

Report on an announced inspection of

# **HMP Everthorpe**

12–16 January 2009

by HM Chief Inspector of Prisons

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# Introduction

HMP Everthorpe, near Hull, is a category C training prison for adult males. The prison has expanded significantly in recent years and this has increased the scale of the challenges facing managers and staff. Commendably, this full announced inspection found that the prison had progressed in most areas, although there remained areas for further improvement.

Reception remained dingy, but prisoners were processed quickly and reported favourably on their treatment. First night arrangements were inconsistent, but induction was comprehensive. Prisoners felt safe at Everthorpe and safer custody arrangements were adequate, but some procedures needed to be tightened. For example, while suicide and self-harm prevention arrangements were generally sound, data collection and analysis needed to be improved. Similarly, violence reduction and anti-bullying arrangements required further development.

The establishment continued to confront a serious problem with illicit drugs. Physical security responses were proportionate and the new integrated drug treatment system (IDTS) had improved clinical management of substance users. The segregation unit had been renamed the separation and care unit, but remained a traditional facility in need of refurbishment and updating. Use of force required better governance.

Staff-prisoner relationships remained mutually respectful, supported by an effective personal officer scheme. Diversity arrangements were underdeveloped. While race issues were well managed, the perceptions of black and minority ethnic prisoners were significantly more negative than their white counterparts. More support was needed for foreign national prisoners. Health services were generally good, but a new healthcare facility was urgently required.

For a training prison, Everthorpe was not providing as much purposeful activity as we would expect and too many prisoners spent too long in their cells. However, there was a wide range of work for those who could access it, together with good levels of accredited vocational training. Good quality education was also available. Access to both the library and the gym was good.

The strategic management of resettlement was undergoing a period of change and had yet to settle. Conversely, offender management arrangements were among the best we have come across. Work across most of the resettlement pathways was satisfactory, but accommodation services were poor and needed to be reinforced.

Everthorpe is a much expanded training prison and managers are to be commended on having built on much of the good work we have identified on previous inspections. The personal officer scheme and new offender management unit deserve particular praise. Inevitably, there were areas for further development, particularly to bolster safety procedures and keep prisoners more fully occupied but, overall, the prison was performing reasonably well in all areas.

Anne Owers  
HM Chief Inspector of Prisons

March 2009



# Fact page

## Task of establishment

HMP Everthorpe is a category C training prison for adult male sentenced prisoners.

## Brief history

Everthorpe opened as a borstal in 1958 and in 1991 converted to its current role as a category C training prison.

## Area organisation

Yorkshire and Humberside

## Number held

672

## Certified normal accommodation

603

## Operational capacity

689

## Last inspection

Full inspection: 29 March-2 April 2004

Short follow-up inspection: 25-26 April 2006

## Description of residential units

A wing: Prisoners on all levels of the incentives and earned privileges (IEP) scheme

B and C wings: Prisoners on all levels of the IEP scheme

D wing: The counselling, assessment, referral, advice and throughcare (CARAT) service is based on this wing

E wing: Rehabilitation wing; all prisoners are signed up to voluntary drug testing. All prisoners are on the enhanced level of the IEP scheme

F wing: Newly built; prisoners on all levels of the IEP scheme; integrated drug treatment system (IDTS) service for identified prisoners

G wing: Newly built; prisoners on induction

## Separation

and care unit: 14-cell unit, including four safer cells with two additional special cells



# Healthy prison summary

## Introduction

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HP1 All inspection reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review Suicide is everyone's concern, published in 1999. The criteria are:

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

HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

**... performing well against this healthy prison test.**

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

**... performing reasonably well 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.

**... not performing sufficiently well 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.

**... performing poorly against this healthy prison test.**

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

## Safety

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HP3 The physical environment of reception was limiting and staff worked to ensure that prisoners spent minimal time there. First night procedures were inconsistent. The induction process was comprehensive and the engagement from key players across the prison good. The quality of self-harm and suicide documentation was generally

good but data analysis was underdeveloped. The procedural arrangements for anti-bullying were poor. Prisoners reported feeling safe and the low level of violent incidents supported this. The policies and procedures of the segregation unit did not support its re-rolling to a separation and care unit, and the physical environment was poor. The clinical management of substance users under the integrated drug treatment system (IDTS) was good. The positive mandatory drug testing (MDT) rate including buprenorphine was high. Overall, the establishment was performing reasonably well against this healthy prison test.

- HP4 There had been a sharp increase in the number of prisoners transferring in who had come from 50 or more miles away and a corresponding increase in the length of journeys for prisoners. Feedback from prisoners was positive in relation to all aspects of their experience on escorts and transfers. The regular handcuffing of prisoners between the escort vehicle and reception was not based on individual assessments of risk and could not, therefore, be considered proportionate.
- HP5 Prisoners were held in the inadequate reception area for as short a time as possible to compensate for the poor, cramped, badly lit and overly public environment. Reception staff were welcoming and proper in their dealings with prisoners. Prisoners we spoke to about their experiences in reception were generally positive and the survey results significantly better than at comparator prisons.
- HP6 The opportunity for newly received prisoners to have a private one-to-one conversation with a member of staff was not routinely available. The first night assessments for four prisoners who arrived late one afternoon during the inspection were not carried out until the following day. Nevertheless, significantly more prisoners than at comparator prisons reported feeling safe on their first night.
- HP7 A new induction programme had been introduced and was bedding in. It was pitched suitably and involved a wide variety of service providers and peer supporters. It was well supported by computer-based learning. There was also some excellent work being carried out by the induction officers in relation to prisoners' issues and concerns.
- HP8 Staff had a good awareness of self-harm and suicide issues, and levels of self-harm were low. The recommendations arising from a death in custody in 2006 had all been acted on. However, there was no ongoing review to ensure that practice was sustained and there were no procedures to follow-up on near-death incidents. These were notable omissions from the otherwise sound safer custody strategy.
- HP9 The monthly safer custody self-harm and suicide prevention meeting was well attended, with good multidisciplinary involvement, although prisoner representation was limited. Data collection and analysis were generally poor. The quality of initial assessments, care plans, support plans and reviews within assessment, care in custody and teamwork (ACCT) documentation were of a good standard. The quality of entries by staff in the ongoing records varied, but good post-closure quality checks were carried out by the safer custody coordinator. Anti-ligature knives were not carried by all staff.
- HP10 Levels of violence were low and prisoner survey returns also indicated that significantly more prisoners than at comparator prisons felt safe. The monthly violence reduction committee was well attended and multidisciplinary but there was insufficient analysis of data and trends. There were procedural flaws around the

- HP11 Physical security was commensurate with the problems identified at the time of the inspection. There was a flexible approach to dealing with the serious drug supply problem, with good intelligence systems and targeted interventions. Strip searching was not based on risk assessment. There were legitimate reasons for the 24 prisoners on closed visits and the three banned visitors. Reviews were held monthly, although all prisoners were put on closed visits for at least three months, irrespective of whether or not additional information came to light. There had been a high number of incidents, including a number of incidents at height.
- HP12 The segregation unit had been renamed as a separation and care unit, but this had not been underpinned by supporting procedures or changes in role. A good and dedicated group of staff worked on this unit. Most of the accommodation was grubby, with graffiti on cell walls, dirty toilets, floors and ceilings in poor condition and no in-cell electricity. None of the toilets was screened, and there was only one shower on the unit, so prisoners only had access on alternate days.
- HP13 Initial segregation documents showed that authorisations were appropriate. Staff maintained an individual record for each prisoner, but did not fully record the levels of care and support they offered. Prisoners were given access to telephones daily, but there was limited evidence of purposeful activity taking place on the unit.
- HP14 The use of force was relatively high. There was no use of force committee, no coordinated approach to monitoring and analysing the use of force, and no routine video-recording of planned removals. Special cells had been used on 18 occasions in 2008. The special accommodation was bleak, dirty, had little natural or artificial light, and had graffiti on the walls. There had been one use of the body belt to facilitate a transfer in the previous six months, even though the documentation provided recorded that the prisoner had been compliant.
- HP15 The IDTS was well run. The random MDT positive rate was relatively high, and very high when including buprenorphine. Significantly more prisoners than at comparator prisons reported that it was easy or very easy to get illegal drugs.

## Respect

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- HP16 The external environment was pleasant and cells were generally in a good state of decoration. Staff-prisoner relationships were good, and the personal officer scheme worked well. The differentials for the incentives and earned privileges (IEP) scheme were good but the scheme's application to pay levels was unfair. Catering provision was reasonable. Diversity provision was under development. There were good management and strategic arrangements around race equality, although black and minority ethnic prisoners had little confidence in the systems for ensuring race equality. Faith provision was excellent. The physical environment for healthcare was unacceptable, but healthcare reception screening was comprehensive, waiting lists for primary care services were of an acceptable length, and good mental health and dental services were provided. Overall, the establishment was performing reasonably well against this healthy prison test.

- HP17 The external areas of the prison were pleasant. The age of the accommodation on A to D wings limited the activities available for prisoners, but the standard of decoration and cleanliness was consistently good across the residential accommodation. Cells were well equipped, and there was good access to cleaning materials. Prisoners could shower daily, but some of the showers were in a poor state of repair, particularly on E wing. Access for prisoners with disabilities was available on G wing and matched the identified need. There were insufficient telephones and some did not have adequate privacy hoods, but access was good.
- HP18 The IEP scheme was well publicised and understood by staff and prisoners, and there were good differentials between the three levels. The current facilities list had been developed in consultation with all prisoners. There were different pay levels according to IEP status, whereby those on enhanced earned nearly twice as much as those on standard and four times as much as those on basic, for the same work. IEP reviews were carried out and prisoners were given a chance to improve their behaviour before being downgraded. Realistic targets related to sentence plans were set in most cases. However, routine and warning-triggered reviews took up to a month to take place – well beyond the behaviour that warranted them. Conversely, automatic downgrades to basic for serious offences often took place on the same day. Management checks were not consistently undertaken. Prisoners could receive an adjudication punishment and be automatically downgraded to basic for some offences.
- HP19 Staff–prisoner-relationships were generally good, and some staff challenged inappropriate behaviour well. Many prisoners expressed confidence in prisoner representatives.
- HP20 The personal officer scheme demonstrated a good level of engagement over a long period, and this was demonstrated in most wing file entries. Personal officers had a good level of knowledge of prisoners in their care, and prisoners retained their personal officer unless staff or prisoners moved wing. Personal officer involvement in sentence planning was good, although there was variation between officers.
- HP21 Prisoner perceptions of the quality of the food were significantly better than at comparator prisons. Serveries on some wings were cramped and dirty. Meals were eaten in cells with unscreened toilets and insufficient space where prisoners were sharing cells. Breakfast packs were issued and often eaten on the preceding day and the content was poor. Prisoners were unable to gain a catering qualification.
- HP22 The transition to the new shop provider had been problematic and had impacted on prisoners. Some of the issues had been resolved and further meetings with the provider were scheduled. Consultation with prisoners was planned before these meetings, to ensure that their concerns could be discussed.
- HP23 There was no overarching diversity policy but there was a disability policy which incorporated the needs of older prisoners, and an action plan was in the process of being implemented which included the training of staff. The reception disability questionnaire allowed prisoners to disclose any disabilities. Identification of those with disabilities did not result in care planning. The disability liaison officer was in the process of identifying wing liaison officers and a 'prisoners with disabilities' forum was due to start and was well publicised. Services for older prisoners were still in the development stages, with the first older prisoners' forum having recently taken place.

- HP24 The race equality action team (REAT) was enthusiastic and committed to promoting and improving race equality. The range of race equality and quality assurance meetings held benefited from input from community groups and from prisoner representatives. There had been a diverse range of cultural activities throughout the year. The work undertaken by the REAT was insufficiently promoted across the establishment, and black and minority ethnic prisoners had little confidence in the systems for addressing race equality issues.
- HP25 There had been an increase in the number of foreign national prisoners at the establishment, but the time allocated to the foreign nationals coordinator had not kept pace. A detailed foreign nationals strategy document identified the needs specific to this group and provided a range of information that would have been useful both for staff and for prisoners, but was not available to prisoners. Links had been developed with the UK Border Agency, which attended the establishment every three months. No links had been established with a local source of independent immigration advice.
- HP26 Information explaining the applications and complaints procedures was displayed on all wings, but only in English. Prisoners were generally satisfied with the responses to their applications and complaints.
- HP27 The work of the chaplaincy team was well integrated into the work of the establishment and well regarded by prisoners, and all the main faiths were covered by the team and sessional chaplains. The chapel was well equipped and peaceful. Prisoners could attend classes and groups in addition to corporate worship. Good pastoral care was provided.
- HP28 The physical environment of the healthcare department was poor, and the same area was used for reception holding cells and healthcare provision. Healthcare reception screening was comprehensive, with follow-up appointments made and previous history checked. Waiting lists for primary care services were of an acceptable length. The healthcare application and appointments systems were poor, and prisoners were insufficiently well informed about healthcare provision. Most medications were given in-possession, and there were no arrangements to offer simple pain relief at night. The dentist provided a full range of treatment. There was good provision of mental health services.

## Purposeful activity

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- HP29 The number of prisoners not engaged fully in purposeful activity was high. There was a wide range of work, and generally good levels of vocational accreditation were available. Education was well managed. The learning and skills provision was good. The prison's calculated weekday time unlocked of around 8.3 hours was accurate but low for a training prison. Access to the library was good and the range of activities available supported learning. PE facilities were mixed. Access to the gym for leisure activities was good but access to accredited provision had until recently been poor, owing to staff shortages. Overall, the establishment was performing reasonably well against this healthy prison test.

- HP30 The establishment recorded 8.3 hours' time out of cell against a target of eight hours. This appeared to be accurate but was low for a training prison.
- HP31 Exercise and association took place consistently and as advertised. Outdoor clothing was not provided, other than for outdoor workers, and was not available on the new facilities list. There was good access to association equipment, and in some outdoor exercise areas seating and tables had been installed. Regime slippage was minimal.
- HP32 There were 35 fewer activity places than prisoners, but a higher level of unemployment than this and a higher level again of prisoners locked up in cells during our roll checks.
- HP33 The management of learning and skills overall was good. There were good external links and effective work had taken place to improve and extend learning and skills provision. The allocation process was particularly thorough and there was good promotion of equality and diversity. The strategy document did not set out a sufficiently clear vision to establish skills for life across the prison, and the development and application of this strategy had been slow.
- HP34 Much teaching, training and learning was effective, and the achievement of qualifications was mostly good. There was good engagement in classes and learners developed skills and confidence in vocational and education provision. The management of attendance was satisfactory and unauthorised absences from work or education were followed up promptly. There was much good teaching and learning in applied skills for life classes and English for speakers of other languages (ESOL). There was insufficient numeracy and literacy support in workshops. The use of individual learning plans was ineffective.
- HP35 The range of provision was generally of high quality, well sequenced and met the needs of learners with different sentence lengths. All work areas had accredited provision, in some areas to level two, but offender learning and skills service (OLASS) construction provision was only accredited at level one, which was too low a level to be useful to employers.
- HP36 Achievements and standards were particularly good in gardening, bicycle repair, fork-lift truck driving, advanced IT, painting and decorating, plumbing, food hygiene and personal and social development programmes.
- HP37 The library service was well managed and access was good. Around 50% of the population attended regularly. Recent changes to improve the library service included use of a new IT system compatible with other organisations in the area, a DVD club, extension to the range of local newspapers available and hosting a writers' workshop and a charity coffee time read event. The library supported learning and skills activities well through Storybook Dads and the Toe by Toe scheme, for which prisoner library orderlies acted as mentors.
- HP38 There had been significant investment in the PE facilities. Resources included a large sports hall, a cardiovascular and weights room and a classroom, but the outside football pitch was out of use and the new showers and changing rooms were in a poor state of repair. An extensive range of recreational and vocational PE was offered and access was good, with 79% of the population accessing PE once or more a week. Although a range of accredited provision was available, due to staff shortages

## Resettlement

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- HP39 There was an up-to-date policy and the recently published needs analysis highlighted the deficiencies in some areas. The strategic management of resettlement was undergoing a period of change. The offender management model worked very well and prisoners had good contact with their offender supervisors. There were gaps in resettlement pathway provision, particularly in accommodation. Work to support families, education and health was good. Overall, the establishment was performing reasonably well against this healthy prison test.
- HP40 The overarching resettlement policy was up to date and reflected current provision. The completed needs analysis of the population had yet to be reflected in the policy but had highlighted the need for additional accredited programmes addressing alcohol-relating offending, domestic abuse and more general violent offending behaviour. It had also underlined the developing issues around sentence length and time left to serve, with more prisoners requiring community reintegration.
- HP41 The management structure for the resettlement function was in a period of change, with no clear senior manager lead. There was little clarity about who had responsibility for some of the pathways and these services were underdeveloped, notably in accommodation and finance, benefit and debt. There had been efforts to forge greater links with non-statutory agencies to develop and improve outcomes for prisoners in the resettlement pathways.
- HP42 The offender management unit was among the most effective we have inspected. The offender management model had a clear rationale. The offender management team was multidisciplinary and there was good joint work. All prisoners were allocated an offender manager, regardless of whether or not they were in scope, and had their initial resettlement needs assessed during induction, with appropriate referrals made. Allocated offender supervisors had oversight of custody planning work and liaised with a variety of groups within and outside the prison to ensure that targets were met. The needs assessment was also repeated two months before release to flag up and deal with any outstanding issues.
- HP43 Significantly more prisoners than at comparator prisons said that they had a sentence plan and that they could achieve some or all of their sentence planning targets at the prison. Personal officers were involved in this process and were supported in this role through offender management awareness training, as well as being provided with a range of relevant written materials and informal advice from supervisors. Residential staff had responsibility for sentence planning boards for some prisoners, and those we observed were excellent. The level of input from personal officers in supporting reducing reoffending work varied. Most sentence plans were agreed within specified timescales, and backlogs for offender assessment system (OASys) assessments were small. There was an excellent initiative to support ex-servicemen.
- HP44 All indeterminate sentence prisoners were supervised by seconded probation officers, but they had few opportunities to air their views and meet as a group.

- HP45 In addition to the accredited drug programmes, the enhanced thinking skills course was available, and audit scores were excellent for this programme. However, provision was not sufficient to meet need and 123 prisoners were on the waiting list, so some prisoners were released from custody without completing a programme. The needs analysis had also identified a number of prisoners requiring programmes which were not offered at the establishment.
- HP46 Categorisation reviews were up to date and were informed by a comprehensive information gathering system. The offender management files were detailed and contained clear information about how and why categorisation decisions had been made.
- HP47 There were significant problems with the level and quality of provision of accommodation services. Some support was available through a contracted worker but this produced a limited number of positive housing outcomes for prisoners and there was a waiting list of 200 prisoners. Around 70% of discharges were released into permanent accommodation, and 7% of prisoners discharged over the previous nine months had had no fixed abode.
- HP48 Provision in the finance benefit and debt pathway was underdeveloped. A money budget management course was offered through the chaplaincy, and assistance with benefit entitlement advice was available through a Jobcentre Plus worker.
- HP49 There were good links with employers, training providers and other external agencies to support prisoners on release. All prisoners due to be discharged were invited to the One Step Closer event six weeks before release, offering a range of support around employment, training and education, but the take-up was low, at 50%. The Helping Offenders by Providing Employment (HOPE) initiative had led to 60 prisoners being released into employment, training or education.
- HP50 Health provision for resettlement was good. Primary care professionals attended the One Step Closer event to identify needs in advance of discharge, and prisoners were invited to attend a discharge clinic before their release.
- HP51 There was good joint work between the counselling, assessment, referral, advice and throughcare (CARAT) and offender management teams. The prison addressing substance-related offending (P-ASRO) programme performed well, despite recent low levels of referrals. The Rehabilitation of Addicted Prisoners trust (RAPt) programme struggled to meet its targets, owing to a lack of referrals from other establishments. An alcohol awareness session was run by the CARAT team, and Alcoholics Anonymous groups were run by external facilitators. Voluntary drug testing worked well, with 284 compacts in place against a target of 282, and there was a waiting list of around 40.
- HP52 There was no visitors' centre but a visitors' receiving area, which was small, clean and well stocked with information, and staff–visitor interaction was positive. The visits hall was bright but noisy, and the carpets and furniture were in a poor state of repair. There was a relaxed atmosphere, and visitors and prisoners arrived on time for their visits.
- HP53 There was a committed and dedicated pathway lead for the children and families of offenders pathway. Families were routinely involved in offending behaviour programme reviews, but were not involved in sentence planning. A 'Keeping up with

HP54 Public protection arrangements were robust and all relevant cases were reviewed by the well-attended weekly meeting. Prisoners were promptly informed of any relevant restrictions placed on them, and liaison with multi-agency public protection arrangements (MAPPA) and other relevant community agencies took place.

## Main recommendations

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- HP55 Anti-bullying and violence reduction procedures should be strengthened and adhered to.
- HP56 The role of the segregation unit should be clearly defined, with supporting policies and procedures developed and implemented to include: an improved regime; individual assessments for access to regimes; individually assessed targets for each prisoner; and care plans for those remaining in the unit beyond their second review.
- HP57 The healthcare building should be replaced.
- HP58 The poor perceptions of black and minority ethnic and Muslim prisoners should be explored and any necessary action taken to improve current negative perceptions.
- HP59 All prisoners should be unlocked during the core day and engaged in employment, education or training.
- HP60 Arrangements for supporting prisoners into accommodation on release should be improved as a matter of priority.



# Section 1: Arrival in custody

## Courts, escorts and transfers

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### Expected outcomes:

Prisoners travel in safe, decent conditions to and from court and between prisons. During movement prisoners' individual needs are recognised and given proper attention.

- 1.1 Transport arrangements for prisoners were sound and relationships between escort and reception staff were good. All relevant paperwork travelled with prisoners, and they were given sufficient notice of transfer in most cases. Escort vehicles were in good condition.
- 1.2 Although journey times for most new arrivals were less than four hours, there had been a sharp increase over the previous two years in the number of prisoners travelling more than 50 miles, which had led to longer journey times. Prisoners that we spoke to were mainly positive about their experiences of escorts and transfers. In our survey, 58% of prisoners described the cleanliness of their escort vehicle as good or very good, and 76% said they that were treated well or very well by escort staff, with both figures being significantly better than the comparators of 51% and 67%, respectively.
- 1.3 Escort and reception staff were observed to treat prisoners in a professional manner, and reception staff were welcoming to all new arrivals. Prisoners were routinely handcuffed when being escorted from vehicles to reception, as a result of several incidents that had occurred during the previous year, when prisoners had gained access to rooftops, one of which had involved a prisoner on an escort vehicle. However, this arrangement was not subject to any individual risk assessment and appeared disproportionate to the risks posed.
- 1.4 Reception was closed over the lunch hour, but staff made arrangements to receive prisoners over this period provided that prior notification was received. Reception was not staffed after 5.30pm but prisoners rarely arrived after this time. Reception staff were flexible in facilitating new arrivals during the evening.
- 1.5 Relevant paperwork travelled with prisoners, and they were given sufficient notice of transfer in most cases.

### Recommendation

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- 1.6 Prisoners should only be handcuffed when being escorted between reception and the escort vehicle on the basis of an individual risk assessment.

## First days in custody

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### Expected outcomes:

Prisoners feel safe on their reception into prison and for the first few days. Their individual needs, both during and after custody, are identified and plans developed to provide help. During a prisoner's induction into the prison he/she is made aware of prison routines, how to access available services and how to cope with imprisonment.

- 1.7 The reception area was cramped, poorly lit and offered no privacy. In order to minimise the time that prisoners spent there, many reception procedures were conducted on the first night and induction unit. First night arrangements were not clear, but a recently introduced induction package appeared to be bedding in well, supported by a committed and enthusiastic staff group.

## Reception

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- 1.8 The reception area was cramped and poorly lit. New arrivals were first interviewed by staff at an open counter next to both the reception entrance and the single holding room, so there was no privacy for prisoners to express any concerns or issues. The holding room was functional but shabby and contained limited and out-of-date information, with none in any languages other than English. Prisoners had unrestricted access to an adjoining shower and toilet.
- 1.9 All prisoners were offered a smokers' pack, but there was no alternative pack for non-smokers, although staff told us that one was being made available shortly. Prisoners could wait up to two weeks before being able to receive orders from the prison shop, although a second smokers' pack was offered after the first week.
- 1.10 In order to minimise the time that prisoners time spent in the reception area, many tasks normally carried out in reception, such as kit issue, health screening and so on, were conducted on the first night and induction unit.
- 1.11 Arrangements for new arrivals to see Listeners were unclear. Although we saw a Listener speaking to a group of prisoners in the holding room, we were later told by a number of Listeners that this had occurred only because of our presence. Listeners told us that they had often been frustrated in their attempts to see all new arrivals in reception, primarily as a result of what they perceived as reception staff's reluctance to facilitate them. This lack of clarity regarding Listener access to new arrivals was acknowledged by both the safer custody and Listener coordinators, who told us that a rota would shortly be in place to ensure consistency in this process.
- 1.12 An Insider always came across with a member of staff from the induction unit, ostensibly to speak to new arrivals, but on the two occasions we were present, the Insider was not given an opportunity to do so.
- 1.13 Although all prisoners leaving and arriving in reception were routinely strip searched, this appeared to be done in a professional manner, and all prisoners we spoke to in reception confirmed this. This was also reinforced by our survey, in which 85% of prisoners said that they had been searched on reception in a respectful way, which was significantly better than the 74% comparator.
- 1.14 The cell sharing risk assessment form was completed thoroughly by reception staff; as well as interviewing each prisoner, they also went through his core record, to gain as much information as possible. Reception staff also appeared to be vigilant at picking up any issues relating to a prisoner's potential vulnerability and then passing it on to the member of staff escorting him to the first night and induction unit.
- 1.15 Prisoners who had completed the necessary reception procedures were held in one of two large cells in what was now the healthcare centre. Because of limited resources, the healthcare centre had appropriated space formerly allocated to reception, which had resulted

- 1.16 The mandatory drug testing suite was located in the reception area, and while this facilitated the implementation of the establishment's policy of testing one in every five new arrivals, this location was inappropriate.

