

Report on an announced inspection of

# **HMP Cardiff**

18–22 March 2013

by HM Chief Inspector of Prisons

## Glossary of terms

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the Glossary of terms on our website at: [http://www.justice.gov.uk/downloads/about/hmipris/Glossary-for-web-rps\\_.pdf](http://www.justice.gov.uk/downloads/about/hmipris/Glossary-for-web-rps_.pdf)

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

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# Introduction

HMP Cardiff is a busy, overcrowded, local prison that at the time of the inspection held 763 men – over 40% more than it was designed to hold. More than half the prisoners were on remand or had sentences of less than six months and many stayed just a matter of days or weeks in the prison. In our survey, one in five prisoners told us they had a disability, more than one in three told us they had emotional or mental health problems, two out of five had a problem with drugs, and one in three had a problem with alcohol.

Managing this needy and very transient population and keeping them safe was a challenging task. Sadly, the prison was not always successful. There had been five self-inflicted deaths over the last year, four whilst in custody and one shortly after release. The prison had taken effective action to learn and implement lessons arising from these tragedies and at the time of the inspection, the number of self-harm incidents was low. Prisoners at risk of self-harm told us they felt well supported but case management required improvement. Reception and first night procedures were good. Those prisoners who found it most difficult to cope on the main wings were held on B1 wing where they were offered kindly support. Fewer prisoners told us they had ever felt unsafe in the prison or felt unsafe at the time of the inspection than in comparable prisons (28% compared with 40%, and 10% compared with 17% respectively), and levels of violence were low. Debt was a cause of what bullying there was and the prison could do more to reduce this by the quicker distribution of canteens after prisoners first arrived.

Prisoners told us that drugs were easily available but the rate of positive results from random tests were similar to other prisons. Action to reduce the supply of drugs was sometimes too casual. The number of security intelligence reports submitted by staff was low and the management of searching and testing required improvement. The prison had identified trade in divertible medication as a significant issue and had taken robust action to address this. Provision for prisoners with substance misuse problems was satisfactory and this continued with very good 'through the gate' peer mentor support after prisoners left the prison. A drug recovery wing was working well with good use of peer support and there was evidence that the programme of training prisoners to deliver naloxone opium antidotes had saved lives.

There were few adjudications and the use of force and segregation was low. However, we were concerned about the use of one landing to hold prisoners on the 'basic' level of the incentives and earned privileges scheme. The regime on the landing was poor and staff gave us different explanations of its purpose. In our view it amounted to segregation without the safeguards and governance arrangements that a formal segregation unit would have.

Many men shared cells designed for one with badly screened toilets. Access to clean clothing and bedding, showers and telephones was problematic but prisoners told us that when they made applications, these were dealt with efficiently. The prison was generally clean and food was reasonably good. We observed positive staff-prisoner relationships. Prisoners told us most problems were sorted out by wing staff without the formal complaints system being needed. Equality and diversity services were generally effective and the chaplaincy was well integrated into the life of the prison. Health care was good, mental health provision particularly so.

A fully employed prisoner would have a good nine hours out of cell a day but for almost half the population who were not engaged in activity, it was less than three hours. The quality of activity on offer was generally good but the quantity was not sufficient for the size of the population and some places were unused. There was good support for prisoners who needed help with literacy, numeracy and basic skills. However, only about half of prisoners attended

the education induction and so their needs were not assessed early enough and some missed the opportunity or were not encouraged to access the help available. Some information was available in Welsh but this required more attention and prisoners needed more encouragement to see the value of the Welsh language for their future employment prospects.

The prison held a small number of life-sentence and indeterminate sentence prisoners. The prison did not effectively meet their needs and they were a distraction from its main purpose. They should be held elsewhere.

Overall, the prison's offender management and resettlement services were not sufficiently geared to the largely transient population it held. Offender managers did not have regular planned contact with the prisoners on their caseload to monitor and motivate them. Practical resettlement services were delivered in a haphazard way and some prisoners did not get the help they needed. Debt was a significant issue for many prisoners with an obvious link to their offending behaviour but there were no general debt services available.

HMP Cardiff's strengths lie in its caring and experienced staff who ensure that outcomes for most prisoners are reasonably good in most areas. However, the approach of the prison as a whole is sometimes too casual and this creates the risk that particularly vulnerable individuals can fall through the net and some poor practices develop unchecked.

**Nick Hardwick**  
HM Chief Inspector of Prisons

**May 2013**

# Fact page

## Task of the establishment

HMP Cardiff is a category B local/training prison serving the courts in the eastern half of South Wales.

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

Public

## Region/Department

Wales

## Number held

763

## Certified normal accommodation

539

## Operational capacity

804

## Date of last full inspection

7–11 January 2008

## Brief history

The origins of HMP Cardiff date back to 1827. Its main role was previously a holding prison for unconvicted and short- to medium-term sentenced prisoners. The accommodation was predominantly Victorian, with high levels of overcrowding.

Today the prison continues to hold unconvicted and trial prisoners from local courts and short-term prisoners serving up to two years. A new wing was built in 1996 to accommodate 218 additional men, including 96 lifers. Major refurbishment and modification of cellular accommodation has seen the capacity rise to 804.

A brand new health care centre was opened in May 2008. The facility provides 21 beds, mostly commissioned by the local health board (Wales' equivalent of a PCT).

## Short description of residential units

A wing:	Convicted wing, mainly category C prisoners (178)
A1 wing:	Prisoners on the basic regime and stage 2 anti-bullying (22)
Care and separation unit (CASU):	Segregated prisoners
B wing:	Convicted prisoners (138)
B1 wing:	Vulnerable prisoners (35)
C wing:	First night and induction unit. (60)
D wing:	Drug recovery unit (59)
E wing:	Lifer prisoners and those on the enhanced regime (98)
F wing:	Unconvicted prisoners (192)
Health care medical unit (22)	

## Name of governor

Richard Booty

**Escort contractor**

GeoAmey

**Health service commissioner and providers**

Cardiff and Vale University Health Board

**Learning and skills providers**

Prison Service

**Independent Monitoring Board chair**

Brian Ballinger

# Healthy prison summary

## Introduction

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HP1 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.

HP2 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.

HP3 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 criteria 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.

HP4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

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

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

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

There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

**- outcomes for prisoners are not sufficiently good against this healthy prison test.**

There is evidence that outcomes for prisoners are being adversely affected in many

areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

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

There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

HP5 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 checked 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.

## Safety

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HP6 Reception, first night and induction arrangements were good. Few prisoners felt unsafe and levels of violence and bullying were very low. B1 wing provided a supportive environment for prisoners less able to cope. Levels of self-harm were low but there had recently been four self-inflicted deaths in custody. Prisoners at risk of self-harm felt well supported but we were not assured that case management was effective. Illegal drugs were easily available but there was little targeted searching and there were few drug finds. The basic regime on the A1 landing was over-punitive, with insufficient safeguards. There were few adjudications and the level of use of force and segregation was low but insufficiently analysed. Substance misuse provision was reasonably good and the drug recovery wing was developing well. Outcomes for prisoners were reasonably good.

HP7 Many prisoners faced long delays in being transported to the prison following court appearances, which meant that most arrived at the prison late in the afternoon.

HP8 Prisoners reported being treated well in reception. Reception was very busy at times and reception processes, although expedient, were thorough and personal interviews were conducted privately. Smokers' and grocery packs were available to new prisoners but not for those transferred in.

HP9 First night procedures were generally good, although there were insufficient safety checks during the first night for new arrivals. Excellent support was provided by trained peer mentors. All first night accommodation we saw had been prepared for occupation. Most prisoners said that they had felt safe on their first night.

HP10 Induction started on the day after arrival and equipped prisoners with the information they needed to access the regime.

- HP11 Few prisoners felt unsafe at the prison, and levels of bullying and violence were low. The safer custody meeting undertook detailed analysis of violence across the prison and took relevant action; however, a prisoner survey had not been carried out since 2011.
- HP12 Investigations into prisoners suspected of anti-social behaviour were thorough but individualised objectives were not yet being set, recording of behaviour was too basic and too few staff beyond the violence reduction officer were involved. There was little provision to challenge the attitudes, thinking and behaviour of perpetrators and victims but the newly developed workbook was a promising initiative. Prisoners struggling to cope with prison life benefitted from enhanced support on B1 wing and were positive about the care provided.
- HP13 Action plans for the four recent self-inflicted deaths in custody were closely monitored and reviewed, with evidence of positive changes being made. The number of incidents of self-harm that we observed at the time of the inspection was low. The quality of assessment, care in custody and teamwork (ACCT) self-harm monitoring documents was variable. Detailed assessments were undermined by weak care maps and a lack of evidence of all actions being achieved. However, prisoners we spoke to who were on an open ACCT documents were positive about the support they received and Listeners (prisoners trained by the Samaritans to support those at risk of self-harm) were well used and supported. Too few staff had completed safer custody training.
- HP14 The number of security information reports (SIRs) submitted was relatively low. Analysis of intelligence data was sophisticated and produced some detailed information but subsequent action was problematic. Despite drugs being identified as a key threat, there were too few target searches carried out and very few finds.
- HP15 In our survey,<sup>1</sup> over a third of prisoners said that it was easy to get illegal drugs in the prison. Positive mandatory drug testing rates were generally similar to those at other local prisons but prisoners and treatment staff told us that (non-detectable) diverted medication was the greater problem. Some headway had been made in addressing diverted medication through increased levels of supervision and clinical reviews for prisoners caught diverting. Suspicion drug test slippage was not monitored so the prison did not know whether all those suspected of taking drugs were being tested.
- HP16 Prisoners were negative about the fairness of the incentives and earned privileges (IEP) scheme. Our observations of wing file entries showed very infrequent, and only negative, IEP-related comments.

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

- HP17 The regime on the basic landing (A1) was over-punitive and in reality was used as an extension to the segregation unit. We were given inconsistent explanations of the purpose of the unit, governance was poor and there were inadequate safeguards in place.
- HP18 The number of adjudications was low. A recently formed adjudications standardisation meeting considered adjudication data but there was no quality assurance of adjudications by a senior manager.
- HP19 There were few incidents involving use of force. Written records were generally of good quality but video recordings of planned use of force were not reviewed and those we saw showed a lack of de-escalation. There was limited management oversight and little analysis of use of force data to identify trends or emerging issues.
- HP20 Levels of segregation were low. Cells were in a reasonable state but toilets were dirty, with some seats and lids missing. The regime was minimal, with no opportunity to access mainstream activities, irrespective of the risk posed. There was little analysis of the use of segregation, and monitoring arrangements were new and yet to be embedded.
- HP21 Prisoners with substance misuse issues received satisfactory clinical and psychosocial treatment, although their outcomes were sometimes disadvantaged by poor integration between the services. The newly established drug recovery unit (DRU) was working well, with developing peer support, group work, and specially selected and trained discipline staff. Prisoners were positive about the care they received on the DRU. The drug strategy group had good representation from across the establishment but there was no supporting action plan. A naloxone (opiate antidote) training and distribution programme was working well, with evidence of at least two lives saved as a result.

## Respect

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- HP22 External areas and most wings were clean. Access to suitable bedding, clean clothes, showers and telephones was problematic. Staff-prisoner interaction was friendly and informal. Equality provision was effective, with a range of support for minority groups. Faith provision was good. The number of complaints was low and analysis was thorough. Legal services advice was comprehensive. Health services were reasonably good, although some waiting lists were too long. A wide range of mental health services was provided. The range and quality of the food provided were reasonably good. Outcomes for prisoners were reasonably good.
- HP23 Outside areas and most wings were generally clean. Too many prisoners were doubled up in cells that were cramped. Most prisoners did not have lockable cabinets, the screening around toilets was inadequate in some cells and mattresses were of poor quality. Most prisoners wore prison-issue clothing and many said that they did not get enough clean or suitable clothes for the week. Showers were mostly clean but most lacked privacy. Access to showers and telephones was hindered by limited association. The offensive display policy was not enforced and too many cells contained offensive posters and graffiti.

- HP24 Most prisoners said that staff treated them with respect, and we saw friendly and informal interactions. The quantity and quality of recorded personal officer contact were extremely variable but too often poor.
- HP25 Equality provision lacked management attention. In spite of this, the equality team, supported by prisoner representatives, had developed a wide range of services and support for minority groups. Some good dedicated resettlement support was provided for minority groups through external equality organisations, including access to housing. The equality strategy was comprehensive, with a relevant action plan. The monitoring of equality of access and treatment of prisoners focused on race, with no analysis relating to other protected characteristics, apart from for complaints.
- HP26 All new prisoners were seen by the equality team, who recorded information about protected characteristics and followed this up with appropriate support. There were formal support and consultation forums for most minority groups, and positive actions were taken. The needs of older prisoners and those with a disability were generally well met, although there were no daytime activities available for those who could not work.
- HP27 In our survey, black and minority ethnic prisoners were more negative than white prisoners about their treatment across a range of areas, including safety. Foreign national prisoners had good support, with access to independent immigration advice and regular access to UK Border Agency and equality staff. Translated materials were available, in both printed and electronic format, via electronic translating machines.
- HP28 Facilities and access to faith services were good for all faiths. The chaplaincy was well integrated into the regime and had links with faith representatives in the local community.
- HP29 The number of complaints submitted was low and fewer prisoners than at comparator establishments said that it was easy to make one. Recent changes appeared to have improved confidence in the system. The collation and analysis of monthly data were excellent. The legal services team provided a comprehensive legal rights service.
- HP30 Health partnership arrangements were good. The health care service had been restructured and improved, and was appropriate for the prison population, although the needs analysis was out of date. The large health care centre was very clean and well equipped for patients attending clinics or requiring inpatient care. Treatment areas on the wings were much more rudimentary and poorly furnished. Prisoners in our survey were negative about the length of time that they had to wait for some clinic appointments and the quality of care provided; however, we found the quality of care to be good. Waiting times for a GP appointment had improved and were generally less than seven days. Waiting times for the dentist were too long but the quality of dental care was good. Pharmacy services were satisfactory. A wide range of mental health services was provided, including access to a full-time psychiatrist.
- HP31 The range and quality of the food provided were reasonably good. Consultation with prisoners was undertaken regularly and some positive changes had been made as a result.
- HP32 Some prisoners waited too long for their first shop order and we found evidence that this had led to some prisoners getting into debt.

## Purposeful activity

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- HP33 For employed prisoners, time out of cell was reasonable but the many unemployed prisoners had only a few hours unlocked each day. There were too few activity places and not all of these were utilised. For those in activity, the quality and range of activities were good and provided effective work-related skills. Excellent use was made of peer mentors. Provision was suitably tailored to meet the needs of the short-term population. A wide range of qualifications was available. Success rates were mixed. Library and PE provision were good. Outcomes for prisoners were reasonably good.
- HP34 Prisoners in full-time activity had reasonable access to time out of cell, at just below nine hours a day. However, almost half the population were not engaged in activity and were unlocked for less than three hours. Access to association was generally limited; not all prisoners had evening association and most had access only three times a week, which limited their opportunities to use telephones and showers.
- HP35 The overall management of learning and skills was good. A comprehensive needs analysis that made good use of labour market information was used well to develop relevant courses. There were good partnerships with a range of employers and social enterprises to promote and encourage employment.
- HP36 There were far too few activity places for the population and not all those available were utilised. Almost half of all prisoners were not engaged in activity but many of these were serving very short sentences or were on remand. For those allocated to activity, attendance was low and not managed sufficiently robustly. Only around half of prisoners attended education induction, leaving the needs of too many not identified early enough.
- HP37 The quality and range of learning and skills and work were generally good and most activities were purposeful and provided good, work-related skills. However, there were too few basic skills classes. Provision was tailored to meet the needs of short-term prisoners, with many courses delivered in small chunks of learning. Nearly all areas offered accreditation but in some areas take-up was low. Workshop environments were of a good quality and used industry-standard equipment. The standards of teaching and instruction were generally good. There was an effective learning support unit. Very good use was made of peer mentors to support learning. There were no clear strategies to promote the Welsh language or its value as a useful employment skill.
- HP38 Learning goals were not always challenging enough and opportunities for progression in some areas were too limited. For those taking qualifications, success rates were good on vocational courses but poor on other courses.
- HP39 Overall access to the library was good, with effective use of orderlies to extend services onto the wings. The level of support available for library users was adequate and there was a wide range of books that catered for most interest groups.

HP40 Access to, and the range of, PE provision was good. Health promotion was effective, and the weight loss programme had a positive impact on the health of prisoners. Additional exercise equipment was available in all of the prison exercise yards.

## Resettlement

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HP41 A good resettlement strategy was not supported by an action plan. Offender management did not effectively meet the needs of the high number of remand and short-term prisoners. Few prisoners had any meaningful offender supervisor contact or any form of custody plan. Categorisation, home detention curfew and public protection arrangements were sound. Too many life-sentenced prisoners were inappropriately located at the establishment. Initial assessment of resettlement needs was not sufficiently comprehensive and resettlement services were poorly coordinated. Pathway provision was mixed, although prisoners with substance misuse issues received excellent through-the-gate support, and children and family services were developing well. Outcomes for prisoners were not sufficiently good.

HP42 A realistic needs analysis, based on a prisoner survey, provided the basis for the reducing reoffending strategy. The strategy set out aims for resettlement but was not supported by an action plan, so it was difficult to see how progress would be made, particularly in meeting the needs of such a short-term population.

HP43 All prisoners were allocated to an offender supervisor but in reality few prisoners knew they had one, as only those sentenced to 12 months or more received an assessment and a sentence plan. Offender supervisors did not have regular planned contact to direct and monitor achievement of sentence plans, even with the small number of prisoners who remained at the prison for a reasonable time. The quality of assessments was mostly reasonable but some sentence plans were not prioritised to fit with the resources available. Home detention curfew arrangements were sound.

HP44 Public protection arrangements were good and prisoners presenting a risk to the public were identified promptly. There were good links with local domestic abuse prevention services.

HP45 Categorisation processes were timely and decisions were justifiable. Regular unplanned overcrowding drafts caused significant disruption to prisoners' progress.

HP46 Many life-sentenced prisoners were inappropriately located at the establishment and those we spoke to felt that they had limited opportunities for progression. Services for this group were underdeveloped.

HP47 Initial assessment of resettlement needs was not comprehensive or centrally coordinated. Resettlement services were disjointed and many prisoners did not know where to go for reintegration services. Not all prisoners benefitted from a pre-release assessment which checked outstanding needs.

HP48 All prisoners without a discharge address were provided with the details of council homelessness services but only some were directly referred to settled accommodation and the effectiveness of the provision was not monitored. The Housing Advice Centre was a valuable resource which helped prisoners to maintain tenancies, deal with rent arrears and obtain specialist accommodation.

- HP49 Links with employers had improved employment opportunities for prisoners on release. However, the pre-release programmes were underdeveloped and too few prisoners knew how to access the visiting Careers Wales adviser, and many who did so, accessed the service too late in their sentence. Prisoners' employment on release was not verified, so the prison could not gauge the effectiveness of the provision.
- HP50 Health discharge arrangements were satisfactory and there were links with community mental health services.
- HP51 Prisoners with substance misuse issues had access to a dedicated 'continuity of care' worker, who arranged mentoring services and assistance with employment, housing and community drug and alcohol agency appointments for prisoners on release.
- HP52 Although more prisoners than at comparator prisons reported having had money worries on arrival at the prison, there was no help for prisoners with debt problems. Bank and savings accounts could be set up before release.
- HP53 Valuable family support services for prisoners and visitors were provided by the Prison Advice and Care Trust (PACT). The visits area was bright, with some good facilities. Staff were friendly but seating was uncomfortable. Although there were no evening visits, extended family visits were available for all prisoners with children.
- HP54 There were insufficient places on accredited offending behaviour programmes to meet the demand from sentenced prisoners who were retained at the establishment.

## Main concerns and recommendations

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- HP55 Concern: The regime on the dedicated landing (A1) for those on the basic level of the incentives and earned privileges scheme was over-punitive, and in reality it functioned like a segregation unit but without the necessary safeguards and governance arrangements in place.

**Recommendation: The purpose and use of the A1 landing should be reviewed. Prisoners whose behaviour necessitates segregation should be formally segregated and subject to formal safeguards.**

- HP56 Concern: Almost half the population was unlocked for only a few hours a day, with little access to association, particularly evening association, when they could contact family and friends.

**Recommendation: Opportunities for association should be increased and all prisoners should have access to association every day and during the evenings.**

- HP57 Concern: There were too few activity places for the population, and even these were not fully utilised, resulting in only half the population engaged in work, education or training.

**Recommendation: The number of activity places should be increased and fully utilised.**

HP58 Concern: Offender management did not meet the needs of the short-term and remand population. Only just over a third of prisoners had offender supervisor contact or any form of sentence plan.

**Recommendation: The needs of all prisoners, including short-term and remanded prisoners, should be identified, actioned and actively managed on a custody/sentence plan.**

HP59 Concern: Resettlement provision was haphazard and lacked any central coordination, so not all prisoners' needs were assessed and few knew where to seek help.

