these were very basic but staff were aware of them. There was little appropriate accommodation for men with disabilities, and a number of prisoners with mobility problems were located on higher landings. There was a lack of individualised care for those with disabilities and many felt isolated and unsupported. There was no formal buddy/carer scheme. Identification of learning disabilities was good but follow-up support was inadequate.
- 2.33** The older population at the establishment had grown considerably since the re-role, with 15% over 50. Staff were not sighted on their specific needs and there was no individualised follow-up care. Many older prisoners felt uncared for and unsupported. We found one older prisoner who felt unsafe in the shower area and consequently had not taken a shower for 18 months. There was some specific regime provision for older prisoners, including a senior gym session, but otherwise provision was underdeveloped.
- 2.34** In our survey, around 6% of prisoners identified themselves as gay or bisexual. Measures to identify these prisoners were crude and insufficiently private. The prisoners we identified were not confident to disclose their sexuality and felt that there was inadequate support for them. Although there were no transgender prisoners at the time of the inspection, there had been two in 2012 and processes to support them appeared to have been good.

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.

2.35 *Faith provision was good and prisoners were well supported by the proactive chaplaincy. External links with faith-based groups were impressive. Arrangements for Ramadan were very good.*

- 2.36** The chaplaincy comprised a range of faith leaders who were fully integrated into prison life. The large multi-faith facility was adequate and included a separate ablutions area. All faiths were properly ministered and, despite some poor survey responses, during the inspection prisoners were extremely positive about the faith provision and support offered by the chaplaincy.
- 2.37** Corporate worship services were well attended, although less so by some vulnerable prisoners from G wing, who told us that they did not feel safe to mix with prisoners from other wings. To counteract this, chaplains were highly visible on G wing. A range of classes and groups was facilitated and there were effective links with faith-based community groups, particularly concerned with mentoring and support on release. The chaplaincy ran a programme called 'Faith in the Future', which was well regarded by many of the prisoners we spoke to (see section on attitudes, thinking and behaviour).
- 2.38** Ramadan started during the inspection, and the preparations were excellent. Muslim prisoners were satisfied with the arrangements.

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.

2.39 *Prisoners had limited confidence in the complaints system and the number of complaints submitted was low. Most responses were of a good quality but some relating to staff were not investigated thoroughly enough or responded to appropriately.*

2.40 In our survey, fewer prisoners than at comparator establishments said that it was easy to make a complaint and that they were dealt with quickly. Complaint forms were freely available but prisoners had limited confidence in the system, particularly if their complaint concerned a member of staff. In the previous six months, 874 complaints had been submitted, which was much lower than at similar prisons. There was little strategic analysis of trends or patterns of complaints, so no action was taken to address recurring issues (see paragraph 2.24).

2.41 At the time of the inspection there was no formal quality assurance procedure. Most of the responses we sampled were of a good standard; they were timely, polite and generally addressed the issue raised. However, a small number, particularly those concerning staff, failed to investigate or respond to the issues appropriately.

Recommendations

2.42 **The prison should explore prisoners' limited confidence in the discrimination incident and general complaints processes and take action to address it. This should include a formal quality assurance process and informing prisoners of the results of regular analysis of the patterns and trends of complaints and the response to them.**

2.43 **Complaints about staff should be properly investigated and responded to.**

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.

2.44 *Legal visits arrangements were satisfactory but legal services provision was otherwise limited.*

2.45 In our survey, fewer prisoners than at comparator prisons said that it was easy to communicate with their solicitor, get bail information or get legal books from the library. There were no trained legal services staff but some offender supervisors were able to signpost prisoners to legal representatives. Legal visits provided an appropriate, sufficiently

private facility and offered adequate access to official visitors. The legal visitors we spoke to said that they had not experienced undue delays or searching before entry.

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.

2.46 *Health services were good, with effective coordination of providers. However, some prisoners had not been appropriately health screened on arrival and there was no routine secondary health assessment. Access to GPs, nurses and the dentist was good and care of prisoners with chronic diseases was reasonably well managed. Health promotion was developing, with good use of prisoner wing health care representatives. Generally safe administration of medicines was compromised by lack of privacy and lack of supervision on the wings. Primary and secondary mental health services were well integrated and provided men with a responsive range of services.*

Governance arrangements

- 2.47** Health services were provided by a consortium of contractors, led by Care UK and including South London and the Maudsley (SLaM) and Guys and St Thomas' (GStTFT) NHS Foundation Trusts. Oversight of performance was good, with collaborative working relationships, in spite of some resource tensions.
- 2.48** A robust health needs assessment had been completed in late 2011 and an audit of health care had been conducted in December 2012, which highlighted the changed population profile.
- 2.49** The health care unit was generally clean and there had been limited refurbishment of wing treatment rooms; however, some still had grubby floors and the rooms in reception had no hand-washing facilities.
- 2.50** Partnership working was facilitated through quarterly partnership board meetings, with representation from commissioners, providers and the prison. Policies and protocols were accessible in the health care centre and wing treatment rooms. Some policies were out of date, with no evidence of systematic review. We did not see current local policies for infection control, blood-borne viruses, immunisations or palliative care.
- 2.51** Health promotion was developing, with good use of enthusiastic prisoner health care wing representatives. Regular health screening campaigns were held on the wings and prisoners told us that these provided a good opportunity to get information about and support for their health issues. Written literature was available only in English and was not always available on the wings.
- 2.52** Chronic disease management met individual needs, with the GP providing most of the care. Almost a third of appointments across all primary care clinics were not attended and as a result, clinics were usually overbooked.

- 2.53** Clinical incidents were reported electronically and were reviewed at the monthly clinical governance meeting. Sixty incidents had been reported in the first four months of 2013. Nurses told us that they were confident about reporting incidents.
- 2.54** Prisoners could only use the prison complaints system to provide feedback on health care.
- 2.55** Resuscitation equipment, including automated defibrillators, was held in the main health care centre and the wing offices. It was accessible to prison staff but only five of them had received training in how to use it. Health services staff received annual training in the use of this equipment.
- 2.56** Mandatory training for health services staff was reasonable but there was no structured clinical supervision for primary care nurses.

Recommendations

- 2.57** **Prisoners should be able to report health care complaints confidentially.**
- 2.58** **All prison staff should receive basic life support training and sufficient staff should be trained to use the automated defibrillators to provide 24-hour cover across the prison.**

Housekeeping points

- 2.59** A cleaning schedule for all health care areas should ensure compliance with national cleanliness and infection control requirements.
- 2.60** Health care policies should reflect key health priorities and the needs of the prison and be up to date.
- 2.61** Written health care information should be available in a range of appropriate languages. (Repeated recommendation 5.19)
- 2.62** Nurses should be trained in chronic disease management, to release doctor capacity for more complex cases.
- 2.63** There should be further analysis of the 'did not attend' rates to focus appropriate action on improving attendance at relevant clinics. (Repeated recommendation 5.24)

Delivery of care (physical health)

- 2.64** In our survey, more prisoners than at comparator prisons (50% versus 43%) said that the overall quality of health care was good, and that the quality of the service provided by the GP was good (54% versus 47%). However, fewer said that the quality of care provided by the nurses was good (50% versus 60%). We noted effective rapport between nurses and prisoners.
- 2.65** In our survey, fewer prisoners than at similar prisons (50% versus 71%) said that they had seen someone from health services on arrival at the establishment. We spoke to two prisoners who had arrived on the previous day and they had not seen anyone from the health care department; it was not clear whether health services staff knew they were in the prison.

- 2.66** The reception screening we observed was thorough and identified key risks on arrival. There was no secondary health assessment.
- 2.67** Prisoners could see a nurse daily on the wings and were able to seek advice and treatments at minor ailments clinics run by the pharmacist. Access to health services overall was good. Most prisoners waited no more than three days for a routine appointment. The consultations we saw were appropriate, with effective follow-through of chronic diseases.
- 2.68** There were regular visits by a podiatrist, optician and physiotherapist. However, prisoners waited too long to see the podiatrist and the optician. There was good use of specialist nursing skills for tuberculosis screening and care, and nursing and pharmacy staff were trained to perform plain chest X-rays, enabling the radiographer to focus on more complex trauma cases and reduce external escorts.
- 2.69** The SystmOne electronic clinical records we reviewed were appropriately completed.
- 2.70** External hospital appointments were well managed, with few cancellations due to lack of escorts and no evidence of clinical care compromised.

Recommendation

- 2.71** **All prisoners should be health screened on arrival and followed up within 72 hours for a secondary health assessment.**

Housekeeping point

- 2.72** The waiting lists for podiatry and the optician should be prioritised and waiting times reduced.

Good practice

- 2.73** *The use of nursing and pharmacy staff to perform plain chest X-rays enabled the radiographer to focus on more complex trauma cases and reduce external escorts.*

Pharmacy

- 2.74** Pharmacy services were provided by GStTFT. Most prisoners received their medication in possession, with a small number having supervised administration or daily collection. Arrangements for assessing risk for in-possession medicines were timely and appropriate. Prisoners were encouraged to order their own medication using a system similar to that in the community.
- 2.75** Pharmacy staff carried out asthma, smoking cessation and daily minor ailment clinics. This enabled prisoners to receive a range of treatments and seek advice from the pharmacist.
- 2.76** Administration of medication from wing treatment rooms offered little privacy. Some of the collection hatches had a privacy area marked on the floor but these were not usually observed and there was no supervision by discipline staff. We saw prisoners having difficulty in hearing and talking to the nurse because of the level of background noise.

- 2.77** Methadone was watered down before administration, which was highly unusual (see also section on substance misuse). The methadone pump was rinsed out using purified bottled water and each bottle was opened and used for approximately a month, which risked increased bacterial growth in the dispensing equipment.
- 2.78** In-possession medicines in the treatment rooms were stored in wooden cupboards. One of the wing collection hatches could not be locked from the outside.
- 2.79** Blood glucose testing kits in the treatment rooms contained finger-prickers with disposable tips, which were inappropriately used for multiple patients.

Recommendation

- 2.80 Medication administration should be adequately supervised, to ensure privacy and compliance, and reduce the risk of bullying and diversion.**

Housekeeping points

- 2.81** Methadone should be administered as prescribed and without dilution, to ensure compliance with its licence conditions and preserve patient confidence; a system of assurance should ensure clinically acceptable levels of bacteria in the water used to rinse the methadone pump.
- 2.82** The administration hatches should be secure, to prevent the risk of hatches being opened from outside the treatment room or items being pulled through the hatches.
- 2.83** Only finger-prickers designed for multiple patient use should be in the glucose testing kits.

Good practice

- 2.84** *Pharmacy-led minor ailments and asthma clinics provided prisoners with community-equivalent advice.*

Dentistry

- 2.85** Dental care was provided by Weymouth Dental Practice. Access to the dentist was better than at most comparable prisons, with appointments scheduled five weeks in advance, and at the time of the inspection there were only two men on the waiting list for routine treatment who did not have appointments within the next five weeks. Prisoners were able to receive the full range of NHS treatments.
- 2.86** The dental suite had been refurbished and old equipment, including the dental chair, had been replaced. We saw the dental suite door left open during consultations and were told that this was because of concerns about staff safety.
- 2.87** The cleaning and decontamination of instruments was carried out in a separate adjoining room. A satisfactory infection control audit had been completed in December 2012.
- 2.88** A digital X-ray machine was in use, and the radiological protection certificate was up to date. All clinical equipment, including the autoclave and washer/disinfector, had been serviced in

the previous year. All equipment servicing and safety documentation was kept in the pharmacy.

- 2.89** Dental staff had received resuscitation training, and emergency drugs and oxygen were kept in the dental suite.

Recommendation

- 2.90** **Prisoners should be given privacy and confidentiality during their dental consultations and risks assessed on an individual basis.**

Housekeeping point

- 2.91** Equipment servicing and maintenance records should be readily accessible to the dental staff.

Delivery of care (mental health)

- 2.92** There were two different mental health service providers but these were integrated and coordinated effectively. Prisoners received good mental health support. All referrals were discussed and care was planned at an integrated weekly referral meeting. There were effective links with safer custody and probation staff. The total combined caseload was 76 and represented approximately 10% of the prison population.
- 2.93** Primary mental health services were provided by Care UK. Two dedicated mental health practitioners provided a responsive brief interventions service. Referrals included self-referrals and acceptance criteria were appropriate. There were 28 prisoners on the caseload and they were seen within 24 hours of a referral. We observed appropriate and focused consultations with prisoners.
- 2.94** An improving access to psychological therapies (IAPT) service provided prisoners with some useful cognitive behavioural techniques to support rehabilitation. There were 20 prisoners on this caseload and three waiting to be seen. Initial assessment was completed within a week of referral. The service provided individual and group sessions focused on sleep, anger and stress.
- 2.95** Secondary mental health services were provided by SLaM and supported prisoners with significant and enduring mental health problems. A team of community psychiatric nurses and psychiatrists accepted referrals, including self-referrals. Priority was given to prisoners already known to community mental health services and routine referrals were usually seen within 24 hours for initial assessment.
- 2.96** Mental health services struggled to find space to see patients appropriately and run group sessions.
- 2.97** All contact was recorded on SystemOne, and the care programme approach records we reviewed showed evidence of appropriate and timely risk assessments, care plans and reviews.
- 2.98** There was recognition of the specific needs of prisoners with learning disabilities and vulnerabilities but there was no dedicated provision or structured support.

- 2.99** Four men had been transferred to inpatient units at other prisons in the previous year because of acute mental health problems. All transfers were completed within a few days and pre-transfer care was well managed.

Recommendation

- 2.100** **Structured support should be provided for prisoners with learning disabilities and other vulnerabilities.**

Housekeeping point

- 2.101** Appropriate spaces for individual and group work should be identified.

Good practice

- 2.102** *The improving access to psychological therapies service mirrored good community services and provided prisoners with helpful coping techniques to prepare for their release.*

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.

- 2.103** *The number of respondents to our survey who were positive about the quality of the food provided was in line with that at other prisons. Meals were served too early and breakfast packs were given out on the day before they were to be eaten. Hotplates were clean but some serveries were in a poor state of decoration. Prisoners working in the main kitchen could not complete National Vocational Qualifications.*

- 2.104** In our survey, 29% of prisoners said that the food provided was good or very good, which was in line with the comparator, and we received few complaints about it. The food we tasted was reasonable. However, prisoners told us that sometimes the food ran out and they could not get their meal of choice. Others said that portions were too small, although the ones we saw were adequate. Menus were clear, easy to understand and provided a wide range of meals, including at least one hot meal a day. Breakfast packs were given out at lunchtime on the day before consumption. Prisoners on main wings were required to eat their meals in cramped cells and did not have the opportunity to eat in association.
- 2.105** Consultation with prisoners about the food provided was generally held each month and some changes had been made as a result. Catering staff were also visible on the wings at serving time to identify issues and answer queries.
- 2.106** Catering for special diets was appropriate. Preparation and provision for Ramadan had been particularly good.

- 2.107** The main kitchen was new and well equipped. Prisoners from G wing worked in the kitchen and were well supervised. Initial training was adequate but they could not complete National Vocational Qualifications.
- 2.108** Some serveries on the wings were in a poor state of decoration but hotplates were well maintained and clean. Meals were served before the publicised times.

Recommendations

- 2.109** **Breakfast packs should be issued on the day they are meant to be eaten.**
- 2.110** **Prisoners on the main wings should be able to eat out of their cells.** (Repeated recommendation 8.2)
- 2.111** **Lunch should not be served before 12 noon and the evening meal not before 5pm.** (Repeated recommendation 8.9)

Housekeeping point

- 2.112** Serveries should be maintained in good decorative order.

Purchases

Expected outcomes:

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

2.113 *Prisoners were generally dissatisfied with the range and price of goods but we found the shop list to be sufficiently diverse. New arrivals waited too long to receive their first shop order. Consultation arrangements about the shop were limited. There was very limited access to catalogues and prisoners were inappropriately charged an administration fee for orders.*

- 2.114** In our survey, fewer prisoners than at comparator establishments, and fewer black and minority ethnic than white prisoners said that the prison shop sold a wide enough range of goods to meet their needs (39% versus 44% and 36% versus 44%, respectively). We found no evidence to support these responses, as the range of items available was sufficiently broad and catered for the needs of minority groups. Throughout the inspection, prisoners told us that the shop prices were too high and that telephone credit was very expensive, and we agreed with this.
- 2.115** Some prisoners could wait up to 10 days before they received their first shop order. This was compounded by the lack of reception grocery packs for new arrivals (see also section on early days in custody). Consultation arrangements about the shop were too limited and prisoners were not aware of the changes that had been made to the shop list or the reasons for them.
- 2.116** There was very limited access to a few products from one catalogue and inconsistent access to another, and prisoners were charged a 50 pence administration fee for orders.

Recommendations

- 2.117** The cost of items on the prison shop list, including telephone credit, should be in line with that in the community.
- 2.118** There should be no administration charge for catalogue orders.

Housekeeping points

- 2.119** Prisoners should be able to buy items from the prison shop within 24 hours of their arrival. (Repeated recommendation 8.17)
- 2.120** Consultation about the shop should be inclusive and decisions well publicised.
- 2.121** More catalogues should be available for prisoner orders. (Repeated recommendation 8.13)

Section 3. Purposeful activity

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.

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.⁵

3.1 *Time out of cell was inadequate for most category C prisoners. Category D prisoners did not have sufficient access to outside areas.*

3.2 In our survey, fewer prisoners than at comparator establishments said that they spent 10 or more hours out of their cell on a weekday and only 61% (against the 77% comparator) said that they went on association five times a week. There were enormous variations between wings. Those on the category C units had the worst experience, with only one hour of evening association a week (unless they were employed off the wing or were on the enhanced level of the incentives and earned privileges scheme). In practice, this was even more limited than was described in the core day schedule; we found prisoners being locked away early, at 7pm, when association was scheduled until 7.30pm and staff were on duty until 8pm.

3.3 Unemployed category C prisoners had three hours' daytime association per day, which included exercise. They had just one hour a week of evening domestic duties time, so their daily weekday average time out of cell was 3.25 hours. Our roll checks indicated that this applied to 60% of all category C prisoners. The small number who were employed full time were out of their cells for approximately seven hours a day.