## First night

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- 1.17 The first night policy called for all new arrivals to be screened by a member of the healthcare department on the first night and induction unit. However, we saw such screenings taking place both on the unit and in the healthcare centre. Staff we spoke to gave inconsistent reasons for this. As few prisoners arrived after 5.30pm, there were no issues about prisoners having access to a hot meal and a shower on their first night.
- 1.18 The first night policy called for a first night assessment to be completed by one of the induction officers for each new prisoner before being locked up for the night. However, following the arrival of a group of prisoners late one afternoon, we saw their first night assessment being carried out within a group the following morning.
- 1.19 Our survey showed that prisoners were significantly more positive than the comparators about the range of help and support offered by staff in the first 24 hours in all areas except problems in needing protection from other prisoners, where the results were the same as at comparator prisons.
- 1.20 All prisoners were given the opportunity to make a free telephone call, but this was not routinely recorded in all wing files. There was a log of calls made, but this did not account for prisoners who declined this offer.

## Induction

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- 1.21 There were three dedicated induction staff, who were based on the first night and induction wing. Two induction officers were on duty during the core day on Monday to Friday, and one during weekday evenings. When prisoners arrived at the weekend, a pre-identified duty induction officer would attend. Induction staff appeared to be committed to their role. The four Insiders located on the induction unit were well integrated among the staff, with induction officers viewing them as a part of the team.
- 1.22 Induction arrangements had been revised six to eight weeks before the inspection. The process was well managed and organised. A rolling induction programme was in operation, lasting between four and five days, depending on the day of the week that prisoners arrived. The programme was appropriate and there were no unnecessary delays in prisoners gaining employment on completion. The establishment had invested in a computer package to assist with the induction process. Prisoners were able to go through the package individually, at their own pace, and it clearly explained all facets of the regime. A comprehensive induction booklet was given to all prisoners; this was available in only five languages other than English. Separate, less comprehensive information was available in 22 other languages, and there were plans to extend this. Any prisoner identified as not speaking English as their first language were always referred to the English for speakers of other languages (ESOL) class.
- 1.23 Prisoners on their first full day at the establishment engaged with information, advice and guidance workers, who carried out a thorough and comprehensive assessment. They also met

- 1.24 Mondays were set aside for all prisoners on the induction programme to have timetabled access to a wide range of services and functions in the prison, including the Independent Monitoring Board, race equality action team, Shelter and Toe by Toe.
- 1.25 In our survey, only 43% of prisoners were able to meet with a member of the chaplaincy team within the first 24 hours, which was significantly worse than the comparator. This surprised induction staff and also the chaplaincy coordinator, who told us that all prisoners were seen by the chaplaincy department within the first 24 hours. We saw the Muslim chaplain engaging with new arrivals during a break on their first full day of induction, and were later told that this informal process was the norm.
- 1.26 All prisoners completing their induction were asked to fill out a short questionnaire about the quality of their induction experience. The results of this survey were analysed quarterly and the resulting report formed the basis of an action plan, demonstrating an excellent level of responsiveness to prisoners' needs.

## Recommendations

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- 1.27 The reception area should be improved to provide more space, light and greater privacy for new arrivals, and afford the reception area autonomy from the healthcare centre.
- 1.28 Non-smokers should be offered a suitable alternative to the smokers' pack.
- 1.29 All prisoners should be able to order from the prison shop within 24 hours of arrival.
- 1.30 All new arrivals should have access to a Listener and an Insider in reception.
- 1.31 The mandatory drug testing suite should be relocated out of the reception area.
- 1.32 Every prisoner should be privately interviewed by a member of staff before lock-up on his first night and this should be recorded in his wing file.
- 1.33 The induction booklet should be available in a wider range of languages.

## Housekeeping points

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- 1.34 Wing files should record that a prisoner has been able to make a telephone call on locating to the induction unit.
- 1.35 The chaplaincy team should ensure that their introduction to prisoners on induction is part of the formal process.

# Section 2: Environment and relationships

## 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.

2.1 The external areas of the prison were pleasant. The age of the accommodation on A to D wings limited the activities available for prisoners, but the standard of decoration was consistently good across the residential accommodation. The wings were clean and bright, and the cells well equipped. Access to cleaning materials was good. Prisoners could shower daily, although some of the showers were in a poor state of repair, particularly on E wing. Prisoner representatives met monthly with relevant staff, and prisoners found these meetings worthwhile. Prisoners were allowed to wear their own clothing, according to privilege level. There were some delays in outgoing mail being posted. There were insufficient telephones and some did not have privacy hoods.

### Accommodation and facilities

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- 2.2 The grounds were in a good state, with pleasant gardens and areas well kept and tidy. The exercise yards were also in a reasonable state of repair and cleanliness, and seating was in the process of being installed.
- 2.3 Efforts had clearly been made with the internal decoration, and the standard of cellular accommodation across the prison was reasonable. Although the physical environment on the older units (A to D) was not ideal, all the cells were clean and in a good state of repair. There was little graffiti, and prisoners were clear that they could have their cells painted at any time by the prisoner painters and decorators. Communal areas were also in a reasonable state of repair and well equipped, although the limited physical environment of the older units made it harder for large numbers of people to associate there. There was little comfortable seating on the older wings, but there were a few comfortable seats available for prisoners on E wing. Staff were noticeably present on the wings during association. Some joined in with the games being played, and all were easily available to prisoners. All prisoners had privacy keys to their rooms.
- 2.4 The temperature was reasonable throughout the prison, with the exception of F wing. The anti-ligature design of the windows of this building meant that there was a constant flow of air from outside for ventilation, and prisoners complained about the draught. Modifications had been made to some of the windows, but most prisoners had blocked off the vents using tape. Prisoners also complained about the water pressure on the newer wings, although the showers we tested had a reasonable flow of water.
- 2.5 Eleven cells each on A, B, C and D wings were designed for single occupancy but occupied by two prisoners. Few toilets were screened, and there were no toilet seats.
- 2.6 Prisoners had access to drinking water, toilets and washing facilities at all times. Kettles were no longer provided by the prison but were available for purchase, and flasks were provided for hot water during lock-up periods.

- 2.7 Cell call bells were all answered quickly. In our survey, 43% of prisoners said that their cell call bell was normally answered within five minutes, which was in line with the comparator. There was no automated cell call response system for management checks. We saw no observation panels covered over, and staff we spoke to were clear about their responsibilities in response to prisoners blocking panels or misusing cell bells, but said that they rarely had to enforce them.
- 2.8 Televisions were readily available to those eligible to have them under the incentives and earned privileges (IEP) scheme.
- 2.9 There was a clear offensive display policy. This had been emphasised recently and prisoners were required to cover any inappropriate pictures. Prisoners demonstrated an understanding of what was expected.
- 2.10 Information was displayed in a variety of areas on the residential wings. Some of this was out of date and some, even though it was current, had yellowed with age.
- 2.11 There were prisoner representatives for a range of consultative and statutory committees, who met monthly with relevant staff, although their contribution to policy meetings was underdeveloped (see sections on self-harm and suicide and race equality). Prisoners we spoke to said that the prisoner representatives worked well and presented their views effectively, and that the decisions made at meetings were communicated back to them. The minutes demonstrated a good range of discussion, although action points were rarely time bounded or attributed to named individuals. Staff also consulted the wider prison population about key issues such as the prison shop, the facilities list and the IEP scheme.
- 2.12 The residential areas were calm and quiet when prisoners were locked in their cells. Prisoners were respectful of each other's privacy at night and music was kept at a low volume. In our survey, 80% of prisoners responded positively when asked if it was normally quiet enough to sleep in their cell at night, which was significantly better than the 70% comparator.

## Clothing and possessions

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- 2.13 The recently published clothing policy said that prisoners were allowed to wear their own clothing, according to privilege level. Prisoners on the basic level of the IEP scheme wore prison issue clothing and footwear, those on the standard level wore prison issue clothing but their own footwear, and those on the enhanced level wore their own clothes and footwear. Restrictions on where in the prison these clothes could be worn, subject to suitable clothing for work, had been removed. Unlimited amounts of underwear could be sent in for all prisoners, irrespective of privilege level. Prisoners had access to adequate clothing and were complimentary about the responsiveness of staff if any of it was damaged or the wrong size. In our survey, 73% of prisoners said that they were normally offered enough clean, suitable clothes for the week, which was significantly better than the 61% comparator.
- 2.14 Prisoners had access to laundry facilities, through orderlies. Irons and ironing boards were available from all wing offices. Prison clothing was washed and returned weekly. Prisoners could have their clothes laundered before discharge, but we did not see this happen during the inspection.
- 2.15 Prisoners' property was held securely in reception. Valuable property was routinely security marked with an infra-red pen before it was issued. The procedures for controlling property were commensurate with risk and need, and there were no inappropriate restrictions. The

- 2.16 Prisoners were given an unlimited number of unidentifiable black bags in which to carry their clothes on release.

## Hygiene

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- 2.17 The general prison environment was mostly clean. The standard of cleanliness in communal areas was good, and a prison-wide competition had been introduced with the aim of increasing prisoner involvement in keeping the environment clean. Access to cleaning materials was good; in our survey, 84% of prisoners said that they normally got cell cleaning materials every week, which was significantly better than the 75% comparator.
- 2.18 The showers were clean and tidy, and prisoners reported easy access to them throughout the day. In our survey, 95% of prisoners said that they were able to have a shower every day, which was significantly better than the 92% comparator. The showers on C and D wings had been refurbished and those on A and B wings were in the process of being renovated. The showers on E wing, while clean, were in a poor state of repair; the plastic protective covering was coming away from the wood underneath, which would soon rot. There was a ready supply of personal hygiene items of basic quality on the residential areas.
- 2.19 Freshly laundered bedding was provided for all prisoners on arrival, and thereafter kit exchange took place weekly. We received no complaints about accessing sheets and blankets, and in our survey 85% of respondents, which was similar to the comparator, said that they normally received clean sheets every week. A mattress replacement system was in operation on application. Prisoners were allowed their own bedspreads, duvets and duvet covers on the enhanced level of the IEP scheme. All prisoners, irrespective of privilege level, were allowed curtains.

## Mail

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- 2.20 Prisoners could send or receive as many letters as they wished. Operational support grade staff sorted mail and delivered it to prisoners on the day of arrival, and outgoing mail was collected from wings on the evening before being posted. Prisoners reported delays in their outgoing mail reaching its destination. No mail was posted out between 3pm Friday and 3pm Monday.
- 2.21 There were suitable monitoring systems for the routine scrutiny of 5% of all mail, for those subject to legal proceedings affecting contact with others and for those identified by security staff as requiring mail monitoring. Legal correspondence was handled appropriately.

## Telephones

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- 2.22 There were insufficient telephones, with one for every 29 prisoners, and some did not have adequate privacy hoods. Access to telephones was available throughout the day, and prisoners told us that staff provided additional telephone calls free of charge in emergencies.

- 2.23 Most prisoners were able to exchange visiting orders for letters, irrespective of whether or not they received visits, but only foreign national prisoners were able to exchange visiting orders for telephone credit.

## Recommendations

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- 2.24 Prisoners should not share cells designed for single occupancy.
- 2.25 Screening should be provided for in-cell toilets and toilet seats should be fitted.
- 2.26 The refurbishment of the showers on A and B wings should be completed and remedial work undertaken in the E wing showers.
- 2.27 Managers should investigate why outgoing mail is being delayed and take steps to keep delays to a minimum.
- 2.28 Additional telephones should be installed, to allow one for every 20 prisoners.
- 2.29 All prisoners should be permitted to exchange visiting orders for telephone credit.
- 2.30 Adequate privacy hoods should be fitted to telephones to enable prisoners to make calls in private.

## Housekeeping points

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- 2.31 The information on notice boards should be refreshed periodically, even when not out of date.
- 2.32 The minutes of prisoner representative meetings should show time-bounded and named responsibility for actions to be taken.

## Staff–prisoner relationships

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### Expected outcomes:

Prisoners are treated respectfully by all staff, throughout the duration of their custodial sentence, and are encouraged to take responsibility for their own actions and decisions. Healthy prisons should demonstrate a well-ordered environment in which the requirements of security, control and justice are balanced and in which all members of the prison community are safe and treated with fairness.

- 2.33 Staff–prisoner relationships were good. Staff were approachable and respectful to prisoners. Staff challenged inappropriate behaviour and gave prisoners the chance to improve their behaviour before being subject to more formal use of IEP warnings or adjudications.
- 2.34 Staff were respectful in the way they spoke to and about prisoners, and had a good awareness of the effect of imprisonment on individuals and their families. Most staff interacted well with prisoners, engaged well on a one-to-one basis with prisoners and with each other, and acted as appropriate role models. They referred to most prisoners by their first or preferred names, and the written entries in wing files used appropriate nomenclature. We saw staff routinely knocking before entering cells.

- 2.35 In our survey, 86% of respondents said that most staff in the prison treated them with respect, and 82% said that there was a member of staff they could turn to for help if they had a problem, both of which were significantly better than the 74% and 72% comparators, respectively. Prisoners in our groups also generally spoke positively about the staff. In our survey, 21% of prisoners said that staff normally spoke to them most or all of the time on association, which was similar to the comparator.
- 2.36 Staff were confident in praising good work, as well as challenging problematic behaviour. A number of entries in wing files showed that prisoners were given the chance to improve their behaviour before being subject to more formal use of IEP warnings or adjudications. Even where the formal warning process had been activated, prisoners were still given opportunities to change their behaviour before being downgraded.

## Personal officers

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### Expected outcomes:

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

- 2.37 The personal officer scheme demonstrated a good level of engagement over a period of time. Most wing file entries demonstrated that personal officers had a good level of knowledge of those on their caseload. Management checks were effective and action recommended was followed up. Prisoners retained their personal officer unless either staff or prisoners moved from the wing. Personal officer engagement in sentence planning was good, although there was variation between officers.
- 2.38 Prisoners were generally positive when asked about their personal officers. In our survey, 81% said that they had a personal officer, which was significantly better than the 71% comparator. Many were able to cite instances where their personal officer had resolved a problem for them or contributed to a review.
- 2.39 There was a good level of engagement with the personal officer scheme from staff. Those we spoke to were aware of their responsibilities and were enthusiastic about them. They showed a good level of knowledge about the prisoners on their caseload.
- 2.40 Each cell had a card on the door on which the name of the personal officer and the relief was printed. There was a good level of consistency of personal officers, with changes only routinely occurring when staff or prisoners moved from the wing. The scheme was wing and caseload based, which helped to ensure consistency.
- 2.41 The published personal officer scheme required a minimum of one entry in the wing history sheet each fortnight. All the files we saw had at least fortnightly entries, dating back several months. The quality of the entries was high and demonstrated that staff were aware of significant events in the lives of those in their care. Management checks were regular and effective. They praised good quality entries, as well as indicating where improvements were required, and action recommended was followed up. However, there were some rare inconsistencies of approach. For example, in the case of a prisoner whose father had died, the file showed no follow-up about the care issues, and three behaviour warnings had been issued in quick succession, with no reference to why this prisoner's behaviour might have deteriorated or acknowledgement of his personal circumstances.

- 2.42 Personal officers contributed to categorisation, IEP reviews, sentence planning and parole reports, although the level of engagement with these processes varied between officers.

## Recommendations

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- 2.43 Wing history file entries should be made at least weekly. Entries should reflect the individual prisoner's circumstances and contain sufficient information for an uninformed reader to understand the context.
- 2.44 The involvement of personal officers in sentence planning should be developed and further integrated into individual prisoners' sentence planning.

# Section 3: Duty of care

## 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). Active and fair systems to prevent and respond to violence and intimidation are known to staff, prisoners and visitors, and inform all aspects of the regime.

- 3.1 Safer custody statistics, our survey and prisoner feedback all indicated that the prison was safe. The four-stage anti-bullying strategy was part of the overarching violence reduction policy, and concentrated on challenging alleged perpetrators. There was minimal focus on either subsequent interventions for bullies or support for victims. There appeared to be no transparency in the use of the strategy, and the establishment was unable to provide documentation relating to formal investigations. The quality of staff entries in anti-bullying documentation was generally good.
- 3.2 The safer custody team comprised a senior officer and an officer. The anti-bullying strategy, which was incorporated into the violence reduction policy, was mainly concerned with the management of perpetrators of bullying. It had little emphasis on effective interventions, instead attempting to manage perpetrators by removing privileges or, as the strategy stated, giving punishments. The strategy comprised four stages, with prisoners immediately challenged about their alleged behaviour and then reviewed after 28 days at the first stage. There was little discernable difference between stages one and two, other than incentives and earned privileges (IEP) and cell sharing risk assessment reviews at stage two, with no directives on action plans or interventions. If a prisoner showed continued evidence of bullying behaviour after 28 days on stage two, he was then moved to stage three, which resulted in an automatic downgrade to the basic level of the IEP scheme and frequent irregular cell searching. A downgrade to basic through regular IEP reviews required principal officer authorisation, but reaching stage three of the anti-bullying strategy only senior officer authorisation. The strategy at this stage required an action plan, but wing managers were unaware of any formal interventions they could use. Continued bullying on stage three resulted in a prisoner moving to stage four, on the authorisation of a governor grade. On this stage, the prisoner was relocated to the segregation unit and continued to be managed under Rule 45 (good order or discipline) arrangements. The quality of staff entries in anti-bullying documentation was generally good.
- 3.3 All prisoners that we spoke to who were currently on stage three of the anti-bullying strategy complained of receiving little or no information about why they had been placed there. While most of the cases that we looked at in further depth showed that there was evidence to back up the allegations, there was no transparency in the process, with the establishment unable to provide documentation relating to formal investigations. In one particular case, entries in a prisoner's anti-bullying file provided no concrete evidence of bullying, yet he had been moved to stage three, with the reasons not recorded or given to the prisoner.
- 3.4 During the previous year, there had been 91 anti-bullying folders opened on prisoners, with 28 resulting in a prisoner moving to stage three or four of the scheme. This appeared to be a high number, given the low levels of violence indicated by the establishment's statistics, our own

- 3.5 There was no formal process within the strategy for prisoners to appeal against being placed on anti-bullying measures, other than the complaints process, and prisoners were not consistently informed that they could make such an appeal.
- 3.6 Although the strategy incorporated directions for support plans to be drawn up for victims of bullying, we saw no evidence of any. There were no formal interventions to support the victims of bullying.
- 3.7 A violence reduction committee met every month, with good multidisciplinary attendance. The minutes evidenced that the issues discussed were appropriate, but while this included some basic statistics (types of violent incidents by month – for example, fighting and bullying), these were not sufficient to identify trends and there was no evidence of quality analysis. For example, in October 2008 the number of alleged bullying incidents had risen from four in the previous month to 19, but no detailed discussion of this, nor consequent action, was recorded in that month's meeting.
- 3.8 There were good links with the security department, which maintained a log of all bullying-related security information reports. This was reviewed daily by the safer custody coordinator. There was also a system of safer custody information reports (SCIRs), whereby staff could report any related issues directly to the safer custody team. However, a number of staff that we spoke to indicated that they were unclear what form should be used and when.
- 3.9 The establishment had safer custody prisoner representatives on five of the seven wings (A to E), called 'free inside' representatives, who had a high profile on the wing, not least because of their brightly coloured t-shirts. They attended the quarterly prisoners' consultative group. Most prisoners we spoke to said that they had sufficient confidence in wing representatives to approach them with a bullying-related issue.
- 3.10 Staff appeared to be proactive in challenging any form of anti-social behaviour, including bullying, and this was confirmed by all of the prisoners that we spoke to. Our survey indicated that 91% of respondents, significantly higher than the 83% comparator, had felt safe on their first night; 18%, significantly fewer than the 29% comparator, had felt unsafe at some time in the prison; and only 6% of prisoners currently felt unsafe, which was significantly better than the 15% comparator.
- 3.11 A bullying and violence survey had been conducted in November 2008, but the resulting data had not yet been analysed. Visitors had also been asked to complete an adapted version of the questionnaire, but the returns had been disappointing.

## Recommendations

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- 3.12 **Formal interventions should be introduced for perpetrators of bullying, including racist bullying.**
- 3.13 **Support should be introduced for victims of bullying, including racist bullying.**

- 3.14 Authority to downgrade a prisoner's incentives and earned privileges (IEP) level under the anti-bullying strategy should be consistent with that stipulated in the IEP policy.
- 3.15 Investigations into alleged bullying behaviour should be formally recorded and the alleged perpetrator informed in writing of the outcome(s).
- 3.16 All prisoners placed on the anti-bullying scheme should be given the reasons for such a decision in writing, and the reasons for any subsequent move to a different level on the scheme should be provided in writing.
- 3.17 Only when there is evidence of bullying should prisoners be subject to anti-bullying measures. Any other forms of violent or anti-social behaviour should be managed through separate measures.
- 3.18 There should be a formal appeal process for any prisoner placed on the anti-bullying strategy.
- 3.19 Violence reduction meetings should analyse data to look at trends and themes and decide on action accordingly.

## Self-harm and suicide

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### Expected outcomes:

Prisons work to reduce the risks of self-harm and suicide through a whole-prison approach. Prisoners at risk of self-harm or suicide are identified at an early stage, and a care and support plan is drawn up, implemented and monitored. Prisoners who have been identified as vulnerable are encouraged to participate in all purposeful activity. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- 3.20 The establishment's safer custody policy and the monthly safer custody meeting provided strategic oversight of self-harm and suicide work, although data collection was limited and there did not appear to be any subsequent analysis. A local action plan had been raised following the Prisons and Probation Ombudsman's report into a self-inflicted death in 2006 and all points had been actioned. Awareness among staff was good, but entries in assessment, care in custody and teamwork (ACCT) documents were not consistently sound. Listeners were well supported by the Listener coordinator but did not feel valued by the establishment as a whole.
- 3.21 The safer custody policy was sound and placed appropriate focus on new prisoners to the establishment and related issues of increased risk. It also stressed the need for continued interaction by staff with prisoners at risk and the importance of ensuring that such prisoners are engaged in purposeful activity as fully as possible. Staff demonstrated a good awareness of the policy and in all matters related to self-harm and suicide.
- 3.22 A self-harm and suicide prevention meeting was held monthly, attended by staff from a range of disciplines from within the establishment plus a representative from the Samaritans. Prisoner representation usually consisted of a single prisoner, if at all. The range of data presented at the meeting was insufficient and there was no evidence that any analysis of potential trends and themes was carried out. There were examples of good work by the

- 3.23 The number of open ACCT documents had decreased significantly over the third quarter of 2008, prompting concerns by the committee that staff had become apathetic. The subsequent report on the situation, by the safer custody coordinator, was able to allay such fears.
- 3.24 Reception and induction staff both checked the core records of new arrivals for any history of self-harm or suicide attempts, and this was passed on to wing staff (see section on first days in custody).
- 3.25 ACCT self-harm monitoring procedures were in place. While the establishment kept records of who had undertaken ACCT foundation training, it was unclear what percentage of staff remained to be trained. There was no consistently delivered programme of refresher training. The safer custody team made daily checks of ACCT documentation, along with managers, and any issues were addressed directly with the member of staff concerned and, if necessary, their manager. Observation books were also used appropriately when staff had low-level concerns, and these entries were also monitored by the safer custody team.
- 3.26 There had been 54 ACCT documents opened between July and December 2008. Staff entries varied in quality, sometimes displaying a sound understanding of the circumstances and feelings of individual prisoners, but sometimes being little more than a perfunctory observation of the prisoner's actions. Management checks consistently picked up on shortfalls and there was evidence that they were addressed accordingly. Initial assessments and subsequent support plans were strong, with attention focused on action points relevant to the individual and his circumstances and updated regularly. Reviews were well attended and appropriately multidisciplinary.
- 3.27 Following the closure of each ACCT document, the safer custody coordinator carried out a comprehensive quality check of the document. Any issues were then followed up with the members of staff concerned. If an issue was repeated in different documents, this was addressed at the self-harm and suicide prevention meeting.
- 3.28 There were seven trained Listeners. They were well supported by a committed Listener coordinator but felt undervalued by the establishment. Links with and support from the Samaritans were good, with a meeting every two weeks held between Listeners and Samaritans, and a member of the Samaritans was available on call. The Samaritans felt well supported by the establishment in their work there and told us that staff were always cooperative. The Listeners had received awareness training in ACCT, self-harm and mental health issues.
- 3.29 In our survey, only 56% of respondents said that they could speak to a Listener at any time, which was significantly worse than the 64% comparator, although this was not confirmed by prisoners we spoke to, both in groups and individually. Listeners also confirmed that no prisoner had ever told them that they had had problems in accessing them; Listeners considered that this perception was due to inadequate promotion of the Listeners scheme until the recent introduction of the new induction programme. Since then, they had had consistent access to all new arrivals in the first night centre, which they felt had increased the profile of their service significantly.

- 3.30 There were two care suites available, on A and G wings, and they had been used three times in the previous six months.
- 3.31 There had been no near-death incidents over the previous 12 months according to the establishment's statistics. However, there was no strategy for action following near-deaths, and neither the safer custody team nor any of the wing managers we spoke to knew what should be done following such incidents. We were unsure of the level of awareness about near-death incidents, and subsequently their identification.
- 3.32 An action plan had been raised in response to the Prisons and Probation Ombudsman recommendations following a self-inflicted death in 2006, and all points had been responded to, but there was no ongoing monitoring to ensure that the recommended actions continued to be implemented, and most managers with links to safer custody were not aware of this action plan.
- 3.33 Not all staff had been issued with anti-ligature knives and a large number were observed not to be carrying one.

## Recommendations

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- 3.34 Suicide and self-harm prevention meetings should analyse data to look at trends and themes and decide action accordingly.
- 3.35 The Listeners should play a larger part in informing self-harm and suicide prevention strategies in the prison, both through the formal monthly meetings and through other consultative processes.
- 3.36 All staff trained in suicide prevention should receive regular refresher training.
- 3.37 The safer custody policy should provide guidance to staff as to what constitutes a near-death, and ensure that such incidents are investigated and an action plan put in place as a result.
- 3.38 There should be regular monitoring of the action plan raised following the Prisons and Probation Ombudsman's recommendations after a self-inflicted death in 2006.
- 3.39 Anti-ligature knives should be issued to and carried by all frontline staff.