**Recommendation: Resettlement provision should be coordinated and publicised, so that the reintegration needs of all prisoners are assessed on arrival and a reintegration plan formulated and actively managed.**

HP60 Concern: Many life-sentenced prisoners had been inappropriately allocated to the prison. Opportunities to progress their sentence were very limited and there was little available to motivate or challenge their behaviour.

**Recommendation: Life-sentenced prisoners should be located at an establishment which provides a challenging regime and opportunities to progress during their sentence.**



# Section 1: Safety

## Courts, escorts and transfers

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### Expected outcomes:

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

- 1.1 Prisoners experienced long delays in being transferred to the prison after court appearances. Good use was made of video-conferencing facilities.
- 1.2 Most prisoners travelled relatively short distances to the prison from local courts. Despite the close proximity of these courts, prisoners could wait for up to six hours to return to the prison after court appearances, resulting in most movements into the prison starting late in the afternoon.
- 1.3 Vans we observed were clean and in good order. Disembarkation processes were reasonable and prisoners were not handcuffed between the transport and the prison reception.
- 1.4 Although the prison provided HMP Cardiff information leaflets for court cells, these were not distributed by the escort contractor and none of the escort staff or newly arrived prisoners had ever seen them.
- 1.5 Use of the prison's video court suite was effective and utilised almost to capacity.

### Recommendation

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- 1.6 Prisoners should be held in court cells for the minimum period possible.

### Housekeeping point

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- 1.7 The HMP Cardiff information leaflets should be available and distributed in all local courts.

## Early days in custody

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### 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.

- 1.8 Reception processes were thorough and expedient. First night arrangements were generally good and the peer mentors provided a valuable service to new arrivals. Induction processes were appropriate and provided comprehensive information.

- 1.9 Reception was bright and well decorated. Holding rooms were clean and relatively free of graffiti, and some initial information was displayed on noticeboards. Prisoners responded positively in our survey and groups about being treated respectfully in reception. Staff engaged with prisoners to put them at their ease, processes were thorough and personal interviews were conducted in private. All prisoners were offered a shower on arrival and a mainland telephone call; calls to other countries were facilitated the following morning by the equality team. Smokers' and grocery packs were available in reception to new prisoners but not for those who had transferred in, who had to make a formal request the next day, which potentially left them open to accumulating debt. Although reception often became very busy due to the late arrival of court vehicles, prisoners were not generally held for long periods in reception before moving to the first night unit on C wing.
- 1.10 First night assessment procedures were good and the accommodation we saw had been reasonably well prepared. All prisoners had a private interview with first night staff, followed by a one-to-one interview with a trained peer mentor, who assisted new prisoners with understanding and completing processes that met their immediate needs. New prisoners told us that they felt reassured after talking to fellow prisoners. Those arriving during the day were able to associate on the landing but there was no association during the evening. All first-night prisoners were identified on the wing roll board but night staff made no enhanced observations and did not make themselves known to newly arrived prisoners or check on their immediate well-being.
- 1.11 Induction started on the day after arrival. A comprehensive presentation was delivered by unit staff, and prisoners met representatives from a range of key departments. An educational assessment and gym induction completed the process and prisoners were then located onto other wings. In our survey, only 66% of prisoners declared having undergone induction; we checked around 50 records and found that these prisoners had all either completed induction or declined the opportunity, having recently been in custody.

## Recommendation

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- 1.12 Night staff should speak to all new prisoners, provide support and check whether they have any specific needs.

## Bullying and violence reduction

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### Expected outcomes:

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

- 1.13 Most prisoners felt safe but the perceptions of black and minority ethnic and remand prisoners and those with disabilities were more negative. Levels of assaults were low and investigations into antisocial behaviour were conducted appropriately. Fewer prisoners than at comparator prisons had reported incidents of victimisation. Management of perpetrators and victims of antisocial behaviour was adequate and the new workbook looked promising. Data analysis was good but no prisoner survey had been conducted by the prison since 2011. B1 wing provided a safe and supportive environment for those requiring a higher level of support or who found it difficult to cope on the main wings.

- 1.14 In our survey, fewer prisoners than at other local prisons said that they had ever or currently felt unsafe at the prison. These perceptions were worse for black and minority ethnic and remand prisoners and those with disabilities relative to their white, sentenced and able-bodied counterparts, respectively, but were still in line with our comparator data (see also section on equality and diversity). Levels of victimisation were low, with only 15% of prisoners (against the 22% comparator) saying that they had been victimised by other prisoners.
- 1.15 Levels of violence were low. There had been 16 assaults on prisoners in the previous six months, which was lower than in similar prisons. The level of reported bullying was low, and also considerably lower than at other local prisons.
- 1.16 A new bullying and violence reduction strategy was overseen by the small safer custody team. A safer custody committee met monthly and had appropriate membership, and attendance had improved over recent months. Good data analysis was undertaken, including examination of the location and type of incident, and the age and ethnicity of those involved. The prison had not completed a prisoner survey about safety since 2011 and some of the actions identified by that survey had not been addressed.
- 1.17 All anti-social incidents of violence and bullying were reported to and investigated by the violence reduction officer. Investigations were timely and thorough. Where relevant, perpetrators were placed on one of three levels to address their behaviour. Daily entries in the 'tackling antisocial attitudes and behaviour' (TASAB) book were made by wing staff but these were too often limited in detail and did not show staff's understanding of the strategy. Involvement of staff beyond the violence reduction officer in the day-to-day management of the bullying and violence reduction strategy was too limited. New TASABs had been developed but it was too early for us to assess their effectiveness. To date, there had been little constructive support for perpetrators and victims. However, a workbook aimed at addressing antisocial attitudes and behaviour had also been developed.
- 1.18 B1 wing provided a safe environment for those requiring a higher level of support or finding it difficult to cope on the main wings. Staff who were selected to work on the wing, encouraged prisoners to return to normal location, and we saw evidence of a number of successful reintegration plans. Prisoners we spoke to on this wing were positive about their environment and the care provided.

## Recommendation

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- 1.19 Targets in tackling antisocial attitudes and behaviour books should be individualised, to address the specific attitudes and behaviour of prisoners.

## Self-harm and suicide prevention

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### 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.

- 1.20 Action plans arising from the Prisons and Probation Ombudsman's reports on the recent self-inflicted deaths were good, and changes in practice evident. Recorded levels of self-harm were

low and the number of assessment, care in custody and teamwork (ACCT) self-harm monitoring documents opened was in line with that at similar prisons. Completed ACCT documents were of variable quality and the post-closure phase was weak. Data analysis was good. Too few staff had been trained in self-harm and suicide prevention. We found adequate access to a well-supported team of Listeners.

- 1.21 There had been five self-inflicted deaths in the previous year, which was high. Four of these had been while in custody and one following release. Action plans had been developed and reviewed to address the Prisons and Probation Ombudsman's recommendations and we saw evidence of positive progress against these, particularly in the health care department. There was a continuous improvement plan.
- 1.22 Self-harm and suicide prevention procedures were included in a local strategy which was overseen by the safer custody committee. Analysis of data and the identification of issues and trends were good. There was a programme of training for staff in suicide prevention but too few (63%) had completed it.
- 1.23 The number of incidents of self-harm was low. In the six months before the inspection, 55 acts of self-harm had been recorded, equivalent to seven per 100 prisoners, which was far lower than the average for local prisons (20 per 100). Safer cells were available on some of the main wings and five constant supervision cells were located in the health care department. All were in an adequate condition and used appropriately.
- 1.24 A total of 181 assessment, care in custody and teamwork (ACCT) self-harm monitoring documents had been opened in the six months before the inspection, which was in line with the number at comparable establishments. Prisoners we spoke to who had previously been on suicide and self-harm monitoring, or who were currently being monitored, were positive about the support they received. However, in practice, completed ACCT documents were of variable quality; too many missed relevant triggers, and detailed initial assessments were undermined by weaker action plans. Case managers did not provide evidence of all actions being completed, and the post-closure phase was particularly poor and not recorded in some cases.
- 1.25 A team of Listeners (prisoners trained by the Samaritans to support those at risk of self-harm) was well supported by the prison and the Samaritans. A number of Listener suites were located across the prison. Records showed a good level of use of Listeners over the previous couple of months.

## Recommendations

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- 1.26 All staff should undergo up-to-date training in suicide prevention.
- 1.27 The quality of assessment, care in custody and teamwork (ACCT) documents, recording by case managers and the post-closure phase should be improved.

## Safeguarding (protection of adults at risk)

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### Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.<sup>2</sup>

1.28 There was no formal strategy for safeguarding adults but the Welsh Assembly Government was in the process of developing one.

1.29 The prison did not have an adult safeguarding policy or general training for wing staff in identifying and reporting safeguarding concerns. Following a recent reorganisation within the Welsh Assembly Government, the safeguarding adults team had been repositioned within the corporate nursing division, with the lead nurse for safeguarding adults reporting to the assistant director of nursing. The Welsh Assembly Government was in the process of developing a safeguarding policy for Wales.

### Recommendation

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1.30 The prison should contact the local Safeguarding Adults Strategic Management Board and Safeguarding Adults team to develop safeguarding policies for vulnerable adults.

## Security

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### 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.

1.31 More prisoners than at comparator prisons said that drugs were easily obtained. The management of searching and drug testing was inadequate. The number of security information reports submitted was low. Although random positive mandatory drug testing (MDT) rates were similar to comparable prisons, diverted medication was a problem. The MDT suite was in need of some improvement.

1.32 On average, 250 security information reports (SIRs) were received every month, identifying drugs, mobile telephones and violence as main areas of concern. This number of SIRs was relatively low; minutes of security meetings showed that this had been identified as an issue, and attempts had been made to address the apparent lack of engagement with security information reporting from some areas of the prison. Analysis of available data was very good, with some sophisticated mapping exercises being undertaken by the security analyst. However, the subsequent (and relatively few) searches usually failed to result in any finds. This did not feature in any of the security meeting minutes we saw. Similarly, when prisoners

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<sup>2</sup> 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).

had been suspected of taking drugs and suspicion drug tests authorised, there had been no scrutiny of whether testing had gone ahead, or of any results obtained. Our analysis of completed suspicion tests over the previous six months yielded a positive return of 38.5% from the 85 tests completed.

- 1.33 In our survey, more prisoners than at comparator prisons said that it was easy to gain access to illegal drugs (34% versus 29%). The random positive mandatory drug testing (MDT) rate was 9.7%, which was similar to that at other local prisons. Prisoners and drug treatment staff had identified diverted medication as a major issue. Prisoners told us that the prison was reacting to the threat posed from traded medications and had increased security measures accordingly. Staff supervision was good in all areas of the prison and prisoners in our groups shared this view. Prisoners caught diverting their medication underwent clinical reviews to assess the need for continued treatment.
- 1.34 The holding cells in the MDT suite were small and had no ventilation once the door was closed. The testing area urinal was dirty and leaked.
- 1.35 At the time of the inspection, there were two prisoners subject to closed visits and three visitors had been banned from visiting. Visits restrictions were appropriately applied and all related to direct trafficking through visits.

## Recommendation

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- 1.36 The prison should ensure that there are effective security measures to reduce the supply of both illicit drugs and diverted medication, including the monitoring of drug testing data.

## Housekeeping point

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- 1.37 The mandatory drug testing suite holding cells should be refurbished, with improved ventilation, and the testing area urinal should be repaired and cleaned.

## Incentives and earned privileges

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### 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.

- 1.38 Prisoners had little faith in the incentives and earned privileges scheme. There was little evidence of positive application of it, and we considered the A1 progression landing to be over-punitive, with insufficient management oversight.
- 1.39 In our survey and our groups, prisoners were negative about the fairness of the incentives and earned privileges (IEP) scheme. Wing file entries showed few IEP-related comments; when present, these were almost entirely negative.
- 1.40 The A1 landing was used to house most prisoners on the basic level (for security and for safety reasons, some were located elsewhere in the prison). Although a few prisoners on the

basic regime worked off the unit, the regime for most was poor, with little time out of cell and minimal opportunity for interaction with staff or other prisoners. In reality, the unit worked as an extension of the segregation unit but without the necessary safeguards in place for prisoners segregated from the main population. Staff and managers gave us inconsistent explanations about its function. It was known locally as the 'progression landing' but there were no reintegration plans for prisoners located there, and when there were individual improvement targets, they were perfunctory and related to obeying the unit rules. Electronic and paper records showed that prisoners were located and subsequently held there purely on the recommendation of the security department, recorded as 'outside of IEP'. Most records we observed reflected behaviour and levels of risk that we normally would expect to result in Rule 45 (good order or discipline) conditions. Not all decisions to place prisoners on the A1 unit were subject to management oversight. The A1 landing was also used to 'lodge' prisoners pending relocation onto other wings, as an overflow for the relatively small segregation unit next door and, inappropriately, for inpatients at short notice when space was required (see main recommendation HP55).

## Recommendations

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- 1.41 The application of the incentives and earned privileges (IEP) system should be reviewed and the generally poor prisoner perception investigated.
- 1.42 Prisoners on the basic level of the IEP scheme should have individualised progression targets with sufficient opportunity to demonstrate improvements.

## Discipline

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### Expected outcomes:

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

- 1.43 The numbers of adjudications was low. There was little use of force but there was no trend analysis. The average number of prisoners segregated was not high but the regime on the unit was minimal.

## Disciplinary procedures

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- 1.44 The number of adjudications was very low compared with that at similar prisons (357 versus 774 for the previous six months), with possession of unauthorised articles, disobeying orders, and threats and abuse regularly featuring as the most common charges.
- 1.45 A recently commissioned adjudication room, located outside of the segregation unit, was suitably decorated and arranged to provide an appropriate environment. Its location helped to address the common prisoner perception that they would be automatically located onto the segregation unit following adjudication.
- 1.46 The recently formed adjudications standardisation meeting considered adjudication data and amended the tariff where necessary, but there was no quality assurance of adjudications by a senior manager.

## The use of force

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- 1.47 The number of incidents of use of force was lower than at comparator prisons. No specific use of force data were collated to enable trend analysis, and management oversight was limited to an ad hoc review of paperwork.
- 1.48 Recording of use of force was generally good and only a few records remained incomplete, although it was unclear who was responsible for ensuring that these were completed or who conducted a management check. Not all planned uses of force were video-recorded and none of the recordings were reviewed. Those we saw showed a lack of de-escalation.
- 1.49 There had been no use of special accommodation since two occasions in early 2012 and the records of these had been appropriately completed.

## Recommendations

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- 1.50 Use of force data should be collated and regularly analysed to identify trends.
- 1.51 All planned interventions should be video-recorded and reviewed.

## Housekeeping point

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- 1.52 Use of force paperwork should be formally and regularly scrutinised by a senior member of staff.

## Segregation

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- 1.53 The segregation unit (care and separation unit) was small and consisted of 10 cells, including one unfurnished accommodation cell. All cells were subject to constant internal closed-circuit television coverage, which was unnecessary and intrusive. Cells were generally clean, but doors were covered in graffiti and toilet units were dirty, badly scaled and some lacked seats and/or lids.
- 1.54 When the unit was full, the A1 landing (for prisoners on the basic level of the IEP scheme) was used as an overflow. A comprehensive recording document was used to ensure that the appropriate levels of governance were applied to 'segregated' prisoners.
- 1.55 The average number of prisoners segregated was not high, at around four per month for the previous six months, although the boundary between those segregated and those held on basic were alarmingly blurred. (see section on incentives and earned privileges and main recommendation HP55).
- 1.56 The regime on the unit was minimal, with no off-unit activity and no access to religious services, although members of the chaplaincy visited segregated prisoners. Daily exercise (taken on either the A or F wing yard) was often solitary, with insufficient consideration of any risk posed.
- 1.57 Daily recording was not regularly completed, including records of access to the regime and, more importantly, the first night (in segregation). Rule 45 reviews were completed on time but the notification to prisoners of the reasons for remaining on Rule 45 was not always issued.

- 1.58 One segregation monitoring and review group meeting had been held; arrangements were new and yet to be embedded, resulting in a lack of available data to enable an analysis of the use of segregation.

## Recommendations

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- 1.59 Segregation unit cells should not routinely be monitored by closed-circuit television.
- 1.60 Graffiti should be removed from segregation unit cells, and toilets deep cleaned and refurbished where required.
- 1.61 Subject to risk assessment, prisoners should be allowed to exercise together, and activities for those on long-term Rule 45 procedures should be provided wherever possible.

## Housekeeping points

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- 1.62 Daily segregation records should be regularly completed.
- 1.63 Rule 45 notification paperwork should be issued on time.
- 1.64 The segregation monitoring and review group meeting should be held regularly.

## Substance misuse

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### Expected outcomes:

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

- 1.65 Clinical and psychosocial care was satisfactory. Clinical and psychosocial teams were insufficiently well integrated. Psychosocial team service delivery was reduced by officer redeployment. The drug recovery unit was working well, and group-work options were developing, but remand prisoners had no access to Alcoholics Anonymous meetings.
- 1.66 At the time of the inspection, there were 110 prisoners undergoing clinical treatment and 57 on opiate substitution therapy (30 on reduction doses and 27 on maintenance doses), 25 on benzodiazepine detoxification programmes and 28 undergoing alcohol detoxification. Lofexidine-based detoxification was the most common treatment offered to new prisoners who had used street drugs in the community. Opiate substitution therapy was not routinely provided. Prisoners arriving on an opiate substitution prescription could be maintained, but usually only for three months, unless mental health or other acute issues dictated otherwise. Secondary detoxification was available.
- 1.67 A naloxone opiate antidote training and distribution programme had been delivered by psychosocial team members, with 411 prisoners trained since January 2011. The programme trained prisoners on how to inject an opiate antidote to someone suffering from an overdose. Prisoners were provided with the antidote on release and documented evidence showed that at least two lives had been saved as a result.

- 1.68 The quality of the clinical care offered was good but prisoners' longer-term potential outcomes were disadvantaged by insufficient integration between clinical and psychosocial services. Clinical reviews often did not involve the psychosocial team and information about changes to the opiate substitution dose was not always shared. This meant that some prisoners missed out on important psychosocial support through crucial stages of their detoxification programme. This issue was further compounded by the psychosocial team being given no access to SystemOne (the electronic clinical record).
- 1.69 At the time of the inspection, the psychosocial team had 244 prisoners on its caseload, with an average ranging between 240 and 280. The team included five officers, who were regularly redeployed. This had caused the cancellation of important substance use assessments, one-to-one session delivery and naloxone training (see above).
- 1.70 The newly established drug recovery unit on D wing was working well, with developing peer support, group work from the integrated drug treatment system modules, and specially selected and trained discipline staff who were highly regarded by prisoners. There were 59 prisoners on this unit at the time of the inspection, and they had all been required to sign a compliance drug testing compact, which prisoners told us was a great help in encouraging them to stay drug free.
- 1.71 In our survey, fewer prisoners than at comparator establishments (33% versus 60%) said that they had received help for their alcohol problems. The range of available interventions addressing such problems included one-to-one sessions and group work, including the Building Skills for Recovery programme. Alcoholics Anonymous groups were held fortnightly, but were not available to remand prisoners, which may have contributed to the poor survey results.
- 1.72 Prisoners could obtain free access to local substance use and mental health helplines via the PIN telephone system.
- 1.73 The drug strategy group met bimonthly, with good representation from across the establishment. However, the meeting lacked strategic direction and there was no supporting action plan. The strategy document was in date, although a needs analysis was due.

## Recommendations

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- 1.74 **Joint-working protocols and practice should be further developed between the clinical substance misuse service and the psychosocial team to improve clinical reviews, care planning and care coordination.**
- 1.75 **The psychosocial team should have access to the SystemOne clinical record.**
- 1.76 **The psychosocial team should not be diverted to discipline duties.**

## Housekeeping points

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- 1.77 The establishment should repeat its substance use needs analysis annually to ensure that service provision matches the current need of the prisoner population.
- 1.78 The drug and alcohol strategy document should be updated and contain detailed action plans and performance measures.