3.4 Those on the vulnerable prisoners wing had more time out of cell and were unlocked twice a day, for up to three hours per session, except for the small number on the G4 landing (see section on segregation), who had considerably less time out of cell. Evening association was not available for any prisoners on this wing, except for a small number of employed men, who had a brief domestic period to get a shower and make a telephone call.

3.5 The regime on C wing, which housed only category D prisoners, had recently improved and all prisoners were unlocked from 8am to 7.30pm. However, their freedom of movement was restricted to their wing and they did not have free access to outside areas.

3.6 There were 50 prisoners on D wing and most were working outside the prison, returning as late as 8.30pm. They could remain out of their cells all day, up to 10pm, but when they stayed in the prison they did not have free access to outside exercise areas.

3.7 There were four exercise areas and they were all clean. The yard serving the vulnerable prisoners wing was small and with only limited seating.

⁵ 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.

Recommendations

- 3.8 Category C prisoners should be able to spend more time out of cell, and daily evening association should be provided.**
- 3.9 Category D prisoners should be allowed free access to outdoor exercise areas.**

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.

3.10 *There was a well-reasoned and achievable long-term strategy but the management of learning and skills provision was inadequate. The quality improvement group had not met for several months and there was no clear focus on improving the quality of learning and skills. Insufficient action had been taken to address key issues, particularly the maximisation of available activity places. The prison had developed appropriate links with a range of employers, but this activity was insufficiently coordinated within the prison. There were too few activity places, most of which were part time, and many of the existing places were not utilised. The variety of education courses was poor and there were insufficient progression opportunities. The quality of provision and the use of the virtual campus were inadequate. There were missed opportunities to offer prisoners qualifications or recognise skills. Few prisoners took qualifications but achievements were mostly high for those who did. The library was poorly managed and there was inadequate recording of data to inform management of the service.*

3.11 *Ofsted⁶ 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

- 3.12** *There was a well-reasoned and achievable long-term learning and skills strategy and the soon-to-be-completed new and refurbished activities buildings would provide sufficient and high-quality activities. However, the management of current learning and skills provision was inadequate.*
- 3.13** *Overall, the learning and skills provision, contracted to A4e, was also inadequate, although a new and experienced manager had recently taken up post and was well placed to make improvements. Quality assurance arrangements were spasmodic. The monitoring of the quality of teaching and learning was underdeveloped, with few observations having taken*

⁶ 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>.

place. The quality improvement group had not met for several months and there was no clear focus on improving the quality of learning and skills. There was insufficient sharing of best practices in teaching and learning. Self-assessment was reasonable and data analysis and use were generally satisfactory. However, insufficient actions had been taken to address key issues, particularly the maximisation of available activity places.

- 3.14** Most learning and skills staff were well qualified and resources generally adequate, although there was inadequate use of information technology in lessons and no interactive whiteboards in the Portakabin classrooms.
- 3.15** Internal working relationships between the A4e, the National Careers Service (NCS) (Prospects), other agencies and the prison were satisfactory, although insufficient action had been taken to improve provision and minimise disruption to activities during major refurbishment and building work. The prison had developed appropriate links with a range of employers, which were used to improve employment opportunities for prisoners, but this activity was insufficiently coordinated within the prison.
- 3.16** Induction to learning and skills was adequate and most prisoners were seen on time. Initial assessment of prisoners' literacy and numeracy support needs was robust but the results were not used effectively to inform appropriate placement to activities. Prisoners identified with support needs were not appropriately dealt with unless they attended a course in education or vocational skills. The activities allocation process was poor and there were insufficient links between sentence planning and allocation to activities.

Recommendations

- 3.17 Observations of teaching and learning should be improved to include all areas of learning and skills, and share best practices to improve the quality of teaching, learning and assessment.**
- 3.18 The initial assessment of prisoners' literacy and numeracy needs should be used effectively to better inform planning and provision of support.**
- 3.19 Sentence planning should link effectively with the allocation process, and improved activities allocations should maximise places.**

Provision of activities

- 3.20** There were only around 439 activity places, which was far too few for the prison population. Most activities were part time and many of the existing places were not utilised. Over 130 prisoners were employed in wing jobs, most of which were of low quality, poorly managed and did not fully occupy prisoners during the core day. Approximately 40% of prisoners were unemployed and we found over half the population on the wings during the day with nothing to do; this was of particular concern in a training prison. The range and number of activities available for vulnerable prisoners were exceptionally poor, with only around 20% involved in any learning and skills activity (see main recommendation S56).
- 3.21** Only around 177 prisoners were enrolled on education courses. The variety of courses was poor, and included literacy, numeracy, information and communications technology (ICT), English for speakers of other languages (ESOL), art, customer service and business start-up. Most programmes were at a low level and there were insufficient progression opportunities. The range of accredited vocational training was very poor for a training prison; at the time of the inspection, only 12 prisoners were taking courses in PE and industrial cleaning.

Recommendations

3.22 The variety and range of activities for vulnerable prisoners should be improved.

3.23 The range and variety of vocational training courses should be considerably increased.

Quality of provision

3.24 The quality of provision was inadequate. Too many teaching sessions were slow paced and lacked stimulation or challenge for learners. Sessions were poorly planned, with insufficient account taken of individual learner needs. Learners on Open University and distance learning courses were adequately supported by A4e and NCS staff. The use of the virtual campus (internet access for prisoners to community education, training and employment opportunities) was inadequate and was not used effectively to help prisoners in searching for jobs or support learning.

3.25 High standards of skills were demonstrated by prisoners in the bakery, and those in the kitchen developed appropriate catering skills, although these were not accredited. There were also missed opportunities to offer prisoners qualifications or recognise skills in other areas such as recycling and waste management, and there was no accreditation of employability skills. There was no outreach support for literacy and numeracy on the wings or in work areas.

Recommendations

3.26 The quality of teaching and learning should be improved.

3.27 Access to the virtual campus should be improved and employability and practical skills should be accredited.

3.28 All prisoners with identified needs in literacy and numeracy should be appropriately supported.

Education and vocational achievements

3.29 Although few prisoners took qualifications, achievements were mostly high for those who did, at well over 85%. However, achievements on a small proportion of courses, particularly level 2 English, were poor, at 35% over the previous year. Learners used safe working practices. Attendance at many classes was low, with some sessions only half full. Punctuality was poor, with too many learners arriving late and disrupting lessons.

Recommendations

3.30 Achievement rates for learners on numeracy and English courses should be improved.

3.31 Attendance and punctuality should be improved.

Library

- 3.32** The library service was provided by Lambeth Borough Council and was operated by one member of staff with the support of two orderlies, all of whom were unqualified. The library was poorly managed and there was inadequate recording of data to inform management of the service.
- 3.33** The library was centrally situated and, although small, offered a welcoming environment. However, access arrangements were poor and the number of prisoners using the library was exceptionally low, with only around 55 prisoners using the facility each week. The library was not open in the evenings or at weekends.
- 3.34** Prisoners had appropriate access to Prison Service Orders but the number and range of other materials, and in particular those for foreign national prisoners, were inadequate. There was no induction to the library for new prisoners. Provision for Toe by Toe (a mentoring scheme to help prisoners learn to read) was in its early stages.

Recommendations

- 3.35 Access to the library and the range of services and materials available should be substantially improved.**
- 3.36 Effective management information systems and data collection should be introduced to improve the library provision.**

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.

3.37 *Recreational PE was well run but a limited range of accredited vocational training was available. Staff were enthusiastic and well qualified, and orderlies gave appropriate support. PE was available to prisoners in the daytime, evening and at weekends, with specific sessions offered for older and vulnerable prisoners and those referred by the health care department. Access was fair. Facilities were poor, although new provision was being built.*

- 3.38** PE for recreational use was well run, and healthy living and the importance of exercise were well promoted. Facilities were very poor, although a new facility was currently being built. They currently included a cardiovascular room and weight training area, as well as a small all-weather outside football pitch, which was in a poor state of repair. An additional outdoor basketball court was available to just two of the five wings because of security restrictions. Equipment was appropriately maintained and changing rooms and showers were adequate.
- 3.39** Staff were enthusiastic and well qualified, although few vocational qualifications were currently offered to prisoners, and those that were available were mostly low level. Prisoners received an appropriate introduction to PE during their first week in the prison, including information on the range of sports offered. Orderlies supported this process appropriately.

- 3.40** A reasonable range of recreational PE was available, including team sports, spinning and cardiovascular training. PE was available to prisoners in the daytime, evening and at weekends, with specific sessions offered for older prisoners, prisoners referred by the health care department, and vulnerable prisoners. Attendance at recreational PE sessions was fairly allocated and the provision was well used, with around 73% of prisoners regularly attending two or more sessions each week. PE staff gave good remedial support for prisoners referred by the health care department. Appropriate PE kit and trainers were available for prisoners who needed it, although many prisoners wore their own.

Recommendations

- 3.41 PE facilities should be improved, including the outside all-weather area and the provision of a dedicated classroom for theory lessons.**
- 3.42 An appropriate range of accredited vocational PE training courses should be provided, with opportunities for progression.**

Section 4. Resettlement

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.

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 *There was a good strategy for reducing reoffending and a new needs analysis was being prepared. Voluntary and community-based providers were involved in the management of the strategy. The use of release on temporary licence was developing well.*

4.2 Since the re-roling of the prison to a training prison, a new strategy for reducing reoffending had been developed. It was comprehensive, covering offender management and resettlement pathways, with a designated lead member of staff for each pathway, descriptions of the services provided and a plan to develop them further. The strategy was limited by the lack of an up-to-date needs analysis of the new population. Although the strategy acknowledged the value of risk and offending information obtained from offender assessment system (OASys) assessments by the offender management unit (OMU), this information was not being incorporated into the new needs analysis.

4.3 The strategy emphasised the importance of making links with external providers, especially to develop employment opportunities, and significant progress had been made in some areas. Organisations providing services were involved in the strategic management group, which met every three months to review progress against the action plan and to identify new developments.

4.4 An important aspect of the strategy was to promote release on temporary licence (ROTL) opportunities for the new population, especially for working in the community. At the time of the inspection, there were 87 category D prisoners who had been assessed as suitable for ROTL. They all had town visits and/or home leaves, and 67 regularly went to outside work or volunteering placements. However, providing category D places with an active working out programme alongside a category C population was proving to be challenging and it was not possible to replicate the conditions that prisoners would experience in open conditions (see also section on security). Category C prisoners could not access ROTL.

4.5 Too many prisoners were received with a short time left to serve, so they could not be enrolled in meaningful interventions or participate in the ROTL programme, frustrating the strategy to develop Brixton as a resettlement prison (see recommendation 4.14).

Housekeeping point

4.6 The resettlement needs analysis should be informed by OASys data which links resettlement need to risk and the likelihood of reoffending.

Offender management and planning

Expected outcomes:

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

4.7 *Offender management was ineffective, with a large backlog of offender assessment system (OASys) assessments and insufficient planned contact with prisoners. Public protection measures were good but recategorisation reviews and transfers of prisoners to suitable establishments were delayed. There was good oversight and consultation with indeterminate-sentenced prisoners.*

4.8 In our survey, only 49% of respondents, against the 71% comparator, said that they had a sentence plan. Of these, 64%, considerably worse than the 46% comparator, said that no one was working with them to achieve their targets. This could be explained by the regular deployment of OMU staff and the large backlog of OASys assessments. At the time of the inspection, only 40 (12.5%) of the 320 low- to medium-risk prisoners being held, whose OASys assessment was the responsibility of prison-based offender supervisors, had an up-to-date assessment and sentence plan. It was difficult to see how this backlog could be eradicated, as there was a regular intake of prisoners from local prisons without an up-to-date assessment, as well as a shortage of staff. The lack of an up-to-date assessment affected prisoners' allocation to suitable interventions, access to ROTL and transfer to suitable establishments for progression (see main recommendation S57).

4.9 Prisoners told us that they felt neglected and that they were not progressing, and many were not clear what was required of them or why they had been sent to the establishment. In our survey, only 39% of those with a sentence plan, against the 66% comparator, said that they could achieve any of their targets in the prison.

4.10 Low- to medium-risk prisoners did not have a single offender supervisor allocated to them but when work with them needed to be done, it was allocated to the next one available. The effect of this was that these prisoners did not have a named offender supervisor to whom they could turn for help and who could provide support for them in progressing with their sentence.

4.11 Although high-risk prisoners with an offender manager in the community were more likely to have an up-to-date sentence plan, a large number did not. Of the 291 such prisoners, including indeterminate-sentenced prisoners, 20 did not have a sentence plan and 51 were overdue a review which meant targets were not revised following assessments. Offender supervisors were allocated to high-risk prisoners but in many cases initial contact was late and contact was intermittent. We saw evidence of significant efforts being made to facilitate progressive transfers but found much of the contact to be reactive or superficial.

4.12 The OMU was not central to the management of prisoners' sentences. Other departments, such as programmes, psychosocial services and learning and skills, filled the vacuum left by the OMU and engaged directly with prisoners, rather than going through a process of prioritising and sequencing their work in alignment with a risk-based sentence plan.

4.13 Home detention curfew (HDC) processes were managed well and decisions were reasonable, with 55% of applications considered in the previous six months being approved. Appeals against refusals were dealt with fairly and were upheld in some cases. In the previous six months, there had been 55 HDC applications which could not be processed in time

because prisoners had been received with only a short time left to serve. In the previous month, there had been 16 assessments for HDC after the eligibility date, all for reasons outside the prison's control, such as delayed external reports, short sentences, and assessments not started on time by the previous establishment.

Recommendation

- 4.14 Prisoners should not be transferred to Brixton without an up-to-date offender assessment system (OASys) assessment, and with insufficient time left to serve to benefit from the regime.**

Public protection

- 4.15** There were effective measures for identifying and monitoring prisoners who presented a risk of harm to the public, and these had been strengthened because of the intake of a large number of sex offenders since the previous inspection.
- 4.16** Restrictions and monitoring were reviewed monthly, and at the time of the inspection only 17 of the 206 identified prisoners were still being monitored.
- 4.17** There was a monthly interdepartmental risk management meeting, with contributions or attendance by representatives from appropriate departments (including resettlement providers, offender supervisors and security staff), which reviewed all public protection cases involving a prisoner who was due for release. Plans to manage risk in the community were comprehensive and prisoners were informed of them through their offender supervisor.

Categorisation

- 4.18** Processes for identifying prisoners due for recategorisation were effective but not all were completed on time.
- 4.19** Prisoners were responsible for ensuring that their application was endorsed by comments from staff who knew them, and could make full written representations but they could not attend the board.
- 4.20** In the previous six months, only 24 of 227 applications for recategorisation from C to D had been approved. The decisions in the cases we examined had been reasonable. However, sex offenders were not recategorised to D, which indicated an inappropriate approach to assessment of their risk of harm.
- 4.21** There were considerable difficulties in transferring prisoners to other establishments. At the time of the inspection, there were 65 category D prisoners waiting for transfer to open conditions, the longest wait being six months, and 63 category C prisoners waiting for transfer, the longest wait being more than two months. This delay was sometimes due to places not being made available by other prisons, and there had been only one transfer draft to a category C prison in the previous six months. A number of transfers were delayed by the lack of an up-to-date OASys assessment and sentence plan, and others because transport had not been organised.

Recommendations

- 4.22** Categorisation reviews should be completed by the due date, and sex offenders should not be automatically denied category D status.
- 4.23** The transfer of prisoners to appropriate establishments should be prompt.

Indeterminate sentence prisoners

- 4.24** At the time of the inspection, there were 44 prisoners serving indeterminate sentences for public protection (IPP) and 13 life-sentenced prisoners. Each had a probation officer or prison officer offender supervisor trained in the management of indeterminate-sentenced prisoners (ISPs).
- 4.25** There were consultation events every month on the main and vulnerable prisoner units which answered individual concerns and kept prisoners informed of policy developments. On the vulnerable prisoner wing, where a large number were living, there was a prisoner ISP representative who facilitated communication with offender supervisors. Escorted town visits were provided for eligible prisoners. There were no other special facilities for ISPs such as family days or independent living units.
- 4.26** Many ISPs complained that their progress was being held up by the difficulties in obtaining transfers to other prisons (see section on categorisation).
- 4.27** The management of parole reports was good, with only one dossier overdue in the year to date because of a late report from an external probation officer.

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.

4.28 *There was no initial resettlement needs assessment or custody plan but all prisoners were seen before discharge. Support to find housing was good and few were released homeless. The National Careers Service provision was inadequate and links with employers were not well coordinated in the prison. Prisoners were not always seen by health services staff before release and some were not given their prescribed medication. Links to community-based substance misuse and mental health services were good. The Rehabilitation of Addicted Prisoners trust (RAPt) was well integrated in the prison and post-release support was well planned. There was limited help with debts but prisoners could open bank accounts. Social visits provision had several weaknesses. There were limited places on the sex offender treatment programme and some men would be released without undergoing targeted offending behaviour work.*

- 4.29** There was no full assessment of resettlement needs on arrival at the prison, which meant that the large number of prisoners received from local prisons soon after sentence were likely to have immediate unmet needs. This was mitigated to some extent by a learning and employment assessment which some prisoners underwent, which provided information about resettlement services.

- 4.30** Discharge arrangements were good. All prisoners were subject to a pre-discharge assessment, undertaken two months before discharge by staff from St Giles Trust or prisoner mentors, to identify any outstanding needs.

Recommendation

- 4.31 All prisoners should have an assessment of their resettlement needs when they arrive and there should be a process to ensure that their needs are met in a timely fashion.**

Accommodation

- 4.32** Accommodation support was provided by St Giles Trust through a full-time team based in the prison, supported by trained prisoner peer mentors on C and G wings.
- 4.33** The service was reasonably well known and received applications from prisoners before the pre-discharge assessment. In the three months before the inspection, St Giles Trust had dealt with 82 cases and secured 31 places in permanent accommodation and 12 in temporary accommodation, and saved four tenancies.
- 4.34** Although referrals were made to hostels, and prisoners were put in touch with the St Giles Trust private rented service, the supply of accommodation had reduced and most work involved trying to secure help from prisoners' family and friends.
- 4.35** The proportion released without accommodation was low. In the previous six months, 24 prisoners out of the 421 released (5.7%) had not had an address. Approximately 10% were released to temporary accommodation, and a new team member had been appointed to support these prisoners in finding a more permanent arrangement.