## Diversity

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**Expected outcomes: All prisoners should have equality of access to all prison facilities. All prisons should be aware of the specific needs of minority groups and implement distinct policies, which aim to represent their views, meet their needs and offer peer support.**

- 3.40 The establishment had not developed an overarching diversity policy but there was a disability policy which incorporated the needs of older prisoners. Work on distinct services for gay, bisexual and transgender prisoners had not yet been developed. Prisoners had the opportunity to declare a disability on arrival. There was a lack of individual personal care planning from the disability liaison officer (DLO), who had insufficient profiled time for the post. The DLO had

organised a forum for all older prisoners and those with a disability. Over 70% of staff had undertaken diversity training in the previous three years.

- 3.41 The establishment had not developed an overarching diversity policy, but there was a policy for prisoners with disabilities which incorporated older prisoners' needs. The head of residence had strategic responsibility for these diversity issues. The disability policy clearly outlined the establishment's obligations under the Disability Discrimination Act, and was focused on ensuring that all prisoners, regardless of their disabilities, had full and fair access to the regime. Work on distinct services for gay, bisexual and transgender prisoners had not yet been developed.
- 3.42 A principal officer grade was the named DLO, but did not have sufficient allocated time to focus sufficiently on developing services for prisoners with diverse needs. The DLO was supported by officers located on F and G wings, who had profiled time of three hours a week to undertake assessments. An administrative officer grade maintained a database of older prisoners and those with disabilities. The DLO was in the process of identifying named liaison officers to support him in developing services for these prisoners, with the aim of providing more consistency in the assessment process.
- 3.43 An action plan had been established which included ongoing staff training in disability awareness. The action plan and development of services for older prisoners and those with disabilities were discussed at the quarterly diversity meeting, which the DLO had not yet attended, having taken up this post only four months before the inspection. Data were provided at these meetings, but no analysis was undertaken to improve services.
- 3.44 Prisoners had the opportunity to declare their disability on arrival at the establishment. They completed a disability questionnaire during their healthcare screening in reception and a further questionnaire was completed during the induction process with information, advice and guidance workers. The DLO was notified of all prisoners with disabilities, and all completed questionnaires were kept by the administrative officer, who input the information on the local inmate database system (LIDS) so that wing staff were kept informed. The support staff from F and G wings subsequently met with prisoners declaring a disability in order to assess whether any reasonable adjustments were needed. When this was the case, a plan of the adjustments was recorded and, if required, a personal evacuation plan drawn up and kept in the prisoner's wing history sheet. Although comprehensive lists of prisoners with disabilities were kept on the residential wings, during the inspection some staff were unable to locate them, and where a prisoner had been identified as requiring assistance, a plan was not always contained in the wing history sheet.
- 3.45 The DLO had not met the 23 prisoners who were recorded as having declared a disability at the time of the inspection, and was not involved in the assessment process, but was consulted when reasonable adjustments were needed to ensure that consideration was given to all aspects of the regime. Prisoners with a disability had no dedicated member of staff to take responsibility for ensuring that their needs were addressed. The system lacked individual personal care planning from the DLO. The DLO had organised a forum for all prisoners with a disability, so that they could contribute to the development of services.
- 3.46 G wing had four adapted cells, as well as a lift to each of the landings and adapted shower facilities on the ground floor. No prisoners with a physical disability were located in these cells at the time of the inspection. There was no specially designated accommodation for older prisoners.

- 3.47 Work with prisoners with learning difficulties included a Toe by Toe mentoring scheme, and a dyslexia specialist was available at the establishment. A health services lead for older prisoners had been identified and an older prisoners' forum had taken place, attended by two out of the five prisoners over 60 years old. Plans were being formulated for a well-being clinic to be established for older prisoners. Links had not yet been formed with non-statutory organisations to provide advice and support for the reintegration needs of these prisoners' diverse needs.
- 3.48 All new staff attended a diversity and race equality meeting with the race equality officer (REO), which formed part of their induction, and over 70% of staff had undertaken diversity training in the previous three years.

## Recommendations

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- 3.49 A diversity policy should be produced which encompasses all types of diversity and outlines how the establishment aims to meet the diverse needs of the population.
- 3.50 The disability liaison officer (DLO) should receive profiled time to develop services for older prisoners and those with a disability.
- 3.51 Named liaison officers should be available on all the residential wings and appropriately trained to support the DLO.
- 3.52 A DLO support worker should undertake the assessment and subsequent coordination of reasonable adjustments and care planning, where appropriate, for all prisoners with a disability.
- 3.53 Regular diversity forums for prisoners with a disability should be held and inform policy and service delivery.
- 3.54 Links should be made with community organisations to assist with the reintegration of older prisoners and those with a disability.

## Race equality

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### Expected outcomes:

All prisoners experience equality of opportunity in all aspects of prison life, are treated equally and are safe. Racial diversity is embraced, valued, promoted and respected.

- 3.55 The race equality action team (REAT) met quarterly, as did the scrutiny panel, and a monthly quality assurance group (QAG) looked in detail at the systems for managing and promoting race equality. The REO was enthusiastic and supported the prisoner race equality representatives. The investigations undertaken by the REO were thorough, the responses respectful, and any learning points were implemented and/or discussed at the REAT meeting. Twenty-one per cent of the prisoner population were from black and minority ethnic backgrounds. They had little confidence in the systems for addressing race equality issues, but perceived staff to be lacking in cultural awareness rather than racist. All black and minority ethnic prisoners we spoke to said that most staff were respectful.

## Race equality

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- 3.56 The deputy governor led on promoting and managing race equality and chaired a variety of meetings to achieve this, some of which were attended by the Governor. The REAT met quarterly, as did the scrutiny panel, and a monthly QAG looked in detail at the systems to manage and promote race equality. The REAT was well attended by an appropriate selection of staff and managers from across the establishment, as well as prisoner representatives and a member of the Humberside Diversity Panel. The REO was in the process of planning an open day, to encourage more voluntary and community organisations to become involved in the REAT.
- 3.57 The REAT meeting analysed systematic monitoring and analysing of racist equality (SMART) data, racist incidents and staff training, and received feedback from the separate subgroup meetings (the scrutiny panel and QAG). The race equality action plan (REAP) was regularly reviewed at the meeting. It was broken down into three areas, namely eliminate unlawful racial discrimination, promote race equality and promote good relations between people of different racial groups. The majority of the action points had been implemented. The REAT benefited from the additional subgroup meetings, as it was able to focus on fewer agenda items, and prioritise, discuss and follow through actions at each meeting. A simplified version of SMART data was provided to race equality representatives, which they were encouraged to share with prisoners.
- 3.58 The REO was a principal officer grade and undertook this role full time, but also provided some assistance to the foreign nationals coordinator. He was enthusiastic and committed to the role, fully involved in all the REAT meetings and supported the prisoner race equality representatives. Prisoners were aware of the REO and he was well regarded by prisoners, and the REAT membership was publicised across the wings.
- 3.59 Twenty-one per cent of the prisoner population were from black and minority ethnic backgrounds, and during the inspection black and minority ethnic prisoners in particular expressed little confidence in the systems to address race equality issues at the establishment. In our survey, 73% of black and minority ethnic prisoners and 70% of Muslim prisoners said that most staff in the prison treated them with respect, both figures being significantly lower than the comparators for white (89%) and non-Muslim (88%) prisoners. Additionally, both groups were more negative than their counterparts about being victimised by prisoners and staff. During the inspection, black and minority ethnic prisoners we spoke to told us that they did not perceive staff as racist, but viewed some of them as lacking cultural awareness. All black and minority ethnic prisoners we spoke to said that most staff were respectful and they were able to identify a member of staff they could turn to for help (see section on staff-prisoner relationships).
- 3.60 Both the deputy governor and the REO recognised that the work of the REAT needed to be better communicated to prisoners and staff, particularly in light of some of the poor perceptions that were held by black and minority ethnic and Muslim prisoners. A new staff diversity training package had recently been implemented which addressed cultural awareness. At the time of the inspection, 38% of staff had completed the new diversity package and there were plans for all staff to undertake it. Although we observed mainly good interactions between prisoners and staff, the absence of black and minority ethnic officers was a consistent issue for black and minority ethnic and Muslim prisoners. The REAP had set an objective to encourage more black and minority ethnic staff to join the establishment, by holding an open day and advertising in black and minority ethnic publications.

## Managing racist incidents

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- 3.61 The REO and prisoner race relations representatives met all prisoners during their induction and explained their role and the process of reporting racist incidents. Racist incident report forms (RIRFs) were available on the wings and the boxes were emptied by a civilian member of staff and forwarded to the REO.
- 3.62 There had been 94 RIRFs submitted in 2008. There had been a year-on-year decrease in RIRF submissions by prisoners. Staff submitted a large proportion of RIRFs and although this was mostly as a result of observing a racist incident, too many were submitted by staff who had been accused of being racist by prisoners. The REO investigated all RIRFs; this was not a good use of the REO's time, and managers were working with staff to improve their confidence in dealing with accusations from prisoners.
- 3.63 The investigations undertaken by the REO were thorough and the responses respectful. The REO ensured that any learning points for the establishment were implemented and/or discussed at the REAT meeting. A quarterly scrutiny panel was chaired by the deputy governor, and attended by a representative from Humberside Diversity Panel, two prisoner race relations representatives and the REO. RIRFs were anonymised and reviewed to ensure that they were appropriately investigated and responded to. A detailed log was kept of all racist incidents so that any emerging trends could be incorporated into report that the REO presented to the REAT meeting.
- 3.64 The REO had made links with Humber Victim Support with a view to offering support to victims of racist incidents. There were no interventions available for challenging racism. The REO had a racist monitoring database, primarily for prisoners or staff who had more than one RIRF submitted about them but with insufficient evidence to uphold the complaint. When found guilty of racist misconduct, prisoners were placed on report and the REO informed wing staff if perpetrators or victims required enhanced monitoring. The REO attended the safer custody meetings and shared information on racist bullying.
- 3.65 Exit questionnaires were distributed to all prisoners leaving the establishment, specifically related to their treatment, whether they had experienced any racial discrimination and their perception of the management of race equality at the establishment. Between 30 and 40 questionnaires were completed each month and the results analysed at the QAG. The results to date had not highlighted any significant issues.

## Race equality duty

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- 3.66 A timetable for impact assessments for 2009 had been tentatively drawn up, with the focus on areas that were failing or due to be assessed. Pay, health services, allocation to services and programmes, and complaints in relation to black and minority ethnic prisoners were identified as the first few areas that were to be impact assessed during 2009. The REAT also aimed to focus on education and the gym and identify why there was an over-representation of black and minority ethnic prisoners in these areas, rather than accept it as a long-standing trend. Prisoner focus groups, extending beyond prisoner representatives, had been convened in order to complete the impact assessments in the previous year.
- 3.67 At the time of the inspection, there were over 40 prisoners at the establishment who had been convicted of a current or previous racially aggravated offence. There were good links between the REO and the public protection team, and the REO attended the public protection meetings. The REO was responsible for notifying wing staff of the prisoners with racially aggravated

- 3.68 Seven prisoner race equality representatives were completing a package of race equality and diversity training. The representatives kept records of REAT minutes and impact assessments and were encouraged to share this with prisoners. Four out of the seven representatives had been in the post for only four months, but all were committed to the role and provided examples of issues that they had raised on behalf of other prisoners. They expressed some concerns and suspicion surrounding the confidentiality of RIRFs and thought that staff emptied the RIRFs boxes; they believed that this contributed to some prisoners' reluctance to submit racist complaints.
- 3.69 A weekly focus group for all the prisoner race equality representatives had started five weeks before the inspection as a means of dealing with any issues from prisoners, to prevent them from becoming formal complaints, and to conduct ongoing training with the race representatives. One part of the meeting was designated as a drop-in time that staff could attend if they had any race equality issues that they wanted to discuss. This was not fully publicised to staff and prisoners and there were no plans to review its effectiveness.
- 3.70 A range of events had been celebrated at the establishment, not only including recognised diversity events, but also cultural awareness workshops throughout the year, art classes and a discussion workshop regarding crime. The main corridor in the establishment in particular displayed a range of pictures depicting various diversity issues, and especially racial diversity. Competitions were held to encourage prisoners to become involved in diversity events. A calendar of events had been planned for 2009, including a gospel choir, Anne Frank display and cultural awareness workshops.

## Recommendations

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- 3.71 The work of the race equality action team should be better publicised, both to prisoners and to staff.
- 3.72 Actions identified in the race equality action plan to increase black and minority ethnic recruitment should be implemented.
- 3.73 The focus group for prisoner race relations representatives and staff should be publicised to staff and prisoners and its effectiveness reviewed after six months.
- 3.74 The low use of racist incident report forms (RIRFs) by prisoners should be investigated and the use of RIRFs should be promoted, particularly their confidentiality and how they are investigated and scrutinised.
- 3.75 Staff should be trained to deal with allegations of racism made by prisoners and encourage them to use the systems available to make a complaint.

## Foreign national prisoners

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### Expected outcomes:

Foreign national prisoners should have the same access to all prison facilities as other prisoners. All prisons are aware of the specific needs that foreign national prisoners have and implement a distinct strategy, which aims to represent their views and offer peer support.

- 3.76** Although there had been an increase in foreign national prisoners at the establishment, the time allocated to the foreign nationals coordinator (FNC) had not increased. A comprehensive foreign nationals strategy document had recently been updated and outlined the distinct needs of this group of prisoners, with a particular focus on language barriers and vulnerability concerns. There were some translated forms and information across the establishment. Foreign national issues were discussed at the REAT meeting. The UK Border Agency attended the establishment quarterly. No link had been established with a local source of independent immigration advice. The process for foreign national prisoners to access a free international telephone call was protracted.
- 3.77** There had been an increase in foreign national prisoners at the establishment; they now represented 5% of the prisoner population, but the time allocated to the FNC had not been increased. A comprehensive foreign nationals strategy document had recently been updated and outlined the distinct needs of this group of prisoners, with a particular focus on language barriers and vulnerability concerns. The document also provided useful information for staff regarding overcoming these issues. The document would have been beneficial to this group of prisoners, as it outlined the entitlements of foreign national prisoners, some of the difficulties in progressing to category D establishments and the deportation process, but it had not been issued to prisoners and they could not freely access it in the library.
- 3.78** There were some translated forms and information across the establishment, and the Big Word translation service was used where necessary. A list of staff and prisoners who spoke other languages was circulated to staff. The FNC told us that prisoners were used infrequently to translate and that they were never used when confidential information was being exchanged. Many of the foreign national prisoners were referred to English for speakers of other languages (ESOL) classes shortly after their arrival at the establishment.
- 3.79** The FNC was a senior officer grade and had taken up responsibility for foreign national prisoners four months before the inspection. He had previously covered for the REO in his absence. The FNC was allocated 17 hours each week to work with foreign national prisoners. In addition, wing-based foreign nationals liaison officers were available, and where possible the FNC delegated tasks to them. The FNC and liaison officers had received a half day of training at HMP Leeds and the FNC was knowledgeable in his work.
- 3.80** Foreign national issues were discussed at the quarterly REAT meeting. In addition, monthly foreign national meetings were held and chaired by the FNC and attended by a small group of foreign national representatives. At the time of the inspection, we were told that there were no longer foreign national representatives and that there were plans to meet all foreign national prisoners as a group. Foreign national prisoners we spoke to were not clear about who the FNC or the liaison officers on their residential wings were, or that the FNC was available twice a week.
- 3.81** The FNC and the discipline clerk had developed good links with the UK Border Agency (UKBA) criminal casework directorate, and the FNC saw prisoners three months before the end of their sentence to ensure that they had legal representation and the necessary documentation in readiness for a possible deportation notice being served. There had been 11 foreign national prisoners held at the establishment past their sentence expiry date in the previous six months; at the time of the inspection, there were only two prisoners held on immigration warrants, since December 2008, with planned imminent moves to immigration detention centres. UKBA attended the establishment quarterly to see prisoners they identified, but the FNC also referred prisoners to UKBA on request. No links had been established with a local source of independent immigration advice.

- 3.82 Representatives from UKBA had attended the establishment in December 2008 to discuss the facilitated returns scheme (FRS). An open meeting was held, to which all foreign national prisoners were invited to hear more about the scheme and to receive assistance with completing forms. Several foreign national prisoners were applying for the FRS but had unrealistic expectations about how soon they would be returned, and would have benefited from a further meeting with the UKBA representatives or the FNC.
- 3.83 A maximum of one free international telephone call could be exchanged for one visiting order, provided that a social visit had not taken place in the preceding month. The process for accessing the telephone call was by application and was protracted but, once it had been agreed, an application to wing staff was sufficient thereafter. However, staff we spoke to were not clear about this, and some thought it had to be agreed by a governor on every occasion. Foreign national prisoners we spoke to said that it could take up to two weeks to have an international call agreed. In addition, there were many foreign national prisoners who had visits from friends in the UK but whose families were abroad, yet they were not permitted an international call, as the policy was rigidly applied.

## Recommendations

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- 3.84 The foreign nationals strategy document should be made available to prisoners.
- 3.85 The foreign nationals coordinator should receive more allocated time to work with foreign national prisoners, and prisoners should be kept informed of when he is available.
- 3.86 Foreign national prisoners should meet as a group with the foreign nationals coordinator and this should be fed back into the race equality action team meeting.
- 3.87 Foreign national liaison officers should be advertised across the residential wings and prisoners should be informed of what they can expect from them in the absence of the foreign nationals coordinator.
- 3.88 An accredited, independent immigration advice agency should be sourced to attend the establishment and meet foreign national prisoners at least quarterly.
- 3.89 The establishment should facilitate meetings between foreign national prisoners and UK Border Agency representatives or the foreign nationals coordinator to improve their understanding of the facilitated returns scheme.
- 3.90 Prisoners should be permitted a free international telephone call if they have family members abroad, regardless of whether they receive a visit, and the process for accessing international telephone calls should be simplified and communicated to staff and prisoners.

## Applications and complaints

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### Expected outcomes:

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

- 3.91 Information explaining the applications and complaints procedures was displayed on all wings, but only in English. Prisoners had to ask at the wing office to obtain application and complaint forms. Prisoners were generally satisfied with the responses to their applications and complaints, but there were too many examples of responses that did not address the issue raised. There was no analysis of complaints data to identify trends.
- 3.92 In our survey, 69% of respondents said that applications were dealt with promptly, which was significantly better than the 52% comparator. The same question in relation to complaints gave a return of 42% against a 39% comparator. The feedback from prisoners in group sessions confirmed these perceptions.
- 3.93 Information explaining the applications and complaints procedures was displayed on all wings, but only in English. Complaint forms, but not application forms, were openly on display, requiring prisoners to ask at the wing office for the latter. Staff told us that this was an attempt to ensure that issues that could be dealt with by staff informally were intercepted before a form was submitted. Prisoners we spoke to confirmed that they were always given a form, even if they did not explain why they needed it.
- 3.94 There were yellow boxes located on each wing for prisoners to post complaint forms. These were emptied every day by a messenger.
- 3.95 Issues raised using the formal complaints system ranged from minor to appropriate. We came across an allegation, made by a prisoner against a member of staff, which was sufficiently serious to merit a formal investigation, but this had resulted only in a response from the member of staff's line manager.
- 3.96 The quality of responses was variable. Although many were satisfactory, too many were poor and merely repeated the establishment's rules and routines, rather than answering the prisoner's specific issues. The establishment carried out a quality check on 10% of complaints, but this appeared to be perfunctory.
- 3.97 Complaints were collated on the basis of location and subject matter, but not by ethnicity, disability or prisoner type. The data were presented in a confusing way, and there was no analysis to identify trends and thus inform local policy.

## Recommendations

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- 3.98 Information explaining the applications and complaints process should be made available in a wider range of languages.
- 3.99 Application forms should be made freely available on the wings, so that prisoners are not required to ask staff for them.
- 3.100 The quality assurance system should effectively address and improve the quality of responses and ensure that complaints requiring formal investigation receive it.
- 3.101 A detailed analysis of complaints should be carried out by ethnicity, disability, location and prisoner type to inform local policy.

# Legal rights

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## Expected outcomes:

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

3.102 All prisoners were asked if they had legal representation on their arrival at the establishment and were informed of the legal services provision during the induction process. The two trained legal services officers were rarely accessed, and some of the information displayed about legal services was incorrect. There were no delays in accessing legal visits.

3.103 There were two fully trained legal services officers but neither received any profiled time to undertake this work. However, when they received an application from a prisoner they contacted the detail office to facilitate cover, so they could respond to the application. Prisoners did not raise any concerns about legal issues during the inspection or in our survey. All prisoners were asked if they had legal representation during the reception process and were given a list of solicitors who specialised in a range of legal issues. They were also given writing materials for legal letters.

3.104 Information about who to contact for legal information was included in the induction programme and the services of the legal officer was advertised on the wings, although some of the information was incorrect. Home detention curfew and end of custody licence were administered from the offender management unit (OMU), and staff on the OMU, along with probation and discharging officers, were also responsible for ensuring that licence conditions were fully explained. Although there were over 50 prisoners who had been recalled to custody, much of the process had been dealt with at the prisons they had been recalled to before being transferred to Everthorpe. Residual issues were dealt with by the OMU at Everthorpe.

3.105 Legal services officers were unable to provide any record of prisoners they had had contact with. We were told that they had met few prisoners in the previous 12 months and that any contact with prisoners mainly concerned accessing solicitors for adjudication hearings or requests for legal letters. Foreign national prisoners' legal issues were dealt with by the foreign nationals coordinator (see section on foreign national prisoners).

3.106 Legal books and up-to-date Prison Service Orders were available in the library, and one of the legal services officers, who was unavailable during the inspection, also had a stock of legal resources. Legal visits took place in three private booths and there was no delay in accessing a legal visit. The resources available to legal services officers were not kept together in one place and the two officers had access to different sections of information.

## Recommendation

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3.107 Legal services officers should keep a log of all applications received and legal services provided to prisoners.

## Housekeeping points

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3.108 Correct information about legal services should be displayed on the residential wings.

- 3.109 Both legal services officers should have access to, and knowledge about, where the legal services resources are kept.

## Substance use

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### Expected outcomes:

**Prisoners with substance-related needs, including alcohol, are identified at reception and receive effective treatment and support throughout their stay in custody. All prisoners are safe from exposure to and the effects of substance use while in prison.**

- 3.110 The integrated drug treatment system (IDTS) ran smoothly, with positive feedback from participating prisoners. Staff shortages limited the expansion of the programme. Random mandatory drug testing (MDT) positive rates indicated high levels of illicit buprenorphine use, which the establishment was working hard to address. The MDT suite's holding cell was dirty and in a poor state of decoration.
- 3.111 The establishment had introduced the IDTS in June 2008. At the time of the inspection, the service was well established and ran smoothly. IDTS prisoners generally arrived from other establishments, having been stabilised on their opiate substitute medication and having completed the IDTS 28-day psychosocial programme. The counselling, assessment, referral, advice and throughcare (CARAT) service case-managed each IDTS prisoner, giving support as necessary through key working and relapse prevention support.
- 3.112 Methadone and suboxone were used as opiate substitute drugs. There was no prescribing of buprenorphine. At the time of the inspection, 29 prisoners were receiving opiate substitution treatment, and they were all housed on F wing, where their daily medication was administered in a clean and appropriately equipped treatment room. The IDTS nurses interacted well with prisoners at the treatment administration hatch, and prisoners demonstrated a high level of trust and confidence in the clinical staff. Prisoners that we spoke to were positive about all aspects of their treatment, including the support of custody staff on the IDTS wing. These positive reports supported a written patient feedback exercise conducted in November 2008.
- 3.113 The number of prisoners on the IDTS was capped at 30, owing to staffing shortages. A recruitment process was under way to fill the post of specialist substance misuse lead nurse. All IDTS prisoners had regular prescribing care plan reviews with the specialist substance misuse general practitioner, in line with Department of Health guidelines.
- 3.114 The average MDT positive rate over the six months July to December 2008 was 9.4%, which rose to 18.8% when buprenorphine was included. The worst month in the previous 12 months had been December 2008, when the rates were 11.4% and 34.3%, respectively. In our survey, 43% of respondents said that it was easy or very easy to get illegal drugs at the establishment, which was significantly worse than the 32% comparator.
- 3.115 Buprenorphine was clearly the most commonly abused drug, and the establishment was working hard to reduce its supply. In addition to the collection and analysis of intelligence to inform targeted searches and suspicion testing, and the regular monitoring of visits, new netting had been erected to stop the smuggling of drugs over the prison walls onto the exercise yards. Prisoners were also randomly tested in reception. There had been 18 drug finds in the six months before the inspection.

- 3.116 The MDT suite was adequately equipped and clean, although the holding cell was dirty, in a poor state of decoration and there was graffiti on the walls.

## Recommendations

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- 3.117 The post of specialist substance misuse lead nurse should be filled as soon as possible to ensure the smooth running of the integrated drug treatment system and an increase in the number of prisoners treated.
- 3.118 The mandatory drug testing holding cell should be deep cleaned and redecorated to remove all graffiti from the cell.

## Section 4: Health services

### Expected outcomes:

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

4.1 The physical environment of the healthcare department was poor, and the shared use of the same area for reception holding cells and healthcare provision was inappropriate. Healthcare reception screening was comprehensive, with follow-up appointments being made and previous history checked. Waiting lists for primary care services were of an acceptable length. The healthcare application and appointments systems were poor, and prisoners were insufficiently well informed about healthcare provision. Most medications were given in-possession. Nurses could only give paracetamol and ibuprofen, and simple pain relief was not available at night. The dentist provided a full range of treatment. The provision of mental health services was good.

### General

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- 4.2 Health services were commissioned and provided by East Riding of Yorkshire Primary Care Trust (PCT). Employment of nursing staff had transferred from the prison to the PCT in August 2008. A health needs assessment had been conducted at the end of 2007 and had been published in 2008. The absence of an electronic patient information system in 2007 had meant that there had been limitations to the local data available. A new health needs assessment was due to be undertaken and it was anticipated that the electronic system that was now in place would be helpful in providing local information. The prison partnership board met quarterly and was attended by senior staff from the prison and the PCT.
- 4.3 The healthcare centre was in a building shared with reception. Most of the rooms used by reception were at one end of the building, with healthcare facilities at the other; however, two reception holding rooms were located in the healthcare area of the building (see section on first days in custody). The building was old and cramped and was not suitable for the delivery of health services. Staff were making good use of the inappropriate building and it was kept clean and tidy. We were told that plans for a new healthcare centre were at an advanced stage, with work due to start in the summer of 2009. Senior health services staff had been involved in the planning of the new building. The waiting room was small, with bench seating. There was a health information board on the wall, and current newspapers and magazines were available. Prisoners were moved to and from the healthcare centre throughout the morning and afternoon sessions to avoid too many people being in the waiting room at the same time. There was evidence that prisoners smoked in the waiting room, as the area smelt of smoke and there were cigarette ends on the floor after the room had been in use.
- 4.4 There was a healthcare room in the main prison corridor, where prisoners from A to E wings collected their medication. The flooring in this room had been damaged. There was also a healthcare room in F wing, where prisoners from F and G wings collected their medication and methadone was administered. There was also a healthcare consultation and treatment room and a group room on F wing. These rooms were clean and tidy.