## Good practice

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- 1.79 *A naloxone opiate antidote training and distribution programme had been delivered by the psychosocial team.*
- 1.80 *Prisoners could obtain free access to local substance use and mental health helplines via the PIN telephone system.*



# Section 2: Respect

## Residential units

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### Expected outcomes:

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

- 2.1 Cells designed for one were shared by two and were cramped. Cells contained adequate furniture but few included lockable cabinets. Many mattresses were of poor quality, as was some of the prison-issue clothing. Screening around some in-cell toilets was inadequate. The offensive display policy was not enforced and too many cells contained graffiti. Some communal showers lacked privacy and access was restricted. The provision of clean bedding and clothing was problematic. Applications were dealt with quickly and fairly.
- 2.2 Most external communal areas and cells were clean. Most cells were shared by two prisoners, including many that had originally been designed for single occupancy and were therefore cramped. They contained adequate furniture but few had lockable cabinets, which was a concern, particularly for those in possession of their medication. Many mattresses we saw were of very poor quality and there was no exchange programme. Some in-cell toilets were poorly screened but those that we saw had toilet seats and lids.
- 2.3 The offensive display policy was clear and appropriate but was not enforced by wing staff. Too many cells contained offensive posters, and others contained graffiti.
- 2.4 Communal showers were clean but most lacked privacy. Access to showers and telephones was restricted because of limited association times (see section on time out of cell).
- 2.5 In our survey, far fewer prisoners than at other local prisons said that they had access to enough clean bedding and suitable clothing. Most prisoners had to wear prison-issue clothing and some of this was of poor quality. Most prisoners resorted to washing their prison-issue clothing in their sink in order to retain items that fitted.
- 2.6 Application forms were freely available but duplicate copies were not given to prisoners to retain, to enable them to follow up their application. Most prisoners, and more than at other local prisons, said that applications were dealt with quickly.
- 2.7 Electronic translating machines (Logiplex) were located on the wings and were effective in translating information into a range of languages, including Welsh.

## Recommendations

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- 2.8 Cells designed for one should not be occupied by two prisoners.
- 2.9 In-cell toilets should be adequately screened and communal showers should provide adequate privacy.
- 2.10 The offensive display policy should be enforced and graffiti removed.

- 2.11 Prisoners should have enough clean bedding and clothes for the week, including warm clothing for the winter.

## Housekeeping points

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- 2.12 Prisoners should have access to a lockable cabinet.
- 2.13 Poor-quality mattresses should be replaced.

## Staff–prisoner relationships

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### 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.

- 2.14 Most prisoners said that staff treated them respectfully, and the interactions that we observed were generally informal and friendly. Staff supervision was good. Most prisoners found their personal officer to be helpful. Case note entries by personal officers were variable and in too many cases were non-existent or poor.
- 2.15 In our survey, 76% of prisoners, in line with the comparator, said that staff treated them with respect. We witnessed friendly and informal interactions on the whole but too many staff referred to prisoners by surname only. Staff supervision of prisoners during association and movement around the prison was good. Prisoner forums met regularly and discussed a wide range of issues, and relevant actions were taken.
- 2.16 Just under half of the prisoners said that they had a personal officer, which was similar to the comparator, and two-thirds of these said that they found them useful.
- 2.17 Personal officers made few entries in P-Nomis (electronic case notes) and those we saw were limited in content and did not focus on progress or personal issues. Too many case notes had no personal officer entries. Quality assurance had begun recently and this was fed back directly to the personal officers and their managers; this had identified the issues that we found.

## Recommendation

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- 2.18 Regular, meaningful personal officer contact should be evidenced in case note entries.

## Equality and diversity

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### 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 characteristic<sup>3</sup> 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.

2.19 Equality provision lacked strategic focus and management input. However, provision was generally effective, with good coordination of services for minority groups. There were formal support forums for most minority groups. In our survey, black and minority ethnic prisoners were more negative than their white counterparts across a range of areas. Foreign national prisoners had good support and regular access to UK Border Agency staff. Provision for prisoners with a disability was reasonable but there was little activity for older prisoners.

## Strategic management

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- 2.20 Equality provision lacked strategic focus and senior management input. However, equality staff ensured that there was good coordination of services and that formal support groups were available.
- 2.21 The equality strategy was comprehensive and covered all protected characteristics. Attendance at diversity and equality action team meetings was very poor, even though senior managers had been identified as lead members of staff for each of the protected characteristics. Prisoner representatives did not attend. Data analysed at the meetings focused on race and there was no monitoring of the equality of access and treatment of prisoners from minority groups (apart from for complaints). Minutes showed that little action was recorded to address any problems identified.
- 2.22 The prisoner equality representatives from each wing attended monthly meetings with the equality team and minutes demonstrated that the issues raised by prisoners in this forum and in support forums were acted on.
- 2.23 Discrimination incident report forms (DIRFs) were freely available. Very few (12) had been received in the previous six months, but they had been investigated to a reasonable standard and internal scrutiny was adequate. External scrutiny was provided annually by a local equality organisation.

## Recommendation

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- 2.24 Governance and management oversight of diversity should be prioritised and the treatment of, and access to services by, minority groups should be monitored and action taken when required.

## Protected characteristics

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- 2.25 All new receptions were seen by the equality team, who then collated relevant information, and prisoners could declare any protected characteristics confidentially. Equality staff and Insiders (prisoners who introduce new arrivals to prison life) gave advice about the help that was available. Gwalia, a local organisation, provided resettlement support for minority groups, including the provision of housing.

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<sup>3</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.26 Approximately 14% of the prison population were from black and minority ethnic backgrounds. In our survey, this group reported more negatively than their white counterparts across a range of areas. For example, more said that they had ever felt unsafe at the prison (39% versus 24%), that they currently felt unsafe (18% versus 8%) and that they had been victimised by staff (39% versus 24%). The prison's race monitoring had identified some concerns and these had been investigated.
- 2.27 In our survey, 5% of prisoners said that they were Gypsy, Romany or Travellers. The chaplaincy provided a weekly support group for such prisoners, and this was well attended. Resettlement support for both this group and black and minority ethnic prisoners was provided by Ihsaan Social Support Association (ISSA) Wales through their New Leaf project.
- 2.28 Foreign nationals represented just over 7% of the population. At the time of the inspection, eight prisoners were being held solely under immigration powers (IS91s) beyond their sentence expiry date, the longest period of detention being three years past the release date. The equality team had maintained contact with UK Border Agency (UKBA) staff about this group of prisoners, and the delays in dealing with them were attributable to UKBA. Foreign national prisoners had access to independent immigration advice and to UKBA staff, who visited the prison regularly.
- 2.29 The foreign national strategy was comprehensive but not all aspects of it were being followed. Provision of free telephone calls for foreign national prisoners should have been automatic but we found that only five out of over 40 prisoners received free calls and they were required to apply monthly, with proof that they did not receive visits.
- 2.30 We found little information displayed in languages other than English but prisoners could access both printed and electronic information in their own language via electronic translating machines (see section on residential units). Professional telephone interpreting services were used regularly by equality staff.
- 2.31 In our survey, 21% of prisoners reported a disability and the prison had identified all prisoners who had declared some form of disability either on reception or later. Provision for such prisoners was reasonable and those located in the health care department had care plans. No prisoners on the other residential units required care plans; the few who required help in an emergency had been identified and personal emergency evacuation plans had been developed. There were no prisoner carers but there was no apparent need for these at the time of the inspection. Adaptations had been made to some cells and prisoners had been provided with aids such as large-print documents and handrails where required.
- 2.32 There were 48 prisoners over the age of 50, the oldest being 80. There was no formal provision of care and no activities for older prisoners, and those we spoke to who were unlocked during the core day and not working complained of boredom (see section on time out of cell).
- 2.33 In our survey, 2% of prisoners identified themselves as gay or bisexual. A weekly lesbian, gay, bisexual and transgender (LGBT) support group was held by the chaplaincy and was attended by representatives from Gwalla. There was a case conference and care plan process for managing transgender prisoners, and one such prisoner had successfully lived on the residential wings in recent months.

## Recommendations

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- 2.34 The negative perceptions of black and minority ethnic prisoners should be further investigated and understood.
- 2.35 Foreign national prisoners should be reliably provided with free monthly telephone calls.

## Faith and religious activity

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### Expected outcomes:

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

- 2.36 Faith facilities and access were good for all faiths and the chaplaincy was well integrated into the regime.
- 2.37 Faith facilities included both a chapel and multi-faith room, and access to them was good. All faiths in the prison were provided for. The chaplaincy team met all new arrivals and ensured that those who wanted to attend services could do so. Those who were unable to attend corporate worship, either through illness or because they were segregated, were visited by a chaplaincy member of their own faith in their residential location.
- 2.38 The team was well integrated into the regime, attended key meetings and provided a number of additional faith activities, including study classes and access to a Pet as Therapy (PAT) dog for the most vulnerable prisoners. They visited all prisoners who were subject to assessment, care in custody and teamwork (ACCT) self-harm monitoring procedures weekly, and we saw evidence of significant pastoral support being given to prisoners and their families at times of bereavement.
- 2.39 There were effective links with local community faith groups, representatives of which attended the prison and contributed to services. These included the local mosque, which part-funded the Muslim chaplain at the prison; Victory Outreach UK, a Christian charity that provided volunteers; The Vision of Hope farm project, where ex-prisoners could gain work placements; and the new Changing Leaf Project, which was a scheme for mentoring black and minority ethnic prisoners back in the community.

## Complaints

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### 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.

- 2.40 The number of complaints submitted was low and fewer prisoners than at comparator establishments said that it was easy to make one. However, the complaints made were dealt

with quickly and fairly. Improvements made to increase prisoners' confidence in the system were having a positive impact. Data analysis was good.

- 2.41 The number of complaints submitted in the previous six months was very low, at about a third of the average for local prisons. Far fewer prisoners than at comparator establishments (39% versus 55%) said that it was easy to make a complaint but a similar number to the comparator said that they were dealt with fairly and quickly.
- 2.42 Improvements had been made to the complaints system in December 2012 and data from the following three months showed a considerable increase in the number of complaints submitted, suggesting improved confidence.
- 2.43 Complaints data were analysed monthly, enabling exploration of issues and trends. The responses to complaints that we examined were respectful and timely but some did not fully address the issue raised.

## Housekeeping point

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- 2.44 Responses to complaints should fully address the issues raised.

## Legal rights

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### 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.

- 2.45 Legal services were well developed and a full range of services were offered.
- 2.46 A team of three officers provided a comprehensive legal rights service. One officer attended the local magistrates' court daily to try to divert offenders from custody by providing accommodation through Stonhams.
- 2.47 The legal services team met all new receptions and ensured that they had access to a solicitor and that they were happy with their legal provision. The team also provided printed information to prisoners who had chosen to represent themselves and those involved in civil and family proceedings.

## Health services

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### 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.

2.48 Health services had undergone considerable improvements and provided high-quality care. Access to the services had improved in some areas but there were some long waiting times for appointments. The range of clinics was appropriate for the prison population but attendance rates for clinics at the health care centre were poor and there was no strategy for health promotion. Pharmacy services were satisfactory and the quality of dental services was good but there were too many patients failing to attend appointments, and long waiting times. A good level of mental health care was available, including access to a full-time psychiatrist.

## Governance arrangements

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- 2.49 There was a good relationship between the health services team and the commissioners, and active involvement of the governor and clinical director, resulting in positive partnership arrangements. Recent restructuring and the appointments of senior health services staff had resulted in considerable improvements to the standard of health care delivered. The health care manager worked closely with the clinical director, managing a large team of staff that all worked well together. The most recent health needs assessment was out of date, having been completed in 2010.
- 2.50 In our survey, prisoners were considerably less satisfied than those at comparator prisons with the overall quality of health services and told us of long waiting times for some appointments. Prisoners we spoke to were generally complimentary about the quality of care once accessed, and those accommodated as inpatients were very satisfied with the level of care received. A 24-hour service was provided, in a large dedicated health care centre and on three treatment areas on the wings. The large health care centre was clean and well equipped for patients attending clinics or requiring inpatient care. Treatment areas on the wings were much more rudimentary and poorly furnished.
- 2.51 The range of clinics provided was appropriate for the prison population. The primary care team included a lead nurse for the care of older prisoners; the team also provided primary mental health services. The professional development of staff had been supported by the health care provider and all staff were in date for their mandatory training.
- 2.52 Two GPs were contracted by the local health board to deliver clinics throughout the week, including on Saturday mornings. They also provided the out-of-hours service, ensuring greater continuity of patient care when required. A full-time pharmacist and two pharmacy technicians were employed on site and delivered a range of pharmacy services. Two dentists, a dental therapist and dental nurses delivered six dental sessions each week. Holiday cover for the dentists was limited and the provider was in the process of recruiting an additional dentist.
- 2.53 The electronic recording of patients' clinical records had been transferred to SystmOne (the electronic clinical record) during the previous year, and this was used effectively. Regular staff meetings kept staff informed of national guidance for health care delivery. Emergency resuscitation equipment was located in the health care centre, the centre treatment room and the F wing treatment room. The kit included automated external defibrillators (AEDs), with an additional one also located in the gym. All equipment underwent weekly checks, including the AEDs, which should have been checked daily, and these were recorded. Discipline and civilian staff were trained in first aid, nine of whom were also trained in the use of AEDs.
- 2.54 Prisoner representatives from the wings had been trained as health care champions, in conjunction with the gym staff. They met monthly, enabling health care and health promotion issues to be shared. A strategy for health promotion had not been developed and there was

limited information around the prison on either health care services or health promotion issues. Disease prevention and screening clinics were available and there were policies for the control of communicable diseases. Prisoners submitted up to 40 health care complaints monthly; these mainly concerned their medication or appointment timings. Complaints were managed well and responses were given quickly and sensitively.

## Recommendations

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- 2.55 Wing treatment rooms should be refurbished to meet infection control guidelines.
- 2.56 An up-to-date health needs assessment should be commissioned.
- 2.57 Automated external defibrillators should be checked daily.
- 2.58 A strategy for health promotion should be developed.

## Delivery of care (physical health)

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- 2.59 Two health care rooms were available in reception and provided satisfactory facilities for the screening process. All prisoners were seen on the day after arrival for a more comprehensive health care screen. A leaflet containing information about health care services was provided but it was only available in English. When required, patients were seen by a GP within seven days, or sooner if urgent. Attendance rates for clinics at the health care centre were not good but were better for the wing treatment rooms. Patients were escorted in batches for the clinics and waited in holding rooms that were stark, with uncomfortable bench seating and no reading material to occupy them while waiting, often for long periods of time.
- 2.60 Prisoners in the segregation unit were seen daily by a GP or nurse but we were told that it was difficult for prisoners to be seen by the mental health team. The gym was actively involved in promoting healthy lifestyles and there were a wide range of screening, vaccination and smoking cessation clinics. Condoms were available from health services staff. Patients requiring outside hospital appointments were well managed and sufficient escorts were available to meet demand.
- 2.61 The inpatient unit had 20 single cells and one double cell. The cells were full during the inspection and we were told that this was usually the case. There were four safer cells, which were used for constant observation of prisoners when required. A regular team of nurses and discipline staff provided a high level of care. The unit was well organised and presented a calm and therapeutic environment. Prisoners were mainly unlocked during the day and had access to a room used for simple assembly work, such as plumbing fittings, and this was a popular and beneficial activity. There was a large open association/dining area. The exercise yard had been developed into a large garden, which was used regularly by those patients who were able to do so.

## Recommendation

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- 2.62 All prisoners should have access to primary and secondary mental health services.

## Housekeeping points

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- 2.63 Health care information should be available in a range of languages.
- 2.64 A review of attendance rates should be carried out and efforts made to reduce the time wasted by missed appointments.
- 2.65 Prisoners should not be held for long periods in the holding rooms in the health care centre and should be provided with information for patients and material to occupy them while waiting for appointments.

## Pharmacy

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- 2.66 Medication was supplied from the in-house pharmacy in a timely manner. The pharmacist ran a weekly minor ailments clinic but did not carry out medicine reviews. Not all reference sources were up to date. Medicines management and clinical governance procedures were mostly impressive, although the refrigerator temperature records on the wings were not completed daily and some maximum temperatures recorded were out of range. There was an in-possession policy but this was not always followed and had not been updated in light of the introduction of SystemOne. In-possession risk assessments were not always recorded on SystemOne. There was a list of preferred medicines for prescribing on this clinical record system but otherwise there was no formulary (a list of medications used to inform prescribing) in use.
- 2.67 Over half of patients had their medicines monthly or weekly in-possession and were encouraged to take responsibility for re-ordering them. Patients sharing cells were not able to store their medicines securely (see housekeeping point 2.12). Prison officers were present when medicines were administered and appeared to be vigilant in ensuring that these were not diverted. There were some gaps in administration records. The last administration time of the day varied widely between wings but was generally between 4.30pm and 7pm. Medication causing sedation was given daily in-possession where necessary but there was no routine night-time administration of medication, even though 24-hour nursing cover was available. Patients were given written information about their medications. They were able to access medication out of hours, and a policy for this was in place.
- 2.68 There were few patient group directions (to enable nurses to supply and administer prescription-only medicine) and those that existed were designed solely for treating withdrawal symptoms on the first night. The only medicine supplied as 'special sick' (immediate health treatment without an appointment) was paracetamol; records were kept of prisoners who received this, although the pharmacy was not always informed. There was a very limited prison shop list and a small list of medicines could be bought through the prison pharmacy, although, in practice, these options were rarely used. The medicines management committee was attended by relevant stakeholders, including GPs, but there was no health board representation. Audits of tradable medication such as gabapentin, pregabalin, tramadol (strong analgesics) and mirtazapine (an antidepressant) had taken place and appropriate action had been taken as a result.

## Recommendations

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- 2.69 The pharmacist should provide medicine use reviews.

- 2.70 The in-possession policy should be updated and the risk assessments of each drug and patient documented, with reasons for the determination recorded.
- 2.71 Full and complete records of the administration of medicines should be made.

### Housekeeping points

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- 2.72 Old reference books should be discarded, and only the most recent copy should be kept, to ensure that any information used is up to date.
- 2.73 Heat-sensitive medicines should be stored appropriately.
- 2.74 A drug formulary should be developed by the health board and pharmacy staff, to be ratified by the medicines management committee.
- 2.75 Medicines causing sedation should be administered at an appropriate time of day.
- 2.76 Patient group directions should be produced, to allow the supply of more potent medicines and vaccines by the nursing staff where appropriate.
- 2.77 The pharmacy should be informed if paracetamol is supplied to a prisoner without a prescription chart via the special sick policy.
- 2.78 The special sick policy should be reviewed regularly by the medicines management committee to ensure that all appropriate medicines can be supplied.
- 2.79 The health board should be represented on the medicines management committee.

### Dentistry

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- 2.80 The dental suite comprised two large surgeries and a separate decontamination room. The suite was very clean and suitably equipped. Patients were not satisfied with the waiting time to see a dentist; at the time of the inspection there were 75 on the waiting list, with the longest wait being eight weeks, which was too long. Patients requiring urgent care were prioritised and treated earlier. There were too many patients failing to attend appointments.
- 2.81 The dental team interacted well with patients, treating them respectfully, giving suitable consideration to their privacy and providing appropriate information. Resuscitation equipment was shared with the health care centre, with oxygen and emergency drugs being located in the suite. Dental health records were managed by the dental team and appointments were managed electronically using SystemOne.

### Recommendation

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- 2.82 Prisoners should have timely access to dental care.

### Housekeeping point

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- 2.83 Efforts should be made to reduce the number of patients that fail to attend appointments.

## Delivery of care (mental health)

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- 2.84 Secondary mental health care was provided by a small team of community psychiatric nurses, occupational therapists and counselling psychotherapists. A full-time psychiatrist was also available for secondary care and to see patients located on the inpatient unit. The total caseload averaged around 80 patients, with up to 15 referrals each week. Rooms in the health care centre and on the wings were used for consultations, and cover was available on weekdays via an open referral system. Multidisciplinary meetings were held each week, in addition to case conferences by the mental health team. A forensic psychiatrist visited the prison weekly, seeing up to three patients per session. Five part-time student counsellors were available to prisoners and were supervised by the university and mental health team.
- 2.85 Discipline staff had attended mental health awareness training at a neighbouring prison over the previous year. During the six months before the inspection, 13 patients had been transferred to secure mental health units, with an average waiting time of two to four weeks. At the time of the inspection, one patient was about to be transferred, having waited for six weeks following referral.

## Catering

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### Expected outcomes:

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

- 2.86 The food provided was reasonably good. The menu was varied and there was good consultation with prisoners. The main kitchen was clean and well equipped.
- 2.87 The menu was based on a four-week cycle and provided a choice of hot and cold meals, including vegetarian and halal. Menus were changed every three months. In our survey, more prisoners than at other local prisons said that the food was good (29% versus 24%). Consultation about food was undertaken regularly and a survey was completed twice a year, and there was evidence of improvements being made as a result of this.
- 2.88 Some prisoners told us that the portion sizes were too small, but those we observed were adequate. The food we tasted was of good quality and hot.
- 2.89 The main kitchen was clean and well equipped, with good storage facilities which included separate storage of halal food. Twenty-two prisoners worked in the kitchen. They had all received basic hygiene training and were dressed appropriately.

## Purchases

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### Expected outcomes:

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

2.90 New prisoners could wait too long for their first full order and we found evidence that this had led to some getting into debt. Prisoners were able to order from catalogues. There was adequate consultation about the shop.

2.91 Newly arrived prisoners could wait up to 15 days for their first full shop order. Not all prisoners were given reception grocery packs as it was assumed that those who had transferred in from other establishments would have sufficient purchases with them, although this was not always the case. Although new prisoners with funds could receive more than one reception pack, we found evidence in DIRF and safer custody investigations that the long wait for shop goods had resulted in some prisoners getting into debt very quickly after arriving at the establishment.