Education, training and employment

- 4.36** Prisoners received appropriate careers advice and guidance from resettlement staff, the National Careers Service (NCS), Jobcentre Plus and a range of additional agencies. Prisoners were given assistance with preparing CVs, disclosure letters and guidance for work, education or training.
- 4.37** Links with employers and outside agencies were reasonable and improving, but these were poorly coordinated. The virtual campus (internet access for prisoners to community education, training and employment opportunities) was underdeveloped and not used effectively for job searches (see also section on learning and skills and work activities).
- 4.38** Prisoners who wanted to become self-employed were supported through a business start-up course. The use of ROTL for work for category D prisoners was developing well. A reasonable proportion of prisoners who left the prison entered into employment, education or training, although prison data did not clarify if these were into existing jobs or places.

Recommendations

- 4.39 Better coordination of links with employers should be developed between resettlement staff and other internal prison agencies.**

- 4.40 The virtual campus to aid job search should be better used and prisoners should be more prepared for interviews on release.**

Health care

- 4.41** Prisoners were not always seen by health services staff before their release. A health care summary was either sent to the prisoner's GP or given to the prisoner. We observed prescribed medication not being given to a prisoner before his release, and were told that this was often the case.
- 4.42** Prisoners with mental health needs were effectively linked with community mental health teams, and there was regular attendance by community mental health team representatives at pre-release care programme approach reviews.

Recommendation

- 4.43 Prisoners should be given appropriate support and advice to access community health services on release, and prescribed medication should always be provided.**

Drugs and alcohol

- 4.44** The clinical substance misuse service had effective links with community agencies to ensure treatment continuity during ROTL and on release. Prisoners requiring opiate substitute prescribing before release could access this, and the clinical team also arranged naltrexone (an opiate blocker used to support people to stay off opiates) treatment post-release.
- 4.45** The monthly continuity of care meeting planned post-release support together with community services; representatives from the OMU attended but mental health staff did not.

Finance, benefit and debt

- 4.46** Although support for prisoners' financial needs was developing, only 16% of respondents to our survey said that they knew where to go for help with finances, which was considerably worse than 28% comparator.
- 4.47** Debt and financial problems were not identified on arrival and the range of help was inconsistent. The Lambeth Advice Service provided a good debt service for Lambeth residents and gave limited advice to prisoners from other areas. St Giles Trust staff helped prisoners to contact the National Debt Advice telephone service.
- 4.48** Jobcentre Plus provided benefits advice and set up new claims for prisoners due for release.
- 4.49** The prison had an arrangement with Santander bank for 10 prisoners a month to open a bank account.
- 4.50** Some financial education was provided through the 'Faith in the Future' course provided by the chaplaincy. Prisoners could attend the money management modules separately from the rest of the course. The modules were provided in partnership with Christians Against Poverty, a national movement, which could also refer prisoners' families for casework.

Recommendation

- 4.51 Prisoners' financial needs should be assessed on arrival and there should be services which meet the needs of all prisoners.**

Children, families and contact with the outside world

- 4.52** Social visits were available every day except Thursday and there were specific sessions for vulnerable prisoners. The information about visiting times on the prison website was inaccurate. The prison was easily accessible, and 44% of prisoners in our survey said that it was easy for family and friends to get there.
- 4.53** Some visitors and prisoners we spoke to complained that it was difficult to book a visit, but when we tested the line our call was answered in a reasonable time, and email bookings were responded to on the day they were received. At the time of the inspection, social visits were available for the next session for main-location prisoners but the next place available in a session for vulnerable prisoners was a week later and there were no weekend places available for two weeks.
- 4.54** There was a small visitors centre, staffed by staff from Spurgeons, a family support organisation. Facilities in the centre were restricted, with limited seating and only vending machines to provide refreshments. There was no play area for children.
- 4.55** The Spurgeons staff booked visitors in and provided advice about visits procedures. There was some printed information about family support services but the main role of visitors centre staff was to facilitate visits rather than provide family support or referrals to services in visitors' home areas.
- 4.56** There were good security systems to identify prisoners and visitors, using fingerprint technology, but prisoners were also required to wear brightly covered vests over their clothes.
- 4.57** The visits hall provided only 23 spaces. It was small and uninviting, with fixed furniture arranged close together and little privacy. It was clean but showing signs of wear and tear. There was a children's play area but this was not always supervised and prisoners were not allowed to play with their children in there.
- 4.58** There were no prisoners on closed visits at the time of the inspection but visitors in closed visits booths would have been in full view of the rest of the hall and have no access to refreshments.
- 4.59** In our survey, only 24% of prisoners, against the 35% comparator, said that staff had supported them and helped them to maintain contact with family and friends. Apart from family visits offered to enhanced prisoners, there were no other services to encourage and develop family contact.

Recommendations

- 4.60 There should be sufficient visits places for vulnerable prisoners.**
- 4.61 The visitors centre should be expanded to meet the needs of the population.**
(Repeated recommendation 9.62)

- 4.62 Prisoners should be able to play with their children in the play area, subject to child protection measures.** (Repeated recommendation 9.65)
- 4.63 There should be better privacy for those on closed visits.** (Repeated recommendation 9.78)
- 4.64 The prison should develop and improve the range of initiatives and support to encourage and enable prisoners to maintain contact with family and friends.** (Repeated recommendation 9.81)

Housekeeping points

- 4.65** Information about visits on the Prison Service and Spurgeons websites should be updated.
- 4.66** Prisoners and visitors on closed visits should have access to refreshments. (Repeated recommendation 9.79)

Attitudes, thinking and behaviour

- 4.67** The thinking skills programme (TSP) was available to all prisoners and also recruited from other prisons. There was insufficient demand for places from referrals through sentence plans, which reflected the backlog of work in the OMU (see section on offender management and planning) and prisoners were encouraged to make self-referrals.
- 4.68** There were 219 sex offenders at the prison. All such prisoners were assessed for the core sex offender treatment programme (SOTP), with 27 places available over the year. At the time of the inspection, eight prisoners were on the waiting list for the next group, and demand was being met. However, 82 were currently undergoing assessment, which made it difficult to predict whether demand would start to exceed supply. There were 40 sex offender prisoners who would be released without treatment because there was no time left in their sentence or they refused to participate in the programme.
- 4.69** The prison also provided two places on the healthy sexual practice programme, which involved one-to-one work. There was a waiting list of 14 for the programme, including applicants from other prisons, which exceeded capacity. We found several examples of sex offenders who required further programme work and had difficulty in getting a suitable place at another establishment (see section on categorisation).
- 4.70** The transitional psychotherapy service was an innovative and valuable individual programme for sex offenders on G wing. It addressed individual background issues with prisoners to help them to understand the connection with sex offending. This was an alternative intervention for those who were not suitable for the SOTP and also complemented the programme by addressing factors which had not been covered.
- 4.71** The main provision of non-accredited interventions was through the 'Faith in the Future' programme provided by the chaplaincy. This was a popular life skills and relationships programme, with 108 completions in the nine months before the inspection.

Recommendation

- 4.72 Provision of the healthy sexual practice programme should be increased to meet demand.**

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, and in the previous report where recommendations have been repeated.

Main recommendations

To the governor

- 5.1** Thorough reception and first night procedures should be applied, to ensure that accommodation is prepared, a shower and a telephone call are available, and appropriate information, support and checks are carried out during prisoners' early days at the establishment. (S53)
- 5.2** The physical security and regime arrangements should be reviewed and amended to reflect conditions which are appropriate to category C and D prisoners, respectively. (S54)
- 5.3** Staff training and supervision processes should support staff in developing relationships with prisoners appropriate to a category C regime. (S55)
- 5.4** Management oversight of diversity should be prioritised to ensure that the needs of all prisoners from minority groups are identified, assessed and met and that any negative perceptions of particular groups are understood. (S56)
- 5.5** The total number of high-quality activity places should be increased to allow more prisoners to be purposefully employed. (S57)
- 5.6** All prisoners should have an up-to-date risk assessment and sentence plan which is overseen by regular and meaningful contact with an allocated offender supervisor. (S58)

Recommendations

To NOMS

Courts, escort and transfers

- 5.7** Transfers should be coordinated to arrive at Brixton during reception working hours. (1.4)

Residential units

- 5.8** Cells designed for single occupancy should not be used for two prisoners. (2.9, repeated recommendation 2.4)

Offender management and planning

- 5.9** Prisoners should not be transferred to Brixton without an up-to-date offender assessment system (OASys) assessment, and with insufficient time left to serve to benefit from the regime. (4.14)

Recommendations

To the governor

Courts, escort and transfers

5.10 Prisoners should not be held on escort vehicles for extended periods after arrival. (1.5)

Early days in custody

5.11 Induction should start on the day after arrival and should provide prisoners with all the information necessary to access services and the regime. (1.12)

Bullying and violence reduction

5.12 The reasons for bullying and antisocial behaviour should be collated and trend analysis should be reintroduced to inform the local strategy. (1.19)

5.13 The prison should investigate and take action on prisoners' negative perceptions of their safety. (1.20, repeated recommendation 3.10)

5.14 Managers should hold consultative meetings with vulnerable prisoners to gauge their perceptions on issues such as safety and access to the regime. (1.21, repeated recommendation 3.11)

5.15 Wing staff should deliver the bullying and antisocial behaviour strategy, and the quality of management and support plans should be improved. (1.22)

5.16 There should be interventions for bullies, such as tackling antisocial behaviour, and support for victims. (1.23, repeated recommendation 3.7)

Self-harm and suicide

5.17 Trend analysis should be used to inform the localised suicide and self-harm prevention strategy. (1.30)

5.18 Access to and the use of Listeners should be reviewed, and identified improvements implemented. (1.31)

Safeguarding

5.19 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.37)

Security

5.20 The prison should ensure that all measures identified in the supply reduction strategy are in place. (1.45)

5.21 The apparent low number of security information reports should be investigated and measures taken to ensure whole-prison involvement in security. (1.46)

Incentives and earned privileges

- 5.22** The regime and management of the basic level of the IEP scheme should be improved. Prisoners should have achievable individual targets and the opportunity to demonstrate progress which should be recorded consistently and regularly reviewed. (1.51)

Discipline

- 5.23** Recording and management oversight of the use of force, including special accommodation, should be effective. (1.57)
- 5.24** Any use of a baton should be investigated to give assurance that its use was appropriate and proportionate. (1.58, repeated recommendation 7.32)
- 5.25** The regime for prisoners in the care and separation unit should be improved. (1.64, repeated recommendation 7.46)
- 5.26** Prisoners should not be segregated without the appropriate level of authority and management oversight (1.65).

Substance misuse

- 5.27** Prisoners committed to recovery and located on the drug recovery unit should not be exposed to high levels of drug use. (1.74)

Residential units

- 5.28** Toilets in cells on A, B and G wings should be appropriately screened. (2.10, repeated recommendation 2.2)
- 5.29** All showers should be screened to allow full privacy. (2.11, repeated recommendation 2.30)
- 5.30** Prisoners who receive prison-issue clothing should have sufficient sets of underwear each week. (2.12, repeated recommendation 2.20)
- 5.31** Prison managers should ensure the consistent application of wing rules. (2.13, repeated recommendation 7.18)

Staff-prisoner relationships

- 5.32** Personal officers should contribute to sentence planning boards and offender assessment system (OASys) reviews where appropriate. (2.20)

Complaints

- 5.33** The prison should explore prisoners' limited confidence in the discrimination incident and general complaints processes and take action to address it. This should include a formal quality assurance process and informing prisoners of the results of regular analysis of the patterns and trends of complaints and the response to them. (2.42)
- 5.34** Complaints about staff should be properly investigated and responded to. (2.43)

Health services

- 5.35** Prisoners should be able to report health care complaints confidentially. (2.57)
- 5.36** All prison staff should receive basic life support training and sufficient staff should be trained to use the automated defibrillators to provide 24-hour cover across the prison. (2.58)
- 5.37** All prisoners should be health screened on arrival and followed up within 72 hours for a secondary health assessment. (2.71)
- 5.38** Medication administration should be adequately supervised, to ensure privacy and compliance, and reduce the risk of bullying and diversion. (2.80)
- 5.39** Prisoners should be given privacy and confidentiality during their dental consultations and risks assessed on an individual basis. (2.90)
- 5.40** Structured support should be provided for prisoners with learning disabilities and other vulnerabilities. (2.100)

Catering

- 5.41** Breakfast packs should be issued on the day they are meant to be eaten. (2.109)
- 5.42** Prisoners on the main wings should be able to eat out of their cells. (2.110, repeated recommendation 8.2)
- 5.43** Lunch should not be served before 12 noon and the evening meal not before 5pm. (2.111, repeated recommendation 8.9)

Purchases

- 5.44** The cost of items on the prison shop list, including telephone credit, should be in line with that in the community. (2.117)
- 5.45** There should be no administration charge for catalogue orders. (2.118)

Time out of cell

- 5.46** Category C prisoners should be able to spend more time out of cell, and daily evening association should be provided. (3.8)
- 5.47** Category D prisoners should be allowed free access to outdoor exercise areas. (3.9)

Learning and skills and work activities

- 5.48** Observations of teaching and learning should be improved to include all areas of learning and skills, and share best practices to improve the quality of teaching, learning and assessment. (3.17)
- 5.49** The initial assessment of prisoners' literacy and numeracy needs should be used effectively to better inform planning and provision of support. (3.18)
- 5.50** Sentence planning should link effectively with the allocation process, and improved activities allocations should maximise places. (3.19)

- 5.51** The variety and range of activities for vulnerable prisoners should be improved. (3.22)
- 5.52** The range and variety of vocational training courses should be considerably increased. (3.23)
- 5.53** The quality of teaching and learning should be improved. (3.26)
- 5.54** Access to the virtual campus should be improved and employability and practical skills should be accredited. (3.27)
- 5.55** All prisoners with identified needs in literacy and numeracy should be appropriately supported. (3.28)
- 5.56** Achievement rates for learners on numeracy and English courses should be improved. (3.30)
- 5.57** Attendance and punctuality should be improved. (3.31)
- 5.58** Access to the library and the range of services and materials available should be substantially improved. (3.35)
- 5.59** Effective management information systems and data collection should be introduced to improve the library provision. (3.36)

Physical education and healthy living

- 5.60** PE facilities should be improved, including the outside all-weather area and the provision of a dedicated classroom for theory lessons. (3.41)
- 5.61** An appropriate range of accredited vocational PE training courses should be provided, with opportunities for progression. (3.42)

Offender management and planning

- 5.62** Categorisation reviews should be completed by the due date, and sex offenders should not be automatically denied category D status. (4.22)
- 5.63** The transfer of prisoners to appropriate establishments should be prompt. (4.23)

Reintegration planning

- 5.64** All prisoners should have an assessment of their resettlement needs when they arrive and there should be a process to ensure that their needs are met in a timely fashion. (4.31)
- 5.65** Better coordination of links with employers should be developed between resettlement staff and other internal prison agencies. (4.39)
- 5.66** The virtual campus to aid job search should be better used and prisoners should be more prepared for interviews on release. (4.40)
- 5.67** Prisoners should be given appropriate support and advice to access community health services on release, and prescribed medication should always be provided. (4.43)
- 5.68** Prisoners' financial needs should be assessed on arrival and there should be services which meet the needs of all prisoners. (4.51)

- 5.69** There should be sufficient visits places for vulnerable prisoners. (4.60)
- 5.70** The visitors centre should be expanded to meet the needs of the population. (4.61, repeated recommendation 9.62)
- 5.71** Prisoners should be able to play with their children in the play area, subject to child protection measures. (4.62, repeated recommendation 9.65)
- 5.72** There should be better privacy for those on closed visits. (4.63, repeated recommendation 9.78)
- 5.73** The prison should develop and improve the range of initiatives and support to encourage and enable prisoners to maintain contact with family and friends. (4.64, repeated recommendation 9.81)
- 5.74** Provision of the healthy sexual practice programme should be increased to meet demand. (4.72)

Housekeeping points

Self-harm and suicide

- 5.75** The continuous improvement plan should include all recommendations from Prisons and Probation Ombudsman reports and should be reviewed at the monthly safer custody meeting. (1.32)
- 5.76** Daily entries in assessment, care in custody and teamwork (ACCT) documents and management oversight should be improved. (1.33)
- 5.77** All staff should complete the safer custody awareness training. (1.34)

Discipline

- 5.78** Planned control and restraint interventions should be routinely video-recorded. (1.59, repeated recommendation 7.33)
- 5.79** Daily case entries for prisoners on the segregation unit should be qualitative and demonstrate interaction with segregated prisoners, reflecting current issues or concerns. (1.66)

Substance misuse

- 5.80** There should be one overall substance misuse strategy document and action plan for drug and alcohol services. (1.75)
- 5.81** Prisoners should receive up-to-date information about drug and alcohol services at the beginning of, and throughout, their time in custody. (1.76)
- 5.82** The Rehabilitation of Addicted Prisoners trust (RAPt) team should develop a mechanism for regular service user feedback to inform future service provision. (1.77)

Residential units

- 5.83** Telephones should be placed in booths. (2.14, repeated recommendation 2.6)
- 5.84** Rules should be thoroughly explained to prisoners. (2.15, repeated recommendation 7.20)

Equality and diversity

- 5.85** The prison should take measures to improve prisoners' understanding, knowledge of and confidence in the discrimination incident report form system. (2.25)

Health services

- 5.86** A cleaning schedule for all health care areas should ensure compliance with national cleanliness and infection control requirements. (2.59)
- 5.87** Health care policies should reflect key health priorities and the needs of the prison and be up to date. (2.60)
- 5.88** Written health care information should be available in a range of appropriate languages. (2.61, repeated recommendation 5.19)
- 5.89** Nurses should be trained in chronic disease management, to release doctor capacity for more complex cases. (2.62)
- 5.90** There should be further analysis of the 'did not attend' rates to focus appropriate action on improving attendance at relevant clinics. (2.63, repeated recommendation 5.24)
- 5.91** The waiting lists for podiatry and the optician should be prioritised and waiting times reduced. (2.72)
- 5.92** Methadone should be administered as prescribed and without dilution, to ensure compliance with its licence conditions and preserve patient confidence; a system of assurance should ensure clinically acceptable levels of bacteria in the water used to rinse the methadone pump. (2.81)
- 5.93** The administration hatches should be secure, to prevent the risk of hatches being opened from outside the treatment room or items being pulled through the hatches. (2.82)
- 5.94** Only finger-prickers designed for multiple patient use should be in the glucose testing kits. (2.83)
- 5.95** Equipment servicing and maintenance records should be readily accessible to the dental staff. (2.91)
- 5.96** Appropriate spaces for individual and group work should be identified. (2.101)