- 4.5 The dental surgery was located in the healthcare centre and had been refurbished about six years previously. The standard of equipment was good and was all working satisfactorily. Cross-infection controls were acceptable.
- 4.6 The prison had its own pharmacy, which consisted of a small but well equipped room, which was clean and tidy and kept appropriately secure. The pharmacy and wing-based healthcare rooms were equipped with refrigerators for the storage of heat-sensitive medicines, and daily temperature records were properly maintained. Some treatment rooms had out-of-date copies of the British National Formulary.
- 4.7 Two rooms were used by pharmacy staff to supply in-possession medication at lunchtime on the wings. These rooms were also used as offices and were not ideally suited for medicine supply; however, the use of these rooms was considered necessary to avoid difficulties in moving prisoners around the prison to the treatment rooms. Supplies were given through stable doors, which provided neither confidentiality nor security.
- 4.8 The healthcare centre was a single-storey building with a ramped entry, and was accessible to those with limited mobility, although the layout of the building would have made it difficult for prisoners using a wheelchair to use some of the rooms. One of the healthcare rooms in the main prison was on the ground floor, while the other was accessible by lift.

## Clinical governance

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- 4.9 Clinical governance arrangements included the management and accountability of staff. All the staff had job descriptions and clear roles and responsibilities. The head of healthcare was a registered general nurse (RGN), and she worked closely with the clinical services manager, who deputised for her in her absence. The rest of the nursing team was made up of seven band five nurses, of whom five were RGNs, one was a registered mental health nurse (RMN) and one was a dual qualified RGN and RMN. There was one band six vacancy which was being advertised, and one band five vacancy. There were plans to convert the band five vacancy to two healthcare assistant posts. Although the RMNs sometimes carried out reception duties and the dual-qualified RMN sometimes carried out generic duties, if the need arose most of their time was dedicated to mental health work.
- 4.10 Some of the primary care nurses took responsibility for specific life-long conditions, such as respiratory conditions, and specialist nurses from the community also attended the prison to advise on the care of specific patients if necessary. The clinical services manager had recently become the nominated lead for the care of older people. If nursing staff required clinic advice when neither of their managers was available, they could contact the modern matron on call for community services, who offered advice and support.
- 4.11 Two discipline officers were allocated to healthcare each day, to provide support and collect and return prisoners to and from wings or workplaces for healthcare appointments. There were two administrator posts.
- 4.12 Pharmacy services were provided by a part-time pharmacist and a full-time pharmacy technician. A dentist provided four sessions a week. Various other allied health professionals, such as an optician and a physiotherapist, undertook sessions at the prison. An occupational therapist attended if needed.
- 4.13 While there was good access to professional development and training provided by the PCT, not all the staff had received resuscitation training within the previous 12 months. Staff also

- 4.14 Emergency equipment, including automated external defibrillators, was available in discipline offices on the main prison corridor and on F wing. The equipment was checked regularly and records of this maintained. However, not all staff were aware of its location.
- 4.15 Clinical records were held in the administrative office in filing cabinets, and were only accessible to health services staff. An electronic clinical system (SystemOne) was in use. Letters were prepared and stored on the system, and a summariser was in the process of adding previous histories from hand-written clinical notes to the electronic system. However, hard copies of clinical records were not available during consultations unless specifically requested, which meant that, until all the records were summarised, medical staff treating a patient might not have all his clinical information available to them. The electronic system included templates for specific purposes, including reception screening, individual care planning and mental health screening. Dental records were appropriately annotated and stored. The dentist also made entries on patients' computerised clinical records.
- 4.16 Formal healthcare complaints were initially dealt with by the prison complaints process, with any stage two complaints being referred to the PCT complaints system. All healthcare-related complaints were reported to the PCT. The prison clinical services manager attended the PCT clinical governance meeting and relayed information to and from the prison and PCT. The prison followed PCT policy and procedures, with prison-specific guidance being included in policies where appropriate. Where a practice was only relevant to the prison, such as reception screening, a separate protocol was in place. The systems for the prevention of communicable diseases were in line with those of the local community.

## Primary care

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- 4.17 When a prisoner arrived at the establishment, he was seen by a member of the health services staff, who completed a reception health screen. This was carried out either in one of the consultation rooms in the healthcare centre or in the F wing consultation room (see section on first days in custody). There appeared to be a lack of clarity regarding where this consultation was conducted. There was also confusion over the procedure to be followed when prisoners arrived at the prison after 5.30pm, when health services staff were undertaking other duties. The reception screening interview was thorough and included information on how to access health services, and prisoners were told that they could obtain barrier protection by requesting it from any member of the health services team. Where necessary, prisoners were referred to other clinics or services, and if a prisoner had a life-long condition he was referred to the appropriate member of the health services team, who would invite him to a clinic for a review of his care.
- 4.18 All prisoners were asked to sign a medication compact and complete a disability questionnaire, which was forwarded to the disability liaison officer if any disability was disclosed. Although the health screening template contained questions about literacy, some nurses undertaking the reception screen were unaware of this and did not check that prisoners were able to read the forms that they were asked to sign. A healthcare information sheet was given to all prisoners as part of the reception screening process, giving a list of services available and how to access them. It required a good reading ability and was poorly presented. All new prisoners were able

- 4.19 Nurse triage clinics had recently been introduced, and we were told that the introduction of these clinics had greatly reduced the waiting time for prisoners to see the doctor. The purpose and benefits of triage were insufficiently promoted to prisoners, as some appeared to perceive triage as a means of preventing them from seeing a general practitioner (GP). Triage algorithms were not in use, although the clinical services manager was working on the introduction of these. A number of patient group directions (PGDs) had recently been signed, but there would be no staff training until these were introduced.
- 4.20 If a prisoner wanted to see a member of the health services team, he completed an application form and put it into a dedicated healthcare box on his wing. The boxes were emptied by one of the health services administrators each weekday but not at weekends. The administrator then added the name to the appropriate waiting list and a reply slip was sent back to the prisoner, informing him that his application had been received. Clinic lists (with the exception of the dental waiting list) were not drawn up until the day before each clinic. This meant that prisoners did not know of their internal appointments in advance, and this appeared to cause frustration. We saw a number of healthcare complaints relating to prisoners asking when their healthcare appointments were.
- 4.21 In addition to using written applications, prisoners could also present as 'special sick' and attend the nurse triage clinic in the healthcare department. The triage clinic, which had recently been introduced, appeared to be used for those presenting as special sick, but not for those completing written applications. The written applications were not routinely screened by a clinical member of staff, and we were told that if an administrator was concerned, he or she would show an application directly to nursing staff. The wait for a GP appointment was around five days at the time of the inspection, although urgent cases were seen on the same or next day.
- 4.22 A GP attended each afternoon on Monday to Saturday from a local practice, and the same practice provided support outside these times, either by providing telephone advice or additional visits.
- 4.23 Smoking cessation clinics were available, facilitated by integrated drug treatment system (IDTS) workers. Information leaflets relating to various health promotion topics and physical and mental well-being were available in the healthcare centre. A health fair was being planned at the time of the inspection.
- 4.24 Although prisoners were able to have paracetamol and ibuprofen in-possession, there was no provision for them to obtain simple pain relief at night if they did not already have some in-possession.

## Pharmacy

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- 4.25 Most medicines were supplied in-possession, in accordance with the policy. A documented risk assessment was carried out for all patients to determine whether medicines could be supplied in-possession and, if so, whether this should be daily, weekly or monthly. Patients were able to collect medication from the pharmacy following their GP appointment and take it back to their wing.

- 4.26 Medicines that were not supplied in-possession, including controlled drugs, were administered by nurses during two daily treatment periods, at 8am and 6pm. Daily in-possession medicines were also supplied during these treatment times. A controlled drugs register was maintained in the pharmacy, but it did not include all the fields of information currently required. The register was used to record the controlled drugs received by the pharmacy and supplied to the treatment room, but there was no register in the treatment room to record the actual supplies of controlled drugs to the patients.
- 4.27 Other in-possession medicines and repeat prescriptions were supplied to prisoners by the pharmacist and pharmacy technician during a mid-day treatment period. This provided an opportunity for patients to discuss their medication with pharmacy staff, although there was no pharmacy option available on the generic healthcare application form. The stable door interface in the treatment room did not facilitate confidential discussion.
- 4.28 The only medicines available for supply without reference to a doctor were Ibuprofen tablets and paracetamol tablets, which were supplied by nurses in accordance with agreed PGDs. These were normally supplied in-possession in packs of 12 and 16, respectively. The nurses had received training from the pharmacist with regard to these PGDs, but the introduction of further PGDs had stalled in lieu of training about other medicines.
- 4.29 An out-of-hours cupboard containing dual-labelled pre-packs was located in the main corridor healthcare room. This could be accessed by health services staff, and access was logged and appropriate records maintained. A medicines and therapeutics committee met every two months. All appropriate stakeholders attended the meetings, including a representative from the PCT.

## Dentistry

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- 4.30 A dentist and dental nurse attended the prison for four sessions each week. A dental nurse also provided a dental triage clinic each week. There was a protocol for providing out-of-hours dental cover, but there were no arrangements to cover annual leave. At the time of the inspection, the waiting time for an initial dental appointment was eight weeks. The full range of NHS treatments was provided. No precise figures for failure to attend rates were available, but were thought to be in the region of 15%. No work had been done to ascertain the reasons why prisoners failed to attend appointments.

## Inpatient care

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- 4.31 One of the administrators coordinated external hospital appointments. Relationships with local hospitals appeared good. There was capacity for one external appointment each morning and on Monday, Tuesday, Thursday and alternate Wednesday afternoons. It was not always possible to accept the earliest appointment offered, owing to the healthcare appointment diary being full. For example, we came across one patient who was offered an appointment on 19 January, but was unable to attend until 9 February; we were told that this was not an unusual occurrence. Where possible, we were told that there was some 'doubling up' for appointments; for example, if two prisoners required appointments at the same hospital department, attempts were made to arrange consecutive appointments (subject to security risk assessment) so that both prisoners could be taken on the same escort.
- 4.32 There was a nurse clinic at the prison, where any pre-admission observations or blood tests were carried out, so that the results would be available when the patient was admitted.

## Mental health

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- 4.33 Mental health services included primary, secondary and tertiary services. Primary services were provided by the PCT, while other mental health services were provided through the local mental health trust. The mental health in-reach team provided a service to both Everthorpe and a neighbouring prison. The team consisted of a band seven nurse, a band six nurse and a band three worker; there was also a vacancy for a second band six nurse. There was also a band seven team leader, who served three prisons in the local area. There were plans for the in-reach teams from all three prisons to work together, which would mean that if prisoners moved within the three prisons, the same nurse would be able to continue working with them. The majority of the team's time was spent at Everthorpe, with approximately one day being spent at the neighbouring prison. One forensic consultant psychiatrist session was provided for half a day every other week. At the time of the inspection, the in-reach team had a caseload of 18 patients.
- 4.34 Anyone could refer prisoners to the mental health teams, including prisoners themselves and their families. The in-reach team nurses also met prisoners' families, with prisoners' consent, if this was considered appropriate. If a patient was subject to a care programme approach, this was continued or started in prison, as appropriate. Transfers to psychiatric care in the community under the Mental Health Act were rare, with about one transfer a year or less.
- 4.35 There were weekly referral meetings, in which the primary mental health nurses and in-reach team discussed the outcome of any assessments carried out in the preceding week, and any referrals that had been received since the previous meeting were allocated. Ongoing cases were also discussed at these meetings, and patients under the care of one team were sometimes moved to that of the other, according to their clinical needs. Prisoners who were identified as being of acute concern were assessed on the day of referral or the following day. Routine referrals were usually carried out within two weeks.
- 4.36 The primary care mental health nurses and the in-reach team both kept their notes on the electronic clinical notes system, so that they were available to all health services staff in the prison. Relapse prevention plans were also included in the patient's wing history files (with consent from the patient), although more general healthcare information was not included in the wing history files.
- 4.37 There was no day care provision for those less able to cope with life on the wings.
- 4.38 The in-reach team had provided mental health awareness training in the prison, and 66 staff had attended these sessions. No training was being provided at the time of the inspection, owing to staff sickness and a vacancy, but we were told that this work was due to restart shortly. This training was in addition to the mental health component of the assessment, care in custody and teamwork (ACCT) training, to which the mental health team contributed. Although questions relating to mental health were asked as part of the reception health screen, staff were concerned that there might still be unmet needs in relation to mental health. It was hoped that by providing mental health awareness training, staff would be more able to identify prisoners who would benefit from contact with mental health services and that the quality of referrals to the service might improve.
- 4.39 At the time of the inspection, there was no administrative support for the team, but a member of staff was in the process of being seconded to the team to provide this service.

## Recommendations

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- 4.40 All staff should have at least annual resuscitation and defibrillation training.
- 4.41 A protocol for reception procedures, including where the reception healthcare screen should take place and the process for those arriving after 5.30pm, should be developed.
- 4.42 Triage algorithms should be developed to ensure consistency of advice and treatment to all prisoners.
- 4.43 Healthcare applications should be collected and screened daily, including weekends.
- 4.44 The healthcare application system should be reviewed, with applications being screened by a clinician and prisoners notified of their internal healthcare appointments in advance.
- 4.45 Prisoners should be able to obtain simple pain relief at night.
- 4.46 The special sick arrangements should be reviewed by the medicines and therapeutics committee, with the aim of increasing the range of treatments available without reference to the general practitioner.
- 4.47 The pharmacy controlled drugs register should be maintained in accordance with current legal requirements, and a separate controlled drugs register should be maintained for each room in which controlled drugs are stored.
- 4.48 The pharmacist should be added to the list of health services professionals available for consultation detailed on the healthcare request forms.
- 4.49 Facilities should be made available to allow patients to receive confidential counselling from the pharmacist.
- 4.50 The failure to attend rates for dental services, and the reasons why appointments are missed, should be assessed.
- 4.51 Dental cover should be available when the regular dentist is unable to attend the prison.

## Housekeeping points

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- 4.52 Prisoners should not be permitted to smoke in the healthcare waiting room.
- 4.53 The floor in the healthcare room on the main corridor should be repaired.
- 4.54 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.
- 4.55 The purpose and benefits of triage should be promoted to prisoners.



# Section 5: Activities

## Learning and skills and work activities

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### Expected outcomes:

Learning and skills provision meets the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities. Sufficient purposeful activity is available for the total prisoner population.

- 5.1 The management of learning and skills overall was good. There were good external links and effective work had taken place to improve and extend the learning and skills provision. The development of the skills for life strategy was slow. The allocation process was thorough. Much of the training was effective, and achievement of qualifications was mostly good or very good. There was insufficient literacy and numeracy support in many workshops. The use of individual learning plans was ineffective. The range of provision was generally satisfactory and well sequenced to meet the needs of prisoners with different sentence lengths. There was insufficient provision above level one in offender learning and skills service (OLASS) construction.
- 5.2 The OLASS contract holder was Manchester College, which provided education, learning and skills together with the prison. Some provision in construction was provided by Hull College of Further Education, and the East Riding Adult Education Service provided classes in family learning through a non-OLASS contract.
- 5.3 All prisoners were assessed to establish their learning styles and literacy, numeracy, language and information and communication technology (ICT) support needs promptly on arrival, as part of the induction process. Initial assessment results were recorded centrally for use in planning. The use of individual learning plans was ineffective. Employability training tutors did not understand their role in recording and monitoring targets. Most individual learning plans focused on accreditation requirements and were not used to set measurable, specific and individualised targets, or to recognise and record personal and social development. However, on some programmes – for example, career planning for self-employment – new individual learning plans were used to set clear targets, which were regularly reviewed.
- 5.4 The range of vocational provision had increased significantly, particularly in ICT and construction. Good links with employers and sector skill councils had informed the development of vocational training to meet identified skills shortages. All work areas had accredited provision, in some areas to level two, but OLASS construction provision was only accredited at level one, which was too low a level to be useful to employers, although there were plans to introduce higher levels. There was no OLASS vocational provision at entry level. Provision was effectively modularised, so that short-stay prisoners could gain accreditation.
- 5.5 English for speakers of other languages (ESOL) arrangements had improved significantly. Outreach work, providing in-cell learning to vulnerable prisoners, included prisoners in the segregation unit. There was no strategy for this work.

- 5.6 The range and depth of skills for life provision had been expanded, but the development and implementation of the strategy was slow, only having been completed in December 2008. Some skills for life staff were unfamiliar with the strategy. There was insufficient embedded literacy and numeracy support in workshops, so learners who might otherwise benefit from vocational training were unable to participate.
- 5.7 The prison offered a wide range of opportunities to develop personal and social skills through its arts and social and life skills programmes, parenting and family learning courses, and engagement in many external activities, such as the Windlesham Trophy for gardening and Koestler award for art. Evening classes had been recently introduced following research into prisoners' wider interests. The recent development of a teamwork course provided by PE staff had improved the effectiveness of the enhanced thinking skills course.
- 5.8 The prison had 35 fewer places than it needed for full employment. At the time of the inspection, there were 652 employment, learning and skills places. There were 25 vacancies and 72 prisoners recorded as unemployed. The sample of records for unemployed prisoners indicated mainly security or disciplinary reasons for their unemployed status. None of the sample had been unemployed for significant lengths of time. The prison had plans for new workshop provision to provide a further 36 places.
- 5.9 Resources and facilities were satisfactory overall, although some of the construction workshops were small for the current numbers of prisoners. The prison had advanced plans to extend the facilities and accommodation for art, to offer print as a vocational area.
- 5.10 The allocation process was thorough and used information from a range of sources: information, advice and guidance (IAG); pathways targets; sentence planning and initial assessment. There was good promotion of equality and diversity. Interventions were carefully sequenced, with key vocational qualifications taken at the end of the sentence to ensure the currency of the qualification. Job shop staff responded promptly to referrals and applications. Detailed records of all aspects of learning, work and qualifications gained were maintained. IAG and job shop staff visited the wings on a three-weekly cycle to follow up unemployment and wing referrals. Waiting lists were systematically managed, but misleadingly long, in that they included prisoners who were at the appropriate stage of their sentence to start a course, those who had expressed an interest in a course at some stage in their sentence and some historical entries from the previous system that did not incorporate IAG. The pay policy was fair and transparent, and did not disadvantage prisoners for working or learning.
- 5.11 Achievements and standards were good or very good in most areas, particularly in gardening and bicycle repair programmes run by the prison, and in fork-lift truck driving, advanced IT, painting and decorating, plumbing, food hygiene and personal and social development programmes run by Manchester College. Most literacy and numeracy learners were on level one programmes, where achievement was excellent. For the relatively small groups in literacy and numeracy at entry level three, achievement was poor. Data for ESOL were incomplete, but of the 31 learners who began a qualification, only 11 achieved during 2007/08. Current ESOL learners were making satisfactory progress.
- 5.12 Standards of work were high in employability training and art. Some construction learners produced work at a higher level than required by their award, and art work was of a good technical standard.
- 5.13 Punctuality and attendance were mostly good. Learners arrived at sessions promptly and continued to work well until the end of the session.

## Library

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- 5.14 The East Riding of Yorkshire Council provided the library service. Access was good for most prisoners. The library recruited and motivated new arrivals as part of the induction process. About 70% of all prisoners were enrolled, and about 50% used the library regularly. There were no access problems for prisoners with limited mobility.
- 5.15 The core day had open access and scheduled sessions that included Toe by Toe, Keeping up with the Children and Storybook Dads. The library was also open for two evenings a week and on Sunday mornings. There were four qualified staff – one full time and three part time – and four orderlies supported library staff. The orderlies had specific roles and responsibilities, including acting as mentors for the Toe by Toe scheme. Achievements were good, and staff and orderlies had received certificates and external recognition for their work.
- 5.16 The interests and needs of prisoners were met through a large range of non-fiction books and some newspaper and journals. Effective communication with learning and skills staff and prisoners informed book procurement. Library staff were keen to provide best value and worked with a local consortium for extending the range and access to learning materials. Prisoners were regularly questioned about their interests, and a survey collated this information annually. Stock levels and lending analysis reports were monitored closely to identify trends.
- 5.17 Library staff were quick to respond to unusual demands and try to meet the needs of ESOL and foreign national prisoners. Only a small selection of non-English language books was available, and bilingual dictionaries were mainly for European languages. There were sufficient legal textbooks and Prison Service Orders available.
- 5.18 Recent improvements to the library service included use of the ALICE system to ensure compatibility with other organisations in the local area, extension of the range of local newspapers available, hosting a writers' workshop, a charity coffee-time reading event and an informally set up DVD club.

## Recommendations

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- 5.19 The skills for life strategy should be completed and established to promote a whole prison approach.
- 5.20 The provision of embedded literacy and numeracy support in workshops should be increased.
- 5.21 The availability of level two qualifications in offender learning and skills service (OLASS) construction should be improved.
- 5.22 Vocationally related opportunities for learners at entry level should be developed.
- 5.23 The effective use of individual learning plans for all aspects of learning and skills should be established.
- 5.24 The capacity for Storybook Dads should be extended.
- 5.25 The availability of books and bilingual dictionaries for speakers of languages other than English should be increased.

5.26 The DVD club arrangements should be formalised.

## Physical education and health promotion

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Expected outcomes:

Physical education (PE) and PE facilities meet the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are also encouraged and enabled to take part in recreational PE, in safe and decent surroundings.

5.27 There had been significant investment in the PE facilities, with some good facilities developed, but the new outdoor football pitch, showers and changing areas had degenerated rapidly. Staffing levels had been low in the previous year but were now satisfactory, allowing the department to offer an extensive range of recreational and vocational PE. Access to PE was good and monitored well. An excellent exercise referral scheme met the needs of prisoners with severe and complex mental and or physical health problems. The department promoted health-related fitness well.

5.28 Significant investment had been made in the PE facilities, and a large sports hall, a cardiovascular and weights room and a classroom had been developed. However, the recently developed outdoor football pitch and new showers and changing areas were in a poor state of repair. At the time of the inspection, the football pitch was not in use, owing to safety issues, but work to rectify the showers was scheduled to start in April 2009. The number of toilets in the sports hall was insufficient to meet need. Staffing levels had been low in the previous year but were now satisfactory, allowing the department to offer an extensive range of recreational and vocational PE. A senior PE officer, supported by seven PE officers, managed the department.

5.29 Access to PE was good and monitored well using a computerised system. According to the prison's data, 79% of the population accessed PE once or more a week. Most men could attend at least three sessions a week. There were waiting lists for only a small number of sessions.

5.30 An excellent exercise referral scheme had been developed in conjunction with other physical and mental health practitioners for prisoners with severe and complex mental and or physical health problems. Men referred to the scheme were carefully screened for health and lifestyle issues. An individualised programme was then developed to meet each person's needs, and this was closely monitored. This work extended to ensuring that men could continue to maintain their healthy lifestyles when they left the prison – for example, through arranging gym membership.

5.31 The department's emphasis on health-related fitness for all prisoners was excellent, with a programme of varied activities, including carpet bowls and walking programmes to engage the less confident and less fit, as well as a good mix of team games and individual activity for the more fit. PE staff had highlighted healthy eating options on prison menus to ensure that all men could make informed choices about their meals. Good use was made of sporting celebrities, including Olympic and world champions, who visited the prison to talk about health and lifestyle. PE staff worked closely with other departments – for example, the health department and the employment guidance worker – to ensure that their provision met the men's needs.

- 5.32 A range of accredited provision was available, although, due to staff shortages, only one course had been offered in the previous year. Courses included the level one FOCUS assistant instructor award, first aid at work, the level two Community Sports Leader Award (CSLA) and level two gym instructor qualification. A new initiative, preparing men as health trainers to work in the local primary care trust, was about to start. Three prisoners working as peer supporters on a drug abstinence programme had been recruited to an Open College Network-accredited Fit for Life course.

## Recommendations

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- 5.33 Current staffing levels should be maintained so the good recreational and accredited provision can continue and develop further.
- 5.34 The scheduled work on the showers and changing area should be completed.
- 5.35 The safety issues with the football pitch should be resolved.
- 5.36 Sufficient toilet facilities should be provided to meet need.

## 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.

- 5.37 The work of the chaplaincy team was well integrated into the work of the prison and well regarded by prisoners. The chaplaincy team met prisoners during their induction. Good pastoral care was provided. As well as faith-based classes, the chaplaincy team held book clubs and meditation classes, and were involved with a two-day money matters course. All religious festivals relevant to the prisoner population were celebrated. Links had been made with faith communities, but there was no formal process whereby prisoners could request support from the chaplaincy to continue their religious beliefs in the community.
- 5.38 The work of the chaplaincy team was well integrated across the establishment and was well regarded by prisoners. In our survey, significantly more prisoners than at comparator establishments said that they felt that their religious needs were respected. Following the lengthy absence of an Anglican chaplain, the chaplaincy team now operated with a full team, including a full-time Muslim chaplain, who was also the coordinating chaplain, full-time Anglican and Roman Catholic chaplains and a part-time Roman Catholic chaplain. A Buddhist chaplain attended the establishment fortnightly and there was a full range of sessional chaplains that the coordinating chaplain could access when necessary. Quarterly chaplaincy meetings were held, reflecting on the work undertaken and identifying development areas. The meetings were well attended, not only by the core team, but also by sessional chaplains.
- 5.39 The chaplaincy team met prisoners during their induction, firstly individually and then, later on in the induction programme, as a group. Information about the range of services, classes and groups was given to prisoners and was well publicised across the establishment. Thirty-five per cent of the population recorded their religion as Church of England, 16% as Roman Catholic and 12% as Muslim. Weekend services were reasonably well attended, with between

- 5.40 The Muslim prayer group and classes on a Friday had the largest attendance, with sometimes in excess of 50 prisoners attending. The coordinating chaplain led Friday prayers but, due to budget constraints, was unable to obtain cover for this duty when he had time off.
- 5.41 Statutory duties were conducted by all the chaplains and, unless prisoners specifically requested a chaplain of a particular faith or religion, the team administered to all prisoners regardless of their religion. A member of the team attended assessment, care in custody and teamwork (ACCT) reviews when invited, and daily visits were made to the segregation unit and to prisoners who were unwell. The coordinating chaplain was keen to ensure that the chaplaincy team was visible across the establishment, and a member of the team visited the wings regularly.
- 5.42 Good pastoral care was provided, particularly in relation to prisoners who had experienced bereavement. Cruse Bereavement Care attended the establishment and delivered a bereavement course, as well as individual counselling.
- 5.43 In addition to faith-based classes, the chaplaincy team held book clubs, meditation classes and were involved with a two-day money matters course, and provided written contributions for sentence planning and parole reports. Some of the groups took place during the core day, and the coordinating chaplain told us that the workshop staff ensured that prisoners were released from their work to attend classes on time.
- 5.44 The chapel was large, well equipped and peaceful. The multi-faith room was spacious and purpose-built washing facilities were available. Two large group work rooms and an office were located on the ground floor and were used by the rest of the establishment for meetings and training events. Prisoners were permitted to keep religious artefacts in their cells and the chaplaincy stocked some artefacts and books in the chapel.
- 5.45 All religious festivals relevant to the prisoner population were celebrated. Links had been made with faith communities but there was no formal process whereby prisoners could request support from the chaplaincy to continue their religious beliefs in the community.