2.92 Prisoners could make purchases from a reasonable range of catalogues but were charged an administration fee. They were also able to order newspapers and magazines. Consultation about the shop was adequate and took place at the general prisoner consultative committee meetings.

## Recommendation

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2.93 Prisoners should be able to receive a full shop order within 24 hours of arriving at the establishment.

## Housekeeping point

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2.94 Prisoners should not be required to pay an administration fee for catalogue orders.

# Section 3: Purposeful activity

## Time out of cell

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### 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.<sup>4</sup>

- 3.1 Time out of cell for most prisoners was reasonable. Access to association was unpredictable and not daily. Not all prisoners had an hour of exercise every day.
- 3.2 For prisoners in full-time activity, time out of cell was reasonable, at just under nine hours a day. Unemployed prisoners were unlocked for less than three hours a day. At weekends, prisoners were locked in their cells for nearly 16 hours overnight.
- 3.3 There was access to outdoor exercise, but for some wings this was for only half an hour a day. Exercise yards had recently been furnished and contained exercise equipment, but no seating was available.
- 3.4 Access to association for most prisoners was unpredictable and it was available up to a maximum of three evenings a week, which restricted their use of telephones and showers. All unemployed prisoners, including those not required to work (remand prisoners) and those who were unable to get a job, had association during the day, which resulted in difficulties in contacting family and friends at a reasonable time. In our survey, more remand than sentenced prisoners (46% versus 29%) reported problems in getting access to telephones (see main recommendation HP56).
- 3.5 In our roll checks during core day periods, a third of the population was locked in their cells and not engaged in activity. Older prisoners and those with disabilities were unlocked during the core day but no activities were provided.

## Recommendations

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- 3.6 Prisoners should be given the opportunity for at least one hour of exercise in the open air every day.
- 3.7 Prisoners should have the opportunity for daily association, including in the evenings, during the week.

## Housekeeping point

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- 3.8 Older prisoners and those with disabilities who are unlocked during the core day should be provided with regime activities.

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<sup>4</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

# Learning and skills and work activities

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## Expected outcomes:

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

3.9 Overall, the management of learning and skills was good. A comprehensive needs analysis that made good use of labour market information was used well to develop courses. The standard of teaching was good and success rates on vocational courses were high. There was a broad range of provision, which improved the employability prospects of prisoners. There were too few activity places and not all of these were used effectively enough. Library facilities were good and used well.

Estyn<sup>5</sup> made the following assessments about the learning and skills and work provision:

Current performance	Good
Prospects for improvement	Good
How good are outcomes?	Good
How good is provision?	Good
How good are leadership and management?	Good

## Management of learning and skills and work

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- 3.10 Overall, the management of learning and skills was good. There were effective structures to coordinate the provision, and annual performance management of workshop and education staff included the setting of relevant targets to improve learning and skills. There were clear plans to develop and promote learning and skills programmes, but these were not always detailed enough. Systems to collect and analyse data were good but were not always used effectively enough to improve learning outcomes. Managers had not analysed the reasons for poor performance in areas such as essential skills.
- 3.11 A comprehensive needs analysis that made good use of labour market information was used well to develop relevant courses – for example, by developing rail training and digital printing. There were good partnerships with a range of employers and social enterprises to promote and encourage employment, and these had resulted in positive outcomes for prisoners.
- 3.12 Arrangements for improving the quality of provision were broadly effective. The prison had produced a detailed self-assessment report with the involvement of staff from many areas.

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<sup>5</sup>Estyn is the office of Her Majesty's Inspectorate for Education and Training in Wales. It is independent of, but funded by, the National Assembly for Wales. The purpose of Estyn is to inspect quality and standards in education and training in Wales.

## Recommendation

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- 3.13 The use of data should be improved to manage poorly performing areas of learning.

## Provision of activities

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- 3.14 Only around half of prisoners attended the education induction programme. This meant that the needs of those who did not attend were not identified early enough and many missed opportunities to improve literacy, numeracy and budgeting skills. For those who took them, initial assessments for education effectively identified prisoners with dyslexia or basic skills needs, and the learning support unit offered good support by helping prisoners to set and meet specific learning targets. There was good use of orderlies to help prisoners make informed choices during induction
- 3.15 The prison had 494 activity places, 145 of them in education. This was not enough for all prisoners to be usefully occupied. In spite of this, a few places remained unoccupied. Most activities were purposeful and provided good, work-related experiences that helped build confidence and self-esteem. Prisoners developed a range of personal, social and employability skills. There were not enough essential skills classes. Almost half of all prisoners were not engaged in activity, although many of these were serving very short sentences or were on remand (see main recommendation HP57).
- 3.16 Allocation to activities was coordinated reasonably effectively by a small group of staff from industries, education and custody. The process was fair and made good use of information about learners' needs and interests. However, the high prisoner turnover meant that the system did not always respond quickly enough. The prison had recognised this and was developing an electronic system to improve the allocation and career pathways for prisoners both inside and on release.
- 3.17 The management of attendance was not sufficiently robust. Although activity hours were recorded, senior managers did not analyse these reports or use them well enough to improve attendance at activities, which was too low.
- 3.18 Pay rates were equitable, with a satisfactory system of incentives and bonuses.

## Recommendations

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- 3.19 All prisoners' literacy and numeracy levels should be assessed on arrival at the prison or before starting education classes or work.
- 3.20 The number of essential skills classes should be increased to meet the needs of the population.

## Quality of provision

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- 3.21 The prison had recently introduced an assessment programme aimed at prisoners who were not participating in education or work. This was motivational and helped them to identify their strengths and ways to improve any weaknesses. The programme had encouraged many participants to progress into other aspects of education or work.

- 3.22 Education and workshop staff worked well with prisoners, encouraging them to engage in learning. Overall, the standard of teaching was good. Most teachers employed a wide range of teaching methods that catered well for different learning styles. In the longer sessions, they planned well, with frequent changes of activities to maintain prisoners' interest. In nearly all lessons, teachers used high-quality materials that were pitched at appropriate levels and challenged prisoners well. Trained prisoner mentors provided very good additional learning support in many classrooms and workshops.
- 3.23 There was effective tracking and recording of prisoners' skills development and attainment. Generally, prisoners received good feedback on their progress, although individual learning plans were not used consistently well.
- 3.24 There was a broad range of provision, which took good account of labour market needs and improved the employability of prisoners. It included railway maintenance, engine building, digital printing and multi-media production. There were well-developed plans to extend the range of work programmes further. Programmes had been designed to take account of the short sentences of most prisoners, with learning delivered in small sections. Nearly all areas offered accreditation but in some areas take-up was low.
- 3.25 Workshops created an authentic working environment. Their industry-standard equipment prepared prisoners well for employment.
- 3.26 Staff used good displays to promote other cultures. Prisoners treated each other with respect and in many sessions supported each other well. The use of Welsh in displays and signs had improved. However, staff were not clear enough about how to encourage the use of Welsh or about enabling prisoners to recognise the use of Welsh as a valuable employment skill.

## Recommendation

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- 3.27 **Clear strategies to promote the Welsh language and its value as a useful employment skill should be developed.**

## Housekeeping point

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- 3.28 The quality of individual learning plans should be monitored and maintained at a reasonable standard.

## Education and vocational achievements

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- 3.29 Success rates on vocational courses were good. Around three-quarters of prisoners on vocational courses successfully completed their learning and the percentage who attained a qualification was high, at around 92%. Completion rates on essential skills courses were poor, with just over 50% of prisoners successfully completing their learning. Completion rates on employability courses were low, with less than two-thirds of prisoners successfully completing their course. On both essential skills and employability courses, around three-quarters of prisoners attained a qualification.
- 3.30 In literacy and numeracy classes, only a minority of prisoners attending developed their skills appropriately and worked towards relevant qualifications. Many did not consistently work towards addressing their identified literacy and numeracy skill deficiencies.

- 3.31 Opportunities to progress were limited. Courses were not always accredited at a high enough level, with many providing only a level 1 qualification. As a result, some took courses to gain qualifications that were at too low a level and not sufficiently challenging. However, the very few prisoners in learning support programmes made effective individual progress in skills development.
- 3.32 Attendance in education classes was adequate, at around 80%. However, too many prisoners were late to classes, many being more than 30 minutes late. This had a negative impact on learning time and prisoner motivation, with many left unoccupied for considerable periods of time.

## Recommendations

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- 3.33 The number of qualifications above level 1 should be increased to meet the needs of more able prisoners.
- 3.34 Attendance and punctuality at all learning and skills activities should be improved.

## Library

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- 3.35 The library operated from a cramped space that was used well, but did not allow for more than one small group of prisoners at any one time. This hampered its use as a flexible learning area.
- 3.36 Overall access to the library was good. Prisoners had a good awareness of library facilities and about the availability of trolley services on the wings. Orderlies were used well to enhance delivery and to support prisoners in their choice of materials.
- 3.37 There was a wide range of books that catered for most interest groups and a good selection of material in formats accessible to prisoners with reading difficulties. There was a reasonable selection of Welsh-medium books, reference books and publications, including some quick readers. Prisoners were able to order books not available in the prison from the local authority library services, and these arrived promptly.
- 3.38 There were dedicated library sessions for prisoners to access legal materials, and library staff reproduced relevant documents for them to take to their cells.
- 3.39 There was a high rate of book borrowing, and book losses were low.

## Physical education and healthy living

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### 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.**

- 3.40 The PE department promoted healthy living, fitness and personal well-being. All prisoners had access to PE at least twice a week. There was good support for prisoners to lose weight and improve their health.

- 3.41 The PE department actively promoted healthy living, fitness and personal well-being, and most prisoners had a good understanding of these issues. Prisoners referred for exercise by medical practitioners had effective and well-planned fitness programmes to meet their individual needs. A few prisoners achieved weight loss through a structured and well-planned exercise and healthy eating weight loss programme. This had had a positive impact on the health of prisoners.
- 3.42 All prisoners had an appropriate induction to organised and supervised activities in the gym. All prisoners had access to PE at least twice a week.
- 3.43 The prison had recently installed fitness equipment into the exercise yards, and it was well used. The prison all-weather pitch allowed prisoners to take part in a suitable range of activities, but there were limited exercise classes specifically for older prisoners.

# Section 4: Resettlement

## Strategic management of resettlement

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### Expected outcomes:

Planning for a prisoner's release or transfer starts on their arrival to 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, based on a prisoner survey, but it had not been fully implemented. The resettlement committee was inconsistently led and attendance was erratic.
- 4.2 The prison had a good reducing reoffending strategy, which addressed the resettlement pathways and was based on a survey of prisoners carried out in 2012 by Cardiff University. However, offender assessment system (OASys) data were not used to link needs to a reduction in reoffending and mainly described current provision rather than identifying development objectives. The high turnover of prisoners and the need for swift intervention was noted but procedures to meet this challenge were not explored.
- 4.3 The strategy had not been fully implemented. There was no clear plan to direct, manage and monitor the achievement of the identified priorities. A senior officer managed resettlement and coordinated some services, while others were provided by the chaplaincy, substance use team, the learning and skills provider and the Prison Advice and Care Trust (PACT), a voluntary family support organisation working in the prison (see main recommendation HP58).
- 4.4 A resettlement policy committee met quarterly and was attended by providers of services in the prison but PACT was not included and attendance was erratic. There was no involvement of community groups who provided resettlement support after release for some prisoners. Chairing of the meeting was inconsistent and the head of function had attended only once in the year to date. The meeting appropriately addressed current developments but did not work to deliver strategic objectives in a planned way. There was no monitoring of resettlement outcomes to inform developments.
- 4.5 For most prisoners, release on temporary licence (ROTL) was not available or appropriate and was not a central part of the strategy. A pragmatic approach had been taken, whereby ROTL had been used exceptionally for the achievement of valuable work qualifications.

### Recommendation

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- 4.6 Implementation of the reducing reoffending strategy should be effectively managed, with the demonstrable commitment of senior managers, clear planning, the monitoring of outcomes and the involvement of all providers.

## Housekeeping point

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- 4.7 Future resettlement surveys should use offender assessment system (OASys) data to identify needs related to risk of harm and reducing reoffending.

## Offender management and planning

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### Expected outcomes:

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

- 4.8 Prisoners were negative about offender management, and for most there was no planned ongoing contact with offender supervisors. The quality of assessment and planning was reasonable but there was insufficient contribution from other prison departments. Home detention curfew arrangements were good and decisions were reasonable. Public protection was well managed and there were links with community-based procedures. Categorisation reviews were timely and recategorised prisoners were moved promptly to open conditions. Too many prisoners were moved to meet overcrowding demands without due regard for their progress in achieving resettlement or vocational targets. The facilities for the substantial indeterminate-sentenced population were inadequate and did not facilitate progress for most.
- 4.9 In our survey, only 15% of respondents, against the 32% comparator, said that they had a named offender supervisor, and 29%, against the 39% comparator, said that they had a sentence plan.
- 4.10 All new arrivals were allocated to an offender supervisor but only those sentenced to more than 12 months and less than two years (just over a third of the population) were routinely contacted. There was no assessment and planning by offender supervisors for unsentenced prisoners or those serving under 12 months, and those sentenced to two years or more were transferred without an assessment to HMP Parc. Contact with unsentenced or short-term prisoners was only made if there were public protection issues (see main recommendation HP59 and sections on public protection and reintegration planning).
- 4.11 The offender management team comprised a mix of prison officers and seconded probation staff working as offender supervisors, and were supported by case administrators. Although nominal caseloads were high, at around 80, only approximately 25 of these were serving sentences between 12 and 24 months, and therefore had offender supervisor contact. However, the workload was still high because of the high turnover associated with short sentences, and officer offender supervisors were regularly deployed to residential duties. However, assessments and reviews were mostly up to date, with only 17 overdue at the time of the inspection.
- 4.12 Offender supervisors did not have planned regular contact with prisoners on their caseload, even those with whom they had prepared a sentence plan. There was no one to motivate and encourage prisoners to address the identified targets, and one consequence of this was that too many prisoners declined learning and skills assessments.

- 4.13 The quality of assessments by offender supervisors in the files we examined was thorough and the targets identified were appropriate. However, in many it was unclear how they had been prioritised or sequenced to maximise the likelihood of achievement.
- 4.14 In most cases, we found that there had been insufficient contribution to assessments and planning by other prison departments. We also found that offender supervisors kept contact notes separately from the shared prison record (P-Nomis, the electronic case notes), which would have made their information available to all prison staff.
- 4.15 Home detention curfew (HDC) assessment systems were effective, most were timely (when the length of sentence allowed) and, although the proportion granted was low, at 23% of the cases we examined, decisions were reasonable as many applicants had a recent history of failure to comply with court orders or had been recalled from the community.

### Housekeeping point

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- 4.16 Records of contact with prisoners should be maintained on the P-Nomis electronic case note system.

### Public protection

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- 4.17 The senior probation officer worked closely with the head of the offender management unit to manage public protection. New arrivals were effectively screened to identify those who presented a risk to members of the public. Appropriate measures were implemented, including telephone monitoring and restricting visitors. Prisoners' allocated offender supervisor informed them of restrictions and how to challenge them, and was responsible for managing public protection in such cases. However, there was insufficient management support and scrutiny in some cases.
- 4.18 A monthly interdepartmental risk management meeting reviewed restrictions. Due to the high turnover of prisoners, this meeting was mainly concerned with checking that appropriate risk reduction measures were in place for those being released, and the location of the public protection team in the offender management unit ensured that they could respond quickly when prisoners were released at short notice. The interdepartmental risk management team did not meet frequently enough to capture all such cases.
- 4.19 We were told that a high proportion of prisoners at the prison posed a risk to the women with whom they were in relationships and we found that links had been established with community multi-agency risk assessment conference (MARAC) teams, with individual offender supervisors allocated as single points of contact. Links with multi-agency public protection arrangements (MAPPA) teams were good, with effective information sharing and attendance at community meetings when required.

### Recommendation

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- 4.20 Cases posing a high or very high risk of harm to others should have effective management oversight.

## Housekeeping point

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- 4.21 The interdepartmental risk management team should meet more frequently.

## Categorisation

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- 4.22 Prisoners were promptly categorised on arrival and timely reviews were held for those who remained at the establishment. Reviews considered an appropriate range of information, although generally did not directly involve prisoners making representations, and their views were not always included in offender supervisors' reports. In the sample we examined, categorisation decisions were reasonable and justified by the information provided.
- 4.23 The observation, classification and allocation (OCA) department ensured that all prisoners sentenced to two years or more were moved promptly and there were no delays in the movement of reclassified prisoners to open conditions.
- 4.24 Prisoners were often required to move at short notice in response to overcrowding drafts directed by the National Offender Management Service. During the inspection, there were two instructions to move prisoners to HMP Birmingham. The OCA department was not always able to ensure that prisoners who were in the middle of a course or a vocational qualification would be exempt; this was disruptive to planned work with prisoners.

## Recommendations

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- 4.25 Prisoners' views should be considered in categorisation reviews.
- 4.26 The criteria for moving prisoners on overcrowding drafts should take account of their sentence plan targets and family ties.

## Indeterminate sentence prisoners

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- 4.27 At the time of the inspection, there were 60 life-sentenced prisoners and 12 serving indeterminate sentences for public protection (IPP). Most indeterminate-sentenced prisoners lived on two landings of E wing and had a dedicated manager and offender supervisor who ensured that all parole reports and sentence plan reviews were timely.
- 4.28 There were few facilities at the prison which were suited to a lifer population. Arrangements for meeting men remanded on charges likely to attract an indeterminate sentence were scant and support for those newly sentenced to a life term was poor. Opportunities for progression were very limited, with no opportunities for accompanied release, no facilities to develop living skills and no special events to foster their family ties, their understanding of their sentence or their motivation (see main recommendation HP60).
- 4.29 In the cases we reviewed, many life-sentenced prisoners had been inappropriately located at the establishment. Although this location had been appropriate for 19 prisoners who had been recalled from the community or brought back from open conditions, 17 of our sample had been category C prisoners who had transferred from other establishments or category B prisoners who had completed interventions at Cardiff but not moved on to suitable establishments.

- 4.30 We were told that some life-sentenced prisoners resisted a move from Cardiff because of family ties and a 'comfortable' existence which was not challenging and was not progressing their sentence.

## Housekeeping point

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- 4.31 Prisoners remanded on charges which are likely to result in an indeterminate sentence should be provided with appropriate support and information.

## Reintegration planning

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### Expected outcomes:

Prisoners' resettlement needs are met 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.

- 4.32 There was no coordinated assessment and planning to meet reintegration needs. Pre-discharge arrangements were good for those who could avail themselves of them. The accommodation support provided by resettlement officers was limited and its effectiveness was not monitored. The Housing Advice Service provided a range of support. There was no debt advice to meet a substantial need. Prisoners could open bank accounts and financial education was provided. Provision for visitors was generally good but there were difficulties in booking visits. The visits area was reasonable but the fixed seating was uncomfortable. Prison Advice and Care Trust (PACT) provided good family support both inside the prison and to the families of prisoners. The needs of veterans in custody were addressed by referral to external sources of help and the mental health in-reach team.
- 4.33 In our survey, fewer prisoners than at comparator prisons knew whom to go to in the prison for help on release with employment, accommodation, benefits, finances, education or drugs and alcohol.
- 4.34 The assessment of reintegration needs on arrival was partial, disparate and poorly coordinated. Orderlies in reception gathered information about accommodation needs, the chaplaincy undertook a partial immediate needs assessment, and the psychosocial team assessed the resettlement needs for those with substance misuse problems. Screening for the resettlement needs of prisoners in scope for offender management (prisoners serving 12 months or more and classified as posing a high risk to the public) was shared with probation officers in the area to which prisoners were to be released, but not the rest of the prison. There was no common needs assessment and reintegration plan for every prisoner to ensure that all their needs were identified and that they had equal access to all services provided. The absence of a prompt and comprehensive assessment and referral system risked missing the opportunity to provide support for the many short-stay prisoners at the establishment, which would reduce their risk of reoffending (see main recommendation HP59).
- 4.35 Services were better for those with longer sentences and whose release was predictable, with a pre-discharge board six weeks before release. Prisoners were offered a two-week pre-discharge course which included reintegration advice and support. It was difficult for some prisoners to access this facility if their stay was short, they were released directly from court or they were granted early release on HDC.

- 4.36 There were links with community groups which provided support after release for some prisoners. These included faith groups and support for black and minority ethnic prisoners and for those with substance misuse problems but, because of the lack of systematic assessment and planning, we were not assured that all eligible prisoners were offered this help.

## Accommodation

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- 4.37 In our survey, 21% of prisoners said that they had had housing problems on arrival at the prison. A designated officer dealt with housing needs referred from reception, on application from prisoners or identified at the pre-discharge board. However, he was able to offer only limited help in finding accommodation directly, and most prisoners were referred to local councils, which had a statutory duty to provide accommodation to homeless ex-prisoners. Although no prisoners had been discharged in the previous six months without at least a referral to their local council, we were not assured that this service met need entirely. There was no monitoring of the proportion of prisoners who presented for the service or of how long they stayed in the accommodation provided, and some prisoners told us that the quality of accommodation could be very poor.
- 4.38 A Housing Advice Centre worker attended the prison two and a half days a week. The range of services provided included dealing with rent and mortgage debt, retention of tenancies, and applications for supported housing and for rent guarantee bonds. .