Catering

- 5.97** Serveries should be maintained in good decorative order. (2.112)

Purchases

- 5.98** Prisoners should be able to buy items from the prison shop within 24 hours of their arrival. (2.119, repeated recommendation 8.17)
- 5.99** Consultation about the shop should be inclusive and decisions well publicised. (2.120)
- 5.100** More catalogues should be available for prisoner orders. (2.121, repeated recommendation 8.13)

Strategic management of resettlement

- 5.101** The resettlement needs analysis should be informed by OASys data which links resettlement need to risk and the likelihood of reoffending. (4.6)

Reintegration planning

- 5.102** Information about visits on the Prison Service and Spurgeons websites should be updated. (4.65)
- 5.103** Prisoners and visitors on closed visits should have access to refreshments. (4.66, repeated recommendation 9.79)

Examples of good practice

Substance misuse

- 5.104** Prisoners on the drug recovery unit could access a wide range of support, including one-to-one work, courses, a structured programme, self-help groups and activities provided by community organisations. (1.78)

Health services

- 5.105** The use of nursing and pharmacy staff to perform plain chest X-rays enabled the radiographer to focus on more complex trauma cases and reduce external escorts. (2.73)
- 5.106** Pharmacy-led minor ailments and asthma clinics provided prisoners with community-equivalent advice. (2.84)
- 5.107** The improving access to psychological therapies service mirrored good community services and provided prisoners with helpful coping techniques to prepare for their release. (2.102)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Kellie Reeve	Inspector
Amy Radford	Researcher
Alissa Redmond	Researcher
Rachel Murray	Researcher

Specialist inspectors

Sigrid Engelen	Substance misuse inspector
Nicola Rabjohns	Health services inspector
Peter Gibbs	Pharmacist
Stephen Pitt	CQC inspector
Neil Edwards	Ofsted inspector
Richard Beaumont	Ofsted inspector
John Grimmer	Ofsted inspector
Jonathan Nason	Offender management inspector
Vivienne Clarke	Offender management inspector
Keith Redfern-Humphreys	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2010, Prisoners spent long periods in court cells or in transit before their arrival but procedures to manage the early experience of custody were generally adequate. Reception was process driven, although staff were reasonably respectful. All new arrivals were risk assessed but we were not assured all were properly inducted. The level of recorded violence was not excessive but violence reduction and anti-bullying procedures needed to develop further. Prisoner perceptions of their own safety were worse than at comparator prisons, although most vulnerable prisoners suggested that they felt safe. The prison had a focus on preventing self-harm and there had been no self-inflicted deaths in recent years. A significant amount of security intelligence was received but this was managed poorly. Use of force was not excessive but governance was weak. Use of segregation was low. Illicit drug use was significant but much improved since our last inspection. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Information sharing between the safer custody and security teams should be improved, and all violent incidents and indicators of violence should be monitored for trends and emerging patterns and should inform the violence reduction action plan and strategy. (HP54)

Partially achieved

Vulnerable prisoners should not be held on the same landing as mainstream prisoners. (HP55)

Achieved

The prison should strengthen measures to curb the supply of illicit drugs. (HP56)

Partially achieved

Recommendations

Prisoners should be held in court cells for the minimum possible period. (I.1).

No longer relevant

Prisoners should be given written information at court about Brixton in a language they understand before their transfer. (I.5)

No longer relevant

Contract escort vehicles should be clean and free from graffiti. (I.9)

Achieved

Prisoner escort records should be completed to show a chronological history that indicates that prisoners' needs (including meals) have been met. (I.10)

Achieved

Prisoners attending court should be offered a breakfast meal and a hot drink on the day they attend. (1.11)

Not achieved

The reception building should be replaced with a purpose-built facility that fully meets the needs of prisoners. (1.12)

Not achieved.

New arrivals should be searched in a private room and before they are seen by other staff in the reception process. (1.15)

Achieved

Night patrols should be alerted to the cell location of new arrivals and make regular checks on them. (1.17)

Partially achieved

All new arrivals should be offered a reception pack, free telephone call and the opportunity for a shower on the day they arrive. (1.19)

Not achieved

First night cells should be clean and maintained to an acceptable standard. (1.22)

Not achieved

Prisoners who need to attend induction should be encouraged to do so. (1.24)

Not achieved

Induction should be revised to ensure that prisoners have adequate time to process the information and the opportunity to see relevant departments on a one-to-one basis, and should take the needs of non-English speaking prisoners into account. (1.31)

Not achieved.

The updated induction booklet should be translated into a range of languages. (1.32)

Partially achieved

The prison should investigate and take action to improve confidence in systems for prisoners to report allegations of bullying. (3.3)

Achieved

The terms of reference for investigations in the violence reduction strategy should be explicit about how and when investigations should be conducted, and staff should be made aware of the document to assist completion of investigations. (3.5)

Not achieved

There should be interventions for bullies, such as tackling antisocial behaviour, and support for victims. (3.7)

Not achieved (recommendation repeated, 1.23)

The prison should investigate and take action on prisoners' negative perceptions of their safety. (3.10)

Not achieved (recommendation repeated, 1.20)

Managers should hold consultative meetings with vulnerable prisoners to gauge their perceptions on issues such as safety and access to the regime. (3.11)

Not achieved (recommendation repeated, 1.21)

Care plans for prisoners at risk of self-harm should be focused on actions and updated regularly. (3.18)

Achieved

The prison should introduce a specific case management structure, other than assessment care in custody and teamwork (ACCT), for prisoners on D wing who do not present with suicidal or self-harming tendencies. (3.32)

No longer relevant

The quality of ACCT forms should be improved. (3.33)

Achieved

Appropriate first night opiate substitution prescribing should be delivered consistently. (3.64)

No longer relevant

Mandatory drug testing should be adequately staffed to ensure all testing is carried out appropriately, within identified timescales and without gaps in provision. (3.67)

Not achieved.

There should be better monitoring of IRS [incident reporting system] to ensure the safety committee is able to identify trends and patterns in reported incidents and take appropriate action. (7.2)

Achieved

The safety department should make regular use of its security liaison officers to ensure fully effective intelligence gathering. (7.5)

Partially achieved

Intelligence management should be developed and strengthened to ensure the security department is fully equipped to address the problems presented by illegal drugs and gang-related activity. (7.7)

Not achieved.

Record keeping for the authorisation of and reviews of closed visits should be improved. (7.13)

Achieved

The local searching strategy should reflect practice, and strip searching after visits should only take place where supported by intelligence. (7.14)

Not achieved.

Management of and procedures at the gate should be improved. (7.15)

Achieved

Prison managers should ensure the consistent application of wing rules. (7.18)

Not achieved (recommendation repeated, 2.13)

Rules should be thoroughly explained to prisoners. (7.20)

Not achieved. (recommendation repeated as a housekeeping point, 2.15)

Adjudication hearings should be properly recorded and show that there has been a fair and thorough investigation of the evidence. (7.25)

Achieved

There should be quality assurance of adjudication records. (7.26)

Achieved

Prisoners should not be subject to unofficial punishments. (7.27)

Achieved

The safety committee should monitor all use of force incidents, and also those that are planned or spontaneous. (7.29)

Not achieved.

Governance arrangements for the use of force, including special accommodation, should be improved. (7.30)

Not achieved.

The correct use of force documentation should be used at all times, and all sections of the documentation should be filled in and subject to thorough quality assurance checks. (7.31)

Not achieved

Any use of a baton should be independently investigated to give assurance that its use was appropriate and proportionate. (7.32)

Not achieved (recommendation repeated, 1.60)

Planned C&R interventions should be routinely recorded by video. (7.33)

Not achieved (recommendation repeated as a housekeeping point, 1.61)

All areas, including toilets, in the care and separation unit should be clean and well maintained. (7.37)

Achieved

The regime for prisoners in the care and separation unit should be improved. (7.46)

Not achieved (recommendation repeated, 1.66)

A segregation monitoring and review group should meet regularly to discuss all issues relating to segregation. (7.47)

Achieved

Wing history sheet entries should consistently demonstrate the use of the incentives and earned privileges (IEP) scheme as a motivational tool to encourage prisoners to engage with regime interventions and sentence plan targets. (7.48)

Achieved

Prisoners on all levels of the IEP scheme should be informed when a negative entry is made in their history sheet, and should have a regular opportunity to read their wing file. (7.49)

No longer relevant

Staff should make daily entries in basic regime and monitoring plans consistently. (7.52)

Not achieved (recommendation repeated as a housekeeping point, 1.52)

Prisoners downgraded to the basic level should be reviewed after seven days and at seven-day intervals thereafter. (7.53)

Partially achieved (recommendation repeated, 1.51)

There should be robust quality assurance and monitoring of the IEP scheme. (7.54)

Achieved

Managers should consult with prisoners to ensure the differentials between IEP levels are sufficient to encourage engagement with the scheme. (7.60)

Partially achieved

The published IEP policy should contain clear guidelines for staff and prisoners on the appropriate circumstances to consider downgrading a prisoner from the enhanced to basic level. (7.61)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2010, the quality and cleanliness of the environment, in particular the wings and cells, were very poor. The external environment had improved marginally. We saw many examples of friendly and constructive engagement between staff and prisoners, although there was evidence that prisoners did not feel respected and some questioned staff effectiveness. The personal officer scheme was very limited. The quality of food was reasonable and appreciated by prisoners. The prison had a good strategy to address all diversity strands but outcomes varied. Support for foreign national prisoners was reasonable but could be developed further. The chaplaincy was highly visible and well integrated into the broader work of the prison. Prisoners expressed limited confidence in applications and complaints procedures. With the exception of the inpatient facility, which was poor, the quality of health care was generally good. However, some patients had long waits for transfer to secure NHS facilities. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

The purpose and function of Brixton prison should be reviewed and redefined, and the resources required to deliver that purpose and function should be provided. (HP53)

Partially achieved

The personal officer scheme should be relaunched and all staff should be clear about their responsibilities under the programme. (HP58)

Achieved

Recommendations

The cleanliness of the residential units should be improved. Cleaning schedules should be agreed and management checks recorded to ensure a rise in standards of hygiene and cleanliness. (2.1)

Partially achieved

Toilets in cells on A, B and G wings should be appropriately screened. (2.2)

Partially achieved (recommendation repeated, 2.10)

All cells should be adequately furnished. (2.3)

Not achieved

Cells designed for single occupancy should not be used for two prisoners. (2.4)

Not achieved (recommendation repeated, 2.9)

Mail should be issued on the wing at a time that prisoners can receive it. (2.5)

Achieved

Prisoners should be able to make telephone calls in the evening. (2.6)

Partially achieved

Telephones should be placed in booths. (2.7)

Not achieved (recommendation repeated as a housekeeping point, 2.14)

Cells should be adequately maintained and kept clean. (2.14)

Partially achieved

There should be an offensive display policy that is reinforced by staff. (2.15)

Not achieved

Outgoing mail should be sent to the sorting office the day the prisoner posts it. (2.16)

Achieved

Wing consultation meetings should be held monthly and address issues appropriately. (2.17)

Partially achieved

Prisoners who receive prison-issue clothing should have sufficient sets of underwear each week. (2.20)

Not achieved (recommendation repeated, 2.12)

All prisoners, including those on D wing, should have greater access to laundry facilities. (2.25)

Achieved

Prisoner access to stored property should be increased. (2.26)

Achieved

All showers should be screened to allow full privacy. (2.30)

Not achieved (recommendation repeated, 2.11)

The quality of staff entries in wing history files should be routinely checked. (2.32)

Achieved

Personal officers should introduce themselves to prisoners, get to know their personal circumstances and show, through regular entries in wing files, that they are aware of any significant events affecting the prisoner. (2.35)

Achieved

Managers should make regular checks of wing files and record these on the file. (2.36)

Achieved

Personal officers should attend sentence planning boards. (2.37)

Not achieved

Personal officers should attend ACCT self-harm monitoring case reviews. (2.38)

Achieved

Prisoners should be encouraged to raise routine queries informally with staff initially before using the formal applications and complaints systems. (3.34)

Partially achieved

Applications should be answered within seven days and replies should be fair and address the issues raised. A manager should check the tracking system on each wing daily and a reply should be sought immediately for any outstanding applications. (3.42)

Partially achieved

Complaints should be answered on time, the recording systems should ensure a true reflection of the process and there should be a daily management check of the records. (3.43)

Partially achieved

Replies to complaints should be fair and consistent and be quality checked. (3.44)

Partially achieved

There should be sufficient cover for the absence of the legal services officer. (3.47)

Not achieved

Legal representatives should be able to access the prison with minimal delays. (3.52)

Achieved

Prisoners should be able to access faith-based services without compromising other aspects of their regime. (3.53)

Achieved

The diversity action team should routinely discuss all diversity strands. (4.9)

Achieved

The diversity action team should explore and take action to address the low number of reporting incidents of discrimination forms submitted. (4.10)

Not achieved

Prison monitoring should include all elements of diversity, including disability, age and, particularly, religion. (4.11)

Not achieved

There should be sufficient diversity orderlies to provide an effective support service across the establishment. (4.12)

Not achieved

The prison should ensure that the ethnicity of all prisoners is accurately recorded on the P-Nomis IT system. (4.16)

Achieved

The diversity action team should explore and take appropriate remedial action to address the low number of racist incident report forms (RIRFs) received. (4.20)

Not achieved

The race equality officer should ensure that all RIRF investigations submitted by staff defending themselves against an accusation of racism should explore the events that led up to the accusation. (4.21)

Achieved

There should be formal interventions to challenge those who engage in racist behaviour. (4.22)

Not achieved

The prison should maintain an accurate list of all prisoners with current or previous racially motivated offences which should be readily available to all staff. (4.26)

Not achieved

There should be ongoing focus groups/structured engagement with Muslim prisoners to explore and address any concerns. (4.31)

Achieved

The prison should work with the UK Border Agency to ensure that decisions to deport and maintain detention after sentence expiry are made and communicated to prisoners well before the end of sentence. (4.33)

Achieved

The prison should regularly monitor and track the progress of deportation decisions. (4.34)

Achieved

The membership of the foreign national consultative committee should be extended to include other key staff and departments with responsibility for foreign national prisoners. (4.36)

Achieved

The foreign national handbook and introductory letter should be available in a range of appropriate languages. (4.46)

Achieved

Regular foreign national prisoner focus groups should be convened and through this forum the foreign national coordinator should ensure all eligible prisoners are aware of the procedures to enable them to make a free monthly international telephone call. (4.47)

Partially achieved

The specific needs of all new arrivals from minority groups, especially foreign national prisoners and those with disabilities, should be assessed promptly and met. (4.49)

Not achieved

Prisoners with a disability should, where necessary, have a personal emergency and evacuation plan, which is easily accessible by staff on wings, and prisoners with such plans should be easily identifiable by staff in the case of an emergency. (4.55)

Achieved

Diversity staff should ensure that all older prisoners are aware of the support group for older prisoners and that this group is consistently facilitated. (4.56)

Not achieved

Follow-up assessments for older prisoners should routinely be undertaken, as outlined in the diversity policy, records maintained and appropriate remedial action taken to meet identified need. (4.57)

Not achieved

The diversity team should re-establish and actively promote the focus group for gay prisoners. (4.60)

Not achieved

The wing treatment rooms should be in a good state of repair, easy to clean and fit for purpose. The rooms and any furnishings should meet infection control standards. (5.1)

Partially achieved

The beds in health services should not form part of the prison's certified normal accommodation (CNA) and admission should only be on assessment of clinical need. (5.2)

No longer relevant

All health care staff should have annual resuscitation and defibrillation training. (5.12)

Achieved

An appropriate complaints procedure should be in place. (5.16)

Not achieved

Written health care information should be available in a range of appropriate languages. (5.19)

Not achieved (recommendation repeated as a housekeeping point, 2.xx)

There should be further analysis of the 'did not attend' rates to focus appropriate action on improving attendance at relevant clinics. (5.24)

Partially achieved (recommendation repeated as a housekeeping point, 2.xx)

Care should be taken to make full and complete records of administration of medicines. This should include records of all occasions where the patient refused medication or failed to attend, and issues relating to drug compliance should be followed up where appropriate. (5.29)

Achieved

Secondary dispensing should cease. (5.30)

Achieved

Patient group directions should be introduced to enable supply of more potent medication by the pharmacist and/or nurse. A copy of the original signed patient group directions should be present in the pharmacy and read and signed by all relevant staff. (5.31)

Not achieved

Loose tablets and tablet foils do not satisfy labelling requirements and should not be present in stock. (5.38)

Achieved

Special sick medicine administrations should also be recorded on the patient's record to enable a full audit trail and informed prescribing. (5.39)

Achieved

Controlled drug prescriptions for supply must be legally written, and include the quantity prescribed in words and figures. (5.40)

Achieved

The planned replacement of the dental chair/unit and X-ray set should be completed. (5.48)

Achieved

Compliance with dental waste decontamination procedures should be maintained. (5.49)

Achieved

There should be a dental surgery inspection as soon as possible. (5.50)

Achieved

More detailed information of patients seen and treatment provided should be available through a system that can be monitored to a standard required by the NHS. (5.51)

Achieved

All inpatients should have care plans which have been informed by nursing assessment and are regularly evaluated. (5.53)

No longer relevant

The inpatient unit should be accessible to all and be fit for purpose, with appropriate décor and cleanliness to be consistent with the promotion of health and well-being. (5.58)

No longer relevant

Prisoners who need specialist mental health services should be transferred expeditiously. (5.60)

Achieved

NHS Lambeth should be informed of all patients who are not transferred expeditiously to specialist mental health beds if clinically indicated. (5.61)

No longer relevant

A daycare service should be available to support prisoners less able to cope on the wings. (5.62)

No longer relevant

Breakfast packs should not be given out as an alternative to a served breakfast. (8.1)

Not achieved

Prisoners on the main wings should be able to eat out of their cells. (8.2)

Not achieved (recommendation repeated, 2.114)

Lunch should not be served before 12 noon and the evening meal not before 5pm. (8.9)

Not achieved (recommendation repeated, 2.115)

Prisoners working in the kitchen who are likely to stay at Brixton long enough to undertake catering national vocational qualifications should be enabled to do so. (8.10)

Not achieved

More catalogues should be available for prisoner orders. (8.13)

Not achieved (recommendation repeated as a housekeeping point, 2.125)

Prisoners should be able to buy items from the prison shop within 24 hours of arrival. (8.17)

Not achieved (recommendation repeated as a housekeeping point, 2.123)

Purposeful activity

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

At the last inspection, in 2010, all prisoners were able to associate daily but time out of cell was very limited and there was no evening association. The quality of learning and skills provision was good for those prisoners able to access it. Basic skills were generally well supported and the quality of learning was good. The provision of vocational training had improved but most work activity was low skill and basic. There remained insufficient activity for the needs of the population and about a third of prisoners were recorded as unemployed. Allocation to activity and attendance also needed to improve. Access to PE was limited, but despite poor facilities the programme was reasonable. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Time out of cell should be increased for all prisoners and should include evening association. (HP57)

Partially achieved

The range of learning and skills courses should be improved and full use should be made of existing capacity. (HP59)

Not achieved

Recommendations

The analysis and use of learning and skills data should be improved to ensure that they are used effectively to manage and develop the provision. (6.4)

Partially achieved

Access to appropriate information should be improved to enable more effective scheduling of prisoners to classes. (6.5)

Not achieved.