## Recommendations

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- 5.46 Arrangements should be made for cover when the coordinating chaplain is unavailable.
- 5.47 Links with faith communities outside the prison should be established to meet prisoners' individual needs.

## Time out of cell

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### Expected outcomes:

All prisoners are actively encouraged to engage in out of cell activities, and the prison offers a timetable of regular and varied extra-mural activities.

- 5.48 The prison recorded 8.3 hours' time out of cell against a target of eight hours. There were no obvious anomalies in the recording of time out of cell but the time allowed was low for a training prison, particularly on Fridays and weekends. A roll check showed almost a quarter of prisoners locked behind their doors during the day. Exercise and association took place consistently. There was interaction between staff and prisoners during association. Outdoor clothing was not routinely provided.
- 5.49 Time out of cell was recorded accurately, and the published core day had the capacity to provide approximately nine hours out of cell on Monday to Thursday. The target for time out of cell was eight hours, which is low for a category C prison, and the prison was achieving 8.3 hours against this target. This was reduced to eight hours on Fridays and seven hours at weekends. Following the implementation of the national core day, Friday afternoons were used to provide association and distribute prison shop goods.
- 5.50 There were minimal delays and slippage to the regime during the inspection. More prisoners were locked in their cells during the day than the recorded number and take-up of activity places suggested. On one morning during the inspection, 21% of prisoners were locked up and 24% during one afternoon. Although there were justifiable reasons for some of them to be behind their doors (such as cancelled activities), they had no purposeful activity to occupy them.
- 5.51 Association areas varied in size across the wings. Residential managers had given priority to providing outdoor seating and tables to the older wings, which had smaller association areas. Association equipment was in good repair and well used. Interactions between staff and prisoners during association were observed but were often instigated more by prisoners than by staff. Association and exercise were provided consistently. The atmosphere during exercise and association was relaxed and positive. Staff routinely only opened the door for exercise when asked by prisoners, rather than doing it at the set time each day.
- 5.52 Outdoor clothing was not provided for exercise, other than for outdoor workers, and was not available on the new facilities list. Exercise periods generally took place in the evenings, when it would have been colder.

## Recommendations

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- 5.53 Time out of cell should be increased.
- 5.54 Prison managers should investigate why so many prisoners are locked up during activity times and action taken to improve the numbers attending purposeful activity.
- 5.55 Alternative activities should be provided for those whose regular activities are cancelled.
- 5.56 Exercise should be arranged and announced as published.
- 5.57 Prisoners should be provided with appropriate clothing for inclement weather.



# Section 6: Good order

## Security and rules

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### Expected outcomes:

Security and good order are maintained through positive staff-prisoner relationships based on mutual respect as well as attention to physical and procedural matters. Rules and routines are well-publicised, proportionate, fair and encourage responsible behaviour. Categorisation and allocation procedures are based on an assessment of a prisoner's risks and needs; and are clearly explained, fairly applied and routinely reviewed.

6.1 The security department was well managed and some links had been made with other areas, such as safer custody. There were effective methods for the processing of security intelligence and good analysis of this information. This had resulted in appropriate measures being put in place to combat the high level of drugs and mobile telephones coming into the establishment by illicit means. Physical security measures were commensurate with the current identified risks. Routine strip searching was overused. Recategorisation reviews were up to date and prisoner files contained clear and detailed information about how decisions had been made.

### Security

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- 6.2 The security department was well managed and some links had been made with other areas, such as safer custody. The head of operations had overall responsibility for the security department, with the day-to-day operations managed by a principal officer. The security committee met monthly, with attendance from most departments. The agenda carried a wide range of subjects, including complaints analysis, security objectives and incidents, which were discussed in detail.
- 6.3 Physical security was appropriate for the design and layout of the establishment, as there were many low buildings, the roofs of which had been accessed by prisoners frequently. There had been over 2,300 security information reports (SIRs) received in 2008, similar to the previous year. Many of these involved drugs, mobile telephones and drug-related activity. There had also been a number of incidents of indiscipline (14 in 2008). This information was managed and analysed effectively, and management of weak areas of physical security was proactive. The security team took a flexible approach to dealing with the serious drug supply problem and disruption caused by incidents. Targeted interventions had been used, such as the installation of netting over exercise yards vulnerable to outside interference, handcuffing of prisoners coming off escort vehicles and the use of anti-climb paint and razor wire.
- 6.4 The police were closely involved in initiatives for reducing the supply of drugs and there had been 18 drug finds in the previous six months. Several visitors had been arrested and charged by police, and some given lengthy prison sentences as a result. Adjudication charges for drug-related activity were high, and this suggested that security information was being carefully considered and appropriately acted on.
- 6.5 Over 150 prisoners came from over 100 miles away from the establishment, including from overseas. Intelligence gathered suggested that prisoners from the North-East had been disproportionately involved in incidents. Efforts had been made by managers at area level to

- 6.6 Strip searching was not based on individual risk assessments and was overused. All prisoners coming in and going out of reception, all those located on the segregation unit and those using the toilet during visits were routinely strip searched. Ten per cent of prisoners were routinely strip searched at the end of a visits session, but this was a random, rather than targeted, approach.
- 6.7 There were 24 prisoners on closed visits and three banned visitors. There were legitimate reasons recorded for using these measures in each case, relating to drug and drug-related activity and abuse to staff, and reviews were carried out monthly. All prisoners were put on closed visits for at least three months, irrespective of whether or not additional intelligence came to light, leading us to question the intention of the first two monthly reviews. The published appeals process had been used by some prisoners.

## Rules

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- 6.8 Prison Service and local rules were explained to all prisoners on induction and included in prisoner compacts. They were also clearly displayed on all residential units.

## Categorisation

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- 6.9 Categorisation reviews were up to date, and were informed by a comprehensive information-gathering system. The offender management files were detailed and contained clear information about how and why categorisation decisions had been made. No data had been kept on how many reviews had taken place or how many had been successful. Prisoners recategorised to D were moved quickly to open conditions, with only four recently recategorised prisoners awaiting transfer at the time of the inspection.
- 6.10 Prisoners were given a detailed account of their review. There was full recognition of achievements, and realistic targets were set for those who had been unsuccessful in gaining category D status. Foreign national prisoners were considered in the same way as British nationals for recategorisation. One had been sent to open conditions within the previous year, but most had been considered as unsuitable for category D, regardless of their immigration status. An appeals process was in place and this had been considered by the appropriate manager and fairly conducted.

## Recommendations

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- 6.11 There should be improved cooperation and communication between areas to ensure better management of prisoners identified as high risk in terms of drug activity or indiscipline.
- 6.12 Security measures implemented to address identified security risks should be reviewed monthly to ensure that they remain appropriate.
- 6.13 Strip searching should be carried out only after a risk assessment indicates that it is necessary.

- 6.14 Prisoners should not routinely be kept on closed visits for three months unless additional information has been received that warrants the continued use of this measure.

## Good practice

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- 6.15 *Prisoners were given a detailed account of their categorisation review.*

## 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.

- 6.16 The number of adjudications was high and reflected the establishment's problems with drug misuse and incidents of indiscipline. Hearings were conducted in a separate area in the segregation unit. Adjudicators ensured that prisoners understood the procedures and gave them the opportunity to seek legal advice. Some records of hearings were sparse and did not show that charges had been fully investigated, and some punishments were outside the published guidelines. Use of force was also high and had increased since 2006, with no analysis of why this had happened. Proper authorisation for use of force was sought. There was an overuse of handcuffing. The segregation unit was adequate but accommodation was in a poor state of repair, toilets were dirty and there was graffiti in some cells. Individual prisoner records did not reflect the care given, and the regime was restricted. All prisoners located on the unit were routinely strip searched. Use of special accommodation was low and this accommodation was also in a poor state of repair.

## Adjudications

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- 6.17 There had been 1,293 formal adjudications in 2008 and 1,309 the previous year. There had been 45 in 2009 to date. Many of the charges related to drugs offences, the possession of unauthorised articles (including mobile telephones) and disobeying lawful orders. The adjudication room was in the segregation unit and was adequately equipped. Relatively few adjudications were referred to the independent adjudicator (between 10 and 20 a month). First offences for positive mandatory drug tests for class A drugs were dealt with in-house, as the independent adjudicator generally gave a suspended punishment in these cases.
- 6.18 All prisoners had the adjudication process explained at the start of the hearing and were offered the opportunity to seek legal advice. The hearings we observed were carried out to a good standard. Prisoners were able to challenge the evidence and give their version of events. We saw one prisoner who had been the subject of a serious assault being referred to the police, healthcare department and safer custody team for additional treatment, advice and support. Some records of previous hearings were brief and did not show that charges had been fully investigated. In addition, several punishments that had been given were above the recommendations of the locally published tariff, with no explanation. Both of these issues had been identified in the minutes of the adjudication standardisation committee, but no follow-up action had been recorded.

## Use of force

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- 6.19 There had been 138 incidents where force had been used in 2008, 135 in 2007 and 42 in 2006. New accommodation had been opened during this time, with 200 additional prisoners in the establishment, although no formal analysis had been made of the significant increase. There had been a month-on-month reduction since September 2008, with six incidents in January 2009 to date, which continued this trend. There was no use of force committee and no coordinated approach to monitoring and analysing the use of force. Some trends and patterns had been identified and acted on seemingly because they had become so obvious.
- 6.20 Many use of force incidents had occurred while escorting prisoners between different locations in the prison, and in particular to the segregation unit. This practice had become routine, even with compliant prisoners, and managers had taken action to stop it. However, there was no evidence that it was reviewed regularly to ensure that compliance by staff continued. Many instances of use of force related to the high number of incidents involving several prisoners, most of whom had been restrained on surrender or on resolution of the incident and located in the segregation unit. There had also been particular problems on B wing in the previous six months and this had resulted in an increased number of incidents involving use of force. These issues had now been addressed.
- 6.21 Spontaneous interventions were well recorded, with injury report forms for prisoners completed in all cases, whether injuries were sustained or not. Despite the high use of force, planned interventions were not video-recorded.
- 6.22 The use of special accommodation was low, with 18 occasions in 2008 and none so far in 2009. All uses had been appropriately authorised. Efforts had been made to ensure that prisoners did not remain in special accommodation for long periods. Detailed record keeping showed that on most occasions prisoners were returned to normal accommodation within two hours, and when they had been held there for longer, the reasons given were appropriate.
- 6.23 Unusually for a category C establishment, we found one recorded use of a body belt to facilitate a transfer. The documentation recorded the prisoner as being compliant, although staff we spoke to recalled that he was violent and refractory. The escort was to enable his transfer back to category B conditions.

## Segregation unit

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- 6.24 The segregation unit had been renamed the separation and care unit, but the policy document relating to the management and use of the unit was basic and had not been underpinned by supporting procedures or changes in role. It was adequate for the size of the establishment, although some areas were in poor condition. A dedicated staff group showed in-depth knowledge of all the prisoners in their care. We observed positive interactions between staff and prisoners and respectful use of preferred names.
- 6.25 The accommodation consisted of 14 cells, four of which were safer cells, and two unfurnished cells (special accommodation). There were no holding rooms for prisoners waiting for adjudication, who had to be held in cells which were not suitable, as they were fully furnished. The cells were of adequate size and reasonably light, but without in-cell electricity. The floors and ceilings were in a poor state of repair. We found graffiti in several and all the toilets were dirty and unscreened. Some cells were being redecorated. The special cells were bleak, had little natural or artificial light, and were dirty, with graffiti on the walls.

- 6.26 One cell had a camera installed and this was used mainly for prisoners being segregated under the secreted items policy. This policy had been introduced to manage prisoners suspected of swallowing or secreting items on their person. The documentation we examined showed that no items had been recovered in the previous 12 months, and most prisoners had been relocated back to the general prisoner population within 24 hours. The two exercise yards were small, austere and caged in, but were well used by prisoners, who were offered time outside every day. There were several notice boards on the unit containing detailed and up-to-date information on a variety of subjects.
- 6.27 A total of 259 prisoners had been located on the unit between June 2008 and the start of the inspection, and the longest stay had been 70 days. There were nine prisoners on the unit at the time of the inspection. All prisoners located there were routinely strip searched and given sterile prison clothing.
- 6.28 Documentation relating to the initial and ongoing segregation of prisoners showed that authorisations were appropriate, and was completed to a basic level. Most authorisations had a pre-printed regime and basic targets. Staff maintained an individual record for each prisoner, which was intended to record interaction with the prisoner, regime access and visitors. Staff did not fully record the levels of care and support they offered to prisoners. Staff from the wings who visited prisoners did no more than sign to say they had done so, even though we observed a positive interaction between them. We saw many good multidisciplinary reviews, with in-depth investigation into the prisoner's well being in most cases. The staff conducting the reviews went into detail about targets and actions to follow up, but these were often not recorded in the review documents. There were no care plans for prisoners remaining on the unit beyond their second review, despite these being required by the existing policy.
- 6.29 The daily log showed that governors, health services staff and the chaplain visited the unit daily. Independent Monitoring Board (IMB) members told us that they were not always informed about prisoner reviews. This had recently improved, and IMB members were now in regular attendance.
- 6.30 The regime on the unit was restricted. There was only one shower, and this resulted in prisoners being offered showers every other day, despite staff reassurances to us that access was daily. Documentation gave staff the option of stating that a shower had been accepted, declined or was not appropriate for an individual prisoner, and 'not appropriate' was indicated on many records. Prisoners were able to make telephone calls daily and access to visits was acceptable. Reading material and in-cell education was provided and some menial in-cell work was undertaken by one prisoner. One prisoner was painting cells. The PE staff had made provision for access to the gym on Friday afternoons, but no prisoners had taken up the offer. Association was not offered. Individual prisoner records showed that at least two prisoners had spent four days a week in bed and had not showered or cleaned their cell regularly. Neither had apparently been challenged about this.
- 6.31 A formal monitoring group met regularly to discuss segregation.

## Recommendations

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- 6.32 Records of adjudication hearings should be comprehensive and reflect all the evidence that has been considered and a full investigation of the charges heard.
- 6.33 Appropriate holding facilities for prisoners awaiting adjudication should be provided.

- 6.34 Punishments should be given in line with the published tariff. When the punishment is unusually high, the reasons for it should be recorded clearly.
- 6.35 On the wholly exceptional occasions when a body belt is deployed, governance, procedures and paperwork must be rigorously adhered to.
- 6.36 The senior management team should monitor and analyse the use of force and the reasons for the high number of incidents.
- 6.37 Remedial work to the special accommodation should be carried out as a priority.
- 6.38 Planned removals should be video-recorded and reviewed.
- 6.39 Individual prisoner records should be fully completed to give an accurate record of daily events.
- 6.40 In-cell electricity should be provided on the unit.
- 6.41 Toilets should be cleaned and screened.
- 6.42 The number of showers on the unit should be increased as a matter of urgency.
- 6.43 Prisoners should be given access to showers daily.
- 6.44 The secreted items policy should be reviewed as to its effectiveness.

### Housekeeping point

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- 6.45 The exercise areas should be made less austere, with seating provided.

## Incentives and earned privileges

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### Expected outcomes:

Incentives and earned privileges schemes are well-publicised, designed to improve behaviour and are applied fairly, transparently and consistently within and between establishments, with regular reviews.

- 6.46 The incentives and earned privileges (IEP) scheme had been published and was clearly understood by staff and prisoners. There were good differentials between the different levels. A new facilities list had been developed in consultation with all prisoners. Routine and warning-triggered reviews often took up to a month to arrange, whereas those for automatic downgrade to basic were undertaken immediately. The pay policy was directly linked to the IEP policy, so some prisoners earned twice or four times as much as others doing the same work. The policy allowed prisoners to receive an adjudication punishment and an automatic downgrade to basic for some offences against discipline.
- 6.47 The IEP scheme was publicised to staff and prisoners. The three usual levels of basic, standard and enhanced were in operation. At the time of the inspection, 56% of the population were enhanced, 42% standard and 2% basic.

- 6.48 Prisoners arriving at the establishment were placed on the IEP level they had gained at their previous prison. Standard prisoners could be considered, or apply, for enhanced status after two months in the prison. The policy document stated that progress or demotion on the scheme would depend on patterns of behaviour, and there was provision for automatic downgrade in the case of one-off serious incidents or offences.
- 6.49 The differentials between the regime levels were good and prisoners we spoke to were keen to be on enhanced. The pay policy was directly linked to the IEP policy, which meant that for some jobs, prisoners on enhanced earned nearly twice as much as those on standard and four times as much as those on basic, for the same work. The facilities list had been developed in consultation with all prisoners.
- 6.50 There were 11 prisoners on basic at the time of the inspection, and review documentation showed that the downgrades had been appropriate. Daily monitoring only took place for those who were the subject of anti-bullying procedures. Documentation showed that for some prisoners no observations had been recorded for up to a week at a time. Prisoners on basic were given 45 minutes of association daily, to enable them to have showers and make telephone calls, and this was consistently offered.
- 6.51 Review boards could be undertaken as routine or triggered by warnings or serious offences against prison discipline. Prisoners were given the opportunity to attend or give a written contribution. Information was sought from a wide range of staff, including offender supervisors, personal officers and employers. Reviews that were routine or triggered by warnings took up to a month to take place, well after the behaviour that prompted them. Conversely, those triggered by one-off instances of serious offences took place on the same day. Prisoners found guilty of certain offences on adjudication could be given a punishment and automatic downgrade to basic. In some cases, the downgrade was mandatory in the policy. There was evidence in some reviews of prisoners being given a chance to improve their behaviour instead of being downgraded. Targets were set in accordance with sentence planning targets, as well as to challenge poor behaviour.
- 6.52 Management checks were not consistently undertaken and we found that only one had been done since July 2008.

## Recommendations

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- 6.53 The pay policy should be reviewed to remove inconsistencies in pay between those on different regime levels doing the same work.
- 6.54 The policy and practice of allowing adjudication punishments and automatic downgrade to basic for some serious disciplinary offences should cease.
- 6.55 Monitoring systems should be developed and implemented for those on the basic regime.
- 6.56 Routine reviews and those triggered by warnings should take place without undue delay.
- 6.57 Regular management checks of reviews should take place consistently.

## Good practice

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6.58 *The facilities list had been developed in consultation with all prisoners.*

# Section 7: Services

## 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.

- 7.1 The kitchen was bright and clean but the floor was in a poor condition. Hygiene standards were good overall and food was appropriately stored. Despite receiving many complaints about food from prisoners during the inspection, our survey results were positive, and the food we sampled was of good quality. The menu reflected the cultural diversity of the population. Prisoners ate their meals in their cells, where the toilet was not completely screened.
- 7.2 Catering services were delivered by a team of civilian caterers and a full-time manager. A number of prisoners were employed in the kitchen and on the wing serveries. All kitchen workers were trained in food hygiene, and prisoners employed undertook an induction programme. Prisoners on wing serveries were British Institute of Cleaning Sciences (BICS) trained. There were no opportunities for prisoners working in the kitchen to obtain formal qualifications. Progress had been made in developing a training programme, but there were no arrangements for implementing it.
- 7.3 The kitchen was bright and clean but the floor was in a poor condition. This was due to be repaired in early 2009. Hygiene standards overall appeared good and the required inspections by environmental health officers had been made. Food was appropriately stored, and separate storage areas were used for halal products. Separate utensils were used for serving halal and vegetarian meals. Staff and prisoners wore appropriate clothing, which was washed after each use.
- 7.4 Despite receiving many complaints about food from prisoners during the inspection, mainly associated with portion size, our survey results were positive, with 39%, significantly better than the 31% comparator, saying that the food was good or very good. We sampled the food at lunch and tea times, and it was of good quality and at a suitable temperature.
- 7.5 A four-week menu cycle operated, and prisoners were able to choose from one of four choices at lunch and five at dinner. Meals were served at 12pm and 5pm. A breakfast pack was delivered on the previous evening, and we were told that prisoners would often eat it the night before or throw it away.
- 7.6 The menu reflected the cultural diversity of the population. In our survey, 36% of black and minority ethnic prisoners (against the 40% comparator) and 46% of Muslim prisoners (against the 38% comparator) said that the food was good or very good. Healthy, vegetarian, vegan and halal options were identified, but the menu choice forms issued for January 2009 were inaccurate because the identifying codes from the previous cycle had not been changed.
- 7.7 Prisoners ate their meals in their cells, where the toilet was not completely screened. They could eat at a table, but this was not large enough in shared cells for both prisoners to eat at the same time.

- 7.8 Food was taken from the kitchens in heated trolleys, but the seals were defective on one which we examined. Halal food was appropriately identified and separated from other meals. The temperature of the food was checked before leaving the kitchen and was monitored at the servery. Wing officers supervised the serveries to ensure that they were operated correctly, but the waste food we found in some servery areas after service indicated that supervision of cleaning was poor.

## Recommendations

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- 7.9 Prisoners should be able to gain formal catering qualifications.
- 7.10 Breakfast should be served on the morning it is to be eaten.
- 7.11 A system for ensuring that serveries have been cleaned after service should be introduced.
- 7.12 Prisoners should not be required to eat meals in their cells.

## Housekeeping point

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- 7.13 The heated trolleys should be regularly maintained and deficiencies rectified.

## Prison shop

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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, from an effectively managed shop.

- 7.14 The canteen contract had changed from Aramark to DHL/Booker in November 2008 and the transition had been problematic. The shop list had reduced from 456 to 375 products. Only a quarter of prisoners said that the canteen sold a wide enough range of goods to meet their needs. Prisoners arriving at the establishment at the beginning of the week waited up to two weeks to buy items.
- 7.15 The shop contract had changed from Aramark to DHL/Booker in November 2008, and the transition had been problematic and had impacted on prisoners, although many of the difficulties were outside the establishment's control.
- 7.16 The previous shop list had contained 456 products and the new list had been reduced to 350, and subsequently increased to 375 products. In our survey, 25% of respondents said that the shop sold a wide enough range of goods to meet their needs, which was significantly worse than the 48% comparator. Besides the reduction in the range of products available, not all prisoners received the correct amount, and some received none, of the PIN credit they had ordered, and non-smokers' packs were not available. The shop manager told us that these concerns were in the process of being rectified.
- 7.17 Prisoners had been kept informed of the main changes that would be occurring through prisoner notices and prisoner representatives, who attended wing-based consultation meetings. The process of reducing the shop list had not been widely consulted on and had not

included the race equality representatives or members of the race equality action team. Some of the black and minority ethnic products had been removed from the new list, despite an impact assessment completed in 2007 highlighting that these products needed to remain on the list as they reflected the diverse needs of the population at the establishment.

- 7.18 Managers had reflected on the change of contracts and had brought forward a series of meetings with the provider to review the transition. Additionally, a series of meetings with prisoners was planned, so that their views and issues could also be discussed at the meeting. Further information and notices were being distributed to prisoners, mainly regarding the resolution of problems, in an attempt to allay their concerns and frustrations.
- 7.19 The shop list was readily available to all prisoners. Order forms, detailing the amount available in each prisoner's account, were distributed every Thursday and collected the following Monday, and the goods were distributed to all wings on the following Friday afternoon. Prisoners arriving at the establishment at the beginning of the week had to wait up to two weeks to buy items. Prisoners who had no access to money on arrival could receive an advance of £5, to be repaid in instalments.
- 7.20 Although we were unable to observe the shop orders being distributed, staff told us that this was well supervised and that each wing took responsibility for how they distributed the goods. Transparent bags were used to seal the goods; prisoners were required to check the contents before opening the bag and any discrepancies were presented to staff on the same day. Any issues regarding the exchange of goods could not be rectified on the same day, but replacement items were delivered within two days.
- 7.21 In addition to the shop list, prisoners had access to the Argos catalogue, and there were plans to introduce further catalogues. A 50 pence administrative charge was levied for each catalogue order.

## Recommendations

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- 7.22 Prisoners should be regularly consulted, in addition to the ongoing meetings with the canteen provider, so that their views can be discussed.
- 7.23 Prisoners should be able to buy items from the shop within 24 hours of arrival.
- 7.24 Non-smokers' packs should be available on reception.
- 7.25 Prisoners should not be charged an administrative fee for purchasing goods from a catalogue.
- 7.26 The range of catalogues currently available should be extended.
- 7.27 The range of black and minority ethnic products should be expanded in consultation with race representatives and black and minority ethnic prisoners. Race representatives and the race equality action team should be consulted regarding any amendments to the shop list.

## Housekeeping point

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- 7.28 The difficulties with PIN credit should be resolved as soon as possible, so that prisoners receive the PIN credit they have ordered.