## Recommendation

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- 4.39 The effectiveness of referrals for accommodation should be monitored and assessed to identify how the service can be improved.

## Education, training and employment

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- 4.40 Pre-release programmes helped prisoners to develop CVs and gain interview skills. However, these programmes were not evaluated well enough to enable the prison to identify what prisoners gained from them or how they could be improved. Resources were not always matched well enough to prisoners' learning needs. In a few cases, tutors did not know who was attending and prisoners arrived without the necessary basic skills to complete the exercises independently. Too few prisoners knew how to access the visiting Careers Wales adviser, and many who did so accessed the service too late in their sentence
- 4.41 The prison's good relationships with local employers had improved some prisoners' success in securing employment opportunities. However, there had been no monitoring of leavers' destinations to identify how well they sustained progression opportunities. There were links with a range of charitable organisations to mentor released prisoners. This boosted prisoners' confidence in coping with the challenges they faced on release, and many said that this support was helpful in finding accommodation and employment. Recently, a few prisoners released on temporary licence had gained work experience that had greatly improved their employment prospects, and many had secured employment as a result. However, too many prisoners were unaware of the opportunities available to them on release.

## Recommendation

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- 4.42 The prison should improve its evaluation of pre-release programmes to ensure that they fully meet the education, training and employment needs of released prisoners.

## Housekeeping point

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- 4.43 Prisoners should be told how to access the Careers Wales adviser.

## Health care

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- 4.44 Pre-discharge health arrangements were satisfactory and appropriate medications were provided in preparation for prisoners' release. The care programme approach was used for those with enduring mental health problems and there were links with community services. Palliative care and end-of-life programmes were available but rarely used.

## Drugs and alcohol

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- 4.45 Support for prisoners with drug and alcohol problems was very good. A dedicated 'continuity of care' post was provided by the psychosocial team each week, ensuring that community drug and alcohol agency appointments were arranged for prisoners on release. The transitional support scheme, co-ordinated by G4S (in partnership with the Prison and Wales Probation Trust), provided reintegration planning help for prisoners with a history of substance misuse, including alcohol. Mentors worked with newly released prisoners for up to three months to help with practical and motivational issues.

## Good practice

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- 4.46 *A dedicated 'continuity of care' post was provided by the psychosocial team each week, ensuring that community drug and alcohol agency appointments were arranged for prisoners on release.*

## Finance, benefit and debt

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- 4.47 In our survey, 27% of prisoners, more than at comparator establishments, said that they had had money worries on arrival at the prison. However, there was no service to help prisoners with debt problems (with the exception of housing-related debt; see section on accommodation), and the need was not identified on arrival.
- 4.48 Jobcentre Plus ensured that benefits claims were closed and arrears settled where appropriate. Prisoners due for discharge were facilitated in making a claim so that payments were not delayed.
- 4.49 Some generic financial advice was included in life skills and parenting courses provided by the education department. This subject was also addressed in the pre-release programme.

- 4.50 There were arrangements with the Halifax Bank for 10 applications a month to open current accounts before release. Prisoners could also open savings accounts with Cardiff Credit Union, which could also give them access to responsible borrowing when released.

## Recommendation

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- 4.51 Prisoners with financial problems should be given support to deal with outstanding debt.

## Children, families and contact with the outside world

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- 4.52 There were two visits sessions every weekday afternoon and prisoners could extend both sessions. Weekend visits were longer and available on Saturday mornings. Most prisoners' friends and families lived locally and transport connections were good; this was reflected in our survey, where 49% of respondents said that it was easy for friends and family to get to the prison, which was better than the 36% comparator. Visitors were complimentary about their treatment by staff.
- 4.53 There was a visitors waiting room adjoining the gate area, which was managed by PACT (see section on strategic management of resettlement). This room was comfortable, with adequate amenities, including toilets, baby changing facilities and refreshments. Visitors could obtain advice and support for family concerns and could be referred for help in their home area.
- 4.54 Visitors and prisoners complained that it was difficult to book a visit by telephone, and the booking line was not answered when we tried to call during the inspection. This was somewhat mitigated by the availability of online booking and the facility to book subsequent visits in the visitors waiting room.
- 4.55 Prisoners were required to wait in dark, austere waiting rooms, with insufficient seating and dirty toilets, and had to wear coloured bibs during visits, which was an unnecessary considering the visitor fingerprint identification system. Visits started promptly.
- 4.56 The visits hall was large and bright but the fixed seating was not comfortable or conducive to social contact. Supervision was not intrusive and visitors and prisoners were not prevented from having appropriate physical contact.
- 4.57 A wide range of refreshments was provided in the cafeteria, which was managed by PACT. A well-equipped play area was not always open because volunteer supervisors were not reliably available but we were told that this facility was due to come under the management of PACT, to provide a consistent service.
- 4.58 There were only two prisoners subject to closed visits at the time of the inspection but the seating in the closed visits booths was uncomfortable (comprising a small wooden plinth) and communication was hampered by vents having been blocked off to prevent the passing of contraband.
- 4.59 There were no evening visits to facilitate better family contact but PACT had proposed an evening homework club for prisoners' children. Extended family visits had been held regularly and were open to all prisoners with children. The PACT worker provided individual support for prisoners with family problems, and a parenting class was run by the education department.

## Recommendations

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- 4.60 Comfortable seating, which is not fixed to the floor, should be provided.
- 4.61 The closed visits booths should provide adequate comfortable seating and good communication between prisoners and visitors.

## Housekeeping points

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- 4.62 The telephone booking line should be answered promptly.
- 4.63 Prisoner waiting areas should be clean and well lit.
- 4.64 Prisoners should not be required to wear bibs during visits.

## Attitudes, thinking and behaviour

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- 4.65 The prison offered accredited programmes in thinking skills (TSP) and controlling anger and learning to manage it (CALM). At the time of the inspection, there were 25 outstanding referrals for the TSP course, which had last been run in July 2012. Two courses were planned but this was unlikely to meet the anticipated demand. There were just five outstanding referrals for the CALM course but delivery of the CALM programme had been hampered by delays and transfers of prisoners, making it difficult to form a cohesive group of prisoners to undertake the programme.
- 4.66 There was some uncertainty among offender supervisors about whether programmes would continue to be available at the prison, and this made it less likely that they would include courses in the targets for the prisoners they were assessing.

## Recommendation

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- 4.67 The prison should have a coherent and realistic plan to deliver programmes appropriate to its population which meets identified need.

## Additional resettlement services

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- 4.68 The legal services officer coordinated resettlement services for armed forces veterans in custody. Veterans were identified by the chaplaincy's initial needs assessment and there were usually between 20 and 30 in the prison at any one time.
- 4.69 The legal services officer liaised with the units of imprisoned serving personnel and with the British Legion and Soldiers, Sailors, Airmen and Families Association for assistance on release, which could include financial support, employment advice and accommodation.
- 4.70 A counselling service was provided by the mental health in-reach team for men with post-traumatic stress conditions.



# Section 5: Recommendations, housekeeping points and good practice

The following is a listing of recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report.

## Main recommendations

To the governor

- 
- 5.1 The purpose and use of the A1 landing should be reviewed. Prisoners whose behaviour necessitates segregation should be formally segregated and subject to formal safeguards. (HP55)
  - 5.2 Opportunities for association should be increased and all prisoners should have access to association every day and during the evenings. (HP56)
  - 5.3 The number of activity places should be increased and fully utilised. (HP57)
  - 5.4 The needs of all prisoners, including short-term and remanded prisoners, should be identified, actioned and actively managed on a custody/sentence plan. (HP58)
  - 5.5 Resettlement provision should be coordinated and publicised, so that the reintegration needs of all prisoners are assessed on arrival and a reintegration plan formulated and actively managed. (HP59)
  - 5.6 Life-sentenced prisoners should be located at an establishment which provides a challenging regime and opportunities to progress during their sentence. (HP60)

## Recommendations

To NOMS

- 
- 5.7 Prisoners should be held in court cells for the minimum period possible. (1.6)
  - 5.8 The criteria for moving prisoners on overcrowding drafts should take account of their sentence plan targets and family ties. (4.26)

## Recommendations

To the governor

### Early days in custody

- 
- 5.9 Night staff should speak to all new prisoners, provide support and check whether they have any specific needs. (1.12)

### Bullying and violence reduction

- 
- 5.10 Targets in tackling antisocial attitudes and behaviour books should be individualised, to address the specific attitudes and behaviour of prisoners. (1.19)

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

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- 5.11 All staff should undergo up-to-date training in suicide prevention. (1.26)
- 5.12 The quality of assessment, care in custody and teamwork (ACCT) documents, recording by case managers and the post-closure phase should be improved. (1.27)

### **Safeguarding (protection of adults at risk)**

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- 5.13 The prison should contact the Safeguarding Adults Strategic Management Board and Safeguarding Adults team to develop safeguarding policies for vulnerable adults. (1.30)

### **Security**

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- 5.14 The prison should ensure that there are effective security measures to reduce the supply of both illicit drugs and diverted medication, including the monitoring of drug testing data. (1.36)

### **Incentives and earned privileges**

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- 5.15 The application of the incentives and earned privileges (IEP) system should be reviewed and the generally poor prisoner perception investigated. (1.41)
- 5.16 Prisoners on the basic level of the IEP scheme should have individualised progression targets with sufficient opportunity to demonstrate improvements. (1.42)

### **Discipline**

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- 5.17 Use of force data should be collated and regularly analysed to identify trends. (1.50)
- 5.18 All planned interventions should be video-recorded and reviewed. (1.51)
- 5.19 Segregation unit cells should not routinely be monitored by closed-circuit television. (1.59)
- 5.20 Graffiti should be removed from segregation unit cells, and toilets deep cleaned and refurbished where required. (1.60)
- 5.21 Subject to risk assessment, prisoners should be allowed to exercise together, and activities for those on long-term Rule 45 procedures should be provided wherever possible. (1.61)

### **Substance misuse**

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- 5.22 Joint-working protocols and practice should be further developed between the clinical substance misuse service and the psychosocial team to improve clinical reviews, care planning and care coordination. (1.74)
- 5.23 The psychosocial team should have access to the SystmOne clinical record. (1.75)
- 5.24 The psychosocial team should not be diverted to discipline duties. (1.76)

## **Residential units**

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- 5.25 Cells designed for one should not be occupied by two prisoners. (2.8)
- 5.26 In-cell toilets should be adequately screened and communal showers should provide adequate privacy. (2.9)
- 5.27 The offensive display policy should be enforced and graffiti removed. (2.10)
- 5.28 Prisoners should have enough clean bedding and clothes for the week, including warm clothing for the winter. (2.11)

## **Staff-prisoner relationships**

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- 5.29 Regular, meaningful personal officer contact should be evidenced in case note entries. (2.18)

## **Equality and diversity**

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- 5.30 Governance and management oversight of diversity should be prioritised and the treatment of, and access to services by, minority groups should be monitored and action taken when required. (2.24)
- 5.31 The negative perceptions of black and minority ethnic prisoners should be further investigated and understood. (2.34)
- 5.32 Foreign national prisoners should be reliably provided with free monthly telephone calls. (2.35)

## **Health services**

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- 5.33 Wing treatment rooms should be refurbished to meet infection control guidelines. (2.55)
- 5.34 An up-to-date health needs assessment should be commissioned. (2.56)
- 5.35 Automated external defibrillators should be checked daily. (2.57)
- 5.36 A strategy for health promotion should be developed. (2.58)
- 5.37 All prisoners should have access to primary and secondary mental health services. (2.62)
- 5.38 The pharmacist should provide medicine use reviews. (2.69)
- 5.39 The in-possession policy should be updated and the risk assessments of each drug and patient documented, with reasons for the determination recorded. (2.70)
- 5.40 Full and complete records of the administration of medicines should be made. (2.71)
- 5.41 Prisoners should have timely access to dental care. (2.82)

## **Purchases**

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- 5.42 Prisoners should be able to receive a full shop order within 24 hours of arriving at the establishment. (2.93)

## **Time out of cell**

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- 5.43 Prisoners should be given the opportunity for at least one hour of exercise in the open air every day. (3.6)
- 5.44 Prisoners should have the opportunity for daily association, including in the evenings, during the week. (3.7)

## **Learning and skills and work activities**

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- 5.45 The use of data should be improved to manage poorly performing areas of learning. (3.13)
- 5.46 All prisoners' literacy and numeracy levels should be assessed on arrival at the prison or before starting education classes or work. (3.19)
- 5.47 The number of essential skills classes should be increased to meet the needs of the population. (3.20)
- 5.48 Clear strategies to promote the Welsh language and its value as a useful employment skill should be developed. (3.27)
- 5.49 The number of qualifications above level 1 should be increased to meet the needs of more able prisoners. (3.33)
- 5.50 Attendance and punctuality at all learning and skills activities should be improved. (3.34)

## **Strategic management of resettlement**

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- 5.51 Implementation of the reducing reoffending strategy should be effectively managed, with the demonstrable commitment of senior managers, clear planning, the monitoring of outcomes and the involvement of all providers. (4.6)

## **Offender management and planning**

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- 5.52 Cases posing a high or very high risk of harm to others should have effective management oversight. (4.20)
- 5.53 Prisoners' views should be considered in categorisation reviews. (4.25)

## **Reintegration planning**

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- 5.54 The effectiveness of referrals for accommodation should be monitored and assessed to identify how the service can be improved. (4.39)

- 5.55 The prison should improve its evaluation of pre-release programmes to ensure that they fully meet the education, training and employment needs of released prisoners. (4.42)
- 5.56 Prisoners with financial problems should be given support to deal with outstanding debt. (4.51)
- 5.57 Comfortable seating, which is not fixed to the floor, should be provided. (4.60)
- 5.58 The closed visits booths should provide adequate comfortable seating and good communication between prisoners and visitors. (4.61)
- 5.59 The prison should have a coherent and realistic plan to deliver programmes appropriate to its population which meets identified need. (4.67)

## Housekeeping points

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### Courts, escorts and transfers

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- 5.60 The HMP Cardiff information leaflets should be available and distributed in all local courts. (1.7)

### Security

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- 5.61 The mandatory drug testing suite holding cells should be refurbished, with improved ventilation, and the testing area urinal should be repaired and cleaned. (1.37)

### Discipline

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- 5.62 Use of force paperwork should be formally and regularly scrutinised by a senior member of staff. (1.52)
- 5.63 Daily segregation records should be regularly completed. (1.62)
- 5.64 Rule 45 notification paperwork should be issued on time. (1.63)
- 5.65 The segregation monitoring and review group meeting should be held regularly. (1.64)

### Substance misuse

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- 5.66 The establishment should repeat its substance use needs analysis annually to ensure that service provision matches the current need of the prisoner population. (1.77)
- 5.67 The drug and alcohol strategy document should be updated and contain detailed action plans and performance measures. (1.78)

### Residential units

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- 5.68 Prisoners should have access to a lockable cabinet. (2.12)
- 5.69 Poor-quality mattresses should be replaced. (2.13)

## **Complaints**

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- 5.70 Responses to complaints should fully address the issues raised. (2.44)

## **Health services**

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- 5.71 Health care information should be available in a range of languages. (2.63)
- 5.72 A review of attendance rates should be carried out and efforts made to reduce the time wasted by missed appointments. (2.64)
- 5.73 Prisoners should not be held for long periods in the holding rooms in the health care centre and should be provided with information for patients and material to occupy them while waiting for appointments. (2.65)
- 5.74 Old reference books should be discarded, and only the most recent copy should be kept, to ensure that any information used is up to date. (2.72)
- 5.75 Heat-sensitive medicines should be stored appropriately. (2.73)
- 5.76 A drug formulary should be developed by the health board and pharmacy staff, to be ratified by the medicines management committee. (2.74)
- 5.77 Medicines causing sedation should be administered at an appropriate time of day. (2.75)
- 5.78 Patient group directions should be produced, to allow the supply of more potent medicines and vaccines by the nursing staff where appropriate. (2.76)
- 5.79 The pharmacy should be informed if paracetamol is supplied to a prisoner without a prescription chart via the special sick policy. (2.77)
- 5.80 The special sick policy should be reviewed regularly by the medicines management committee to ensure that all appropriate medicines can be supplied. (2.78)
- 5.81 The health board should be represented on the medicines management committee. (2.79)
- 5.82 Efforts should be made to reduce the number of patients that fail to attend appointments. (2.83)

## **Purchases**

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- 5.83 Prisoners should not be required to pay an administration fee for catalogue orders. (2.94)

## **Time out of cell**

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- 5.84 Older prisoners and those with disabilities who are unlocked during the core day should be provided with regime activities. (3.8)

### **Learning and skills and work activities**

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- 5.85 The quality of individual learning plans should be monitored and maintained at a reasonable standard. (3.28)

### **Strategic management of resettlement**

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- 5.86 Future resettlement surveys should use offender assessment system (OASys) data to identify needs related to risk of harm and reducing reoffending. (4.7)

### **Offender management and planning**

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- 5.87 Records of contact with prisoners should be maintained on the P-Nomis electronic case note system. (4.16)
- 5.88 The interdepartmental risk management team should meet more frequently. (4.21)
- 5.89 Prisoners remanded on charges which are likely to result in an indeterminate sentence should be provided with appropriate support and information. (4.31)

### **Reintegration planning**

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- 5.90 Prisoners should be told how to access the Careers Wales adviser. (4.43)
- 5.91 The telephone booking line should be answered promptly. (4.62)
- 5.92 Prisoner waiting areas should be clean and well lit. (4.63)
- 5.93 Prisoners should not be required to wear bibs during visits. (4.64)

## **Examples of good practice**

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### **Substance misuse**

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- 5.94 A naloxone opiate antidote training and distribution programme had been delivered by the psychosocial team. (1.79)
- 5.95 Prisoners could obtain free access to local substance use and mental health helplines via the PIN telephone system. (1.80)

### **Reintegration planning**

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- 5.96 A dedicated 'continuity of care' post was provided by the psychosocial team each week, ensuring that community drug and alcohol agency appointments were arranged for prisoners on release. (4.46)



## Appendix I: Inspection team

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Nick Hardwick	Chief Inspector
Alison Perry	Team leader
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Sandra Fieldhouse	Inspector
Karen Dillon	Inspector
Joe Simmonds	Researcher
Amy Radford	Researcher

### **Specialist inspectors**

Paul Roberts	Substance misuse inspector
Michael Bowen	Health services inspector
Helen Boniface	Pharmacist
Bobby Jones	Offender management inspector
Keith Humphries	Offender management inspector
Lisa Gordon	Offender management inspector
Rachael Bubalo	Estyn inspector
Alun Connick	Estyn inspector
Gill Sims	Estyn inspector
Craig Weeks	PPO Researcher

## Appendix II: Prison population profile

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

Status	18-20-year-olds	21 and over	%
Sentenced	5	424	54.5
Recall	1	39	5.1
Convicted unsentenced	14	103	14.8
Remand	0	0	0.0
Civil prisoners	1	4	0.6
Detainees	20	177	25.0
<b>Total</b>	<b>41</b>	<b>747</b>	<b>100</b>

Sentence	18-20-year-olds	21 and over	%
Unsentenced	35	283	40.4
Less than 6 months	1	117	15.0
6 months to less than 12 months	2	61	8.0
12 months to less than 2 years	1	155	19.8
2 years to less than 4 years	2	12	1.8
4 years to less than 10 years	0	18	2.2
10 years and over (not life)	0	19	2.4
ISPP	0	6	0.8
Life	0	76	9.6
<b>Total</b>	<b>41</b>	<b>747</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age = 18		
Under 21 years	41	5.2
21 years to 29 years	309	39.2
30 years to 39 years	259	32.9
40 years to 49 years	131	16.6
50 years to 59 years	37	4.7
60 years to 69 years	8	1.0
70 plus years	3	0.4
Please state maximum age = 80		
<b>Total</b>	<b>788</b>	<b>100</b>

Nationality	18-20-year-olds	21 and over	%
British	34	683	91
Foreign nationals	7	51	7.4
Not stated	0	13	1.6
<b>Total</b>	<b>41</b>	<b>747</b>	<b>100</b>

Security category	18-20-year-olds	21 and over	%
Uncategorised unsentenced	0	1	0.1
Uncategorised sentenced	33	271	38.6
Category A	0	0	0.0
Category B	0	42	5.3
Category C	0	411	52.2

Category D	0	18	2.3
Other	8	4	1.5
<b>Total</b>	<b>41</b>	<b>747</b>	<b>100</b>

<b>Ethnicity</b>	<b>18-20-year-olds</b>	<b>21 and over</b>	<b>%</b>
White			
British	28	614	81.5
Irish	0	2	0.3
Other white	1	25	3.2
Mixed			
White and black Caribbean	2	14	2.0
White and black African	0	5	0.6
White and Asian	1	2	0.4
Other mixed	1	9	1.3
Asian or Asian British			
Indian	0	3	0.4
Pakistani	1	7	1.0
Bangladeshi	0	2	0.3
Other Asian	1	6	0.9
Black or black British			
Caribbean	0	20	2.5
African	4	8	1.5
Other black	0	2	0.3
Chinese or other ethnic group			
Chinese	0	4	0.5
Arab	0	7	0.9
Other ethnic group	1	1	0.3
Not stated	0	4	0.5
<b>Total</b>	<b>40</b>	<b>735</b>	<b>98.4</b>

<b>Religion</b>	<b>18-20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Baptist	0	1	0.1
Church of England	0	13	1.6
Roman Catholic	4	110	14.5
Other Christian denominations	8	238	31.2
Muslim	6	53	7.4
Sikh	0	0	0.0
Hindu	0	6	0.8
Buddhist	0	6	0.8
Jewish	0	0	0.0
Other	0	10	1.3
No religion	23	303	41.4
Not stated	0	7	0.9
<b>Total</b>	<b>41</b>	<b>747</b>	<b>100</b>

Other demographics	18-20-year-olds	21 and over	%
Gypsy/Romany/Traveller	1	12	1.6
<b>Total</b>	<b>1</b>	<b>12</b>	<b>1.6</b>

#### Sentenced prisoners only

Length of stay	18-20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	4	0.5	134	17.0
1 month to 3 months	1	0.1	129	16.4
3 months to 6 months	0	0.0	94	11.9
6 months to 1 year	1	0.1	67	8.6
1 year to 2 years	0	0.0	9	1.1
2 years to 4 years	0	0.0	17	2.2
4 years or more	0	0.0	14	1.8
<b>Total</b>	<b>6</b>	<b>0.7</b>	<b>464</b>	<b>59.0</b>

#### Sentenced prisoners only

	18-20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry	1	7	1.0
<b>Total</b>	<b>1</b>	<b>7</b>	<b>1.0</b>

#### Unsentenced prisoners only

Length of stay	18-20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	20	2.5	111	14.2
1 month to 3 months	12	1.5	102	12.9
3 months to 6 months	2	0.3	48	6.1
6 months to 1 year	1	0.1	19	2.4
1 year to 2 years	0	0	2	0.3
2 years to 4 years	0	0	1	0.1
4 years or more	0	0	0	0.0
<b>Total</b>	<b>35</b>	<b>4.4</b>	<b>283</b>	<b>36</b>

# Appendix III: Summary of prisoner questionnaires and interviews

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## Prisoner survey methodology

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

### Choosing the sample size

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

At the time of the survey on 18 February 2013, the prisoner population at HMP Cardiff was 808. The sample size was 199. Overall, this represented 25% of the prisoner population.