The curriculum for segregated and vulnerable prisoners should be improved. (6.16)

Not achieved

The availability of formal additional learning support and English for speakers of other languages (ESOL) should be improved. (6.22)

Partially achieved

The range of learning and skills courses should be improved and effective use made of capacity. (6.23)

Not achieved

The policy on breaks in lessons should be revised to make better use of session time and prevent unnecessary disruption to learning. (6.24)

Achieved

The analysis of data on library use should be improved and used effectively to manage and develop the provision. (6.26)

Not achieved

PE should be available at weekends. (6.31)

Achieved

Prisoner free flow on and off the exercise yard should be permitted during exercise periods. (6.44)

Achieved

Prisoners should be able to spend more time out of cell. (6.47)

Partially achieved

Allocated association sessions on each wing should be varied between mornings and afternoons. (6.48)

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 inspection, in 2010, the resettlement policy was comprehensive and addressed each pathway but was not supported by an up-to-date action plan. Prisoners had a comprehensive initial assessment of their resettlement needs through the London initial screening and reducing reoffending tool (LISARRT) ensuring that all, including short-term and remand prisoners, received some custody planning. Most prisoners attended pre-release meetings to review resettlement plans before discharge but take-up was limited as many declined to attend. Work with prisoners in scope for offender management was good. Links with the London Diamond (integrated offender management) initiative required further development. Public protection arrangements were comprehensive and generally well managed. Accommodation support was good but some other pathways required more development. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

The prison should agree development objectives for each resettlement pathway, including offender management, and these should be monitored through the resettlement partnership group. (9.2)

Achieved

Prisoners not completing London initial screening and referral and reducing reoffending tool (LISARRT) assessments on their arrival should be given a further opportunity to complete the document. (9.4)

No longer relevant

There should be monthly checks of a random sample of LISARRT assessments to ensure referrals have been picked up. (9.5)

No longer relevant

The prison should ensure that regional initiatives, especially the London Diamond, are appropriately integrated into the work of the establishment to ensure sufficient community-based post-release support for prisoners. (9.8)

No longer relevant

Resettlement boards should alternate weekly between afternoons and mornings. (9.13)

No longer relevant

Prisoners missed by the resettlement board should be seen on an individual basis. (9.14)

No longer relevant

Release on temporary licence should be used as part of sentence planning to allow suitably risk-assessed prisoners to maintain family ties. (9.15)

Achieved

There should be individual debt management advice for prisoners. (9.35)

Partially achieved

Prisoners should be able to open bank accounts before release. (9.36)

Achieved

The alcohol strategy should be reviewed and based on an up-to-date prisoners' needs analysis. (9.38)

Not achieved

Psychometric test results taken pre- and post-PASRO and short duration programme courses should be copied to individual prisoners as a measure of progress. (9.41)

No longer relevant

The End2End project should be fully staffed in the prison, at the earliest opportunity, to ensure a fully operational service, with minimal waiting times for prisoners, and its services should be available to prisoners on all locations. (9.52)

Achieved

The monthly continuity of care meetings should be attended by representatives from all relevant departments, especially mental health, psychology and the offender management unit. (9.53)

Not achieved

There should be an induction package to ensure that all prisoners are fully aware of the services available from the End2End project. (9.54)

Partially achieved

Compact-based drug testing should be reinstated for prisoners on the P-ASRO (prison addressing substance related offending) programme and the short duration programme. (9.55)

No longer relevant

All 12-step fellowships and other interventions for prisoners with alcohol problems should be available whatever their location. (9.56)

Partially achieved

Evening visits should be introduced. (9.58)

Not achieved

There should be improved systems for booking visits by telephone to ensure the lines are accessible and can deal with the number of visitors. (9.61)

Achieved

The visitors centre should be expanded to meet the needs of the population. (9.62)

Not achieved (recommendation repeated, 4.61)

A disabled-access toilet should be provided in the visitors' centre. (9.64)

Achieved

Prisoners should be able to play with their children in the play area, subject to child protection measures. (9.65)

Not achieved (recommendation repeated, 4.62)

Security clearances for PACT volunteers should be completed in a timely manner. (9.66)

No longer relevant

Prisoners who do not receive visits should be able to exchange unused visiting orders for extra letters or telephone credit, and this should be publicised to prisoners. (9.69)

Not achieved.

A qualified family worker should be employed to help prisoners maintain contact with their families. (9.71)

Not achieved

Prisoners should be able to receive their first visit within one week of admission. (9.76)

No longer relevant

The visits area and furniture should be clean and well maintained. (9.77)

Partially achieved

There should be better privacy for those on closed visits. (9.78)

Not achieved (recommendation repeated, 4.63)

Prisoners and visitors on closed visits should have access to refreshments. (9.79)

Not achieved (recommendation repeated as a housekeeping point, 4.66)

The prisoners' waiting room in visits should be adequately supervised. (9.80)

Not achieved

The prison should develop and improve the range of initiatives and support to encourage and enable prisoners to maintain contact with family and friends. (9.81)

Partially achieved (recommendation repeated, 4.64)

Victim awareness work should be developed and expanded, based on links between the chaplaincy and resettlement services. (9.83)

Achieved

Prisoners identified as needing to complete offending behaviour programmes should be able to access them without significant delays. (9.86)

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	0	682	90.81
Recall	0	48	6.39
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	9	1.20
Detainees	0	12	1.60
Total	0	751	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	12	1.60
Less than six months	0	9	1.20
six months to less than 12 months	0	31	4.13
12 months to less than 2 years	0	105	13.98
2 years to less than 4 years	0	255	33.95
4 years to less than 10 years	0	258	34.35
10 years and over (not life)	0	24	3.20
ISPP (indeterminate sentence for public protection)	0	44	5.86
Life	0	13	1.73
Total	0	751	100

Age	Number of prisoners	%
Please state minimum age here: 21	-	-
Under 21 years	0	0
21 years to 29 years	282	37.55
30 years to 39 years	216	28.76
40 years to 49 years	135	17.98
50 years to 59 years	64	8.52
60 years to 69 years	35	4.66
70 plus years	19	2.53
Please state maximum age here: 86	-	-
Total	751	100

Nationality	18–20-year-olds	21 and over	%
British	0	636	84.68
Foreign nationals	0	107	14.25
Not Stated	0	8	1.07
Total	0	751	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	0	0

Category C	0	578	76.97
Category D	0	172	22.90
Other	0	1	0.13
Total	0	751	100

Ethnicity	18–20-year-olds	21 and over	%
White	0	348	46.33
British	0	285	37.95
Irish	0	11	1.46
Gypsy/Irish Traveller	0	0	0
Other white	0	52	6.92
Mixed	0	35	4.66
White and black Caribbean	0	15	2.00
White and black African	0	6	0.80
White and Asian	0	2	0.26
Other mixed	0	12	1.60
Asian or Asian British	0	74	9.87
Indian	0	28	3.73
Pakistani	0	14	1.87
Bangladeshi	0	14	1.87
Chinese	0	0	0
Other Asian	0	18	2.40
Black or black British	0	269	35.82
Caribbean	0	144	19.18
African	0	76	10.12
Other black	0	49	6.52
Other ethnic group	0	11	1.46
Arab	0	2	0.26
Other ethnic group	0	9	1.20
Not stated	0	14	1.86
Total	0	751	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	0	162	21.57
Roman Catholic	0	122	16.25
Other Christian denominations	0	92	12.25
Muslim	0	188	25.03
Sikh	0	13	1.73
Hindu	0	8	1.07
Buddhist	0	15	2
Jewish	0	4	0.53
Other	0	11	1.46
No religion	0	135	17.98
Not stated		1	0.13
Total	0	751	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)			Not supplied
Total			

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	113	15.29
1 month to 3 months	0	0	202	27.33
3 months to six months	0	0	247	33.42
six months to 1 year	0	0	131	17.73
1 year to 2 years	0	0	42	5.69
2 years to 4 years	0	0	4	0.54
4 years or more	0	0	0	0
Total	0	0	739	100

Sentenced prisoners only

	18–20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry	0	12	1.62
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	0	197	26.23
Total	0	209	27.85

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	1	8.33
1 month to 3 months	0	0	0	0
3 months to six months	0	0	2	16.67
six months to 1 year	0	0	6	50
1 year to 2 years	0	0	3	25
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
Total	0	0	12	100

Main offence	18–20-year-olds	21 and over	%
Violence against the person	0	Not supplied	
Sexual offences	0		
Burglary	0		
Robbery	0		
Theft and handling	0		
Fraud and forgery	0		
Drugs offences	0		
Other offences	0		
Civil offences	0		
Offence not recorded /holding warrant	0		
Total	0		

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

The prisoner 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. Respondents were then randomly selected from a P-Nomis prisoner 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 1 July 2013 the prisoner population at HMP Brixton was 742. Using the method described above, questionnaires were distributed to a sample of 207 prisoners.

We received a total of 182 completed questionnaires, a response rate of 88%. This included one questionnaire completed via interview. Seventeen respondents refused to complete a questionnaire, four questionnaires were not returned and four were returned blank.

Wing/unit	Number of completed survey returns
A	49
B	34
C	31
D	9
G	59

Presentation of survey results and analyses

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

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant 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 prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Brixton in 2013 compared with responses from prisoners surveyed in all other category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 41 category C trainer prisons since April 2008.
- A comparison within the 2013 survey between the responses of white prisoners 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 prisoners and non-Muslim prisoners.
- A comparison within the 2013 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2013 survey between those who are aged 50 and over and those under 50.

Survey summary

Section I: About You

QI.1	What wing or houseblock are you currently living on? See Shortened Methodology		
QI.2	How old are you?		
	<i>Under 21</i>		1 (1%)
	<i>21 - 29</i>		67 (37%)
	<i>30 - 39</i>		62 (34%)
	<i>40 - 49</i>		28 (15%)
	<i>50 - 59</i>		10 (6%)
	<i>60 - 69</i>		9 (5%)
	<i>70 and over</i>		4 (2%)
QI.3	Are you sentenced?		
	<i>Yes</i>		154 (88%)
	<i>Yes - on recall</i>		18 (10%)
	<i>No - awaiting trial</i>		0 (0%)
	<i>No - awaiting sentence</i>		0 (0%)
	<i>No - awaiting deportation</i>		3 (2%)
QI.4	How long is your sentence?		
	Not sentenced		3 (2%)
	<i>Less than 6 months</i>		14 (8%)
	<i>6 months to less than 1 year</i>		15 (9%)
	<i>1 year to less than 2 years</i>		21 (12%)
	<i>2 years to less than 4 years</i>		53 (30%)
	<i>4 years to less than 10 years</i>		57 (33%)
	<i>10 years or more</i>		3 (2%)
	<i>IPP (indeterminate sentence for public protection)</i>		6 (3%)
	<i>Life</i>		2 (1%)
QI.5	Are you a foreign national? (i.e. do not have UK citizenship)		
	<i>Yes</i>		19 (10%)
	<i>No</i>		162 (90%)
QI.6	Do you understand spoken English?		
	<i>Yes</i>		177 (98%)
	<i>No</i>		4 (2%)
QI.7	Do you understand written English?		
	<i>Yes</i>		176 (97%)
	<i>No</i>		5 (3%)
QI.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	69 (39%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	5 (3%)	<i>Asian or Asian British - other</i> 3 (2%)
	<i>White - other</i>	7 (4%)	<i>Mixed race - white and black Caribbean</i> 9 (5%)
	<i>Black or black British - Caribbean</i>	38 (21%)	<i>Mixed race - white and black African</i> 3 (2%)

<i>Black or black British - African</i>	19 (11%)	<i>Mixed race - white and Asian</i>	1 (1%)
<i>Black or black British - other</i>	3 (2%)	<i>Mixed race - other</i>	2 (1%)
<i>Asian or Asian British - Indian</i>	5 (3%)	<i>Arab</i>	0 (0%)
<i>Asian or Asian British - Pakistani</i>	6 (3%)	<i>Other ethnic group</i>	3 (2%)
<i>Asian or Asian British - Bangladeshi</i>	4 (2%)		

Q1.9 Do you consider yourself to be Gypsy/ Romany/ Traveller?

Yes	6 (3%)
No	167 (97%)

Q1.10 What is your religion?

<i>None</i>	31 (18%)	<i>Hindu</i>	4 (2%)
<i>Church of England</i>	38 (22%)	<i>Jewish</i>	1 (1%)
<i>Catholic</i>	31 (18%)	<i>Muslim</i>	45 (26%)
<i>Protestant</i>	2 (1%)	<i>Sikh</i>	4 (2%)
<i>Other Christian denomination</i>	8 (5%)	<i>Other</i>	7 (4%)
<i>Buddhist</i>	5 (3%)		

Q1.11 How would you describe your sexual orientation?

<i>Heterosexual/ Straight</i>	167 (94%)
<i>Homosexual/Gay</i>	5 (3%)
<i>Bisexual</i>	5 (3%)

Q1.12 Do you consider yourself to have a disability?

(i.e do you need help with any long term physical, mental or learning needs)

Yes	39 (22%)
No	136 (78%)

Q1.13 Are you a veteran (ex- armed services)?

Yes	10 (6%)
No	167 (94%)

Q1.14 Is this your first time in prison?

Yes	92 (51%)
No	88 (49%)

Q1.15 Do you have children under the age of 18?

Yes	95 (53%)
No	85 (47%)

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>	92 (51%)
<i>2 hours or longer</i>	81 (45%)
<i>Don't remember</i>	7 (4%)

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>	92 (53%)
Yes	62 (35%)
No	18 (10%)
<i>Don't remember</i>	3 (2%)

Q2.3 On your most recent journey here, were you offered a toilet break?

<i>My journey was less than two hours</i>	92 (52%)
Yes	7 (4%)

	No	77 (43%)
	Don't remember	2 (1%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	106 (60%)
	No	62 (35%)
	Don't remember	10 (6%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	137 (77%)
	No	35 (20%)
	Don't remember	5 (3%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well	34 (19%)
	Well	91 (51%)
	Neither	33 (19%)
	Badly	8 (5%)
	Very badly	8 (5%)
	Don't remember	3 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (please tick all that apply)	
	Yes, someone told me	81 (46%)
	Yes, I received written information	74 (42%)
	No, I was not told anything	29 (16%)
	Don't remember	0 (0%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	156 (87%)
	No	22 (12%)
	Don't remember	2 (1%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	Less than 2 hours	96 (54%)
	2 hours or longer	78 (44%)
	Don't remember	4 (2%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	142 (81%)
	No	31 (18%)
	Don't remember	3 (2%)
Q3.3	Overall, how were you treated in reception?	
	Very well	22 (12%)
	Well	93 (52%)
	Neither	34 (19%)
	Badly	17 (10%)
	Very badly	10 (6%)
	Don't remember	2 (1%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply)	
	Loss of property	29 (16%)
	Physical health	22 (12%)

	<i>Housing problems</i>	41 (23%)	<i>Mental health</i>	22 (12%)
	<i>Contacting employers</i>	5 (3%)	<i>Needing protection from other prisoners</i>	9 (5%)
	<i>Contacting family</i>	53 (30%)	<i>Getting phone numbers</i>	33 (19%)
	<i>Childcare</i>	3 (2%)	<i>Other</i>	4 (2%)
	<i>Money worries</i>	28 (16%)	Did not have any problems	48 (27%)
	<i>Feeling depressed or suicidal</i>	24 (14%)		
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?			
	Yes			38 (22%)
	No			87 (50%)
	Did not have any problems			48 (28%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply)			
	<i>Tobacco</i>			12 (7%)
	<i>A shower</i>			25 (14%)
	<i>A free telephone call</i>			15 (8%)
	<i>Something to eat</i>			72 (40%)
	<i>PIN phone credit</i>			18 (10%)
	<i>Toiletries/ basic items</i>			42 (24%)
	Did not receive anything			76 (43%)
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>			58 (34%)
	<i>Someone from health services</i>			85 (50%)
	<i>A Listener/Samaritans</i>			15 (9%)
	<i>Prison shop/ canteen</i>			25 (15%)
	Did not have access to any of these			59 (35%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply)			(Please
	<i>What was going to happen to you</i>			29 (17%)
	<i>What support was available for people feeling depressed or suicidal</i>			18 (10%)
	<i>How to make routine requests (applications)</i>			34 (20%)
	<i>Your entitlement to visits</i>			32 (18%)
	<i>Health services</i>			38 (22%)
	<i>Chaplaincy</i>			43 (25%)
	Not offered any information			106 (61%)
Q3.9	Did you feel safe on your first night here?			
	Yes			129 (72%)
	No			45 (25%)
	<i>Don't remember</i>			5 (3%)
Q3.10	How soon after you arrived here did you go on an induction course?			
	Have not been on an induction course			67 (38%)
	<i>Within the first week</i>			77 (44%)
	<i>More than a week</i>			24 (14%)
	<i>Don't remember</i>			9 (5%)
Q3.11	Did the induction course cover everything you needed to know about the prison?			
	Have not been on an induction course			67 (39%)
	Yes			44 (25%)