# Section 8: Resettlement

## Strategic management of resettlement

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### Expected outcomes:

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

- 8.1 The resettlement policy outlined how offender management arrangements linked to resettlement provision. A needs analysis had identified specific areas of resettlement provision which required further development, including programmes to address alcohol-related offending, domestic violence and general violent behaviour. There was insufficient pre-release provision in some of the resettlement pathways. Prisoners were not clear whom to contact about some pre-release resettlement support. Management arrangements were in a period of change, and responsibilities for some pathways were not clear. A review was underway of the provision in each of the reducing reoffending pathways, and prisoners in our survey were more positive than at comparators about being able to address some or all of their sentence planning targets. Effective use was made of peer workers and there was a good initiative to provide support to prisoners who were ex-servicemen.
- 8.2 The overarching resettlement policy was up to date and outlined offender management arrangements and how these supported the provision of interventions to reduce reoffending. There was a range of prison and contracted resettlement provision to address areas of need in the various resettlement pathways. The Prison Service area required the establishment to develop interventions in the seven core National Offender Management Service (NOMS) pathways, and in addition an eighth covering prolific and other priority offenders (PPOs) and a ninth covering voluntary and community sector engagement.
- 8.3 A comprehensive needs analysis, based, in part, on offender assessment system (OASys) assessments, had recently been completed. This had highlighted a range of resettlement needs relevant to the prisoner population. While there were interventions to address many of these, some gaps had been identified, notably the need for offending behaviour programmes to address alcohol-related offending, domestic abuse and more general violent behaviour. However, neither the findings of the needs analysis nor the actions planned to address them were reflected in the resettlement policy.
- 8.4 The needs analysis also looked at issues such as average sentence length and time left to serve, establishing that nearly three-quarters of prisoners at the establishment had less than 12 months left to serve. This had led to an increase in the range of pre-release interventions being offered in some areas, but not all (see sections on accommodation and finance, benefit and debt). Prisoners in our survey were less positive than at comparator prisons about knowing whom to contact for assistance in a range of pre-release resettlement areas, including finding a job, accommodation or dealing with money and financial problems.
- 8.5 The management structure for the resettlement function was in a period of change, with no clear senior manager lead. This was being addressed, but there was confusion about who had responsibility for some of the reducing reoffending pathways. In addition, the resettlement meeting structure had recently changed, but the purpose of the two meetings being run was unclear and we found little evidence of strategic thinking and discussions in the minutes.

- 8.6 A full-time voluntary and community sector coordinator had been in post for approximately six months and was carrying out an ongoing review of resettlement provision. While efforts had been made to forge stronger links with voluntary and community sector providers to develop and improve outcomes for prisoners in the resettlement pathways, the post holder recognised some ongoing areas of weakness in provision (see section on resettlement pathways). Nevertheless, in our survey, 77% of respondents, significantly higher than the 68% comparator, said that they could achieve some or all of their sentence planning targets.
- 8.7 Some prisoners who had graduated from offending behaviour programmes were used effectively to provide peer support and resettlement signposting to other prisoners. In addition, there was a good initiative to identify on arrival at the prison the 5–6% prisoners who were ex-servicemen, and to provide them with a range of information and advice about the support available to them from specialist organisations in the community. Monthly prisoner forums were also run, during which these prisoners could discuss issues of mutual interest and be signposted to relevant support.

## Recommendations

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- 8.8 Sufficient places on appropriate offending behaviour courses should be available to meet the needs of prisoners.
- 8.9 Prison managers should act promptly on the results of the review of resettlement pathway provision.
- 8.10 Current provision in the resettlement pathways should be better publicised to prisoners, so they are aware of whom to contact about the range of pre-release support available.
- 8.11 Responsibility for each of the nine reducing reoffending pathways should be clarified.
- 8.12 The purpose and aims of the two resettlement committee meetings should be clarified, and in particular which is responsible for discussing strategy and policy.

## Good practice

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- 8.13 *Prisoners who were ex-servicemen were identified on arrival and subsequently offered a range of specialist and relevant information and support.*

## Offender management and planning

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### Expected outcomes:

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

- 8.14 The offender management unit was among the most effective we have inspected. All prisoners were allocated an offender supervisor, and initial resettlement needs were assessed and referrals made. Most OASys and sentence planning work was up to date, but some delays occurred when prisoners were transferred to the establishment with an assessment already

overdue. All prisoners were seen by their offender supervisor pre-release. OASys assessments were quality checked, but sentence planning target setting was weak. The number of prisoners on some caseloads was high and offender supervisors had no administrative support. The offender management team was co-located, multidisciplinary and worked effectively together. Relationships with internal intervention providers and external probation teams were good. Personal officers and other residential staff had an important role in supporting offender management, but input from personal officers to sentence planning was inconsistent. Little was done to support prisoners serving an indeterminate sentence for public protection (IPP), but public protection arrangements were robust.

## Sentence planning and offender management

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- 8.15** A total of 191 prisoners were in scope of phase two of offender management, and 31 were in scope of phase three. The balance of the population mainly comprised prisoners with sentences longer than 12 months but not in scope for offender management, and around 3% of the population were serving sentences of less than 12 months. All prisoners were allocated an offender supervisor on arrival at the prison.
- 8.16** Each of the 11 offender supervisors had a caseload of prisoners to manage, and met them shortly after their arrival at the prison to carry out a thorough initial assessment of their resettlement needs (the induction immediate needs assessment), making any necessary referrals. They also completed an OASys assessment for those not in scope of offender management and worked with the offender manager to do likewise for those prisoners who were in scope. Backlogs of OASys assessments and sentence plans were small, and mainly the result of prisoners being transferred to the establishment with an assessment already overdue. In one case, this had resulted in a delay of two years for a sentence plan to be agreed for a PPO prisoner. A system was in place at the establishment to address this as a matter of urgency.
- 8.17** Sentence management of prisoners serving less than 12 months was largely taken forward using the induction immediate needs assessment document. All prisoners were seen by their offender supervisor at least two months before release, when the needs assessment was repeated to flag and deal with any outstanding resettlement issues. In our survey, 81% of respondents, compared with the 60% comparator, said that they had a sentence plan.
- 8.18** There was a system of OASys checks to ensure that the quality of assessments was acceptable, and regular feedback was provided to offender supervisors. The quality of sentence plans was adequate, although target setting generally focused on the interventions available at the prison, rather than behaviour and attitudes needing to be changed.
- 8.19** There were plans to develop the offender management model further to make better use of the administrative resources available, to the benefit of offender supervisors, who complained about having to carry out a range of tasks more suited to an administrator. It was hoped that this would free them to have more regular ongoing contact with prisoners on their caseloads. This was particularly relevant, given that the numbers on some caseloads were high (70–80 prisoners).
- 8.20** The offender management unit (OMU) team consisted of operational prison staff and civilian and seconded probation officers, and these were largely co-located, which helped to facilitate some good joint working. Case files were stored in a central secure location and were well organised and easily accessible to relevant staff.

- 8.21 Personal officers had an important role in supporting offender management. Some had attended awareness training and they were all provided with a range of relevant written materials and informal advice from offender supervisors. Residential principal officers were responsible for chairing sentence planning boards for prisoners not in scope of offender management serving sentences of over four years. This engendered a sense of ownership among these staff for the sentence planning targets agreed, and facilitated good attendance at boards by personal officers. The boards that we observed were well attended by relevant key workers, showed good knowledge of prisoners by staff and attempted to encourage engagement by prisoners. However, the level of input and involvement from personal officers in supporting sentence planning work varied greatly between prisoners, with around 50% of all sentence planning boards having personal officers in attendance.
- 8.22 Work was ongoing to develop relationships with external probation offender management teams, including staff exchanges between the local probation services and prison OMU staff to develop a greater degree of understanding of each group's roles and difficulties. This had resulted in a good level of joint working. Nevertheless, the level of attendance of offender managers at sentence planning boards was variable and might have been the cause of delays in the process, and some were conducted by telephone. Sentence planning for in-scope prisoners always involved input from the offender manager.
- 8.23 There were no delays in home detention curfew or early conditional release work, and there was a good system to manage those prisoners who had been recalled to prison, who were subject to sentence planning. There were also sound systems to identify PPO prisoners, who were all managed by offender supervisors. Release on temporary licence was used to develop familial relationships pre-release.
- 8.24 Relationships between offender supervisors and resettlement service providers at the prison were strong and sentence planning targets were key to the sequencing of many resettlement interventions. This extended to decisions made about work allocations and incentives and earned privileges levels.

## Public protection

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- 8.25 Public protection arrangements were robust, with at least two gatekeeper processes to identify relevant offenders, and all cases were reviewed at the well-attended weekly meeting. Key staff and departments were informed of any restrictions, and the prisoners concerned were promptly informed both verbally and in writing. Liaison with multi-agency public protection arrangements (MAPPA) and other relevant community agencies took place.

## Indeterminate-sentenced prisoners

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- 8.26 All IPP prisoners were supervised by seconded probation officers at the prison, and this work was up to date. However, IPP prisoners complained that little had been done to provide them with regular opportunities to air their views and meet as a group. An initial group had been run shortly before the inspection and there were plans to develop this work further. There were no life-sentenced prisoners at the establishment.

## Recommendations

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- 8.27 Offender assessment system (OASys) assessments and sentence plans should be up to date when transferring prisoners between different prisons.

- 8.28 Additional administrative support should be offered to offender supervisors.
- 8.29 Sentence planning targets should address the behaviour and attitudes needing to be changed, rather than the interventions available at the prison.
- 8.30 Residential managers should ensure that personal officers attend all sentence planning boards.
- 8.31 Forums and days for prisoners with an indeterminate sentence for public protection should be run monthly.

## Good practice

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- 8.32 *Sentence planning boards for some prisoners were chaired by residential principal officers, with good attendance by personal officers, offender supervisors, other key workers and prisoners.*

## Resettlement pathways

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### Expected outcomes:

Prisoners' resettlement needs are met under the seven pathways outlined in the Reducing Reoffending National Action Plan. An effective multi-agency response is used to meet the specific needs of each individual offender in order to maximise the likelihood of successful reintegration into the community.

## Reintegration planning

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- 8.33 It was unclear who was responsible for accommodation work, and there were longstanding difficulties with maintaining the level of specialist resources required. Although all prisoners were invited to a One Step Closer event six weeks before release, which provided access to a range of specialist support in the education, training and employment pathway, take-up was low. Work was ongoing with local employers to raise their awareness of the range of training that prisoners could undertake while in custody. Health provision for resettlement was good. Primary care professionals attended the One Step Closer pre-release event to identify prisoners' health needs in advance of their discharge. Prisoners were invited to attend a discharge clinic before their release, and a letter was prepared for their general practitioner (GP) in the community. Provision in the finance, benefit and debt pathway was insufficient, with limited specialist services available for prisoners with debt or financial problems.

## Accommodation

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- 8.34 It was not clear which Prison Service manager had responsibility for accommodation work. The main provision was through a contract with an external provider. At the time of the inspection, the only provision was one unqualified worker, who attended the prison on three days a week. This had resulted in significant backlogs, with around 200 prisoners waiting to be seen. The contract provided for an additional full-time qualified adviser. While the worker provided input to the induction process, the service available was mainly by application, although the worker

- 8.35 Around 60% of prisoners discharged were released into permanent accommodation, but, given the level of resources invested in accommodation work, prison interventions only had a minimal impact on this. Forty-nine prisoners, or around 7% of those who had been released over the preceding nine months, had no fixed abode.

### **Education, training and employment**

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*For further details, see Learning and skills and work activities in Section 5*

- 8.36 All prisoners due for release were invited to a One Step Closer event six weeks before the end of their sentence. This provided them with access to a range of specialist support that could be tailored to meet their individual circumstances. A range of local and national voluntary sector agencies was available at this event to provide support and referrals, close to prisoners' homes, for employment support, training and education and housing. However, at the time of the inspection, although prisoners were invited twice to this event, only about 50% of eligible prisoners attended, and the prison had not followed up reasons for this. Nevertheless, prisoners we spoke to were aware of what to expect when their release date drew near.
- 8.37 The prison had invested in staffing to ensure continuity for a successful European Social Fund project after funding had ended. The Helping Offenders by Providing Employment (HOPE) project had established links with employers, and 60 prisoners had been effectively supported to retain jobs held before custody or to have employment available on release, representing 40% of those who had been helped. Prisoners could add their CVs to a database used by employers to recruit staff. Work was ongoing with local employers to raise their awareness of the range of training that prisoners could undertake while in custody. Much of the employer engagement development work was carried out jointly with other nearby training prisons.

### **Mental and physical health**

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- 8.38 Health provision for resettlement was good. Primary care professionals attended the One Step Closer pre-release event to identify prisoners' health needs in advance of their discharge. Prisoners were invited to attend a discharge clinic on the Monday before their release, when any care they had received and future health provision was discussed with them. A letter was prepared for their GP in the community. If prisoners declined to attend this clinic, their notes were still reviewed and a GP letter written. Prisoners on prescription medication were given a supply to take home.
- 8.39 The mental health in-reach team held discharge care programme approach meetings, and if community representatives were not able to attend they were contacted by email, letter or telephone. Telephone calls had been facilitated by the in-reach team to enable prisoners to speak to their community mental health nurse before release. The mental health team highlighted problems they had encountered with prisoners leaving the prison without accommodation or when accommodation had only been confirmed a short time before release, as without an address it had not been possible to liaise effectively with community services.

### **Finance, benefit and debt**

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- 8.40 Although the needs analysis indicated that 47% of prisoners had an issue in this area related to their offending behaviour, there was no specialist finance or debt advice service offered. Prisoners were asked at induction whether they had financial problems, but the support

- 8.41 The provision of help to open bank accounts was in its infancy, with only one having been opened.
- 8.42 A money matters course was offered through the chaplaincy.

## Recommendations

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- 8.43 A prison manager should be given the clear lead for the accommodation pathway.
- 8.44 Adequate specialist accommodation provision should be made available.
- 8.45 The number of prisoners benefiting from the One Step Closer event should be increased.
- 8.46 Prisoners should have a discharge address in advance of their release from the prison.
- 8.47 Specialist debt advice and support should be available to prisoners on arrival at the prison, pre-release and by application at any other time.

## Drugs and alcohol

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- 8.48 The drugs and alcohol policy was up to date and had been informed by two needs analyses. There was good joint working between services, although the intensive 12-step programme had been struggling to attain referrals from other establishments. An alcohol awareness session was offered, as well as a range of other programmes, and participants rated these highly.
- 8.49 A drugs and alcohol strategy, dated November 2008, was in place and had been informed by a comprehensive population needs analysis and a specific substance misuse treatment needs analysis. The drug strategy team met bi-monthly, with representation from a range of stakeholding departments in the prison. The counselling, assessment, referral, advice and throughcare (CARAT) team comprised four discipline officers, and two full-time and one part-time Lifeline employees. The team had approximately 50% of the prison population on their caseload.
- 8.50 Structured interventions offered by the team included an alcohol awareness session for all prisoners who were screened as having alcohol-related problems. Those who were assessed as being 'alcohol only' were also eligible for the course, although a lack of funding prevented the CARAT team from providing support following the programme. However, a full-time alcohol worker post was being sought to address this shortfall. Alcoholics Anonymous groups were independently facilitated, with referrals handled by the chaplaincy team.
- 8.51 Other one-to-one and group programmes provided by CARAT services included drug awareness; motivation; relapse prevention; healthy balanced living; cocaine/crack awareness; relaxation; harm reduction and blood-borne viruses; and overdose and safer injecting.

- 8.52 There was good joint work between the CARAT team and the OMU. CARAT care plans were shared (with prisoner consent) with offender managers, who were involved in regular treatment reviews. Prisoners that we spoke to said that they had experienced greater levels of positive support when information was shared between CARAT services and the OMU. Others on treatment programmes said that support from an offender manager who had knowledge of their drug-using history had helped them to break through their denial of drug-related problems.
- 8.53 The CARAT team was also responsible for referrals to the two abstinence-based accredited programmes available at the establishment: prison addressing substance-related offending (P-ASRO), a medium intensity course, and Rehabilitation of Addicted Prisoners trust (RAPt), an intensive six-month, 12-step rehabilitation programme. P-ASRO had had 72 starts in the year to date (YTD), against a key performance target (KPT) of 96. There had been 63 completions YTD, against a KPT of 62. The programme clearly performed well, despite low levels of referrals and the loss of one staff member. Recent treatment and systems audits had yielded 100% scores for each. Participants also told us of their high levels of satisfaction with the programme and the dedication and empathy of P-ASRO facilitators.
- 8.54 The RAPt programme was housed on the drug-free E wing, which also housed enhanced prisoners. At the time of the inspection, 26 participants were on the programme, the only one of its kind in the Yorkshire and Humberside area. YTD starts numbered 59, against a KPT of 75. Staff had struggled to meet start targets owing to a lack of referrals from other establishments in the area. This was being addressed with the area office and by programme staff travelling to other prisons to sell the programme using a DVD of participants' testimonies. Prisoners reported high levels of satisfaction with the programme and with the custody staff on E wing who supported those on the RAPt programme.
- 8.55 A voluntary drug testing programme was offered to prisoners. At the time of the inspection, a total of 284 compacts were in place, against a KPT of 282, and there was a waiting list of around 40. Testing was conducted by staff from E wing. All wings except A wing had their own dedicated testing suites. These were clean and well maintained.
- 8.56 Contacts between CARAT services and drug intervention programmes (DIP) were good in the Yorkshire and Humberside area. DIP workers from East and West Yorkshire regularly visited prisoners due for release, and DIPs from both Ridings operated a gate pick-up scheme.

## Recommendation

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- 8.57 The post of full-time alcohol worker should be funded and filled as soon as possible.

## Good practice

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- 8.58 *There was good joint work between the counselling, assessment, referral, advice and throughcare (CARAT) team and the offender management unit.*

## Children and families of offenders

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- 8.59 Provision under the children and families pathway was well developed, with some innovative provision. A dedicated and enthusiastic lead had been appointed. Prisoners were able to access visits easily, and visitors and prisoners were complimentary about staff. The visitor

receiving area was small and had few facilities for visitors. The visits hall furnishings were in a poor state of repair. Families were encouraged to participate in some aspects of a prisoner's life and a parenting course and family days were provided regularly. Some prisoners and their visitors were disadvantaged by the system for access to family days. There had been use of release on temporary licence for maintaining family ties.

- 8.60 Domestic visits were provided on Monday, Thursday and Friday afternoons and on weekend mornings and afternoons. Our survey showed that more prisoners were able to receive their entitlement to visits than at comparator prisons. The visits booking line was open from 6.30–8.30pm on Monday to Friday. It was answered immediately when we rang it and we were offered visits the next day. Closed visits were available within two days. Queries and comments about visits could be made by email.
- 8.61 Information about visits was available to prisoners and their visitors and there was a comprehensive visits policy. There was no visitors' centre, but a visitors' receiving area, which was located in the gate complex and offered advice, toilets and booking-in facilities to visitors. It was small and clean, and visitors praised the staff who worked there.
- 8.62 There were no refreshments or play facilities available in the visitors' receiving area. Visitors had access to the receiving area from 12.30pm until after the end of visits. A drug support worker from the Council for Dependency Problems was available to offer advice and support to visitors, although take-up was low.
- 8.63 On the day we observed visits, visitors were taken over to the visits hall in good time. Prisoners arrived on time for their visits. There was little room to carry out drug detection procedures and no private room to carry out searches of visitors. The visits hall was bright but noisy when a large number of visits took place. The carpets and furniture were in a poor state of repair. These were scheduled for replacement in the week following the inspection. Interactions between staff, prisoners and visitors were positive, with staff offering advice to visitors on a variety of matters. The atmosphere was relaxed and welcoming.
- 8.64 There was a large children's play area open on Fridays and weekends. It was staffed by volunteers from the Pre-school Learning Alliance. A range of refreshments was offered for sale, served by volunteers.
- 8.65 There were three closed visits booths in sight, but out of hearing, of staff. Two rooms were provided for legal visits or when prisoners and visitors required privacy in emergencies or when bad news had to be given.
- 8.66 Any prisoner wishing to use the toilet during a visit was strip searched before returning to their visit, without the consideration of a risk assessment. Ten per cent of prisoners were routinely strip searched following visits – again, without consideration of a risk assessment.
- 8.67 A visitors' survey had been undertaken before the inspection and there were plans to carry out a more in-depth consultation.
- 8.68 A comprehensive parenting course was provided by the Pre-school Learning Alliance. Prisoners could only access family days on completion of this course. This system disadvantaged prisoners who had been able to access family days at their previous establishment but who had not yet undertaken the course at Everthorpe. The waiting list was short, however, and efforts were made to encourage prisoners to apply for, and participate in, the course. The family day we observed was well run, with support being offered to fathers and their children. Mothers and usual carers attended for the first and last parts of the visit,

- 8.69 Prisoners' families were routinely invited to attend offending behaviour course reviews and these were well attended. Additional efforts were being made to encourage Asian families to attend, among whom take-up was poor. Families were routinely involved in other aspects of prisoners' lives.
- 8.70 A Keeping up with the Children course was provided by East Riding Adult Education Service, which enabled fathers to understand and track their child's progress through the national curriculum. Training had been provided by Kids VIP, a voluntary organisation involved in children's welfare, to enable staff to understand the impact of visits on prisoners and their families, and Storybook Dads was available through the library.
- 8.71 A dedicated at-risk helpline was available to visitors and prisoners to report concerns about prisoners. This had been used several times to report matters relating to safer custody and was monitored daily, and concerns were followed up by the safer custody team.
- 8.72 There was little provision for prisoners whose families did not live locally. Over 150 prisoners were from distances of over 100 miles from the prison, including overseas. In our prisoner groups, some of these prisoners reported difficulties in keeping in touch with their families and gaining transfers back to their home areas. This had resulted in some disruption and a number of incidents.
- 8.73 There had been use of release on temporary licence for maintaining family ties.

## **Recommendations**

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- 8.74 A comprehensive visitors' centre facility and service should be provided.
- 8.75 The furniture and carpets in the visits hall should be replaced.
- 8.76 Additional space should be provided for the dog handlers and police to carry out searches and drug detection procedures.
- 8.77 Prisoners using the toilet during visits should not routinely be strip searched.
- 8.78 Risk assessments should be used to determine which prisoners, if any, should be strip searched following visits.
- 8.79 Where appropriate, families should be invited to participate in other aspects of prisoners lives, such as assessment, care in custody and teamwork (ACCT) reviews and sentence planning boards.
- 8.80 All prisoners should be able to access family visits.
- 8.81 Provision should be made to encourage family ties for prisoners whose families are not local to the establishment.

## Attitudes, thinking and behaviour

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- 8.82** The quality of the enhanced thinking skills (ETS) provision was good, but while the yearly target of completions was exceeded, this was still not meeting the need. Many personal officers were supportive of the programme. The diverse needs of prisoners were well met, but little was done to address issues of denial and a poor motivation. Needs analysis had identified gaps in offending behaviour programme provision.
- 8.83** In addition to the accredited drug programmes (see section on drugs and alcohol), ETS was offered, with 54 agreed places available each year. The prison expected to exceed this figure, with over 60 completions of the programme anticipated for 2009. Prison Service audit scores had been consistently excellent, with scores of 100% anticipated. In the previous year, the prison had been rated as being in the top eight in the UK for delivering the programme. Personal officers were generally supportive of the programme and attended over half of the post-programme reviews run.
- 8.84** Arrangements to identify and meet the diverse needs of prisoners were described in the audit criteria of the programme, and we saw examples of this happening in practice. Little was done to address the issues presented by those who denied their offences or did not engage with their offending behaviour sentence planning targets.
- 8.85** Current ETS provision was not sufficient to meet the needs of all those assessed as requiring it, with 123 prisoners on the waiting list. Those places that were available were appropriately prioritised in terms of risk of harm issues and sentence type (IPP and PPO prisoners were priority groups). This meant that some prisoners with ETS in their sentence plans were released from custody without being offered a place on the programme. In addition, the needs analysis had identified a number of prisoners needing programmes not offered at the prison (see section on strategic management of resettlement).

## Recommendation

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- 8.86** A strategy should be put in place to address issues of denial, and identify and implement work to motivate prisoners not engaging with sentence planning targets.