### Selecting the sample

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

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

Interviews were carried out with any respondents with literacy difficulties. In total, three respondents were interviewed.

## Methodology

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

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

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

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

## Response rates

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In total, 167 respondents completed and returned their questionnaires. This represented 21% of the prison population. The response rate was 84%. In addition to the eight respondents who refused to complete a questionnaire, 14 questionnaires were not returned and 10 were returned blank.

## Comparisons

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

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

The following analyses have been conducted:

- The current survey responses in 2013 against comparator figures for all prisoners surveyed in local prisons. This comparator is based on all responses from prisoner surveys carried out in 35 local prisons since April 2008.
- The current survey responses in 2013 against the responses of prisoners surveyed at HMP Cardiff in 2007.
- 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 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 the responses of prisoners on remand compared to those who are sentenced.

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

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

## Summary

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

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

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

# Survey summary

## Section 1: About you

### Q1.2 How old are you?

<i>Under 21</i> .....	12 (7%)
<i>21 - 29</i> .....	75 (45%)
<i>30 - 39</i> .....	48 (29%)
<i>40 - 49</i> .....	24 (14%)
<i>50 - 59</i> .....	6 (4%)
<i>60 - 69</i> .....	2 (1%)
<i>70 and over</i> .....	0 (0%)

### Q1.3 Are you sentenced?

<i>Yes</i> .....	108 (65%)
<i>Yes - on recall</i> .....	7 (4%)
<i>No - awaiting trial</i> .....	31 (19%)
<i>No - awaiting sentence</i> .....	17 (10%)
<i>No - awaiting deportation</i> .....	4 (2%)

### Q1.4 How long is your sentence?

<b><i>Not sentenced</i></b> .....	52 (32%)
<i>Less than 6 months</i> .....	33 (20%)
<i>6 months to less than 1 year</i> .....	23 (14%)
<i>1 year to less than 2 years</i> .....	29 (18%)
<i>2 years to less than 4 years</i> .....	8 (5%)
<i>4 years to less than 10 years</i> .....	6 (4%)
<i>10 years or more</i> .....	0 (0%)
<i>IPP (indeterminate sentence for public protection)</i> .....	2 (1%)
<i>Life</i> .....	10 (6%)

### Q1.5 Are you a foreign national? (i.e. do not have UK citizenship)

<i>Yes</i> .....	15 (9%)
<i>No</i> .....	148 (91%)

### Q1.6 Do you understand spoken English?

<i>Yes</i> .....	162 (98%)
<i>No</i> .....	3 (2%)

### Q1.7 Do you understand written English?

<i>Yes</i> .....	159 (96%)
<i>No</i> .....	6 (4%)

### Q1.8 What is your ethnic origin?

<i>White - British (English/ Welsh/Scottish/Northern Irish)....</i>	134 (82%)	<i>Asian or Asian British - Chinese</i> .....	1 (1%)
<i>White - Irish</i> .....	1 (1%)	<i>Asian or Asian British - other</i> .....	0 (0%)
<i>White - other</i> .....	11 (7%)	<i>Mixed race - white and black Caribbean</i> .....	3 (2%)
<i>Black or black British - Caribbean</i> .....	3 (2%)	<i>Mixed race - white and black African</i> .....	1 (1%)
<i>Black or black British - African</i> ....	1 (1%)	<i>Mixed race - white and Asian</i> .....	0 (0%)
<i>Black or black British - other</i> .....	1 (1%)	<i>Mixed race - other</i> .....	1 (1%)

<i>Asian or Asian British - Indian</i> .....	1 (1%)	<i>Arab</i> .....	3 (2%)
<i>Asian or Asian British - Pakistani</i> .....	1 (1%)	<i>Other ethnic group</i> .....	0 (0%)
<i>Asian or Asian British - Bangladeshi</i> .....	2 (1%)		

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

Yes.....	8 (5%)
No.....	155 (95%)

**Q1.10 What is your religion?**

<i>None</i> .....	85 (52%)	<i>Hindu</i> .....	1 (1%)
<i>Church of England</i> .....	19 (12%)	<i>Jewish</i> .....	1 (1%)
<i>Catholic</i> .....	26 (16%)	<i>Muslim</i> .....	15 (9%)
<i>Protestant</i> .....	0 (0%)	<i>Sikh</i> .....	0 (0%)
<i>Other Christian denomination</i> .....	9 (5%)	<i>Other</i> .....	2 (1%)
<i>Buddhist</i> .....	6 (4%)		

**Q1.11 How would you describe your sexual orientation?**

<i>Heterosexual/straight</i> .....	160 (98%)
<i>Homosexual/gay</i> .....	1 (1%)
<i>Bisexual</i> .....	2 (1%)

**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.....	35 (21%)
No.....	130 (79%)

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

Yes.....	10 (6%)
No.....	156 (94%)

**Q1.14 Is this your first time in prison?**

Yes.....	50 (30%)
No.....	115 (70%)

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

Yes.....	106 (64%)
No.....	60 (36%)

**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> .....	146 (87%)
<i>2 hours or longer</i> .....	11 (7%)
<i>Don't remember</i> .....	10 (6%)

**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> .....	146 (88%)
Yes.....	6 (4%)
No.....	9 (5%)
<i>Don't remember</i> .....	5 (3%)

<b>Q2.3</b>	<b>On your most recent journey here, were you offered a toilet break?</b>	
	<i>My journey was less than two hours</i> .....	146 (88%)
	Yes.....	1 (1%)
	No.....	15 (9%)
	Don't remember.....	3 (2%)
<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>	
	Yes.....	103 (62%)
	No.....	56 (34%)
	Don't remember.....	7 (4%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes.....	138 (83%)
	No.....	26 (16%)
	Don't remember.....	2 (1%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>	
	Very well.....	49 (29%)
	Well.....	79 (47%)
	Neither.....	28 (17%)
	Badly.....	4 (2%)
	Very badly.....	5 (3%)
	Don't remember.....	2 (1%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)</b>	
	Yes, someone told me.....	127 (76%)
	Yes, I received written information.....	6 (4%)
	No, I was not told anything.....	29 (17%)
	Don't remember.....	7 (4%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>	
	Yes.....	150 (91%)
	No.....	9 (5%)
	Don't remember.....	6 (4%)

### Section 3: Reception, first night and induction

<b>Q3.1</b>	<b>How long were you in reception?</b>	
	Less than 2 hours.....	98 (59%)
	2 hours or longer.....	57 (35%)
	Don't remember.....	10 (6%)
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>	
	Yes.....	136 (84%)
	No.....	21 (13%)
	Don't remember.....	5 (3%)
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>	
	Very well.....	49 (30%)
	Well.....	74 (45%)
	Neither.....	27 (16%)
	Badly.....	9 (5%)
	Very badly.....	3 (2%)

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 to you.)**

Loss of property .....	11 (7%)	Physical health .....	28 (17%)
Housing problems.....	34 (21%)	Mental health.....	39 (24%)
Contacting employers .....	7 (4%)	Needing protection from other prisoners.....	7 (4%)
Contacting family .....	29 (18%)	Getting phone numbers .....	43 (26%)
Childcare .....	4 (2%)	Other.....	7 (4%)
Money worries.....	44 (27%)	<b>Did not have any problems</b> .....	51 (31%)
Feeling depressed or suicidal.....	31 (19%)		

**Q3.5 Did you receive any help/support from staff in dealing with these problems when you first arrived here?**

Yes .....	44 (28%)
No.....	62 (39%)
<b>Did not have any problems</b> .....	51 (32%)

**Q3.6 When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)**

Tobacco.....	138 (84%)
A shower .....	64 (39%)
A free telephone call.....	127 (77%)
Something to eat.....	120 (73%)
PIN phone credit .....	137 (83%)
Toiletries/basic items.....	103 (62%)
<b>Did not receive anything</b> .....	1 (1%)

**Q3.7 When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)**

Chaplain .....	82 (51%)
Someone from health services.....	106 (66%)
A Listener/Samaritans.....	52 (32%)
Prison shop/canteen.....	34 (21%)
<b>Did not have access to any of these</b> .....	32 (20%)

**Q3.8 When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)**

What was going to happen to you.....	90 (56%)
What support was available for people feeling depressed or suicidal.....	80 (50%)
How to make routine requests (applications) .....	83 (52%)
Your entitlement to visits.....	82 (51%)
Health services .....	77 (48%)
Chaplaincy .....	77 (48%)
<b>Not offered any information</b> .....	37 (23%)

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

Yes .....	139 (84%)
No.....	20 (12%)
Don't remember .....	6 (4%)

**Q3.10 How soon after you arrived here did you go on an induction course?**

<b>Have not been on an induction course</b> .....	57 (35%)
Within the first week .....	85 (52%)

More than a week ..... 15 (9%)  
 Don't remember ..... 8 (5%)

**Q3.11 Did the induction course cover everything you needed to know about the prison?**  
**Have not been on an induction course**..... 57 (35%)  
 Yes ..... 64 (40%)  
 No ..... 28 (17%)  
 Don't remember ..... 12 (7%)

**Q3.12 How soon after you arrived here did you receive an education ('skills for life') assessment?**  
**Did not receive an assessment**..... 65 (41%)  
 Within the first week ..... 37 (23%)  
 More than a week ..... 43 (27%)  
 Don't remember ..... 15 (9%)

### 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/legal representative?	24 (15%)	39 (25%)	29 (19%)	23 (15%)	23 (15%)	18 (12%)
Attend legal visits?	30 (20%)	64 (43%)	17 (11%)	9 (6%)	9 (6%)	21 (14%)
Get bail information?	14 (10%)	21 (15%)	33 (23%)	16 (11%)	22 (15%)	38 (26%)

**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** ..... 23 (14%)  
 Yes ..... 71 (44%)  
 No ..... 68 (42%)

**Q4.3 Can you get legal books in the library?**  
 Yes ..... 44 (27%)  
 No ..... 18 (11%)  
 Don't know ..... 101 (62%)

**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?	65 (40%)	93 (58%)	3 (2%)
Are you normally able to have a shower every day?	113 (70%)	47 (29%)	2 (1%)
Do you normally receive clean sheets every week?	127 (79%)	30 (19%)	3 (2%)
Do you normally get cell cleaning materials every week?	82 (52%)	70 (44%)	6 (4%)
Is your cell call bell normally answered within five minutes?	63 (39%)	71 (44%)	28 (17%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	101 (64%)	54 (34%)	3 (2%)
If you need to, can you normally get your stored property?	36 (23%)	71 (45%)	51 (32%)

**Q4.5 What is the food like here?**  
 Very good ..... 5 (3%)

	Good.....	42 (26%)
	Neither.....	40 (25%)
	Bad.....	42 (26%)
	Very bad.....	33 (20%)
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>	
	<i>Have not bought anything yet/don't know</i> .....	20 (12%)
	Yes.....	73 (45%)
	No.....	69 (43%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time if you want to?</b>	
	Yes.....	85 (52%)
	No.....	18 (11%)
	<i>Don't know</i> .....	60 (37%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>	
	Yes.....	69 (42%)
	No.....	14 (9%)
	<i>Don't know/N/A</i> .....	80 (49%)
<b>Q4.9</b>	<b>Are you able to speak to a chaplain of your faith in private if you want to?</b>	
	Yes.....	77 (48%)
	No.....	12 (7%)
	<i>Don't know/N/A</i> .....	73 (45%)
<b>Q4.10</b>	<b>How easy or difficult is it for you to attend religious services?</b>	
	<i>I don't want to attend</i> .....	50 (31%)
	Very easy.....	23 (14%)
	Easy.....	37 (23%)
	Neither.....	12 (7%)
	Difficult.....	7 (4%)
	Very difficult.....	3 (2%)
	<i>Don't know</i> .....	29 (18%)

## Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>			
	Yes.....	131 (80%)		
	No.....	22 (13%)		
	<i>Don't know</i> .....	10 (6%)		
<b>Q5.2</b>	<b>Please answer the following questions about applications:</b>			
	<i>(If you have not made an application please tick the 'not made one' option.)</i>			
		<b>Not made one</b>	Yes	No
	Are <i>applications</i> dealt with fairly?	25 (16%)	82 (52%)	50 (32%)
	Are <i>applications</i> dealt with quickly (within seven days)?	25 (17%)	72 (49%)	50 (34%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>			
	Yes.....	61 (39%)		
	No.....	29 (18%)		
	<i>Don't know</i> .....	67 (43%)		

<b>Q5.4</b>	<b>Please answer the following questions about complaints:</b> (If you have not made a complaint please tick the 'not made one' option.)			
		<b>Not made one</b>	<b>Yes</b>	<b>No</b>
	Are complaints dealt with fairly?	103 (65%)	18 (11%)	38 (24%)
	Are complaints dealt with quickly (within seven days)?	103 (65%)	20 (13%)	35 (22%)
<b>Q5.5</b>	<b>Have you ever been prevented from making a complaint when you wanted to?</b>			
	Yes.....		21 (14%)	
	No.....		124 (86%)	
<b>Q5.6</b>	<b>How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?</b>			
	<i>Don't know who they are</i> .....		73 (46%)	
	Very easy.....		14 (9%)	
	Easy.....		20 (13%)	
	Neither.....		26 (17%)	
	Difficult.....		18 (11%)	
	Very difficult.....		6 (4%)	

## Section 6: Incentive and earned privileges scheme

<b>Q6.1</b>	<b>Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)</b>			
	<i>Don't know what the IEP scheme is</i> .....		34 (21%)	
	Yes.....		66 (41%)	
	No.....		32 (20%)	
	Don't know.....		28 (18%)	
<b>Q6.2</b>	<b>Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)</b>			
	<i>Don't know what the IEP scheme is</i> .....		34 (23%)	
	Yes.....		68 (45%)	
	No.....		31 (21%)	
	Don't know.....		17 (11%)	
<b>Q6.3</b>	<b>In the last six months have any members of staff physically restrained you (C&amp;R)?</b>			
	Yes.....		7 (4%)	
	No.....		151 (96%)	
<b>Q6.4</b>	<b>If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?</b>			
	<i>I have not been to segregation in the last 6 months</i> .....		137 (85%)	
	Very well.....		4 (2%)	
	Well.....		7 (4%)	
	Neither.....		8 (5%)	
	Badly.....		3 (2%)	
	Very badly.....		3 (2%)	

## Section 7: Relationships with staff

<b>Q7.1</b>	<b>Do most staff treat you with respect?</b>		
	Yes.....		123 (76%)
	No.....		39 (24%)

<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	Yes .....	119 (75%)
	No.....	39 (25%)
<b>Q7.3</b>	<b>Has a member of staff checked on you personally in the last week to see how you are getting on?</b>	
	Yes .....	43 (27%)
	No.....	117 (73%)
<b>Q7.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<b>Do not go on association</b> .....	12 (7%)
	Never .....	33 (20%)
	Rarely .....	49 (30%)
	Some of the time.....	38 (23%)
	Most of the time.....	25 (15%)
	All of the time.....	7 (4%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<b>I have not met him/her</b> .....	87 (54%)
	In the first week.....	30 (19%)
	More than a week.....	16 (10%)
	Don't remember .....	28 (17%)
<b>Q7.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<b>Do not have a personal officer/I have not met him/her</b> .....	87 (56%)
	Very helpful.....	24 (15%)
	Helpful.....	20 (13%)
	Neither.....	13 (8%)
	Not very helpful.....	6 (4%)
	Not at all helpful .....	5 (3%)

## Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	43 (26%)
	No.....	121 (74%)
<b>Q8.2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	16 (10%)
	No.....	146 (90%)
<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>	
	<b>Never felt unsafe</b> .....	121 (75%)
	Everywhere.....	12 (7%)
	Segregation unit.....	5 (3%)
	Association areas .....	13 (8%)
	Reception area.....	5 (3%)
	At the gym.....	10 (6%)
	In an exercise yard .....	11 (7%)
	At work.....	4 (2%)
	During movement .....	6 (4%)
	At education.....	5 (3%)
	At mealtimes.....	9 (6%)
	At health services .....	4 (2%)
	Visits area .....	10 (6%)
	In wing showers .....	13 (8%)
	In gym showers.....	7 (4%)
	In corridors/stairwells .....	5 (3%)
	On your landing/wing .....	10 (6%)
	In your cell.....	12 (7%)
	At religious services .....	1 (1%)

<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>	
	Yes .....	25 (15%)
	No.....	138 (85%)
<b>Q8.5</b>	<b>If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends).....</i>	8 (5%)
	<i>Physical abuse (being hit, kicked or assaulted).....</i>	3 (2%)
	<i>Sexual abuse.....</i>	1 (1%)
	<i>Feeling threatened or intimidated.....</i>	14 (9%)
	<i>Having your canteen/property taken.....</i>	6 (4%)
	<i>Medication.....</i>	4 (2%)
	<i>Debt.....</i>	4 (2%)
	<i>Drugs .....</i>	2 (1%)
	<i>Your race or ethnic origin .....</i>	3 (2%)
	<i>Your religion/religious beliefs.....</i>	3 (2%)
	<i>Your nationality .....</i>	2 (1%)
	<i>You are from a different part of the country than others.....</i>	4 (2%)
	<i>You are from a traveller community .....</i>	2 (1%)
	<i>Your sexual orientation .....</i>	1 (1%)
	<i>Your age.....</i>	1 (1%)
	<i>You have a disability .....</i>	3 (2%)
	<i>You were new here.....</i>	3 (2%)
	<i>Your offence/crime .....</i>	0 (0%)
	<i>Gang related issues .....</i>	2 (1%)
<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>	
	Yes .....	44 (27%)
	No.....	120 (73%)
<b>Q8.7</b>	<b>If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends).....</i>	16 (10%)
	<i>Physical abuse (being hit, kicked or assaulted).....</i>	4 (2%)
	<i>Sexual abuse.....</i>	0 (0%)
	<i>Feeling threatened or intimidated.....</i>	11 (7%)
	<i>Medication.....</i>	5 (3%)
	<i>Debt.....</i>	1 (1%)
	<i>Drugs .....</i>	2 (1%)
	<i>Your race or ethnic origin .....</i>	6 (4%)
	<i>Your religion/religious beliefs.....</i>	6 (4%)
	<i>Your nationality .....</i>	5 (3%)
	<i>You are from a different part of the country than others.....</i>	4 (2%)
	<i>You are from a traveller community .....</i>	3 (2%)
	<i>Your sexual orientation .....</i>	1 (1%)
	<i>Your age.....</i>	2 (1%)
	<i>You have a disability .....</i>	3 (2%)
	<i>You were new here.....</i>	5 (3%)
	<i>Your offence/crime .....</i>	3 (2%)
	<i>Gang related issues .....</i>	2 (1%)
<b>Q8.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	<b>Not been victimised .....</b>	117 (73%)
	Yes .....	10 (6%)
	No.....	34 (21%)