No	51 (29%)
Don't remember	11 (6%)

Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment	48 (27%)
	Within the first week	48 (27%)
	More than a week	70 (39%)
	Don't remember	12 (7%)

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?	22 (13%)	47 (28%)	25 (15%)	28 (17%)	12 (7%) 35 (21%)
	Attend legal visits?	20 (13%)	55 (35%)	17 (11%)	11 (7%)	6 (4%) 46 (30%)
	Get bail information?	3 (2%)	13 (9%)	15 (10%)	16 (11%)	15 (10%) 82 (57%)
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					48 (27%)
	Yes					48 (27%)
	No					80 (45%)
Q4.3	Can you get legal books in the library?					
	Yes					46 (26%)
	No					18 (10%)
	Don't know					114 (64%)
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?	115 (65%)	54 (30%)	9 (5%)		
	Are you normally able to have a shower every day?	168 (94%)	9 (5%)	1 (1%)		
	Do you normally receive clean sheets every week?	134 (75%)	33 (19%)	11 (6%)		
	Do you normally get cell cleaning materials every week?	138 (78%)	35 (20%)	4 (2%)		
	Is your cell call bell normally answered within five minutes?	41 (23%)	79 (45%)	55 (31%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	109 (62%)	64 (36%)	3 (2%)		
	If you need to, can you normally get your stored property?	29 (16%)	72 (41%)	76 (43%)		
Q4.5	What is the food like here?					
	Very good					3 (2%)
	Good					49 (28%)
	Neither					55 (31%)
	Bad					36 (20%)
	Very bad					35 (20%)
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					1 (1%)
	Yes					68 (39%)
	No					107 (61%)
Q4.7	Can you speak to a Listener at any time, if you want to?					
	Yes					61 (34%)
	No					17 (10%)
	Don't know					100 (56%)

Q4.8	Are your religious beliefs respected?	
	Yes	101 (57%)
	No	27 (15%)
	Don't know/ N/A	49 (28%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	99 (55%)
	No	6 (3%)
	Don't know/ N/A	75 (42%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	I don't want to attend	30 (17%)
	Very easy	39 (22%)
	Easy	54 (30%)
	Neither	17 (10%)
	Difficult	6 (3%)
	Very difficult	12 (7%)
	Don't know	20 (11%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?	
	Yes	134 (77%)
	No	30 (17%)
	Don't know	10 (6%)
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?	13 (8%) 94 (57%) 59 (36%)
	Are applications dealt with quickly (within seven days)?	13 (8%) 60 (37%) 88 (55%)
Q5.3	Is it easy to make a complaint?	
	Yes	80 (48%)
	No	27 (16%)
	Don't know	61 (36%)
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?	80 (47%) 31 (18%) 58 (34%)
	Are complaints dealt with quickly (within seven days)?	80 (49%) 19 (12%) 64 (39%)
Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	25 (15%)
	No	137 (85%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?	
	Don't know who they are	59 (35%)
	Very easy	14 (8%)
	Easy	17 (10%)
	Neither	41 (25%)
	Difficult	23 (14%)

Very difficult

13 (8%)

Section 6: Incentive and earned privileges scheme

Q6.1	Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels)	
	<i>Don't know what the IEP scheme is</i>	9 (5%)
	Yes	86 (50%)
	No	60 (35%)
	<i>Don't know</i>	17 (10%)
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>	9 (5%)
	Yes	76 (45%)
	No	63 (37%)
	<i>Don't know</i>	21 (12%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	4 (2%)
	No	170 (98%)
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>	155 (91%)
	Very well	3 (2%)
	Well	4 (2%)
	Neither	6 (4%)
	Badly	0 (0%)
	Very badly	2 (1%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	116 (67%)
	No	56 (33%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	116 (67%)
	No	56 (33%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	40 (23%)
	No	136 (77%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	9 (5%)
	Never	49 (28%)
	Rarely	49 (28%)
	Some of the time	49 (28%)
	Most of the time	12 (7%)
	All of the time	7 (4%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	84 (48%)

<i>In the first week</i>	27 (15%)
<i>More than a week</i>	49 (28%)
<i>Don't remember</i>	15 (9%)

Q7.6 How helpful is your personal (named) officer?

<i>Do not have a personal officer/ I have not met him/ her</i>	84 (49%)
<i>Very helpful</i>	17 (10%)
<i>Helpful</i>	24 (14%)
<i>Neither</i>	22 (13%)
<i>Not very helpful</i>	13 (8%)
<i>Not at all helpful</i>	12 (7%)

Section 8: Safety**Q8.1 Have you ever felt unsafe here?**

<i>Yes</i>	69 (39%)
<i>No</i>	106 (61%)

Q8.2 Do you feel unsafe now?

<i>Yes</i>	36 (22%)
<i>No</i>	129 (78%)

Q8.3 In which areas have you felt unsafe? (Please tick all that apply)

<i>Never felt unsafe</i>	106 (65%)	<i>At meal times</i>	14 (9%)
<i>Everywhere</i>	16 (10%)	<i>At health services</i>	7 (4%)
<i>Segregation unit</i>	0 (0%)	<i>Visits area</i>	4 (2%)
<i>Association areas</i>	22 (13%)	<i>In wing showers</i>	20 (12%)
<i>Reception area</i>	5 (3%)	<i>In gym showers</i>	5 (3%)
<i>At the gym</i>	7 (4%)	<i>In corridors/stairwells</i>	11 (7%)
<i>In an exercise yard</i>	15 (9%)	<i>On your landing/wing</i>	17 (10%)
<i>At work</i>	7 (4%)	<i>In your cell</i>	11 (7%)
<i>During movement</i>	15 (9%)	<i>At religious services</i>	5 (3%)
<i>At education</i>	6 (4%)		

Q8.4 Have you been victimised by other prisoners here?

<i>Yes</i>	39 (22%)
<i>No</i>	136 (78%)

Q8.5 If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply)

<i>Insulting remarks (about you or your family or friends)</i>	13 (7%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	7 (4%)
<i>Sexual abuse</i>	0 (0%)
<i>Feeling threatened or intimidated</i>	19 (11%)
<i>Having your canteen/property taken</i>	4 (2%)
<i>Medication</i>	3 (2%)
<i>Debt</i>	3 (2%)
<i>Drugs</i>	3 (2%)
<i>Your race or ethnic origin</i>	2 (1%)
<i>Your religion/religious beliefs</i>	1 (1%)
<i>Your nationality</i>	3 (2%)
<i>You are from a different part of the country than others</i>	1 (1%)
<i>You are from a traveller community</i>	0 (0%)
<i>Your sexual orientation</i>	3 (2%)
<i>Your age</i>	6 (3%)
<i>You have a disability</i>	2 (1%)
<i>You were new here</i>	11 (6%)

Your offence/ crime	5 (3%)
Gang related issues	2 (1%)

Q8.6 Have you been victimised by staff here?

Yes	53 (31%)
No	119 (69%)

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)	17 (10%)
Physical abuse (being hit, kicked or assaulted)	3 (2%)
Sexual abuse	0 (0%)
Feeling threatened or intimidated	21 (12%)
Medication	4 (2%)
Debt	1 (1%)
Drugs	3 (2%)
Your race or ethnic origin	11 (6%)
Your religion/religious beliefs	6 (3%)
Your nationality	5 (3%)
You are from a different part of the country than others	1 (1%)
You are from a traveller community	1 (1%)
Your sexual orientation	0 (0%)
Your age	5 (3%)
You have a disability	2 (1%)
You were new here	16 (9%)
Your offence/ crime	6 (3%)
Gang related issues	1 (1%)

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

Not been victimised	104 (64%)
Yes	19 (12%)
No	39 (24%)

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

	Don't know	Very easy	Easy	Neither	Difficult	Very difficult
The doctor	21 (12%)	13 (7%)	52 (30%)	28 (16%)	40 (23%)	20 (11%)
The nurse	18 (10%)	23 (13%)	65 (38%)	33 (19%)	20 (12%)	13 (8%)
The dentist	39 (23%)	7 (4%)	19 (11%)	24 (14%)	41 (24%)	42 (24%)

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

	Not been	Very good	Good	Neither	Bad	Very bad
The doctor	31 (18%)	18 (10%)	58 (34%)	36 (21%)	18 (10%)	11 (6%)
The nurse	27 (16%)	22 (13%)	50 (29%)	35 (21%)	19 (11%)	17 (10%)
The dentist	65 (38%)	20 (12%)	28 (17%)	35 (21%)	9 (5%)	12 (7%)

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

Not been	22 (13%)
Very good	13 (8%)
Good	62 (36%)
Neither	42 (24%)
Bad	21 (12%)
Very bad	12 (7%)

Q9.4 Are you currently taking medication?

Yes	75 (42%)
-----	----------

	No	102 (58%)
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?	
	Not taking medication	102 (59%)
	Yes, all my meds	46 (26%)
	Yes, some of my meds	15 (9%)
	No	11 (6%)
Q9.6	Do you have any emotional or mental health problems?	
	Yes	43 (24%)
	No	133 (76%)
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)	
	Do not have any emotional or mental health problems	133 (78%)
	Yes	18 (11%)
	No	20 (12%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	39 (22%)
	No	135 (78%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	25 (15%)
	No	147 (85%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	35 (20%)
	Easy	17 (10%)
	Neither	14 (8%)
	Difficult	4 (2%)
	Very difficult	8 (5%)
	Don't know	94 (55%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	14 (8%)
	Easy	11 (6%)
	Neither	15 (9%)
	Difficult	9 (5%)
	Very difficult	17 (10%)
	Don't know	106 (62%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	11 (6%)
	No	163 (94%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	6 (3%)
	No	168 (97%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	Did not / do not have a drug problem	128 (76%)
	Yes	26 (15%)

	No	14 (8%)
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>	147 (86%)
	Yes	11 (6%)
	No	13 (8%)
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>	137 (82%)
	Yes	26 (16%)
	No	4 (2%)

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>	Very Easy	Easy	Neither	Difficult	Very difficult
	Prison job	12 (7%)	8 (5%)	24 (14%)	25 (15%)	41 (24%)	61 (36%)
	Vocational or skills training	31 (19%)	10 (6%)	29 (17%)	24 (14%)	30 (18%)	43 (26%)
	Education (including basic skills)	25 (15%)	19 (11%)	52 (31%)	18 (11%)	26 (16%)	26 (16%)
	Offending behaviour programmes	54 (33%)	9 (5%)	20 (12%)	23 (14%)	17 (10%)	42 (25%)
Q11.2	Are you currently involved in the following? (Please tick all that apply)						
	<i>Not involved in any of these</i>						62 (36%)
	Prison job						63 (37%)
	Vocational or skills training						13 (8%)
	Education (including basic skills)						43 (25%)
	Offending behaviour programmes						19 (11%)
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>	Yes	No			<i>Don't know</i>
	Prison job	49 (33%)	27 (18%)	60 (40%)			13 (9%)
	Vocational or skills training	53 (43%)	31 (25%)	29 (23%)			11 (9%)
	Education (including basic skills)	34 (24%)	54 (39%)	38 (27%)			13 (9%)
	Offending behaviour programmes	50 (40%)	31 (25%)	26 (21%)			17 (14%)
Q11.4	How often do you usually go to the library?						
	<i>Don't want to go</i>						30 (18%)
	Never						69 (41%)
	Less than once a week						41 (24%)
	About once a week						23 (14%)
	More than once a week						7 (4%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?						
	<i>Don't use it</i>						81 (49%)
	Yes						19 (11%)
	No						67 (40%)
Q11.6	How many times do you usually go to the gym each week?						
	<i>Don't want to go</i>						47 (28%)
	0						28 (17%)
	1 to 2						32 (19%)
	3 to 5						46 (27%)

	<i>More than 5</i>	15 (9%)
Q11.7	How many times do you usually go outside for exercise each week?	
	Don't want to go	32 (19%)
	0	22 (13%)
	1 to 2	61 (35%)
	3 to 5	38 (22%)
	More than 5	19 (11%)
Q11.8	How many times do you usually have association each week?	
	Don't want to go	10 (6%)
	0	4 (2%)
	1 to 2	20 (12%)
	3 to 5	33 (19%)
	More than 5	104 (61%)
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>	21 (12%)
	<i>2 to less than 4 hours</i>	50 (29%)
	<i>4 to less than 6 hours</i>	48 (28%)
	<i>6 to less than 8 hours</i>	21 (12%)
	<i>8 to less than 10 hours</i>	7 (4%)
	<i>10 hours or more</i>	17 (10%)
	<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?	
	Yes	40 (24%)
	No	127 (76%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	79 (46%)
	No	92 (54%)
Q12.3	Have you had any problems getting access to the telephones?	
	Yes	44 (26%)
	No	128 (74%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	25 (15%)
	<i>Very easy</i>	26 (15%)
	<i>Easy</i>	49 (28%)
	<i>Neither</i>	23 (13%)
	<i>Difficult</i>	16 (9%)
	<i>Very difficult</i>	28 (16%)
	<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?	
	Not sentenced	3 (2%)
	Yes	126 (75%)
	No	40 (24%)

Q13.2	What type of contact have you had with your offender manager since being in prison? (please tick all that apply)	
	Not sentenced/ NA	43 (25%)
	No contact	44 (26%)
	Letter	41 (24%)
	Phone	33 (19%)
	Visit	39 (23%)
Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	102 (61%)
	No	66 (39%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	3 (2%)
	Yes	81 (48%)
	No	86 (51%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/ not sentenced	89 (52%)
	Very involved	19 (11%)
	Involved	25 (15%)
	Neither	8 (5%)
	Not very involved	9 (5%)
	Not at all involved	22 (13%)
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	89 (54%)
	Nobody	49 (30%)
	Offender supervisor	22 (13%)
	Offender manager	11 (7%)
	Named/ personal officer	5 (3%)
	Staff from other departments	9 (5%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/ not sentenced	89 (53%)
	Yes	31 (18%)
	No	24 (14%)
	Don't know	25 (15%)
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	89 (52%)
	Yes	20 (12%)
	No	41 (24%)
	Don't know	20 (12%)
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	89 (52%)
	Yes	21 (12%)
	No	37 (22%)
	Don't know	24 (14%)
Q13.10	Do you have a needs based custody plan?	
	Yes	7 (4%)
	No	83 (51%)
	Don't know	74 (45%)

Q13.11 Do you feel that any member of staff has helped you to prepare for your release?

Yes	21 (12%)
No	148 (88%)

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

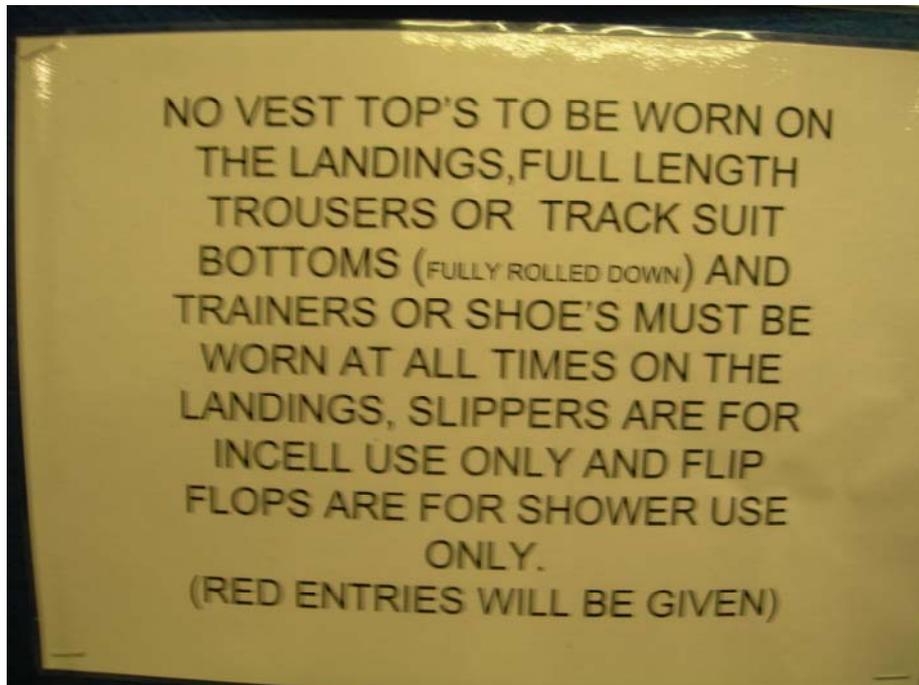
	<i>Do not need help</i>	Yes	No
Employment	34 (21%)	41 (25%)	86 (53%)
Accommodation	35 (22%)	43 (27%)	79 (50%)
Benefits	27 (17%)	38 (24%)	91 (58%)
Finances	32 (21%)	19 (13%)	101 (66%)
Education	38 (25%)	40 (26%)	76 (49%)
Drugs and alcohol	51 (35%)	34 (23%)	60 (41%)

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?

Not sentenced	3 (2%)
Yes	83 (50%)
No	79 (48%)

Appendix V: Photographs

Notice on a wing, warning of the issuance of a 'red entry'.