# Section 9: Recommendations, housekeeping points and good practice

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

## Main recommendations

to the Governor

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- 9.1 Anti-bullying and violence reduction procedures should be strengthened and adhered to. (HP55)
  - 9.2 The role of the segregation unit should be clearly defined, with supporting policies and procedures developed and implemented to include: an improved regime; individual assessments for access to regimes; individually assessed targets for each prisoner; and care plans for those remaining in the unit beyond their second review. (HP56)
  - 9.3 The healthcare building should be replaced. (HP57)
  - 9.4 The poor perceptions of black and minority ethnic and Muslim prisoners should be explored and any necessary action taken to improve current negative perceptions. (HP58)
  - 9.5 All prisoners should be unlocked during the core day and engaged in employment, education or training. (HP59)
  - 9.6 Arrangements for supporting prisoners into accommodation on release should be improved as a matter of priority. (HP60)

## Recommendations

to NOMS

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- 9.7 Sufficient places on appropriate offending behaviour courses should be available to meet the needs of prisoners. (8.8)
  - 9.8 Offender assessment system (OASys) assessments and sentence plans should be up to date when transferring prisoners between different prisons. (8.27)

## Recommendation

to the Area Manager

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- 9.9 There should be improved cooperation and communication between areas to ensure better management of prisoners identified as high risk in terms of drug activity or indiscipline. (6.11)

## Recommendations

to the Governor

## Courts, escorts and transfers

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- 9.10 Prisoners should only be handcuffed when being escorted between reception and the escort vehicle on the basis of an individual risk assessment. (1.6)

## **First days in custody**

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- 9.11 The reception area should be improved to provide more space, light and greater privacy for new arrivals, and afford the reception area autonomy from the healthcare centre. (1.27)
- 9.12 Non-smokers should be offered a suitable alternative to the smokers' pack. (1.28)
- 9.13 All prisoners should be able to order from the prison shop within 24 hours of arrival. (1.29)
- 9.14 All new arrivals should have access to a Listener and an Insider in reception. (1.30)
- 9.15 The mandatory drug testing suite should be relocated out of the reception area. (1.31)
- 9.16 Every prisoner should be privately interviewed by a member of staff before lock-up on his first night and this should be recorded in his wing file. (1.32)
- 9.17 The induction booklet should be available in a wider range of languages. (1.33)

## **Residential units**

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- 9.18 Prisoners should not share cells designed for single occupancy. (2.24)
- 9.19 Screening should be provided for in-cell toilets and toilet seats should be fitted. (2.25)
- 9.20 The refurbishment of the showers on A and B wings should be completed and remedial work undertaken in the E wing showers. (2.26)
- 9.21 Managers should investigate why outgoing mail is being delayed and take steps to keep delays to a minimum. (2.27)
- 9.22 Additional telephones should be installed, to allow one for every 20 prisoners. (2.28)
- 9.23 All prisoners should be permitted to exchange visiting orders for telephone credit. (2.29)
- 9.24 Adequate privacy hoods should be fitted to telephones to enable prisoners to make calls in private. (2.30)

## **Personal officers**

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- 9.25 Wing history file entries should be made at least weekly. Entries should reflect the individual prisoner's circumstances and contain sufficient information for an uninformed reader to understand the context. (2.43)
- 9.26 The involvement of personal officers in sentence planning should be developed and further integrated into individual prisoners' sentence planning. (2.44)

## **Bullying and violence reduction**

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- 9.27 Formal interventions should be introduced for perpetrators of bullying, including racist bullying. (3.12)

- 9.28 Support should be introduced for victims of bullying, including racist bullying. (3.13)
- 9.29 Authority to downgrade a prisoner's incentives and earned privileges (IEP) level under the anti-bullying strategy should be consistent with that stipulated in the IEP policy. (3.14)
- 9.30 Investigations into alleged bullying behaviour should be formally recorded and the alleged perpetrator informed in writing of the outcome(s). (3.15)
- 9.31 All prisoners placed on the anti-bullying scheme should be given the reasons for such a decision in writing, and the reasons for any subsequent move to a different level on the scheme should be provided in writing. (3.16)
- 9.32 Only when there is evidence of bullying should prisoners be subject to anti-bullying measures. Any other forms of violent or anti-social behaviour should be managed through separate measures. (3.17)
- 9.33 There should be a formal appeal process for any prisoner placed on the anti-bullying strategy. (3.18)
- 9.34 Violence reduction meetings should analyse data to look at trends and themes and decide on action accordingly. (3.19)

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

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- 9.35 Suicide and self-harm prevention meetings should analyse data to look at trends and themes and decide action accordingly. (3.34)
- 9.36 The Listeners should play a larger part in informing self-harm and suicide prevention strategies in the prison, both through the formal monthly meetings and through other consultative processes. (3.35)
- 9.37 All staff trained in suicide prevention should receive regular refresher training. (3.36)
- 9.38 The safer custody policy should provide guidance to staff as to what constitutes a near-death, and ensure that such incidents are investigated and an action plan put in place as a result. (3.37)
- 9.39 There should be regular monitoring of the action plan raised following the Prisons and Probation Ombudsman's recommendations after a self-inflicted death in 2006. (3.38)
- 9.40 Anti-ligature knives should be issued to and carried by all frontline staff. (3.39)

### **Diversity**

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- 9.41 A diversity policy should be produced which encompasses all types of diversity and outlines how the establishment aims to meet the diverse needs of the population. (3.49)
- 9.42 The disability liaison officer (DLO) should receive profiled time to develop services for older prisoners and those with a disability. (3.50)
- 9.43 Named liaison officers should be available on all the residential wings and appropriately trained to support the DLO. (3.51)

- 9.44 A DLO support worker should undertake the assessment and subsequent coordination of reasonable adjustments and care planning, where appropriate, for all prisoners with a disability. (3.52)
- 9.45 Regular diversity forums for prisoners with a disability should be held and inform policy and service delivery. (3.53)
- 9.46 Links should be made with community organisations to assist with the reintegration of older prisoners and those with a disability. (3.54)

### **Race equality**

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- 9.47 The work of the race equality action team should be better publicised, both to prisoners and to staff. (3.71)
- 9.48 Actions identified in the race equality action plan to increase black and minority ethnic recruitment should be implemented. (3.72)
- 9.49 The focus group for prisoner race relations representatives and staff should be publicised to staff and prisoners and its effectiveness reviewed after six months. (3.73)
- 9.50 The low use of racist incident report forms (RIRFs) by prisoners should be investigated and the use of RIRFs should be promoted, particularly their confidentiality and how they are investigated and scrutinised. (3.74)
- 9.51 Staff should be trained to deal with allegations of racism made by prisoners and encourage them to use the systems available to make a complaint. (3.75)

### **Foreign national prisoners**

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- 9.52 The foreign nationals strategy document should be made available to prisoners. (3.84)
- 9.53 The foreign nationals coordinator should receive more allocated time to work with foreign national prisoners, and prisoners should be kept informed of when he is available. (3.85)
- 9.54 Foreign national prisoners should meet as a group with the foreign nationals coordinator and this should be fed back into the race equality action team meeting. (3.86)
- 9.55 Foreign national liaison officers should be advertised across the residential wings and prisoners should be informed of what they can expect from them in the absence of the foreign nationals coordinator. (3.87)
- 9.56 An accredited, independent immigration advice agency should be sourced to attend the establishment and meet foreign national prisoners at least quarterly. (3.88)
- 9.57 The establishment should facilitate meetings between foreign national prisoners and UK Border Agency representatives or the foreign nationals coordinator to improve their understanding of the facilitated returns scheme. (3.89)
- 9.58 Prisoners should be permitted a free international telephone call if they have family members abroad, regardless of whether they receive a visit, and the process for accessing international telephone calls should be simplified and communicated to staff and prisoners. (3.90)

## **Applications and complaints**

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- 9.59 Information explaining the applications and complaints process should be made available in a wider range of languages. (3.98)
- 9.60 Application forms should be made freely available on the wings, so that prisoners are not required to ask staff for them. (3.99)
- 9.61 The quality assurance system should effectively address and improve the quality of responses and ensure that complaints requiring formal investigation receive it. (3.100)
- 9.62 A detailed analysis of complaints should be carried out by ethnicity, disability, location and prisoner type to inform local policy. (3.101)

## **Legal rights**

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- 9.63 Legal services officers should keep a log of all applications received and legal services provided to prisoners. (3.107)

## **Substance use**

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- 9.64 The post of specialist substance misuse lead nurse should be filled as soon as possible to ensure the smooth running of the integrated drug treatment system and an increase in the number of prisoners treated. (3.117)
- 9.65 The mandatory drug testing holding cell should be deep cleaned and redecorated to remove all graffiti from the cell. (3.118)

## **Health services**

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- 9.66 All staff should have at least annual resuscitation and defibrillation training. (4.40)
- 9.67 A protocol for reception procedures, including where the reception healthcare screen should take place and the process for those arriving after 5.30pm, should be developed. (4.41)
- 9.68 Triage algorithms should be developed to ensure consistency of advice and treatment to all prisoners. (4.42)
- 9.69 Healthcare applications should be collected and screened daily, including weekends. (4.43)
- 9.70 The healthcare application system should be reviewed, with applications being screened by a clinician and prisoners notified of their internal healthcare appointments in advance. (4.44)
- 9.71 Prisoners should be able to obtain simple pain relief at night. (4.45)
- 9.72 The special sick arrangements should be reviewed by the medicines and therapeutics committee, with the aim of increasing the range of treatments available without reference to the general practitioner. (4.46)

- 9.73 The pharmacy controlled drugs register should be maintained in accordance with current legal requirements, and a separate controlled drugs register should be maintained for each room in which controlled drugs are stored. (4.47)
- 9.74 The pharmacist should be added to the list of health services professionals available for consultation detailed on the healthcare request forms. (4.48)
- 9.75 Facilities should be made available to allow patients to receive confidential counselling from the pharmacist. (4.49)
- 9.76 The failure to attend rates for dental services, and the reasons why appointments are missed, should be assessed. (4.50)
- 9.77 Dental cover should be available when the regular dentist is unable to attend the prison. (4.51)

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

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- 9.78 The skills for life strategy should be completed and established to promote a whole prison approach. (5.19)
- 9.79 The provision of embedded literacy and numeracy support in workshops should be increased. (5.20)
- 9.80 The availability of level two qualifications in offender learning and skills service (OLASS) construction should be improved. (5.21)
- 9.81 Vocationally related opportunities for learners at entry level should be developed. (5.22)
- 9.82 The effective use of individual learning plans for all aspects of learning and skills should be established. (5.23)
- 9.83 The capacity for Storybook Dads should be extended. (5.24)
- 9.84 The availability of books and bilingual dictionaries for speakers of languages other than English should be increased. (5.25)
- 9.85 The DVD club arrangements should be formalised. (5.26)

### **Physical education and health promotion**

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- 9.86 Current staffing levels should be maintained so the good recreational and accredited provision can continue and develop further. (5.33)
- 9.87 The scheduled work on the showers and changing area should be completed. (5.34)
- 9.88 The safety issues with the football pitch should be resolved. (5.35)
- 9.89 Sufficient toilet facilities should be provided to meet need. (5.36)

### **Faith and religious activity**

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- 9.90 Arrangements should be made for cover when the coordinating chaplain is unavailable. (5.46)

- 9.91 Links with faith communities outside the prison should be established to meet prisoners' individual needs. (5.47)

### **Time out of cell**

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- 9.92 Time out of cell should be increased. (5.53)
- 9.93 Prison managers should investigate why so many prisoners are locked up during activity times and action taken to improve the numbers attending purposeful activity. (5.54)
- 9.94 Alternative activities should be provided for those whose regular activities are cancelled. (5.55)
- 9.95 Exercise should be arranged and announced as published. (5.56)
- 9.96 Prisoners should be provided with appropriate clothing for inclement weather. (5.57)

### **Security and rules**

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- 9.97 Security measures implemented to address identified security risks should be reviewed monthly to ensure that they remain appropriate. (6.12)
- 9.98 Strip searching should be carried out only after a risk assessment indicates that it is necessary. (6.13)
- 9.99 Prisoners should not routinely be kept on closed visits for three months unless additional information has been received that warrants the continued use of this measure. (6.14)

### **Discipline**

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- 9.100 Records of adjudication hearings should be comprehensive and reflect all the evidence that has been considered and a full investigation of the charges heard. (6.32)
- 9.101 Appropriate holding facilities for prisoners awaiting adjudication should be provided. (6.33)
- 9.102 Punishments should be given in line with the published tariff. When the punishment is unusually high, the reasons for it should be recorded clearly. (6.34)
- 9.103 On the wholly exceptional occasions when a body belt is deployed, governance, procedures and paperwork must be rigorously adhered to. (6.35)
- 9.104 The senior management team should monitor and analyse the use of force and the reasons for the high number of incidents. (6.36)
- 9.105 Remedial work to the special accommodation should be carried out as a priority. (6.37)
- 9.106 Planned removals should be video-recorded and reviewed. (6.38)
- 9.107 Individual prisoner records should be fully completed to give an accurate record of daily events. (6.39)
- 9.108 In-cell electricity should be provided on the unit. (6.40)

- 9.109 Toilets should be cleaned and screened. (6.41)
- 9.110 The number of showers on the unit should be increased as a matter of urgency. (6.42)
- 9.111 Prisoners should be given access to showers daily. (6.43)
- 9.112 The secreted items policy should be reviewed as to its effectiveness. (6.44)

### **Incentives and earned privileges**

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- 9.113 The pay policy should be reviewed to remove inconsistencies in pay between those on different regime levels doing the same work. (6.53)
- 9.114 The policy and practice of allowing adjudication punishments and automatic downgrade to basic for some serious disciplinary offences should cease. (6.54)
- 9.115 Monitoring systems should be developed and implemented for those on the basic regime. (6.55)
- 9.116 Routine reviews and those triggered by warnings should take place without undue delay. (6.56)
- 9.117 Regular management checks of reviews should take place consistently. (6.57)

### **Catering**

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- 9.118 Prisoners should be able to gain formal catering qualifications. (7.9)
- 9.119 Breakfast should be served on the morning it is to be eaten. (7.10)
- 9.120 A system for ensuring that serveries have been cleaned after service should be introduced. (7.11)
- 9.121 Prisoners should not be required to eat meals in their cells. (7.12)

### **Prison shop**

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- 9.122 Prisoners should be regularly consulted, in addition to the ongoing meetings with the canteen provider, so that their views can be discussed. (7.22)
- 9.123 Prisoners should be able to buy items from the shop within 24 hours of arrival. (7.23)
- 9.124 Non-smokers' packs should be available on reception. (7.24)
- 9.125 Prisoners should not be charged an administrative fee for purchasing goods from a catalogue. (7.25)
- 9.126 The range of catalogues currently available should be extended. (7.26)
- 9.127 The range of black and minority ethnic products should be expanded in consultation with race representatives and black and minority ethnic prisoners. Race representatives and the race equality action team should be consulted regarding any amendments to the shop list. (7.27)

## **Strategic management of resettlement**

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- 9.128 Prison managers should act promptly on the results of the review of resettlement pathway provision. (8.9)
- 9.129 Current provision in the resettlement pathways should be better publicised to prisoners, so they are aware of whom to contact about the range of pre-release support available. (8.10)
- 9.130 Responsibility for each of the nine reducing reoffending pathways should be clarified. (8.11)
- 9.131 The purpose and aims of the two resettlement committee meetings should be clarified, and in particular which is responsible for discussing strategy and policy. (8.12)

## **Offender management and planning**

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- 9.132 Additional administrative support should be offered to offender supervisors. (8.28)
- 9.133 Sentence planning targets should address the behaviour and attitudes needing to be changed, rather than the interventions available at the prison. (8.29)
- 9.134 Residential managers should ensure that personal officers attend all sentence planning boards. (8.30)
- 9.135 Forums and days for prisoners with an indeterminate sentence for public protection should be run monthly. (8.31)

## **Resettlement pathways**

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- 9.136 A prison manager should be given the clear lead for the accommodation pathway. (8.43)
- 9.137 Adequate specialist accommodation provision should be made available. (8.44)
- 9.138 The number of prisoners benefiting from the One Step Closer event should be increased. (8.45)
- 9.139 Prisoners should have a discharge address in advance of their release from the prison. (8.46)
- 9.140 Specialist debt advice and support should be available to prisoners on arrival at the prison, pre-release and by application at any other time. (8.47)
- 9.141 The post of full-time alcohol worker should be funded and filled as soon as possible. (8.57)
- 9.142 A comprehensive visitors' centre facility and service should be provided. (8.74)
- 9.143 The furniture and carpets in the visits hall should be replaced. (8.75)
- 9.144 Additional space should be provided for the dog handlers and police to carry out searches and drug detection procedures. (8.76)
- 9.145 Prisoners using the toilet during visits should not routinely be strip searched. (8.77)

- 9.146 Risk assessments should be used to determine which prisoners, if any, should be strip searched following visits. (8.78)
- 9.147 Where appropriate, families should be invited to participate in other aspects of prisoners lives, such as assessment, care in custody and teamwork (ACCT) reviews and sentence planning boards. (8.79)
- 9.148 All prisoners should be able to access family visits. (8.80)
- 9.149 Provision should be made to encourage family ties for prisoners whose families are not local to the establishment. (8.81)
- 9.150 A strategy should be put in place to address issues of denial, and identify and implement work to motivate prisoners not engaging with sentence planning targets. (8.86)

## Housekeeping points

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### **First days in custody**

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- 9.151 Wing files should record that a prisoner has been able to make a telephone call on locating to the induction unit. (1.34)
- 9.152 The chaplaincy team should ensure that their introduction to prisoners on induction is part of the formal process. (1.35)

### **Residential units**

---

- 9.153 The information on notice boards should be refreshed periodically, even when not out of date. (2.31)
- 9.154 The minutes of prisoner representative meetings should show time-bounded and named responsibility for actions to be taken. (2.32)

### **Legal rights**

---

- 9.155 Correct information about legal services should be displayed on the residential wings. (3.108)
- 9.156 Both legal services officers should have access to, and knowledge about, where the legal services resources are kept. (3.109)

### **Health services**

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- 9.157 Prisoners should not be permitted to smoke in the healthcare waiting room. (4.52)
- 9.158 The floor in the healthcare room on the main corridor should be repaired. (4.53)
- 9.159 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. (4.54)

9.160 The purpose and benefits of triage should be promoted to prisoners. (4.55)

### **Discipline**

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9.161 The exercise areas should be made less austere, with seating provided. (6.45)

### **Catering**

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9.162 The heated trolleys should be regularly maintained and deficiencies rectified. (7.13)

### **Prison shop**

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9.163 The difficulties with PIN credit should be resolved as soon as possible, so that prisoners receive the PIN credit they have ordered. (7.28)

## **Examples of good practice**

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### **Security and rules**

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9.164 Prisoners were given a detailed account of their categorisation review. (6.15)

### **Incentives and earned privileges**

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9.165 The facilities list had been developed in consultation with all prisoners. (6.58)

### **Strategic management of resettlement**

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9.166 Prisoners who were ex-servicemen were identified on arrival and subsequently offered a range of specialist and relevant information and support. (8.13)

### **Offender management and planning**

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9.167 Sentence planning boards for some prisoners were chaired by residential principal officers, with good attendance by personal officers, offender supervisors, other key workers and prisoners. (8.32)

### **Resettlement pathways**

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9.168 There was good joint work between the counselling, assessment, referral, advice and throughcare (CARAT) team and the offender management unit. (8.58)



## Appendix I: Inspection team

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|                    |                               |
|--------------------|-------------------------------|
| Nigel Newcomen     | Deputy Chief Inspector        |
| Sara Snell         | Team leader                   |
| Karen Dillon       | Inspector                     |
| Sean Sullivan      | Inspector                     |
| Vinnett Pearcy     | Inspector                     |
| Andrew Rooke       | Inspector                     |
| Martin Owens       | Inspector                     |
|                    |                               |
| Mandy Whittingham  | Healthcare inspector          |
| Paul Roberts       | Substance misuse inspector    |
| Steve Gascoigne    | Pharmacy inspector            |
| Martin Wall        | Dental inspector              |
|                    |                               |
| Paddy Doyle        | Offender management inspector |
|                    |                               |
| Laura Nettleingham | Researcher                    |
| Samantha Booth     | Researcher                    |
|                    |                               |
| Susan Bain         | Ofsted team leader            |
| Marina Gaze        | Ofsted inspector              |
| Beverley Clark     | Ofsted inspector              |

## Appendix II: Prison population profile

| (i) Status                      | Number of prisoners | %          |
|---------------------------------|---------------------|------------|
| Sentenced                       | 670                 | 99.70      |
| Civil prisoners                 | 0                   |            |
| Detainees (single power status) | 2                   | 0.30       |
| Detainees (dual power status)   | 0                   |            |
| <b>Total</b>                    | <b>672</b>          | <b>100</b> |

| (ii) Sentence                   | Number of prisoners | %          |
|---------------------------------|---------------------|------------|
| Less than 6 months              | 8                   | 1.19       |
| 6 months to less than 12 months | 18                  | 2.68       |
| 12 months to less than 2 years  | 98                  | 14.58      |
| 2 years to less than 4 years    | 273                 | 40.63      |
| 4 years to less than 10 years   | 233                 | 34.67      |
| 10 years and over (not life)    | 11                  | 1.64       |
| Life                            | 31                  | 4.61       |
| <b>Total</b>                    | <b>672</b>          | <b>100</b> |

| (iii) Length of stay | Number of prisoners | %          |
|----------------------|---------------------|------------|
| Less than 1 month    | 76                  | 11.31      |
| 1 month to 3 months  | 164                 | 24.40      |
| 3 months to 6 months | 181                 | 26.93      |
| 6 months to 1 year   | 171                 | 25.45      |
| 1 year to 2 years    | 69                  | 10.27      |
| 2 years to 4 years   | 10                  | 1.49       |
| 4 years or more      | 1                   | 0.15       |
| <b>Total</b>         | <b>672</b>          | <b>100</b> |

| (iv) Main offence                     | Number of prisoners | %          |
|---------------------------------------|---------------------|------------|
| Violence against the person           | 163                 | 24.26      |
| Sexual offences                       | 1                   | 0.15       |
| Burglary                              | 150                 | 22.32      |
| Robbery                               | 102                 | 15.18      |
| Theft and handling                    | 14                  | 2.08       |
| Fraud and forgery                     | 13                  | 1.93       |
| Drugs offences                        | 156                 | 23.21      |
| Other offences                        | 73                  | 10.86      |
| Civil offences                        | 0                   |            |
| Offence not recorded/ Holding warrant | 0                   |            |
| <b>Total</b>                          | <b>672</b>          | <b>100</b> |

| (v) Age                  | Number of prisoners | %          |
|--------------------------|---------------------|------------|
| 21 years to 29 years     | 370                 | 55.06      |
| 30 years to 39 years     | 199                 | 29.61      |
| 40 years to 49 years     | 80                  | 11.90      |
| 50 years to 59 years     | 18                  | 2.68       |
| 60 years to 69 years     | 5                   | 0.74       |
| 70 plus years            | 0                   |            |
| Please state maximum age | 67                  |            |
| <b>Total</b>             | <b>672</b>          | <b>100</b> |

| (vi) Home address                      | Number of prisoners | %     |
|--|---------------------|-------|
| Within 50 miles of the prison          | 461                 | 68.60 |
| Between 50 and 100 miles of the prison | 42                  | 6.25  |
| Over 100 miles from the prison         | 113                 | 16.82 |

|              |            |            |
|--------------|------------|------------|
| Overseas     | 33         | 4.91       |
| NFA          | 23         | 3.42       |
| <b>Total</b> | <b>672</b> | <b>100</b> |

| <b>(vii) Nationality</b> | <b>Number of prisoners</b> | <b>%</b>   |
|--------------------------|----------------------------|------------|
| British                  | 634                        | 94.35      |
| Foreign nationals        | 38                         | 5.65       |
| <b>Total</b>             | <b>672</b>                 | <b>100</b> |

| <b>(viii) Ethnicity</b>              | <b>Number of prisoners</b> | <b>%</b>   |
|--------------------------------------|----------------------------|------------|
| <i>White</i>                         |                            |            |
| British                              | 525                        | 78.13      |
| Irish                                | 4                          | 0.60       |
| Other White                          | 25                         | 3.72       |
| <i>Mixed</i>                         |                            |            |
| White and Black Caribbean            | 5                          | 0.74       |
| White and Black African              | 0                          |            |
| White and Asian                      | 0                          |            |
| Other Mixed                          | 4                          | 0.60       |
| <i>Asian or Asian British:</i>       |                            |            |
| Indian                               | 13                         | 1.93       |
| Pakistani                            | 32                         | 4.76       |
| Bangladeshi                          | 1                          | 0.15       |
| Other Asian                          | 13                         | 1.93       |
| <i>Black or Black British</i>        |                            |            |
| Caribbean                            | 23                         | 3.42       |
| African                              | 9                          | 1.34       |
| Other Black                          | 12                         | 1.79       |
| <i>Chinese or other ethnic group</i> |                            |            |
| Chinese                              | 4                          | 0.60       |
| Other ethnic group                   | 2                          | 0.30       |
| <b>Total</b>                         | <b>672</b>                 | <b>100</b> |

| <b>(ix) Religion</b>          | <b>Number of prisoners</b> | <b>%</b>   |
|-------------------------------|----------------------------|------------|
| Baptist                       | 0                          |            |
| Church of England             | 235                        | 34.97      |
| Roman Catholic                | 106                        | 15.77      |
| Other Christian denominations | 16                         | 2.38       |
| Muslim                        | 79                         | 11.76      |
| Sikh                          | 0                          |            |
| Hindu                         | 0                          |            |
| Buddhist                      | 13                         | 1.93       |
| Jewish                        | 1                          | 0.15       |
| Other                         | 4                          | 0.60       |
| No religion                   | 218                        | 32.44      |
| <b>Total</b>                  | <b>672</b>                 | <b>100</b> |

## Appendix III: Summary of prisoner questionnaires

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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*

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 9 December 2008, the prisoner population at HMP Everthorpe was 683. The sample size was 139. Overall, this represented 20% of the prisoner population.

#### *Selecting the sample*

Respondents were randomly selected from a local inmate database system (LIDS) prisoner population printout using a stratified systematic sampling method. This basically means that every second person is selected from a LIDS list, which is printed in location order, if 50% of the population is to be sampled.

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

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

#### *Methodology*

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

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

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

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

### *Response rates*

In total, 127 respondents completed and returned their questionnaires. This represented 19% of the prison population. The response rate was 91%. In addition to the seven respondents who refused to complete a questionnaire, three questionnaires were not returned and two were returned blank.

### *Comparisons*

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 2008 against comparator figures for all prisoners surveyed in category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 36 category C trainer prisons since April 2003.
- A comparison within the 2008 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2008 survey between the responses of Muslim and non-Muslim prisoners.

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.

## 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 to certain responses within the summary – for example, 'Not sentenced' options across questions – may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data 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.