## Section 9: Health services

<b>Q9.1</b>	<b>How easy or difficult is it to see the following people?</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	30 (19%)	9 (6%)	24 (15%)	15 (9%)	46 (29%)	37 (23%)
	The nurse	24 (16%)	27 (18%)	52 (34%)	16 (10%)	23 (15%)	12 (8%)
	The dentist	38 (25%)	4 (3%)	10 (6%)	8 (5%)	25 (16%)	70 (45%)
<b>Q9.2</b>	<b>What do you think of the quality of the health service from the following people?:</b>						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	48 (30%)	15 (9%)	32 (20%)	15 (9%)	25 (16%)	24 (15%)
	The nurse	35 (22%)	23 (15%)	46 (29%)	18 (11%)	16 (10%)	20 (13%)
	The dentist	75 (49%)	3 (2%)	17 (11%)	15 (10%)	15 (10%)	29 (19%)
<b>Q9.3</b>	<b>What do you think of the overall quality of the health services here?</b>						
	<i>Not been</i> .....	30 (20%)					
	<i>Very good</i> .....	9 (6%)					
	<i>Good</i> .....	28 (18%)					
	<i>Neither</i> .....	21 (14%)					
	<i>Bad</i> .....	28 (18%)					
	<i>Very bad</i> .....	36 (24%)					
<b>Q9.4</b>	<b>Are you currently taking medication?</b>						
	Yes.....	70 (43%)					
	No.....	91 (57%)					
<b>Q9.5</b>	<b>If you are taking medication, are you allowed to keep some/all of it in your own cell?</b>						
	<i>Not taking medication</i> .....	91 (57%)					
	<i>Yes, all my meds</i> .....	17 (11%)					
	<i>Yes, some of my meds</i> .....	17 (11%)					
	<i>No</i> .....	34 (21%)					
<b>Q9.6</b>	<b>Do you have any emotional or mental health problems?</b>						
	Yes.....	58 (37%)					
	No.....	100 (63%)					
<b>Q9.7</b>	<b>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)</b>						
	<i>Do not have any emotional or mental health problems</i> .....	100 (65%)					
	Yes.....	24 (15%)					
	No.....	31 (20%)					

## Section 10: Drugs and alcohol

<b>Q10.1</b>	<b>Did you have a problem with drugs when you came into this prison?</b>		
	Yes.....	71 (44%)	
	No.....	91 (56%)	
<b>Q10.2</b>	<b>Did you have a problem with alcohol when you came into this prison?</b>		
	Yes.....	57 (35%)	
	No.....	105 (65%)	

<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	<i>Very easy</i> .....	31 (19%)
	<i>Easy</i> .....	23 (14%)
	<i>Neither</i> .....	15 (9%)
	<i>Difficult</i> .....	7 (4%)
	<i>Very difficult</i> .....	7 (4%)
	<i>Don't know</i> .....	78 (48%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	<i>Very easy</i> .....	9 (6%)
	<i>Easy</i> .....	12 (7%)
	<i>Neither</i> .....	15 (9%)
	<i>Difficult</i> .....	15 (9%)
	<i>Very difficult</i> .....	19 (12%)
	<i>Don't know</i> .....	92 (57%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	<i>Yes</i> .....	12 (8%)
	<i>No</i> .....	148 (93%)
<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	<i>Yes</i> .....	15 (10%)
	<i>No</i> .....	141 (90%)
<b>Q10.7</b>	<b>Have you received any support or help (e.g. substance misuse teams) for your drug problem, while in this prison?</b>	
	<i>Did not/do not have a drug problem</i> .....	84 (54%)
	<i>Yes</i> .....	34 (22%)
	<i>No</i> .....	37 (24%)
<b>Q10.8</b>	<b>Have you received any support or help (e.g. substance misuse teams) for your alcohol problem, while in this prison?</b>	
	<i>Did not/do not have an alcohol problem</i> .....	105 (67%)
	<i>Yes</i> .....	17 (11%)
	<i>No</i> .....	35 (22%)
<b>Q10.9</b>	<b>Was the support or help you received, while in this prison, helpful?</b>	
	<i>Did not have a problem/ did not receive help</i> .....	115 (74%)
	<i>Yes</i> .....	27 (17%)
	<i>No</i> .....	14 (9%)

## Section 11: Activities

<b>Q11.1</b>	<b>How easy or difficult is it to get into the following activities, in this prison?</b>					
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>
						<i>Very difficult</i>
	Prison job	27 (17%)	14 (9%)	40 (25%)	15 (9%)	38 (24%)
	Vocational or skills training	49 (32%)	7 (5%)	30 (19%)	16 (10%)	27 (18%)
	Education (including basic skills)	38 (24%)	15 (9%)	44 (28%)	17 (11%)	26 (16%)
						20 (13%)

Offending behaviour programmes	79 (51%)	6 (4%)	12 (8%)	10 (6%)	21 (14%)	27 (17%)
--------------------------------	-------------	-----------	---------	---------	-------------	-------------

- Q11.2 Are you currently involved in the following? (Please tick all that apply to you.)**
- |   |          |
|---|----------|
| <b>Not involved in any of these</b> ..... | 72 (46%) |
| Prison job .....                          | 60 (38%) |
| Vocational or skills training.....        | 11 (7%)  |
| Education (including basic skills).....   | 22 (14%) |
| Offending behaviour programmes.....       | 1 (1%)   |
- 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?**
- |                                    | <b>Not been involved</b> | Yes      | No       | Don't know |
|------------------------------------|--------------------------|----------|----------|------------|
| Prison job                         | 63 (43%)                 | 40 (27%) | 30 (20%) | 14 (10%)   |
| Vocational or skills training      | 72 (61%)                 | 22 (19%) | 15 (13%) | 9 (8%)     |
| Education (including basic skills) | 65 (54%)                 | 25 (21%) | 18 (15%) | 12 (10%)   |
| Offending behaviour programmes     | 78 (66%)                 | 16 (13%) | 14 (12%) | 11 (9%)    |
- Q11.4 How often do you usually go to the library?**
- |                               |          |
|-------------------------------|----------|
| <b>Don't want to go</b> ..... | 23 (15%) |
| Never.....                    | 44 (28%) |
| Less than once a week.....    | 30 (19%) |
| About once a week.....        | 55 (35%) |
| More than once a week.....    | 6 (4%)   |
- Q11.5 Does the library have a wide enough range of materials to meet your needs?**
- |                           |          |
|---------------------------|----------|
| <b>Don't use it</b> ..... | 53 (34%) |
| Yes.....                  | 49 (32%) |
| No.....                   | 53 (34%) |
- Q11.6 How many times do you usually go to the gym each week?**
- |                               |          |
|-------------------------------|----------|
| <b>Don't want to go</b> ..... | 32 (21%) |
| 0.....                        | 35 (23%) |
| 1 to 2.....                   | 44 (28%) |
| 3 to 5.....                   | 41 (26%) |
| More than 5.....              | 3 (2%)   |
- Q11.7 How many times do you usually go outside for exercise each week?**
- |                               |          |
|-------------------------------|----------|
| <b>Don't want to go</b> ..... | 22 (14%) |
| 0.....                        | 19 (12%) |
| 1 to 2.....                   | 39 (24%) |
| 3 to 5.....                   | 31 (19%) |
| More than 5.....              | 49 (31%) |
- Q11.8 How many times do you usually have association each week?**
- |                               |          |
|-------------------------------|----------|
| <b>Don't want to go</b> ..... | 2 (1%)   |
| 0.....                        | 8 (5%)   |
| 1 to 2.....                   | 27 (17%) |
| 3 to 5.....                   | 77 (49%) |
| More than 5.....              | 44 (28%) |
- Q11.9 How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc)**
- |                                |          |
|--------------------------------|----------|
| <b>Less than 2 hours</b> ..... | 62 (39%) |
|--------------------------------|----------|

2 to less than 4 hours.....	18 (11%)
4 to less than 6 hours.....	33 (21%)
6 to less than 8 hours.....	11 (7%)
8 to less than 10 hours.....	12 (8%)
10 hours or more.....	16 (10%)
Don't know .....	8 (5%)

## Section 12: Contact with family and friends

<b>Q12.1</b>	<b>Have staff supported you and helped you to maintain contact with your family/friends while in this prison?</b>	
	Yes .....	62 (39%)
	No.....	95 (61%)
<b>Q12.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes .....	70 (43%)
	No.....	91 (57%)
<b>Q12.3</b>	<b>Have you had any problems getting access to the telephones?</b>	
	Yes .....	52 (33%)
	No.....	108 (68%)
<b>Q12.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	<i>I don't get visits</i> .....	24 (15%)
	Very easy .....	29 (18%)
	Easy.....	50 (31%)
	Neither.....	19 (12%)
	Difficult.....	20 (12%)
	Very difficult.....	15 (9%)
	Don't know .....	5 (3%)

## Section 13: Preparation for release

<b>Q13.1</b>	<b>Do you have a named offender manager (home probation officer) in the probation service?</b>	
	<b>Not sentenced</b> .....	52 (32%)
	Yes .....	54 (33%)
	No.....	58 (35%)
<b>Q13.2</b>	<b>What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)</b>	
	<b>Not sentenced/N/A</b> .....	110 (67%)
	No contact.....	30 (18%)
	Letter.....	15 (9%)
	Phone .....	1 (1%)
	Visit .....	12 (7%)
<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes .....	23 (15%)
	No.....	128 (85%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	<b>Not sentenced</b> .....	52 (32%)
	Yes.....	32 (20%)

No..... 79 (48%)

**Q13.5 How involved were you in the development of your sentence plan?**  
*Do not have a sentence plan/not sentenced*..... 131 (80%)  
 Very involved..... 3 (2%)  
 Involved..... 17 (10%)  
 Neither..... 4 (2%)  
 Not very involved..... 2 (1%)  
 Not at all involved..... 6 (4%)

**Q13.6 Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)**  
*Do not have a sentence plan/not sentenced*..... 131 (82%)  
 Nobody..... 15 (9%)  
 Offender supervisor..... 8 (5%)  
 Offender manager..... 3 (2%)  
 Named/ personal officer..... 4 (3%)  
 Staff from other departments..... 4 (3%)

**Q13.7 Can you achieve any of your sentence plan targets in this prison?**  
*Do not have a sentence plan/not sentenced*..... 131 (82%)  
 Yes..... 18 (11%)  
 No..... 5 (3%)  
 Don't know..... 6 (4%)

**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*..... 131 (82%)  
 Yes..... 7 (4%)  
 No..... 12 (8%)  
 Don't know..... 9 (6%)

**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*..... 131 (83%)  
 Yes..... 7 (4%)  
 No..... 11 (7%)  
 Don't know..... 8 (5%)

**Q13.10 Do you have a needs based custody plan?**  
 Yes..... 10 (7%)  
 No..... 67 (44%)  
 Don't know..... 75 (49%)

**Q13.11 Do you feel that any member of staff has helped you to prepare for your release?**  
 Yes..... 25 (16%)  
 No..... 128 (84%)

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

	<i>Do not need help</i>	Yes	No
Employment	27 (18%)	32 (22%)	88 (60%)
Accommodation	26 (18%)	37 (25%)	83 (57%)
Benefits	26 (17%)	42 (28%)	82 (55%)
Finances	32 (22%)	23 (16%)	90 (62%)
Education	31 (22%)	28 (19%)	85 (59%)

Drugs and alcohol 33 (23%) 40 (28%) 72 (50%)

**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*** ..... 52 (32%)  
Yes ..... 47 (29%)  
No ..... 62 (39%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP Cardiff 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 Cardiff 2013	Adult closed prisons comparator	HMP Cardiff 2013	HMP Cardiff 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>167</b>	<b>5795</b>	<b>167</b>	<b>121</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	7%	6%	7%	1%
1.3	Are you sentenced?	69%	68%	69%	78%
1.3	Are you on recall?	4%	9%	4%	13%
1.4	Is your sentence less than 12 months?	34%	21%	34%	21%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	3%	1%	8%
1.5	Are you a foreign national?	9%	13%	9%	9%
1.6	Do you understand spoken English?	98%	98%	98%	
1.7	Do you understand written English?	96%	97%	96%	
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	11%	25%	11%	19%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	5%	5%	5%	
1.1	Are you Muslim?	9%	12%	9%	13%
1.11	Are you homosexual/gay or bisexual?	2%	3%	2%	1%
1.12	Do you consider yourself to have a disability?	21%	21%	21%	15%
1.13	Are you a veteran (ex-armed services)?	6%	6%	6%	
1.14	Is this your first time in prison?	30%	30%	30%	20%
1.15	Do you have any children under the age of 18?	64%	53%	64%	52%
<b>SECTION 2: Transfers and escorts</b>					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	7%	18%	7%	19%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	30%	39%	30%	
2.3	Were you offered a toilet break?	5%	9%	5%	
2.4	Was the van clean?	62%	64%	62%	
2.5	Did you feel safe?	83%	77%	83%	
2.6	Were you treated well/very well by the escort staff?	77%	67%	77%	68%
2.7	Before you arrived here were you told that you were coming here?	76%	67%	76%	
2.7	Before you arrived here did you receive any written information about coming here?	4%	5%	4%	
2.8	When you first arrived here did your property arrive at the same time as you?	91%	81%	91%	84%

## Main comparator and comparator to last time

### Key to tables

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<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	59%	48%	59%	
3.2	When you were searched in reception, was this carried out in a respectful way?	84%	76%	84%	65%
3.3	Were you treated well/very well in reception?	75%	60%	75%	59%
	When you first arrived:				
3.4	Did you have any problems?	69%	74%	69%	72%
3.4	Did you have any problems with loss of property?	7%	14%	7%	10%
3.4	Did you have any housing problems?	21%	24%	21%	13%
3.4	Did you have any problems contacting employers?	4%	6%	4%	6%
3.4	Did you have any problems contacting family?	18%	32%	18%	21%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	6%	2%	7%
3.4	Did you have any money worries?	27%	22%	27%	19%
3.4	Did you have any problems with feeling depressed or suicidal?	19%	21%	19%	16%
3.4	Did you have any physical health problems?	17%	17%	17%	
3.4	Did you have any mental health problems?	24%	19%	24%	
3.4	Did you have any problems with needing protection from other prisoners?	4%	8%	4%	2%
3.4	Did you have problems accessing phone numbers?	26%	30%	26%	
	For those with problems:				
3.5	Did you receive any help/support from staff in dealing with these problems?	42%	40%	42%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	84%	87%	84%	75%
3.6	A shower?	39%	33%	39%	43%
3.6	A free telephone call?	77%	57%	77%	50%
3.6	Something to eat?	73%	78%	73%	76%
3.6	PIN phone credit?	83%	57%	83%	
3.6	Toiletries/ basic items?	63%	60%	63%	

## Main comparator and comparator to last time

### Key to tables

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Percentages which are not highlighted show there is no significant difference					
<b>SECTION 3: Reception, first night and induction continued</b>					
	When you first arrived here did you have access to the following people:				
	3.7 The chaplain or a religious leader?	51%	50%	51%	
	3.7 Someone from health services?	66%	73%	66%	
	3.7 A Listener/Samaritans?	32%	40%	32%	
	3.7 Prison shop/canteen?	21%	16%	21%	30%
	When you first arrived here were you offered information about any of the following:				
	3.8 What was going to happen to you?	56%	48%	56%	51%
	3.8 Support was available for people feeling depressed or suicidal?	50%	48%	50%	46%
	3.8 How to make routine requests?	52%	41%	52%	31%
	3.8 Your entitlement to visits?	51%	45%	51%	44%
	3.8 Health services?	48%	52%	48%	
	3.8 The chaplaincy?	48%	47%	48%	
	3.9 Did you feel safe on your first night here?	84%	74%	84%	81%
	3.10 Have you been on an induction course?	66%	79%	66%	66%
	For those who have been on an induction course:				
	3.11 Did the course cover everything you needed to know about the prison?	62%	58%	62%	59%
	3.12 Did you receive an education (skills for life) assessment?	59%	74%	59%	
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
	4.1 Communicate with your solicitor or legal representative?	40%	41%	40%	56%
	4.1 Attend legal visits?	63%	57%	63%	80%
	4.1 Get bail information?	24%	22%	24%	42%
	4.2 Have staff ever opened letters from your solicitor or legal representative when you were not with them?	44%	39%	44%	47%
	4.3 Can you get legal books in the library?	27%	37%	27%	
	For the wing/unit you are currently on:				
	4.4 Are you normally offered enough clean, suitable clothes for the week?	40%	54%	40%	48%
	4.4 Are you normally able to have a shower every day?	70%	81%	70%	76%
	4.4 Do you normally receive clean sheets every week?	79%	80%	79%	91%
	4.4 Do you normally get cell cleaning materials every week?	52%	62%	52%	81%
	4.4 Is your cell call bell normally answered within five minutes?	39%	36%	39%	55%
	4.4 Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	64%	64%	64%	73%
	4.4 Can you normally get your stored property if you need to?	23%	26%	23%	39%
	4.5 Is the food in this prison good/very good?	29%	24%	29%	23%
	4.6 Does the shop/canteen sell a wide enough range of goods to meet your needs?	45%	47%	45%	38%
	4.7 Are you able to speak to a Listener at any time if you want to?	52%	58%	52%	61%
	4.8 Are your religious beliefs are respected?	42%	54%	42%	55%
	4.9 Are you able to speak to a religious leader of your faith in private if you want to?	48%	55%	48%	59%
	4.10 Is it easy/very easy to attend religious services?	37%	47%	37%	

## Main comparator and comparator to last time

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<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	80%	81%	80%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	62%	58%	62%	69%
5.2	Do you feel applications are dealt with quickly (within seven days)?	59%	48%	59%	66%
5.3	Is it easy to make a complaint?	39%	55%	39%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	32%	33%	32%	38%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	37%	36%	37%	42%
5.5	Have you ever been prevented from making a complaint when you wanted to?	15%	16%	15%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	22%	21%	22%	44%
<b>SECTION 6: Incentives and earned privileges scheme</b>					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	41%	47%	41%	55%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	44%	45%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	4%	7%	4%	4%
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?	44%	38%	44%	
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	76%	73%	76%	77%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	75%	73%	75%	73%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	27%	32%	27%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	20%	18%	20%	19%
7.5	Do you have a personal officer?	46%	44%	46%	53%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	65%	65%	65%	68%

## Main comparator and comparator to last time

### Key to tables

		HMP Cardiff 2013	Adult closed prisons comparator
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	26%	40%
8.2	Do you feel unsafe now?	10%	17%
8.4	Have you been victimised by other prisoners here?	15%	22%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	5%	10%
8.5	Hit, kicked or assaulted you?	2%	7%
8.5	Sexually abused you?	1%	1%
8.5	Threatened or intimidated you?	9%	13%
8.5	Taken your canteen/property?	4%	5%
8.5	Victimised you because of medication?	2%	5%
8.5	Victimised you because of debt?	2%	3%
8.5	Victimised you because of drugs?	1%	4%
8.5	Victimised you because of your race or ethnic origin?	2%	3%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%
8.5	Victimised you because of your nationality?	1%	2%
8.5	Victimised you because you were from a different part of the country?	2%	4%
8.5	Victimised you because you are from a Traveller community?	1%	1%
8.5	Victimised you because of your sexual orientation?	1%	1%
8.5	Victimised you because of your age?	1%	2%
8.5	Victimised you because you have a disability?	2%	3%
8.5	Victimised you because you were new here?	2%	5%
8.5	Victimised you because of your offence/crime?	0%	5%
8.5	Victimised you because of gang related issues?	1%	4%

HMP Cardiff 2013	HMP Cardiff 2007
26%	33%
10%	9%
15%	14%
5%	8%
2%	4%
1%	1%
9%	
4%	1%
2%	
1%	4%
2%	3%
2%	2%
1%	
2%	3%
1%	
1%	0%
1%	
2%	2%
2%	3%
0%	
1%	