A typical cell designed for one being used by two men



Main comparator and comparator



Prisoner survey responses HMP Brixton 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

		HMP Brixton 2013	Category C training prisons comparator
	Any percentage highlighted in green is significantly better		
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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		182	6358
SECTION 1: General information			
1.2	Are you under 21 years of age?	1%	2%
1.3	Are you sentenced?	98%	100%
1.3	Are you on recall?	10%	10%
1.4	Is your sentence less than 12 months?	17%	6%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	10%
1.5	Are you a foreign national?	11%	11%
1.6	Do you understand spoken English?	98%	99%
1.7	Do you understand written English?	97%	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.)	54%	26%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	4%
1.1	Are you Muslim?	26%	12%
1.11	Are you homosexual/gay or bisexual?	6%	3%
1.12	Do you consider yourself to have a disability?	22%	18%
1.13	Are you a veteran (ex-armed services)?	6%	6%
1.14	Is this your first time in prison?	51%	37%
1.15	Do you have any children under the age of 18?	53%	52%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	45%	45%
	For those who spent two or more hours in the escort van:		
2.2	Were you offered anything to eat or drink?	75%	72%
2.3	Were you offered a toilet break?	8%	9%
2.4	Was the van clean?	60%	67%
2.5	Did you feel safe?	77%	81%
2.6	Were you treated well/very well by the escort staff?	71%	70%
2.7	Before you arrived here were you told that you were coming here?	46%	62%
2.7	Before you arrived here did you receive any written information about coming here?	42%	17%
2.8	When you first arrived here did your property arrive at the same time as you?	87%	89%

Main comparator and comparator

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SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	54%	52%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	83%
3.3	Were you treated well/very well in reception?	65%	73%
	When you first arrived:		
3.4	Did you have any problems?	73%	61%
3.4	Did you have any problems with loss of property?	16%	16%
3.4	Did you have any housing problems?	23%	15%
3.4	Did you have any problems contacting employers?	3%	3%
3.4	Did you have any problems contacting family?	30%	21%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	3%
3.4	Did you have any money worries?	16%	14%
3.4	Did you have any problems with feeling depressed or suicidal?	14%	13%
3.4	Did you have any physical health problems?	13%	12%
3.4	Did you have any mental health problems?	13%	12%
3.4	Did you have any problems with needing protection from other prisoners?	5%	4%
3.4	Did you have problems accessing phone numbers?	19%	19%
	For those with problems:		
3.5	Did you receive any help/ support from staff in dealing with these problems?	30%	38%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	7%	78%
3.6	A shower?	14%	31%
3.6	A free telephone call?	8%	43%
3.6	Something to eat?	41%	66%
3.6	PIN phone credit?	10%	51%
3.6	Toiletries/ basic items?	24%	45%

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SECTION 3: Reception, first night and induction continued		
When you first arrived here did you have access to the following people:		
3.7 The chaplain or a religious leader?	34%	53%
3.7 Someone from health services?	50%	71%
3.7 A Listener/Samaritans?	9%	33%
3.7 Prison shop/ canteen?	15%	19%
When you first arrived here were you offered information about any of the following:		
3.8 What was going to happen to you?	17%	52%
3.8 Support was available for people feeling depressed or suicidal?	10%	44%
3.8 How to make routine requests?	20%	46%
3.8 Your entitlement to visits?	19%	45%
3.8 Health services?	22%	56%
3.8 The chaplaincy?	25%	50%
3.9 Did you feel safe on your first night here?	72%	83%
3.10 Have you been on an induction course?	62%	92%
For those who have been on an induction course:		
3.11 Did the course cover everything you needed to know about the prison?	42%	64%
3.12 Did you receive an education (skills for life) assessment?	73%	85%
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?	41%	48%
4.1 Attend legal visits?	48%	52%
4.1 Get bail information?	11%	15%
4.2 Have staff ever opened letters from your solicitor or legal representative when you were not with them?	27%	41%
4.3 Can you get legal books in the library?	26%	44%
For the wing/unit you are currently on:		
4.4 Are you normally offered enough clean, suitable clothes for the week?	65%	66%
4.4 Are you normally able to have a shower every day?	94%	92%
4.4 Do you normally receive clean sheets every week?	75%	78%
4.4 Do you normally get cell cleaning materials every week?	78%	72%
4.4 Is your cell call bell normally answered within five minutes?	23%	38%
4.4 Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	62%	70%
4.4 Can you normally get your stored property, if you need to?	16%	27%
4.5 Is the food in this prison good/very good?	29%	26%
4.6 Does the shop/canteen sell a wide enough range of goods to meet your needs?	39%	44%
4.7 Are you able to speak to a Listener at any time, if you want to?	34%	57%
4.8 Are your religious beliefs are respected?	57%	53%
4.9 Are you able to speak to a religious leader of your faith in private if you want to?	55%	59%
4.10 Is it easy/very easy to attend religious services?	52%	51%

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SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	77%	83%
	For those who have made an application:		
5.2	Do you feel applications are dealt with fairly?	61%	61%
5.2	Do you feel applications are dealt with quickly (within seven days)?	41%	49%
5.3	Is it easy to make a complaint?	48%	61%
	For those who have made a complaint:		
5.4	Do you feel complaints are dealt with fairly?	35%	33%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	23%	37%
5.5	Have you ever been prevented from making a complaint when you wanted to?	15%	17%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	19%	29%
SECTION 6: Incentives and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	50%	54%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	5%
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?	47%	41%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	68%	77%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	68%	76%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	23%	29%
7.4	Do staff normally speak to you most of the time/all of the time during association?	11%	20%
7.5	Do you have a personal officer?	52%	74%
	For those with a personal officer:		
7.6	Do you think your personal officer is helpful/very helpful?	47%	64%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	40%	32%
8.2	Do you feel unsafe now?	22%	13%
8.4	Have you been victimised by other prisoners here?	22%	22%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	7%	10%
8.5	Hit, kicked or assaulted you?	4%	6%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	11%	13%
8.5	Taken your canteen/property?	2%	4%
8.5	Victimised you because of medication?	2%	4%
8.5	Victimised you because of debt?	2%	3%
8.5	Victimised you because of drugs?	2%	3%
8.5	Victimised you because of your race or ethnic origin?	1%	3%
8.5	Victimised you because of your religion/religious beliefs?	1%	2%
8.5	Victimised you because of your nationality?	2%	2%
8.5	Victimised you because you were from a different part of the country?	1%	4%
8.5	Victimised you because you are from a Traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	2%	1%
8.5	Victimised you because of your age?	3%	2%
8.5	Victimised you because you have a disability?	1%	2%
8.5	Victimised you because you were new here?	6%	4%
8.5	Victimised you because of your offence/crime?	3%	4%
8.5	Victimised you because of gang related issues?	1%	3%

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	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	31%	26%
Since you have been here, have staff:			
8.7	Made insulting remarks about you, your family or friends?	10%	10%
8.7	Hit, kicked or assaulted you?	2%	3%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	12%	12%
8.7	Victimised you because of medication?	2%	4%
8.7	Victimised you because of debt?	1%	2%
8.7	Victimised you because of drugs?	2%	2%
8.7	Victimised you because of your race or ethnic origin?	6%	5%
8.7	Victimised you because of your religion/religious beliefs?	3%	3%
8.7	Victimised you because of your nationality?	3%	3%
8.7	Victimised you because you were from a different part of the country?	1%	4%
8.7	Victimised you because you are from a Traveller community?	1%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	3%	2%
8.7	Victimised you because you have a disability?	1%	2%
8.7	Victimised you because you were new here?	10%	5%
8.7	Victimised you because of your offence/crime?	3%	4%
8.7	Victimised you because of gang related issues?	1%	2%
For those who have been victimised by staff or other prisoners:			
8.8	Did you report any victimisation that you have experienced?	33%	38%

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	Percentages which are not highlighted show there is no significant difference		
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	37%	32%
9.1	Is it easy/very easy to see the nurse?	51%	55%
9.1	Is it easy/very easy to see the dentist?	15%	13%
	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?	54%	47%
9.2	The nurse?	50%	60%
9.2	The dentist?	46%	42%
9.3	The overall quality of health services?	50%	43%
9.4	Are you currently taking medication?	42%	47%
	For those currently taking medication:		
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	85%	85%
9.6	Do you have any emotional well being or mental health problems?	24%	26%
	For those who have problems:		
9.7	Are you being helped or supported by anyone in this prison?	47%	49%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	22%	23%
10.2	Did you have a problem with alcohol when you came into this prison?	15%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	30%	30%
10.4	Is it easy/very easy to get alcohol in this prison?	15%	18%
10.5	Have you developed a problem with drugs since you have been in this prison?	6%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	6%
	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%	65%
10.8	Have you received any support or help with your alcohol problem while in this prison?	46%	65%
	For those who have received help or support with their drug or alcohol problem:		
10.9	Was the support helpful?	87%	80%

Main comparator and comparator

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013	Category C training prisons comparator
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	19%	42%
11.1	Vocational or skills training?	23%	36%
11.1	Education (including basic skills)?	43%	51%
11.1	Offending behaviour programmes?	18%	20%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	37%	60%
11.2	Vocational or skills training?	8%	17%
11.2	Education (including basic skills)?	25%	27%
11.2	Offending behaviour programmes?	11%	14%
11.3	Have you had a job while in this prison?	67%	83%
	For those who have had a prison job while in this prison:		
11.3	Do you feel the job will help you on release?	27%	43%
11.3	Have you been involved in vocational or skills training while in this prison?	57%	74%
	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?	44%	61%
11.3	Have you been involved in education while in this prison?	76%	80%
	For those who have been involved in education while in this prison:		
11.3	Do you feel the education will help you on release?	51%	62%
11.3	Have you been involved in offending behaviour programmes while in this prison?	60%	72%
	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?	42%	54%
11.4	Do you go to the library at least once a week?	18%	49%
11.5	Does the library have a wide enough range of materials to meet your needs?	11%	46%
11.6	Do you go to the gym three or more times a week?	36%	37%
11.7	Do you go outside for exercise three or more times a week?	33%	46%
11.8	Do you go on association more than five times each week?	61%	77%
11.9	Do you spend ten or more hours out of your cell on a weekday?	10%	15%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	24%	35%
12.2	Have you had any problems with sending or receiving mail?	46%	44%
12.3	Have you had any problems getting access to the telephones?	26%	24%
12.4	Is it easy/ very easy for your friends and family to get here?	44%	27%

Main comparator and comparator

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013	Category C training prisons comparator
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 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?	76%	82%
For those who are sentenced what type of contact have you had with your offender manager:			
13.2	No contact?	38%	33%
13.2	Contact by letter?	31%	38%
13.2	Contact by phone?	24%	25%
13.2	Contact by visit?	30%	33%
13.3	Do you have a named offender supervisor in this prison?	61%	66%
For those who are sentenced:			
13.4	Do you have a sentence plan?	49%	71%
For those with a sentence plan:			
13.5	Were you involved/very involved in the development of your plan?	53%	56%
Who is working with you to achieve your sentence plan targets:			
13.6	Nobody?	64%	46%
13.6	Offender supervisor?	29%	35%
13.6	Offender manager?	14%	26%
13.6	Named/ personal officer?	6%	14%
13.6	Staff from other departments?	12%	17%
For those with a sentence plan:			
13.7	Can you achieve any of your sentence plan targets in this prison?	39%	66%
13.8	Are there plans for you to achieve any of your targets in another prison?	25%	22%
13.9	Are there plans for you to achieve any of your targets in the community?	26%	29%
13.10	Do you have a needs based custody plan?	4%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	17%
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?	32%	35%
13.12	Accommodation?	35%	38%
13.12	Benefits?	30%	39%
13.12	Finances?	16%	28%
13.12	Education?	35%	37%
13.12	Drugs and alcohol?	36%	46%
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%



Prisoner survey responses (Category D wings) HMP Brixton 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

		Category D wings (C & D wings)	All other wings (A, B & G wings)
	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		40	142
SECTION 1: General information			
1.2	Are you under 21 years of age?	3%	0%
1.3	Are you sentenced?	100%	98%
1.3	Are you on recall?	0%	13%
1.4	Is your sentence less than 12 months?	18%	16%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	3%
1.5	Are you a foreign national?	12%	10%
1.6	Do you understand spoken English?	100%	97%
1.7	Do you understand written English?	98%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	59%	53%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	4%
1.1	Are you Muslim?	33%	24%
1.11	Are you homosexual/gay or bisexual?	3%	7%
1.12	Do you consider yourself to have a disability?	15%	25%
1.13	Are you a veteran (ex-armed services)?	3%	7%
1.14	Is this your first time in prison?	72%	45%
1.15	Do you have any children under the age of 18?	58%	52%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	54%	43%
2.5	Did you feel safe?	82%	76%
2.6	Were you treated well/very well by the escort staff?	62%	73%
2.7	Before you arrived here were you told that you were coming here?	50%	44%
2.8	When you first arrived here did your property arrive at the same time as you?	88%	86%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	62%	52%
3.2	When you were searched in reception, was this carried out in a respectful way?	76%	82%
3.3	Were you treated well/very well in reception?	67%	64%

Key to tables

	Any percentage highlighted in green is significantly better	Category D wings (C & D wings)	All other wings (A, B & G wings)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
	When you first arrived:		
3.4	Did you have any problems?	68%	74%
3.4	Did you have any problems with loss of property?	24%	14%
3.4	Did you have any housing problems?	5%	28%
3.4	Did you have any problems contacting employers?	0%	4%
3.4	Did you have any problems contacting family?	47%	25%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%
3.4	Did you have any money worries?	10%	17%
3.4	Did you have any problems with feeling depressed or suicidal?	8%	15%
3.4	Did you have any physical health problems?	5%	14%
3.4	Did you have any mental health problems?	5%	14%
3.4	Did you have any problems with needing protection from other prisoners?	0%	7%
3.4	Did you have problems accessing phone numbers?	24%	17%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	5%	7%
3.6	A shower?	26%	11%
3.6	A free telephone call?	8%	9%
3.6	Something to eat?	38%	41%
3.6	PIN phone credit?	10%	10%
3.6	Toiletries/ basic items?	28%	22%
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?	43%	32%
3.7	Someone from health services?	55%	49%
3.7	A Listener/Samaritans?	8%	9%
3.7	Prison shop/ canteen?	14%	15%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	32%	13%
3.8	Support was available for people feeling depressed or suicidal?	16%	9%
3.8	How to make routine requests?	29%	17%
3.8	Your entitlement to visits?	21%	18%
3.8	Health services?	29%	20%
3.8	The chaplaincy?	29%	24%
3.9	Did you feel safe on your first night here?	85%	69%

Key to tables

	Any percentage highlighted in green is significantly better	Category D wings (C & D wings)	All other wings (A, B & G wings)
	Any percentage highlighted in blue is significantly worse		
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	Percentages which are not highlighted show there is no significant difference		
3.10	Have you been on an induction course?	93%	54%
3.12	Did you receive an education (skills for life) assessment?	85%	70%
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?	46%	39%
4.1	Attend legal visits?	47%	49%
4.1	Get bail information?	11%	11%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	28%	27%
4.3	Can you get legal books in the library?	23%	27%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	74%	62%
4.4	Are you normally able to have a shower every day?	100%	93%
4.4	Do you normally receive clean sheets every week?	65%	78%
4.4	Do you normally get cell cleaning materials every week?	72%	80%
4.4	Is your cell call bell normally answered within five minutes?	21%	24%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	60%
4.4	Can you normally get your stored property, if you need to?	18%	16%
4.5	Is the food in this prison good/very good?	16%	33%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	38%
4.7	Are you able to speak to a Listener at any time, if you want to?	37%	33%
4.8	Are your religious beliefs are respected?	63%	56%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	68%	52%
4.10	Is it easy/very easy to attend religious services?	68%	48%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	74%	78%
5.3	Is it easy to make a complaint?	64%	43%
5.5	Have you ever been prevented from making a complaint when you wanted to?	8%	18%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	19%	19%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	68%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	57%	42%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	3%
SECTION 7: Relationships with staff			

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		
7.1	Do most staff, in this prison, treat you with respect?	68%	67%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	67%	68%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	15%	25%
7.4	Do staff normally speak to you most of the time/all of the time during association?	10%	11%
7.5	Do you have a personal officer?	60%	50%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	18%	46%
8.2	Do you feel unsafe now?	8%	26%
8.4	Have you been victimised by other prisoners here?	8%	27%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	3%	9%
8.5	Hit, kicked or assaulted you?	0%	5%
8.5	Sexually abused you?	0%	0%
8.5	Threatened or intimidated you?	3%	13%
8.5	Taken your canteen/property?	0%	3%
8.5	Victimised you because of medication?	0%	2%
8.5	Victimised you because of debt?	0%	2%
8.5	Victimised you because of drugs?	0%	2%
8.5	Victimised you because of your race or ethnic origin?	0%	1%
8.5	Victimised you because of your religion/religious beliefs?	0%	1%
8.5	Victimised you because of your nationality?	0%	2%
8.5	Victimised you because you were from a different part of the country?	0%	1%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	3%	1%
8.5	Victimised you because of your age?	0%	4%
8.5	Victimised you because you have a disability?	0%	1%
8.5	Victimised you because you were new here?	0%	8%
8.5	Victimised you because of your offence/crime?	0%	4%
8.5	Victimised you because of gang related issues?	0%	1%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	31%	31%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	10%	10%

Key to tables

	Any percentage highlighted in green is significantly better	Category D wings (C & D wings)	All other wings (A, B & G wings)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.7	Hit, kicked or assaulted you?	0%	2%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	10%	13%
8.7	Victimised you because of medication?	0%	3%
8.7	Victimised you because of debt?	0%	1%
8.7	Victimised you because of drugs?	8%	0%
8.7	Victimised you because of your race or ethnic origin?	0%	8%
8.7	Victimised you because of your religion/religious beliefs?	3%	4%
8.7	Victimised you because of your nationality?	0%	4%
8.7	Victimised you because you were from a different part of the country?	0%	1%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	0%	4%
8.7	Victimised you because you have a disability?	0%	2%
8.7	Victimised you because you were new here?	8%	11%
8.7	Victimised you because of your offence/crime?	3%	4%
8.7	Victimised you because of gang related issues?	3%	0%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	28%	40%
9.1	Is it easy/very easy to see the nurse?	48%	52%
9.1	Is it easy/very easy to see the dentist?	12%	16%
9.4	Are you currently taking medication?	50%	40%
9.6	Do you have any emotional well being or mental health problems?	12%	28%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	8%	27%
10.2	Did you have a problem with alcohol when you came into this prison?	3%	18%
10.3	Is it easy/very easy to get illegal drugs in this prison?	15%	35%
10.4	Is it easy/very easy to get alcohol in this prison?	8%	17%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	4%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	27%	17%

Key to tables

		Category D wings (C & D wings)	All other wings (A, B & G wings)
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
11.1	Vocational or skills training?	33%	21%
11.1	Education (including basic skills)?	54%	40%
11.1	Offending Behaviour Programmes?	19%	17%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	53%	33%
11.2	Vocational or skills training?	8%	8%
11.2	Education (including basic skills)?	10%	30%
11.2	Offending Behaviour Programmes?	10%	11%
11.4	Do you go to the library at least once a week?	16%	18%
11.5	Does the library have a wide enough range of materials to meet your needs?	16%	10%
11.6	Do you go to the gym three or more times a week?	57%	30%
11.7	Do you go outside for exercise three or more times a week?	51%	28%
11.8	Do you go on association more than five times each week?	59%	61%
11.9	Do you spend ten or more hours out of your cell on a weekday?	11%	10%
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%	22%
12.2	Have you had any problems with sending or receiving mail?	55%	44%
12.3	Have you had any problems getting access to the telephones?	46%	20%
12.4	Is it easy/ very easy for your friends and family to get here?	48%	42%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	85%	54%
13.10	Do you have a needs based custody plan?	3%	5%
13.11	Do you feel that any member of staff has helped you to prepare for release?	28%	8%

Diversity Analysis



Key question responses (disability, age over 50) HMP Brixton 2013

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

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		39	136	23	158
1.3	Are you sentenced?	97%	99%	100%	98%
1.5	Are you a foreign national?	15%	8%	9%	11%
1.6	Do you understand spoken English?	100%	98%	100%	98%
1.7	Do you understand written English?	98%	98%	100%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	45%	57%	27%	58%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	2%	4%	3%
1.1	Are you Muslim?	22%	26%	4%	29%
1.12	Do you consider yourself to have a disability?	-	-	28%	22%
1.13	Are you a veteran (ex-armed services)?	13%	4%	23%	3%
1.14	Is this your first time in prison?	39%	54%	79%	47%
2.6	Were you treated well/very well by the escort staff?	76%	68%	83%	69%
2.7	Before you arrived here were you told that you were coming here?	48%	45%	52%	46%
3.2	When you were searched in reception, was this carried out in a respectful way?	78%	81%	96%	79%
3.3	Were you treated well/very well in reception?	73%	63%	78%	63%
3.4	Did you have any problems when you first arrived?	89%	69%	73%	73%
3.7	Did you have access to someone from health care when you first arrived here?	63%	46%	38%	51%
3.9	Did you feel safe on your first night here?	64%	74%	77%	71%
3.10	Have you been on an induction course?	69%	60%	66%	62%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	43%	40%	46%	40%

Diversity Analysis

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	68%	63%	52%	67%
4.4	Are you normally able to have a shower every day?	92%	95%	100%	94%
4.4	Is your cell call bell normally answered within five minutes?	27%	21%	35%	22%
4.5	Is the food in this prison good/very good?	39%	27%	46%	27%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	36%	39%	43%	38%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	28%	35%	34%
4.8	Do you feel your religious beliefs are respected?	58%	55%	79%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	56%	52%	55%
5.1	Is it easy to make an application?	84%	76%	92%	75%
5.3	Is it easy to make a complaint?	50%	47%	60%	46%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	59%	48%	62%	48%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	50%	44%	38%	46%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	2%	0%	3%
7.1	Do most staff, in this prison, treat you with respect?	80%	63%	77%	66%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	76%	64%	73%	66%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	21%	8%	9%	11%
7.4	Do you have a personal officer?	75%	46%	82%	48%
8.1	Have you ever felt unsafe here?	47%	37%	27%	41%
8.2	Do you feel unsafe now?	36%	19%	10%	24%
8.3	Have you been victimised by other prisoners?	21%	22%	13%	24%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	8%	12%	4%	12%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	2%	0%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	1%	0%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	2%	0%	2%
8.5	Have you been victimised because of your age? (By prisoners)	5%	3%	0%	4%
8.5	Have you been victimised because you have a disability? (By prisoners)	5%	0%	0%	1%

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		Prisoners aged 50 and over
	Any percentage highlighted in blue is significantly worse				Prisoners under the age of 50
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	27%	33%	9%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	13%	12%	0%	14%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	5%	0%	7%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	4%	0%	4%
8.7	Have you been victimised because of your nationality? (By staff)	5%	2%	0%	3%
8.7	Have you been victimised because of your age? (By staff)	5%	2%	0%	3%
8.7	Have you been victimised because you have a disability? (By staff)	5%	0%	0%	1%
9.1	Is it easy/very easy to see the doctor?	39%	36%	46%	36%
9.1	Is it easy/ very easy to see the nurse?	50%	52%	59%	50%
9.4	Are you currently taking medication?	76%	32%	65%	39%
9.6	Do you feel you have any emotional well being/mental health issues?	57%	17%	9%	27%
10.3	Is it easy/very easy to get illegal drugs in this prison?	43%	27%	0%	35%
11.2	Are you currently working in the prison?	35%	36%	35%	37%
11.2	Are you currently undertaking vocational or skills training?	8%	8%	4%	8%
11.2	Are you currently in education (including basic skills)?	30%	25%	22%	26%
11.2	Are you currently taking part in an offending behaviour programme?	13%	11%	13%	11%
11.4	Do you go to the library at least once a week?	16%	19%	32%	16%
11.6	Do you go to the gym three or more times a week?	34%	38%	14%	40%
11.7	Do you go outside for exercise three or more times a week?	22%	37%	31%	34%
11.8	On average, do you go on association more than five times each week?	50%	64%	79%	58%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	11%	10%	13%	10%
12.2	Have you had any problems sending or receiving mail?	36%	50%	18%	50%
12.3	Have you had any problems getting access to the telephones?	19%	30%	17%	27%

Diversity analysis



Key question responses (ethnicity, foreign national and religion) HMP Brixton 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		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
Any percentage highlighted in blue is significantly worse							
Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
Number of completed questionnaires returned		96	81	19	162	45	131
1.3	Are you sentenced?	97%	100%	94%	99%	98%	98%
1.5	Are you a foreign national?	12%	7%			16%	9%
1.6	Do you understand spoken English?	98%	99%	84%	99%	93%	99%
1.7	Do you understand written English?	98%	98%	79%	99%	93%	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.)			65%	53%	91%	42%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	6%	19%	2%	2%	4%
1.1	Are you Muslim?	42%	5%	37%	24%		
1.12	Do you consider yourself to have a disability?	18%	27%	35%	21%	19%	23%
1.13	Are you a veteran (ex-armed services)?	2%	10%	6%	6%	5%	6%
1.14	Is this your first time in prison?	49%	54%	69%	49%	42%	54%
2.6	Were you treated well/very well by the escort staff?	66%	76%	59%	72%	63%	73%
2.7	Before you arrived here were you told that you were coming here?	41%	51%	39%	46%	45%	45%
3.2	When you were searched in reception, was this carried out in a respectful way?	77%	85%	88%	80%	70%	85%
3.3	Were you treated well/very well in reception?	61%	70%	53%	66%	53%	69%
3.4	Did you have any problems when you first arrived?	72%	74%	84%	72%	66%	74%
3.7	Did you have access to someone from health care when you first arrived here?	50%	47%	73%	47%	52%	49%
3.9	Did you feel safe on your first night here?	68%	78%	61%	73%	75%	71%
3.10	Have you been on an induction course?	61%	64%	67%	62%	61%	63%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	46%	34%	73%	37%	50%	38%

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						
4.4	Are you normally offered enough clean, suitable clothes for the week?	65%	66%	74%	64%	67%	65%
4.4	Are you normally able to have a shower every day?	91%	98%	100%	94%	93%	95%
4.4	Is your cell call bell normally answered within five minutes?	23%	24%	16%	24%	24%	23%
4.5	Is the food in this prison good/very good?	29%	31%	10%	32%	26%	31%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	36%	44%	39%	39%	39%	39%
4.7	Are you able to speak to a Listener at any time, if you want to?	33%	35%	53%	33%	29%	35%
4.8	Do you feel your religious beliefs are respected?	65%	49%	67%	56%	67%	52%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	62%	48%	74%	53%	73%	48%
5.1	Is it easy to make an application?	76%	78%	88%	76%	67%	81%
5.3	Is it easy to make a complaint?	44%	52%	59%	46%	47%	47%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	44%	58%	41%	51%	43%	51%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	46%	44%	67%	42%	44%	44%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	2%	0%	3%	2%	2%
7.1	Do most staff, in this prison, treat you with respect?	64%	72%	50%	69%	60%	70%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	68%	66%	55%	69%	71%	67%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	11%	10%	16%	10%	14%	9%
7.4	Do you have a personal officer?	47%	56%	61%	51%	43%	54%
8.1	Have you ever felt unsafe here?	43%	35%	45%	39%	36%	40%
8.2	Do you feel unsafe now?	25%	20%	27%	21%	21%	22%
8.3	Have you been victimised by other prisoners?	22%	22%	17%	23%	25%	22%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	10%	12%	6%	11%	7%	12%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	2%	0%	1%	0%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	1%	0%	1%	0%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	2%	1%	0%	2%	3%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	1%	1%	0%	1%	3%	1%

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?	38%	22%	41%	30%	45%	26%						
8.7	Have you ever felt threatened or intimidated by staff here?	16%	9%	12%	12%	12%	11%						
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	6%	7%	23%	5%	5%	6%						
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	1%	6%	3%	12%	1%						
8.7	Have you been victimised because of your nationality? (By staff)	1%	5%	12%	2%	3%	3%						
8.7	Have you been victimised because you have a disability? (By staff)	1%	1%	0%	1%	3%	1%						
9.1	Is it easy/very easy to see the doctor?	36%	40%	22%	39%	37%	39%						
9.1	Is it easy/ very easy to see the nurse?	48%	55%	50%	51%	56%	50%						
9.4	Are you currently taking medication?	33%	53%	55%	41%	33%	45%						
9.6	Do you feel you have any emotional well being/mental health issues?	21%	30%	12%	26%	22%	25%						
10.3	Is it easy/very easy to get illegal drugs in this prison?	30%	32%	22%	31%	26%	33%						
11.2	Are you currently working in the prison?	34%	41%	63%	34%	35%	39%						
11.2	Are you currently undertaking vocational or skills training?	8%	8%	19%	7%	3%	10%						
11.2	Are you currently in education (including basic skills)?	24%	27%	25%	25%	18%	29%						
11.2	Are you currently taking part in an offending behaviour programme?	10%	13%	12%	11%	3%	14%						
11.4	Do you go to the library at least once a week?	18%	18%	16%	18%	21%	18%						
11.6	do you go to the gym three or more times a week?	48%	24%	37%	36%	46%	33%						
11.7	Do you go outside for exercise three or more times a week?	39%	27%	29%	34%	40%	32%						
11.8	On average, do you go on association more than five times each week?	58%	64%	69%	60%	65%	59%						
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%	10%	6%	10%	12%	9%						
12.2	Have you had any problems sending or receiving mail?	47%	47%	50%	46%	50%	46%						
12.3	Have you had any problems getting access to the telephones?	28%	23%	33%	25%	31%	23%						



Key question responses (VP wing) HMP Brixton 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

		HMP Brixton 2013 VP Wing	HMP Brixton 2013 All other wings
	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		59	123
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	1%
1.3	Are you sentenced?	100%	98%
1.3	Are you on recall?	12%	10%
1.4	Is your sentence less than 12 months?	14%	18%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	7%	2%
1.5	Are you a foreign national?	10%	11%
1.6	Do you understand spoken English?	97%	98%
1.7	Do you understand written English?	97%	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.)	38%	62%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	3%
1.1	Are you Muslim?	14%	31%
1.11	Are you homosexual/gay or bisexual?	16%	1%
1.12	Do you consider yourself to have a disability?	23%	22%
1.13	Are you a veteran (ex-armed services)?	9%	4%
1.14	Is this your first time in prison?	66%	44%
1.15	Do you have any children under the age of 18?	44%	57%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	41%	47%
2.5	Did you feel safe?	86%	73%
2.6	Were you treated well/very well by the escort staff?	78%	67%
2.7	Before you arrived here were you told that you were coming here?	46%	45%
2.8	When you first arrived here did your property arrive at the same time as you?	92%	84%

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013 VP Wing	HMP Brixton 2013 All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	56%	53%
3.2	When you were searched in reception, was this carried out in a respectful way?	88%	77%
3.3	Were you treated well/very well in reception?	71%	61%
	When you first arrived:		
3.4	Did you have any problems?	71%	74%
3.4	Did you have any problems with loss of property?	10%	20%
3.4	Did you have any housing problems?	19%	25%
3.4	Did you have any problems contacting employers?	5%	2%
3.4	Did you have any problems contacting family?	20%	35%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	3%
3.4	Did you have any money worries?	15%	16%
3.4	Did you have any problems with feeling depressed or suicidal?	10%	15%
3.4	Did you have any physical health problems?	17%	10%
3.4	Did you have any mental health problems?	15%	11%
3.4	Did you have any problems with needing protection from other prisoners?	7%	4%
3.4	Did you have problems accessing phone numbers?	17%	20%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	9%	6%
3.6	A shower?	7%	18%
3.6	A free telephone call?	7%	9%
3.6	Something to eat?	48%	37%
3.6	PIN phone credit?	5%	13%
3.6	Toiletries/ basic items?	22%	24%
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?	30%	36%
3.7	Someone from health services?	48%	50%
3.7	A Listener/Samaritans?	11%	8%
3.7	Prison shop/ canteen?	20%	12%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	12%	19%
3.8	Support was available for people feeling depressed or suicidal?	14%	9%

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013 VP Wing	HMP Brixton 2013 All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.8	How to make routine requests?	28%	15%
3.8	Your entitlement to visits?	25%	15%
3.8	Health services?	32%	17%
3.8	The chaplaincy?	30%	22%
3.9	Did you feel safe on your first night here?	74%	71%
3.10	Have you been on an induction course?	55%	66%
3.12	Did you receive an education (skills for life) assessment?	49%	84%
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?	41%	41%
4.1	Attend legal visits?	45%	50%
4.1	Get bail information?	4%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	26%	28%
4.3	Can you get legal books in the library?	27%	25%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	54%	70%
4.4	Are you normally able to have a shower every day?	98%	92%
4.4	Do you normally receive clean sheets every week?	71%	78%
4.4	Do you normally get cell cleaning materials every week?	74%	80%
4.4	Is your cell call bell normally answered within five minutes?	24%	23%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	62%	62%
4.4	Can you normally get your stored property, if you need to?	19%	15%
4.5	Is the food in this prison good/very good?	46%	21%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	38%
4.7	Are you able to speak to a Listener at any time, if you want to?	41%	31%
4.8	Are your religious beliefs are respected?	51%	60%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	41%	62%
4.10	Is it easy/very easy to attend religious services?	46%	56%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	83%	74%
5.3	Is it easy to make a complaint?	48%	47%
5.5	Have you ever been prevented from making a complaint when you wanted to?	9%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	16%	20%

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013 VP Wing	HMP Brixton 2013 All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	48%	51%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	3%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	65%	68%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	69%	67%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	35%	17%
7.4	Do staff normally speak to you most of the time/all of the time during association?	14%	10%
7.5	Do you have a personal officer?	64%	46%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	42%	38%
8.2	Do you feel unsafe now?	21%	23%
8.4	Have you been victimised by other prisoners here?	27%	20%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	8%	7%
8.5	Hit, kicked or assaulted you?	2%	5%
8.5	Sexually abused you?	0%	0%
8.5	Threatened or intimidated you?	10%	11%
8.5	Taken your canteen/property?	2%	3%
8.5	Victimised you because of medication?	0%	3%
8.5	Victimised you because of debt?	0%	3%
8.5	Victimised you because of drugs?	2%	2%
8.5	Victimised you because of your race or ethnic origin?	2%	1%
8.5	Victimised you because of your religion/religious beliefs?	0%	1%
8.5	Victimised you because of your nationality?	0%	3%
8.5	Victimised you because you were from a different part of the country?	2%	0%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	3%	1%
8.5	Victimised you because of your age?	0%	5%
8.5	Victimised you because you have a disability?	0%	2%
8.5	Victimised you because you were new here?	7%	6%
8.5	Victimised you because of your offence/crime?	5%	2%
8.5	Victimised you because of gang related issues?	2%	1%

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013 VP Wing	HMP Brixton 2013 All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		

SECTION 8: Safety continued

8.6	Have you been victimised by staff here?	23%	35%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	5%	12%
8.7	Hit, kicked or assaulted you?	2%	2%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	9%	14%
8.7	Victimised you because of medication?	0%	3%
8.7	Victimised you because of debt?	0%	1%
8.7	Victimised you because of drugs?	0%	3%
8.7	Victimised you because of your race or ethnic origin?	5%	7%
8.7	Victimised you because of your religion/religious beliefs?	2%	4%
8.7	Victimised you because of your nationality?	2%	3%
8.7	Victimised you because you were from a different part of the country?	0%	1%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	0%	4%
8.7	Victimised you because you have a disability?	0%	2%
8.7	Victimised you because you were new here?	9%	11%
8.7	Victimised you because of your offence/crime?	5%	3%
8.7	Victimised you because of gang related issues?	0%	1%

SECTION 9: Health services

9.1	Is it easy/very easy to see the doctor?	45%	34%
9.1	Is it easy/very easy to see the nurse?	59%	47%
9.1	Is it easy/very easy to see the dentist?	21%	13%
9.4	Are you currently taking medication?	48%	40%
9.6	Do you have any emotional well being or mental health problems?	25%	24%

SECTION 10: Drugs and alcohol

10.1	Did you have a problem with drugs when you came into this prison?	12%	28%
10.2	Did you have a problem with alcohol when you came into this prison?	9%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	18%	37%
10.4	Is it easy/very easy to get alcohol in this prison?	3%	20%
10.5	Have you developed a problem with drugs since you have been in this prison?	3%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	3%

Key to tables

	Any percentage highlighted in green is significantly better	HMP Brixton 2013 VP Wing	HMP Brixton 2013 All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	19%	19%
11.1	Vocational or skills training?	9%	31%
11.1	Education (including basic skills)?	23%	53%
11.1	Offending Behaviour Programmes?	14%	19%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	38%	37%
11.2	Vocational or skills training?	3%	10%
11.2	Education (including basic skills)?	17%	30%
11.2	Offending Behaviour Programmes?	12%	11%
11.4	Do you go to the library at least once a week?	18%	18%
11.5	Does the library have a wide enough range of materials to meet your needs?	9%	13%
11.6	Do you go to the gym three or more times a week?	24%	43%
11.7	Do you go outside for exercise three or more times a week?	16%	42%
11.8	Do you go on association more than five times each week?	69%	57%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	9%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	25%	24%
12.2	Have you had any problems with sending or receiving mail?	39%	50%
12.3	Have you had any problems getting access to the telephones?	12%	33%
12.4	Is it easy/ very easy for your friends and family to get here?	28%	51%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	67%	57%
13.10	Do you have a needs based custody plan?	2%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	9%	14%