## Main comparator and comparator to last time

### Key to tables

		HMP Cardiff 2013	Adult closed prisons comparator	HMP Cardiff 2013	HMP Cardiff 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	27%	27%	27%	18%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	10%	11%	10%	7%
8.7	Hit, kicked or assaulted you?	2%	5%	2%	1%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	7%	12%	7%	
8.7	Victimised you because of medication?	3%	5%	3%	
8.7	Victimised you because of debt?	1%	2%	1%	
8.7	Victimised you because of drugs?	1%	4%	1%	3%
8.7	Victimised you because of your race or ethnic origin?	4%	5%	4%	4%
8.7	Victimised you because of your religion/religious beliefs?	4%	3%	4%	3%
8.7	Victimised you because of your nationality?	3%	3%	3%	
8.7	Victimised you because you were from a different part of the country?	2%	3%	2%	2%
8.7	Victimised you because you are from a Traveller community?	2%	2%	2%	
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	0%
8.7	Victimised you because of your age?	1%	2%	1%	
8.7	Victimised you because you have a disability?	2%	2%	2%	2%
8.7	Victimised you because you were new here?	3%	6%	3%	4%
8.7	Victimised you because of your offence/crime?	2%	5%	2%	
8.7	Victimised you because of gang related issues?	1%	2%	1%	
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	23%	33%	23%	37%

## Main comparator and comparator to last time

### Key to tables

		HMP Cardiff 2013	Adult closed prisons comparator	HMP Cardiff 2013	HMP Cardiff 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	21%	26%	21%	
9.1	Is it easy/very easy to see the nurse?	51%	51%	51%	
9.1	Is it easy/very easy to see the dentist?	9%	10%	9%	
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	42%	43%	42%	48%
9.2	The nurse?	56%	56%	56%	65%
9.2	The dentist?	25%	32%	25%	29%
9.3	The overall quality of health services?	30%	39%	30%	39%
9.4	Are you currently taking medication?	44%	51%	44%	41%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	50%	64%	50%	
9.6	Do you have any emotional well being or mental health problems?	37%	34%	37%	
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	44%	40%	44%	
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	44%	36%	44%	29%
10.2	Did you have a problem with alcohol when you came into this prison?	35%	27%	35%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	34%	29%	34%	25%
10.4	Is it easy/very easy to get alcohol in this prison?	13%	13%	13%	
10.5	Have you developed a problem with drugs since you have been in this prison?	8%	8%	8%	
10.6	Have you developed a problem with diverted medication since you have been in this prison?	10%	8%	10%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	48%	65%	48%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	33%	60%	33%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	66%	79%	66%	

## Main comparator and comparator to last time

### Key to tables

Any percentage highlighted in green is significantly better	HMP Cardiff 2013	Adult closed prisons comparator	HMP Cardiff 2013	HMP Cardiff 2007
Any percentage highlighted in blue is significantly worse				
Any percentage highlighted in orange shows a significant difference in prisoners' background details				
Percentages which are not highlighted show there is no significant difference				
<b>SECTION 11: Activities</b>				
Is it very easy/ easy to get into the following activities:				
11.1 A prison job?	34%	34%	34%	
11.1 Vocational or skills training?	24%	30%	24%	
11.1 Education (including basic skills)?	37%	44%	37%	
11.1 Offending behaviour programmes?	12%	19%	12%	
Are you currently involved in any of the following activities:				
11.2 A prison job?	38%	44%	38%	
11.2 Vocational or skills training?	7%	9%	7%	
11.2 Education (including basic skills)?	14%	27%	14%	
11.2 Offending behaviour programmes?	1%	8%	1%	
11.3 Have you had a job while in this prison?	57%	69%	57%	69%
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	48%	42%	48%	44%
11.3 Have you been involved in vocational or skills training while in this prison?	39%	53%	39%	57%
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?	48%	50%	48%	58%
11.3 Have you been involved in education while in this prison?	46%	65%	46%	61%
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	46%	57%	46%	63%
11.3 Have you been involved in offending behaviour programmes while in this prison?	34%	51%	34%	57%
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?	39%	48%	39%	58%
11.4 Do you go to the library at least once a week?	39%	35%	39%	40%
11.5 Does the library have a wide enough range of materials to meet your needs?	32%	34%	32%	
11.6 Do you go to the gym three or more times a week?	28%	31%	28%	37%
11.7 Do you go outside for exercise three or more times a week?	50%	37%	50%	50%
11.8 Do you go on association more than five times each week?	28%	47%	28%	46%
11.9 Do you spend ten or more hours out of your cell on a weekday?	10%	10%	10%	11%
<b>SECTION 12: Friends and family</b>				
12.1 Have staff supported you and helped you to maintain contact with family/friends while in this prison?	40%	35%	40%	
12.2 Have you had any problems with sending or receiving mail?	44%	46%	44%	31%
12.3 Have you had any problems getting access to the telephones?	33%	33%	33%	22%
12.4 Is it easy/ very easy for your friends and family to get here?	49%	36%	49%	

## Main comparator and comparator to last time

### Key to tables

	Any percentage highlighted in green is significantly better	HMP Cardiff 2013	Adult closed prisons comparator	HMP Cardiff 2013	HMP Cardiff 2007
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 13: Preparation for release</b>					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	48%	61%	48%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	57%	42%	57%	
13.2	Contact by letter?	28%	28%	28%	
13.2	Contact by phone?	2%	16%	2%	
13.2	Contact by visit?	23%	34%	23%	
13.3	Do you have a named offender supervisor in this prison?	15%	32%	15%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	29%	39%	29%	35%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	63%	57%	63%	52%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	54%	43%	54%	
13.6	Offender supervisor?	29%	32%	29%	
13.6	Offender manager?	11%	29%	11%	
13.6	Named/personal officer?	14%	14%	14%	
13.6	Staff from other departments?	14%	20%	14%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	62%	61%	62%	87%
13.8	Are there plans for you to achieve any of your targets in another prison?	25%	27%	25%	
13.9	Are there plans for you to achieve any of your targets in the community?	27%	31%	27%	
13.10	Do you have a needs based custody plan?	7%	6%	7%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	16%	14%	16%	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?	27%	31%	27%	
13.12	Accommodation?	31%	44%	31%	
13.12	Benefits?	34%	46%	34%	
13.12	Finances?	20%	27%	20%	
13.12	Education?	25%	33%	25%	
13.12	Drugs and alcohol?	36%	48%	36%	
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	43%	46%	43%	50%

## Diversity analysis



### Key question responses (ethnicity) HMP Cardiff 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
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			
<b>Number of completed questionnaires returned</b>		<b>18</b>	<b>146</b>
1.3	Are you sentenced?	61%	70%
1.5	Are you a foreign national?	23%	7%
1.6	Do you understand spoken English?	94%	99%
1.7	Do you understand written English?	94%	97%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	6%	5%
1.1	Are you Muslim?	67%	2%
1.12	Do you consider yourself to have a disability?	12%	23%
1.13	Are you a veteran (ex-armed services)?	6%	6%
1.14	Is this your first time in prison?	17%	32%
2.6	Were you treated well/very well by the escort staff?	78%	77%
2.7	Before you arrived here were you told that you were coming here?	67%	77%
3.2	When you were searched in reception, was this carried out in a respectful way?	82%	85%
3.3	Were you treated well/very well in reception?	78%	76%
3.4	Did you have any problems when you first arrived?	83%	67%
3.7	Did you have access to someone from health care when you first arrived here?	78%	66%
3.9	Did you feel safe on your first night here?	83%	85%
3.10	Have you been on an induction course?	50%	67%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	35%	41%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	23%	43%
4.4	Are you normally able to have a shower every day?	59%	72%
4.4	Is your cell call bell normally answered within five minutes?	47%	38%
4.5	Is the food in this prison good/very good?	12%	31%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	29%	48%
4.7	Are you able to speak to a Listener at any time if you want to?	47%	53%
4.8	Do you feel your religious beliefs are respected?	65%	40%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	46%
5.1	Is it easy to make an application?	78%	81%
5.3	Is it easy to make a complaint?	35%	40%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	28%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	12%	4%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	67%	77%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	72%	76%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	17%	20%
7.4	Do you have a personal officer?	45%	47%
8.1	Have you ever felt unsafe here?	39%	24%
8.2	Do you feel unsafe now?	18%	8%
8.3	Have you been victimised by other prisoners?	17%	14%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	6%	8%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	0%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	2%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	39%	24%
8.7	Have you ever felt threatened or intimidated by staff here?	22%	4%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	12%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	12%	2%
8.7	Have you been victimised because of your nationality? (By staff)	12%	2%
8.7	Have you been victimised because you have a disability? (By staff)	0%	2%
9.1	Is it easy/very easy to see the doctor?	25%	20%
9.1	Is it easy/very easy to see the nurse?	67%	50%
9.4	Are you currently taking medication?	25%	46%
9.6	Do you feel you have any emotional wellbeing/mental health issues?	33%	37%
10.3	Is it easy/very easy to get illegal drugs in this prison?	44%	33%
11.2	Are you currently working in the prison?	21%	41%
11.2	Are you currently undertaking vocational or skills training?	0%	7%
11.2	Are you currently in education (including basic skills)?	7%	15%
11.2	Are you currently taking part in an offending behaviour programme?	0%	1%
11.4	Do you go to the library at least once a week?	38%	39%
11.6	Do you go to the gym three or more times a week?	47%	26%
11.7	Do you go outside for exercise three or more times a week?	75%	48%
11.8	On average, do you go on association more than five times each week?	18%	30%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	12%	10%
12.2	Have you had any problems sending or receiving mail?	65%	40%
12.3	Have you had any problems getting access to the telephones?	35%	31%

## Diversity Analysis



### Key question responses (disability) HMP Cardiff 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

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	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		
<b>Number of completed questionnaires returned</b>		<b>35</b>	<b>130</b>
1.3	Are you sentenced?	<b>69%</b>	<b>69%</b>
1.5	Are you a foreign national?	<b>3%</b>	<b>10%</b>
1.6	Do you understand spoken English?	<b>100%</b>	<b>98%</b>
1.7	Do you understand written English?	<b>94%</b>	<b>97%</b>
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	<b>6%</b>	<b>12%</b>
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	<b>11%</b>	<b>3%</b>
1.1	Are you Muslim?	<b>9%</b>	<b>9%</b>
1.13	Are you a veteran (ex-armed services)?	<b>11%</b>	<b>5%</b>
1.14	Is this your first time in prison?	<b>28%</b>	<b>31%</b>
2.6	Were you treated well/very well by the escort staff?	<b>74%</b>	<b>77%</b>
2.7	Before you arrived here were you told that you were coming here?	<b>83%</b>	<b>74%</b>
3.2	When you were searched in reception, was this carried out in a respectful way?	<b>85%</b>	<b>83%</b>
3.3	Were you treated well/very well in reception?	<b>79%</b>	<b>74%</b>
3.4	Did you have any problems when you first arrived?	<b>88%</b>	<b>64%</b>
3.7	Did you have access to someone from health care when you first arrived here?	<b>52%</b>	<b>70%</b>
3.9	Did you feel safe on your first night here?	<b>79%</b>	<b>85%</b>
3.10	Have you been on an induction course?	<b>59%</b>	<b>67%</b>
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	<b>37%</b>	<b>40%</b>

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	41%	40%
4.4	Are you normally able to have a shower every day?	68%	70%
4.4	Is your cell call bell normally answered within five minutes?	44%	38%
4.5	Is the food in this prison good/very good?	37%	27%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	36%	47%
4.7	Are you able to speak to a Listener at any time if you want to?	56%	50%
4.8	Do you feel your religious beliefs are respected?	56%	38%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	47%	47%
5.1	Is it easy to make an application?	65%	84%
5.3	Is it easy to make a complaint?	36%	39%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	46%	40%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	45%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	5%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	76%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	74%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	21%	19%
7.4	Do you have a personal officer?	41%	48%
8.1	Have you ever felt unsafe here?	38%	23%
8.2	Do you feel unsafe now?	18%	8%
8.3	Have you been victimised by other prisoners?	9%	17%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	3%	10%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	2%
8.5	Have you been victimised because of your age? (By prisoners)	0%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	6%	1%

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	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%	24%
8.7	Have you ever felt threatened or intimidated by staff here?	9%	6%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	4%
8.7	Have you been victimised because of your nationality? (By staff)	0%	4%
8.7	Have you been victimised because of your age? (By staff)	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	6%	1%
9.1	Is it easy/very easy to see the doctor?	21%	20%
9.1	Is it easy/very easy to see the nurse?	47%	52%
9.4	Are you currently taking medication?	62%	38%
9.6	Do you feel you have any emotional wellbeing/mental health issues?	69%	28%
10.3	Is it easy/very easy to get illegal drugs in this prison?	35%	33%
11.2	Are you currently working in the prison?	34%	40%
11.2	Are you currently undertaking vocational or skills training?	4%	8%
11.2	Are you currently in education (including basic skills)?	28%	11%
11.2	Are you currently taking part in an offending behaviour programme?	4%	0%
11.4	Do you go to the library at least once a week?	43%	37%
11.6	Do you go to the gym three or more times a week?	19%	31%
11.7	Do you go outside for exercise three or more times a week?	46%	51%
11.8	On average, do you go on association more than five times each week?	41%	25%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	16%	9%
12.2	Have you had any problems sending or receiving mail?	41%	45%
12.3	Have you had any problems getting access to the telephones?	36%	32%



## Prisoner survey responses HMP Cardiff 2013 (remand vs. sentenced prisoners)

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

### Key to tables

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<b>Number of completed questionnaires returned</b>		<b>48</b>	<b>115</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	13%	5%
1.3	Are you sentenced?		
1.3	Are you on recall?	0%	6%
1.4	Is your sentence less than 12 months?	0%	51%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	2%
1.5	Are you a foreign national?	11%	5%
1.6	Do you understand spoken English?	96%	100%
1.7	Do you understand written English?	93%	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)?	11%	10%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	11%	3%
1.1	Are you Muslim?	8%	9%
1.11	Are you homosexual/gay or bisexual?	2%	2%
1.12	Do you consider yourself to have a disability?	23%	21%
1.13	Are you a veteran (ex-armed services)?	6%	6%
1.14	Is this your first time in prison?	42%	24%
1.15	Do you have any children under the age of 18?	65%	64%
<b>SECTION 2: Transfers and escorts</b>			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	8%	6%
2.5	Did you feel safe?	77%	85%
2.6	Were you treated well/very well by the escort staff?	67%	80%
2.7	Before you arrived here were you told that you were coming here?	77%	76%
2.8	When you first arrived here did your property arrive at the same time as you?	87%	92%
<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	53%	61%
3.2	When you were searched in reception, was this carried out in a respectful way?	78%	87%
3.3	Were you treated well/very well in reception?	68%	78%

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	When you first arrived:		
3.4	Did you have any problems?	76%	67%
3.4	Did you have any problems with loss of property?	11%	5%
3.4	Did you have any housing problems?	22%	21%
3.4	Did you have any problems contacting employers?	7%	3%
3.4	Did you have any problems contacting family?	31%	13%
3.4	Did you have any problems ensuring dependants were being looked after?	5%	2%
3.4	Did you have any money worries?	37%	24%
3.4	Did you have any problems with feeling depressed or suicidal?	22%	18%
3.4	Did you have any physical health problems?	18%	18%
3.4	Did you have any mental health problems?	28%	23%
3.4	Did you have any problems with needing protection from other prisoners?	7%	3%
3.4	Did you have problems accessing phone numbers?	48%	19%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	79%	87%
3.6	A shower?	38%	38%
3.6	A free telephone call?	70%	80%
3.6	Something to eat?	66%	75%
3.6	PIN phone credit?	77%	85%
3.6	Toiletries/basic items?	64%	61%
<b>SECTION 3: Reception, first night and induction continued</b>			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	59%	49%
3.7	Someone from health services?	67%	64%
3.7	A Listener/Samaritans?	35%	31%
3.7	Prison shop/canteen?	22%	19%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	52%	58%
3.8	Support was available for people feeling depressed or suicidal?	39%	54%
3.8	How to make routine requests?	43%	54%
3.8	Your entitlement to visits?	48%	53%
3.8	Health services?	50%	47%
3.8	The chaplaincy?	48%	48%
3.9	Did you feel safe on your first night here?	74%	88%

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3.10	Have you been on an induction course?	72%	62%
3.12	Did you receive an education (skills for life) assessment?	67%	57%
<b>SECTION 4: Legal rights and respectful custody</b>			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	33%	44%
4.1	Attend legal visits?	57%	67%
4.1	Get bail information?	30%	23%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	38%	44%
4.3	Can you get legal books in the library?	23%	30%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	41%	41%
4.4	Are you normally able to have a shower every day?	61%	73%
4.4	Do you normally receive clean sheets every week?	71%	83%
4.4	Do you normally get cell cleaning materials every week?	50%	51%
4.4	Is your cell call bell normally answered within five minutes?	46%	34%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	55%	67%
4.4	Can you normally get your stored property if you need to?	22%	23%
4.5	Is the food in this prison good/very good?	28%	30%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	48%	43%
4.7	Are you able to speak to a Listener at any time if you want to?	46%	54%
4.8	Are your religious beliefs are respected?	44%	41%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	47%
4.10	Is it easy/very easy to attend religious services?	35%	39%
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	74%	82%
5.3	Is it easy to make a complaint?	33%	43%
5.5	Have you ever been prevented from making a complaint when you wanted to?	16%	14%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	27%	20%
<b>SECTION 6: Incentive and earned privileges scheme</b>			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	34%	46%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	48%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	5%
<b>SECTION 7: Relationships with staff</b>			

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7.1	Do most staff, in this prison, treat you with respect?	69%	78%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	77%	74%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	23%	27%
7.4	Do staff normally speak to you most of the time/all of the time during association?	20%	19%
7.5	Do you have a personal officer?	38%	48%
<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	35%	23%
8.2	Do you feel unsafe now?	14%	8%
8.4	Have you been victimised by other prisoners here?	18%	14%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	7%	4%
8.5	Hit, kicked or assaulted you?	2%	2%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	9%	8%
8.5	Taken your canteen/property?	2%	4%
8.5	Victimised you because of medication?	5%	2%
8.5	Victimised you because of debt?	5%	2%
8.5	Victimised you because of drugs?	2%	1%
8.5	Victimised you because of your race or ethnic origin?	5%	1%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%
8.5	Victimised you because of your nationality?	2%	1%
8.5	Victimised you because you were from a different part of the country?	7%	1%
8.5	Victimised you because you are from a traveller community?	2%	1%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	2%	0%
8.5	Victimised you because you have a disability?	2%	2%
8.5	Victimised you because you were new here?	5%	1%
8.5	Victimised you because of your offence/crime?	0%	0%
8.5	Victimised you because of gang related issues?	5%	0%
<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	26%	27%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	7%	11%

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8.7	Hit, kicked or assaulted you?	2%	3%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	9%	6%
8.7	Victimised you because of medication?	2%	3%
8.7	Victimised you because of debt?	2%	0%
8.7	Victimised you because of drugs?	2%	1%
8.7	Victimised you because of your race or ethnic origin?	5%	3%
8.7	Victimised you because of your religion/religious beliefs?	5%	3%
8.7	Victimised you because of your nationality?	7%	2%
8.7	Victimised you because you were from a different part of the country?	9%	0%
8.7	Victimised you because you are from a traveller community?	2%	2%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	2%	1%
8.7	Victimised you because you have a disability?	0%	3%
8.7	Victimised you because you were new here?	7%	2%
8.7	Victimised you because of your offence/crime?	2%	2%
8.7	Victimised you because of gang related issues?	2%	1%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	9%	25%
9.1	Is it easy/very easy to see the nurse?	39%	56%
9.1	Is it easy/very easy to see the dentist?	5%	10%
9.4	Are you currently taking medication?	43%	44%
9.6	Do you have any emotional well being or mental health problems?	29%	39%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	55%	41%
10.2	Did you have a problem with alcohol when you came into this prison?	41%	34%
10.3	Is it easy/very easy to get illegal drugs in this prison?	39%	32%
10.4	Is it easy/very easy to get alcohol in this prison?	18%	11%
10.5	Have you developed a problem with drugs since you have been in this prison?	14%	5%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	19%	6%
<b>SECTION 11: Activities</b>			
Is it very easy/ easy to get into the following activities:			
11.1	A prison job?	28%	37%

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11.1	Vocational or skills training?	22%	26%
11.1	Education (including basic skills)?	30%	39%
11.1	Offending behaviour programmes?	5%	14%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	30%	43%
11.2	Vocational or skills training?	5%	8%
11.2	Education (including basic skills)?	23%	9%
11.2	Offending behaviour programmes?	0%	1%
11.4	Do you go to the library at least once a week?	49%	36%
11.5	Does the library have a wide enough range of materials to meet your needs?	26%	34%
11.6	Do you go to the gym three or more times a week?	38%	26%
11.7	Do you go outside for exercise three or more times a week?	47%	52%
11.8	Do you go on association more than five times each week?	26%	30%
11.9	Do you spend ten or more hours out of your cell on a weekday?	7%	12%
<b>SECTION 12: Friends and family</b>			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	28%	43%
12.2	Have you had any problems with sending or receiving mail?	43%	45%
12.3	Have you had any problems getting access to the telephones?	46%	29%
12.4	Is it easy/ very easy for your friends and family to get here?	27%	57%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	5%	19%
13.10	Do you have a needs based custody plan?	5%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	3%	22%