## Section 1: About You

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

|             |  |     |
|-------------|--|-----|
| <b>Q1.2</b> | <b>How old are you?</b>  |     |
|             | <i>Under 21</i> .....  | 1%  |
|             | <i>21 - 29</i> .....   | 57% |
|             | <i>30 - 39</i> .....   | 31% |
|             | <i>40 - 49</i> .....   | 7%  |
|             | <i>50 - 59</i> .....   | 4%  |
|             | <i>60 - 69</i> .....   | 1%  |
|             | <i>70 and over</i> .....   | 0%  |
| <b>Q1.3</b> | <b>Are you sentenced?</b>  |     |
|             | <i>Yes</i> .....   | 92% |
|             | <i>Yes - on recall</i> .....   | 8%  |
|             | <i>No - awaiting trial</i> .....   | 0%  |
|             | <i>No - awaiting sentence</i> .....  | 0%  |
|             | <i>No - awaiting deportation</i> .....   | 0%  |
| <b>Q1.4</b> | <b>How long is your sentence?</b>  |     |
|             | <b><i>Not sentenced</i></b> .....  | 0%  |
|             | <i>Less than 6 months</i> .....  | 2%  |
|             | <i>6 months to less than 1 year</i> .....  | 5%  |
|             | <i>1 year to less than 2 years</i> .....   | 14% |
|             | <i>2 years to less than 4 years</i> .....  | 42% |
|             | <i>4 years to less than 10 years</i> .....   | 29% |
|             | <i>10 years or more</i> .....  | 2%  |
|             | <i>IPP (Indeterminate Sentence for Public Protection)</i> .....  | 6%  |
|             | <i>Life</i> .....  | 0%  |
| <b>Q1.5</b> | <b>Approximately, how long do you have left to serve (if you are serving life or IPP, please use the date of your next board)?</b> |     |
|             | <b><i>Not sentenced</i></b> .....  | 0%  |
|             | <i>6 months or less</i> .....  | 41% |
|             | <i>More than 6 months</i> .....  | 59% |
| <b>Q1.6</b> | <b>How long have you been in this prison?</b>  |     |
|             | <i>Less than 1 month</i> .....   | 9%  |
|             | <i>1 to less than 3 months</i> .....   | 21% |
|             | <i>3 to less than 6 months</i> .....   | 17% |
|             | <i>6 to less than 12 months</i> .....  | 25% |
|             | <i>12 months to less than 2 years</i> .....  | 20% |
|             | <i>2 to less than 4 years</i> .....  | 5%  |
|             | <i>4 years or more</i> .....   | 3%  |

|              |   |        |   |
|--------------|---|--------|---|
| <b>Q1.7</b>  | <b>Are you a foreign national? (i.e. do not hold UK citizenship)</b>                              |        |   |
|              | Yes.....  |        | 7%  |
|              | No.....   |        | 93%   |
| <b>Q1.8</b>  | <b>Is English your first language?</b>  |        |   |
|              | Yes.....  |        | 93%   |
|              | No.....   |        | 7%  |
| <b>Q1.9</b>  | <b>What is your ethnic origin?</b>  |        |   |
|              | White - British.....  | 83%    | Asian or Asian British - Bangladeshi.....   |
|              |   |        | 0%  |
|              | White - Irish.....  | 0%     | Asian or Asian British - Other.....         |
|              |   |        | 0%  |
|              | White - Other.....  | 0%     | Mixed Race - White and Black Caribbean..... |
|              |   |        | 1%  |
|              | Black or Black British - Caribbean ...  | 2%     | Mixed Race - White and Black African.....   |
|              |   |        | 0%  |
|              | Black or Black British - African.....   | 2%     | Mixed Race - White and Asian.....           |
|              |   |        | 0%  |
|              | Black or Black British - Other.....   | 2%     | Mixed Race - Other.....                     |
|              |   |        | 0%  |
|              | Asian or Asian British - Indian.....  | 0%     | Chinese.....                                |
|              |   |        | 1%  |
|              | Asian or Asian British - Pakistani ....   | 9%     | Other ethnic group.....                     |
|              |   |        | 1%  |
| <b>Q1.10</b> | <b>What is your religion?</b>   |        |   |
|              | None.....   | 31%    | Hindu.....                                  |
|              |   |        | 0%  |
|              | Church of England.....  | 31%    | Jewish.....                                 |
|              |   |        | 0%  |
|              | Catholic.....   | 21%    | Muslim.....                                 |
|              |   |        | 10%   |
|              | Protestant.....   | 2%     | Sikh.....                                   |
|              |   |        | 0%  |
|              | Other Christian denomination.....   | 2%     | Other.....                                  |
|              |   |        | 0%  |
|              | Buddhist.....   | 2%     |   |
| <b>Q1.11</b> | <b>How would you describe your sexual orientation?</b>  |        |   |
|              | Heterosexual/ Straight.....   |        | 97%   |
|              | Homosexual/Gay.....   |        | 1%  |
|              | Bisexual.....   |        | 2%  |
|              | Other.....  |        | 0%  |
| <b>Q1.12</b> | <b>Do you consider yourself to have a disability?</b>   |        |   |
|              | Yes.....  |        | 10%   |
|              | No.....   |        | 90%   |
| <b>Q1.13</b> | <b>How many times have you been in prison before?</b>   |        |   |
|              | 0   | 1      | 2 to 5                                      |
|              | 21%   | 10%    | 34%   |
|              |   |        | More than 5                                 |
|              |   |        | 35%   |
| <b>Q1.14</b> | <b>Including this prison, how many prisons have you been in during this sentence/remand time?</b> |        |   |
|              | 1   | 2 to 5 | More than 5                                 |
|              | 7%  | 81%    | 12%   |

|              |  |     |
|--------------|--|-----|
| <b>Q1.15</b> | <b>Do you have any children under the age of 18?</b> |     |
|              | Yes.....   | 54% |
|              | No.....  | 46% |

## Section 2: Courts, transfers and escorts

**Q2.1 We want to know about the most recent journey you have made either to or from court or between prisons? How was ...**

|   | <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very Bad</i> | <i>Don't remember</i> | <i>N/A</i> |
|---|------------------|-------------|----------------|------------|-----------------|-----------------------|------------|
| The cleanliness of the van              | 8%               | 50%         | 14%            | 20%        | 5%              | 2%                    | 2%         |
| Your personal safety during the journey | 11%              | 60%         | 20%            | 4%         | 3%              | 0%                    | 2%         |
| The comfort of the van                  | 4%               | 16%         | 11%            | 29%        | 38%             | 0%                    | 1%         |
| The attention paid to your health needs | 6%               | 34%         | 30%            | 16%        | 10%             | 0%                    | 3%         |
| The frequency of toilet breaks          | 2%               | 12%         | 13%            | 21%        | 36%             | 2%                    | 14%        |

**Q2.2 How long did you spend in the van?**

| <i>Less than 1 hour</i> | <i>Over 1 hour to 2 hours</i> | <i>Over 2 hours to 4 hours</i> | <i>More than 4 hours</i> | <i>Don't remember</i> |
|-------------------------|-------------------------------|--------------------------------|--------------------------|-----------------------|
| 18%                     | 45%                           | 30%                            | 6%                       | 1%                    |

**Q2.3 How did you feel you were treated by the escort staff?**

| <i>Very well</i> | <i>Well</i> | <i>Neither</i> | <i>Badly</i> | <i>Very badly</i> | <i>Don't remember</i> |
|------------------|-------------|----------------|--------------|-------------------|-----------------------|
| 16%              | 60%         | 18%            | 3%           | 2%                | 1%                    |

**Q2.4 Please answer the following questions about when you first arrived here:**

|   | <i>Yes</i> | <i>No</i> | <i>Don't remember</i> |
|---|------------|-----------|-----------------------|
| Did you know where you were going when you left court or when transferred from another prison?  | 92%        | 8%        | 0%                    |
| Before you arrived here did you receive any written information about what would happen to you? | 30%        | 67%       | 3%                    |
| When you first arrived here did your property arrive at the same time as you?                   | 92%        | 7%        | 2%                    |

## Section 3: Reception, first night and induction

**Q3.1 In the first 24 hours, did staff ask you if you needed help or support with the following? (Please tick all that apply to you)**

|  |     |  |     |
|--|-----|--|-----|
| <i>Didn't ask about any of these</i> ..... | 17% | <i>Money worries</i> .....                           | 23% |
| <i>Loss of property</i> .....              | 19% | <i>Feeling depressed or suicidal</i> .....           | 61% |
| <i>Housing problems</i> .....              | 31% | <i>Health problems</i> .....                         | 66% |
| <i>Contacting employers</i> .....          | 15% | <i>Needing protection from other prisoners</i> ..... | 20% |

|   |     |                               |     |
|---|-----|-------------------------------|-----|
| Contacting family.....                            | 53% | Accessing phone numbers ..... | 44% |
| Ensuring dependents were being looked after ..... | 17% | Other.....                    | 1%  |

**Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply)**

|  |     |  |     |
|--|-----|--|-----|
| <b>Didn't have any problems</b> .....      | 44% | Money worries.....                           | 11% |
| Loss of property .....                     | 15% | Feeling depressed or suicidal.....           | 9%  |
| Housing problems.....                      | 20% | Health problems.....                         | 22% |
| Contacting employers.....                  | 4%  | Needing protection from other prisoners..... | 3%  |
| Contacting family.....                     | 18% | Accessing phone numbers .....                | 14% |
| Ensuring dependents were looked after..... | 1%  | Other.....                                   | 0%  |

**Q3.3 Please answer the following questions about reception:**

|   | Yes | No  | Don't remember |
|---|-----|-----|----------------|
| Were you seen by a member of health services?                     | 92% | 2%  | 6%             |
| When you were searched, was this carried out in a respectful way? | 85% | 10% | 5%             |

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

| Very well | Well | Neither | Badly | Very badly | Don't remember |
|-----------|------|---------|-------|------------|----------------|
| 21%       | 59%  | 15%     | 2%    | 0%         | 2%             |

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

|  |     |
|--|-----|
| Information about what was going to happen to you .....                                    | 76% |
| Information about what support was available for people feeling depressed or suicidal..... | 73% |
| Information about how to make routine requests .....                                       | 67% |
| Information about your entitlement to visits.....  | 73% |
| Information about health services .....  | 81% |
| Information about the chaplaincy .....   | 73% |
| <b>Not offered anything</b> .....  | 10% |

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

|  |     |
|--|-----|
| A smokers/non-smokers pack.....                    | 94% |
| The opportunity to have a shower.....              | 41% |
| The opportunity to make a free telephone call..... | 46% |
| Something to eat.....                              | 78% |
| <b>Did not receive anything</b> .....              | 1%  |

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

|                                    |     |
|------------------------------------|-----|
| Chaplain or religious leader ..... | 43% |
| Someone from health services.....  | 91% |

|              |   |     |
|--------------|---|-----|
|              | <i>A listener/Samaritans</i> .....  | 42% |
|              | <b>Did not meet any of these people</b> .....   | 9%  |
| <b>Q3.8</b>  | <b>Did you have access to the prison shop/canteen within the first 24 hours of your arrival at this prison?</b> |     |
|              | Yes.....  | 6%  |
|              | No.....   | 94% |
| <b>Q3.9</b>  | <b>Did you feel safe on your first night here?</b>  |     |
|              | Yes.....  | 90% |
|              | No.....   | 6%  |
|              | Don't remember.....   | 4%  |
| <b>Q3.10</b> | <b>How soon after your arrival did you go on an induction course?</b>   |     |
|              | <b>Have not been on an induction course</b> .....   | 9%  |
|              | <i>Within the first week</i> .....  | 75% |
|              | <i>More than a week</i> .....   | 15% |
|              | <i>Don't remember</i> .....   | 1%  |
| <b>Q3.11</b> | <b>Did the induction course cover everything you needed to know about the prison?</b>                           |     |
|              | <b>Have not been on an induction course</b> .....   | 9%  |
|              | Yes.....  | 62% |
|              | No.....   | 25% |
|              | Don't remember.....   | 5%  |

#### Section 4: Legal rights and respectful custody

|             |  |                  |             |                |                   |                       |            |
|-------------|--|------------------|-------------|----------------|-------------------|-----------------------|------------|
| <b>Q4.1</b> | <b>How easy is to?</b>   |                  |             |                |                   |                       |            |
|             |  | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i>  | <i>Very difficult</i> | <i>N/A</i> |
|             | Communicate with your solicitor or legal representative?   | 11%              | 35%         | 15%            | 20%               | 5%                    | 15%        |
|             | Attend legal visits?   | 8%               | 53%         | 14%            | 2%                | 2%                    | 21%        |
|             | Obtain bail information?   | 3%               | 17%         | 23%            | 7%                | 6%                    | 44%        |
| <b>Q4.2</b> | <b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b> |                  |             |                |                   |                       |            |
|             | <b>Not had any letters</b> .....   |                  |             |                |                   |                       | 23%        |
|             | Yes.....   |                  |             |                |                   |                       | 31%        |
|             | No.....  |                  |             |                |                   |                       | 47%        |
| <b>Q4.3</b> | <b>Please answer the following questions about the wing/unit you are currently living on:</b>                            |                  |             |                |                   |                       |            |
|             |  |                  | <i>Yes</i>  | <i>No</i>      | <i>Don't know</i> | <i>N/A</i>            |            |
|             | Are you normally offered enough clean, suitable clothes for the week?  | 73%              | 24%         | 1%             | 2%                |                       |            |
|             | Are you normally able to have a shower every day?  | 95%              | 5%          | 0%             | 0%                |                       |            |

|  |     |     |     |    |
|--|-----|-----|-----|----|
| Do you normally receive clean sheets every week?   | 85% | 11% | 1%  | 4% |
| Do you normally get cell cleaning materials every week?                                      | 84% | 14% | 2%  | 1% |
| Is your cell call bell normally answered within five minutes?                                | 43% | 38% | 15% | 4% |
| Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 79% | 20% | 1%  | 0% |
| Can you normally get your stored property, if you need to?                                   | 31% | 34% | 25% | 9% |

**Q4.4 What is the food like here?**

|                  |             |                |            |                 |
|------------------|-------------|----------------|------------|-----------------|
| <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very bad</i> |
| 3%               | 36%         | 28%            | 21%        | 12%             |

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

|   |     |
|---|-----|
| <i>Have not bought anything yet</i> ..... | 3%  |
| Yes.....                                  | 25% |
| No.....                                   | 72% |

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

|                     |                  |             |                |                  |                       |                   |
|---------------------|------------------|-------------|----------------|------------------|-----------------------|-------------------|
|                     | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> | <i>Don't know</i> |
| A complaint form    | 60%              | 30%         | 3%             | 3%               | 0%                    | 4%                |
| An application form | 61%              | 34%         | 2%             | 2%               | 0%                    | 2%                |

**Q4.7 Have you made an application?**

|          |     |
|----------|-----|
| Yes..... | 93% |
| No.....  | 7%  |

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

|  |                     |     |     |
|--|---------------------|-----|-----|
|  | <b>Not made one</b> | Yes | No  |
| Do you feel <i>applications</i> are dealt with fairly?                       | 7%                  | 69% | 24% |
| Do you feel <i>applications</i> are dealt with promptly? (within seven days) | 7%                  | 64% | 29% |

**Q4.9 Have you made a complaint?**

|          |     |
|----------|-----|
| Yes..... | 45% |
| No.....  | 55% |

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

|  |                     |     |     |
|--|---------------------|-----|-----|
|  | <b>Not made one</b> | Yes | No  |
| Do you feel <i>complaints</i> are dealt with fairly?                       | 56%                 | 14% | 30% |
| Do you feel <i>complaints</i> are dealt with promptly? (within seven days) | 56%                 | 19% | 26% |
| Were you given information about how to make an appeal?                    | 34%                 | 31% | 35% |

**Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?**  
*Not made a complaint*..... 56%  
 Yes..... 7%  
 No..... 37%

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

|  |                                |                  |             |                |                  |                       |
|--|--------------------------------|------------------|-------------|----------------|------------------|-----------------------|
|  | <i>Don't know who they are</i> | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> |
|  | 30%                            | 9%               | 24%         | 22%            | 13%              | 2%                    |

**Q4.13 Please answer the following questions about your religious beliefs?**

|  |     |     |                        |
|--|-----|-----|------------------------|
|  | Yes | No  | <i>Don't know/ N/A</i> |
| Do you feel your religious beliefs are respected?                                    | 59% | 10% | 31%                    |
| Are you able to speak to a religious leader of your faith in private if you want to? | 64% | 4%  | 32%                    |

**Q4.14 Can you speak to a listener at any time, if you want to?**

|     |    |                   |
|-----|----|-------------------|
| Yes | No | <i>Don't know</i> |
| 56% | 4% | 40%               |

**Q4.15 Please answer the following questions about staff in this prison?**

|  |     |     |
|--|-----|-----|
|  | Yes | No  |
| Is there a member of staff you can turn to for help if you have a problem? | 82% | 18% |
| Do <b>most</b> staff treat you with respect?                               | 86% | 14% |

## Section 5: Safety

**Q5.1 Have you ever felt unsafe in this prison?**  
 Yes..... 18%  
 No..... 82%

**Q5.2 Do you feel unsafe in this prison at the moment?**  
 Yes..... 6%  
 No..... 94%

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

|                                     |   |
|-------------------------------------|---|
| <i>Never felt unsafe</i> ..... 84%  | <i>At meal times</i> ..... 0%           |
| <i>Everywhere</i> ..... 3%          | <i>At health services</i> ..... 2%      |
| <i>Segregation unit</i> ..... 2%    | <i>Visit's area</i> ..... 0%            |
| <i>Association areas</i> ..... 5%   | <i>In wing showers</i> ..... 2%         |
| <i>Reception area</i> ..... 0%      | <i>In gym showers</i> ..... 3%          |
| <i>At the gym</i> ..... 3%          | <i>In corridors/stairwells</i> ..... 3% |
| <i>In an exercise yard</i> ..... 2% | <i>On your landing/wing</i> ..... 4%    |
| <i>At work</i> ..... 3%             | <i>In your cell</i> ..... 3%            |

*During Movement*..... 7%    *At religious services*..... 0%  
*At education*..... 1%

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

Yes..... 13%  
 No..... 87%    **If No, go to question 5.6**

**Q5.5 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply)**

|  |    |   |    |
|--|----|---|----|
| <i>Insulting remarks (about you or your family or friends)</i> ..... | 7% | <i>Because you were new here</i> .....                              | 3% |
| <i>Physical abuse (being hit, kicked or assaulted)</i> .....         | 5% | <i>Because of your sexuality</i> .....                              | 0% |
| <i>Sexual abuse</i> .....  | 0% | <i>Because you have a disability</i> .....                          | 0% |
| <i>Because of your race or ethnic origin</i> .....                   | 2% | <i>Because of your religion/religious beliefs</i> .....             | 1% |
| <i>Because of drugs</i> .....  | 1% | <i>Being from a different part of the country than others</i> ..... | 6% |
| <i>Having your canteen/property taken</i> .....                      | 2% | <i>Because of your offence/ crime</i> .....                         | 0% |

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

Yes..... 15%  
 No..... 85%    **If No, go to question 5.8**

**Q5.7 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply)**

|  |    |   |    |
|--|----|---|----|
| <i>Insulting remarks (about you or your family or friends)</i> ..... | 6% | <i>Because of your sexuality</i> .....                              | 0% |
| <i>Physical abuse (being hit, kicked or assaulted)</i> .....         | 6% | <i>Because you have a disability</i> .....                          | 2% |
| <i>Sexual abuse</i> .....  | 2% | <i>Because of your religion/religious beliefs</i> .....             | 0% |
| <i>Because of your race or ethnic origin</i> .....                   | 2% | <i>Being from a different part of the country than others</i> ..... | 2% |
| <i>Because of drugs</i> .....  | 1% | <i>Because of your offence/ crime</i> .....                         | 1% |
| <i>Because you were new here</i> .....                               | 1% |   |    |

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

**Not been victimised** ..... 77%  
 Yes..... 7%  
 No..... 15%

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

Yes..... 13%  
 No..... 87%

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

Yes..... 10%  
 No..... 90%

**Q5.11 Is it easy or difficult to get illegal drugs in this prison?**

*Very easy*    *Easy*    *Neither*    *Difficult*    *Very difficult*    *Don't know*  
 23%    20%    8%    3%    1%    45%

**Section 6: Health services**

**Q6.1 How easy or difficult is it to see the following people:**

|              | <i>Don't know</i> | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> |
|--------------|-------------------|------------------|-------------|----------------|------------------|-----------------------|
| The doctor   | 10%               | 7%               | 35%         | 16%            | 23%              | 9%                    |
| The nurse    | 9%                | 21%              | 51%         | 8%             | 7%               | 4%                    |
| The dentist  | 13%               | 3%               | 16%         | 11%            | 36%              | 20%                   |
| The optician | 33%               | 3%               | 18%         | 15%            | 20%              | 12%                   |

**Q6.2 Are you able to see a pharmacist?**

Yes..... 70%  
 No..... 30%

**Q6.3 What do you think of the quality of the health service from the following people:**

|              | <i>Not been</i> | <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very bad</i> |
|--------------|-----------------|------------------|-------------|----------------|------------|-----------------|
| The doctor   | 22%             | 11%              | 34%         | 14%            | 10%        | 10%             |
| The nurse    | 14%             | 23%              | 45%         | 9%             | 2%         | 7%              |
| The dentist  | 37%             | 25%              | 22%         | 10%            | 1%         | 6%              |
| The optician | 57%             | 10%              | 13%         | 13%            | 3%         | 3%              |

**Q6.4 What do you think of the overall quality of the health services here?**

*Not been*    *Very good*    *Good*    *Neither*    *Bad*    *Very bad*  
 10%    14%    38%    17%    14%    8%

**Q6.5 Are you currently taking medication?**

Yes..... 33%  
 No..... 67%

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

*Not taking medication*..... 67%  
 Yes..... 30%  
 No..... 3%

**Q6.7 Do you feel you have any emotional well being/ mental health issues?**

Yes..... 22%  
 No..... 78%

|              |   |     |     |            |
|--------------|---|-----|-----|------------|
| <b>Q6.8</b>  | <b>Are your emotional well-being/ mental health issues being addressed by any of the following? (Please tick all that apply)</b>                  |     |     |            |
|              | <i>Do not have any issues / Not receiving any help</i> .....  |     |     | 88%        |
|              | <i>Doctor</i> .....   |     |     | 9%         |
|              | <i>Nurse</i> .....  |     |     | 5%         |
|              | <i>Psychiatrist</i> .....   |     |     | 3%         |
|              | <i>Mental Health In Reach team</i> .....  |     |     | 6%         |
|              | <i>Counsellor</i> .....   |     |     | 2%         |
|              | <i>Other</i> .....  |     |     | 1%         |
| <b>Q6.9</b>  | <b>Did you have a problem with either of the following when you came into this prison?</b>  |     |     |            |
|              |   | Yes | No  |            |
|              | Drugs   | 30% | 70% |            |
|              | Alcohol   | 22% | 78% |            |
| <b>Q6.10</b> | <b>Have you developed a problem with either of the following since you have been in this prison?</b>  |     |     |            |
|              |   | Yes | No  |            |
|              | Drugs   | 14% | 86% |            |
|              | Alcohol   | 2%  | 98% |            |
| <b>Q6.11</b> | <b>Do you know who to contact in this prison to get help with your drug or alcohol problem?</b>   |     |     |            |
|              | Yes.....  |     |     | 38%        |
|              | No.....   |     |     | 6%         |
|              | <i>Did not / do not have a drug or alcohol problem</i> .....  |     |     | 56%        |
| <b>Q6.12</b> | <b>Have you received any intervention or help (including, CARATs, Health Services etc.) for your drug/alcohol problem, whilst in this prison?</b> |     |     |            |
|              | Yes.....  |     |     | 35%        |
|              | No.....   |     |     | 9%         |
|              | <i>Did not / do not have a drug or alcohol problem</i> .....  |     |     | 56%        |
| <b>Q6.13</b> | <b>Was the intervention or help you received, whilst in this prison, helpful?</b>   |     |     |            |
|              | Yes.....  |     |     | 32%        |
|              | No.....   |     |     | 9%         |
|              | <i>Did not have a problem/Have not received help</i> .....  |     |     | 59%        |
| <b>Q6.14</b> | <b>Do you think you will have a problem with either of the following when you leave this prison?</b>  |     |     |            |
|              |   | Yes | No  | Don't know |
|              | Drugs   | 7%  | 74% | 19%        |
|              | Alcohol   | 3%  | 80% | 18%        |
| <b>Q6.15</b> | <b>Do you know who in this prison can help you contact external drug or alcohol agencies on release?</b>  |     |     |            |
|              | Yes.....  |     |     | 28%        |
|              | No.....   |     |     | 7%         |
|              | N/A.....  |     |     | 65%        |

## Section 7: Purposeful Activity

**Q7.1 Are you currently involved in any of the following activities? (Please tick all that apply)**

|   |     |
|---|-----|
| Prison job .....                          | 53% |
| Vocational or skills training .....       | 18% |
| Education (including basic skills).....   | 15% |
| Offending behaviour programmes .....      | 16% |
| <b>Not involved in any of these</b> ..... | 19% |

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

|                                    | <b>Not been involved</b> | Yes | No  | Don't know |
|------------------------------------|--------------------------|-----|-----|------------|
| Prison job                         | 31%                      | 30% | 28% | 11%        |
| Vocational or skills training      | 42%                      | 36% | 13% | 9%         |
| Education (including basic skills) | 40%                      | 40% | 11% | 10%        |
| Offending behaviour programmes     | 47%                      | 33% | 11% | 10%        |

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

|                               |     |
|-------------------------------|-----|
| <b>Don't want to go</b> ..... | 15% |
| Never.....                    | 15% |
| Less than once a week.....    | 18% |
| About once a week.....        | 48% |
| More than once a week.....    | 2%  |
| Don't know.....               | 2%  |

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

| <i>Don't want to go</i> | 0   | 1  | 2   | 3 to 5 | More than 5 | Don't know |
|-------------------------|-----|----|-----|--------|-------------|------------|
| 22%                     | 14% | 2% | 13% | 44%    | 5%          | 2%         |

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

| <i>Don't want to go</i> | 0  | 1 to 2 | 3 to 5 | More than 5 | Don't know |
|-------------------------|----|--------|--------|-------------|------------|
| 5%                      | 6% | 25%    | 34%    | 27%         | 3%         |

**Q7.6 On average how many hours do you spend out of your cell on a weekday? (Please include hours at education, at work etc)**

|                              |     |
|------------------------------|-----|
| Less than 2 hours .....      | 15% |
| 2 to less than 4 hours.....  | 2%  |
| 4 to less than 6 hours.....  | 20% |
| 6 to less than 8 hours.....  | 33% |
| 8 to less than 10 hours..... | 19% |
| 10 hours or more.....        | 5%  |
| Don't know.....              | 6%  |

**Q7.7 On average, how many times do you have association each week?**

| <i>Don't want to go</i> | 0  | 1 to 2 | 3 to 5 | More than 5 | Don't know |
|-------------------------|----|--------|--------|-------------|------------|
| 2%                      | 2% | 1%     | 2%     | 90%         | 4%         |

|             |  |     |
|-------------|--|-----|
| <b>Q7.8</b> | <b>How often do staff normally speak to you during association time?</b> |     |
|             | <i>Do not go on association</i> .....                                    | 4%  |
|             | <i>Never</i> .....   | 15% |
|             | <i>Rarely</i> .....  | 22% |
|             | <i>Some of the time</i> .....  | 37% |
|             | <i>Most of the time</i> .....  | 14% |
|             | <i>All of the time</i> .....   | 7%  |

## Section 8: Resettlement

|             |   |     |
|-------------|---|-----|
| <b>Q8.1</b> | <b>When did you first meet your personal officer?</b>   |     |
|             | <i>Still have not met him/her</i> .....   | 19% |
|             | <i>In the first week</i> .....  | 41% |
|             | <i>More than a week</i> .....   | 32% |
|             | <i>Don't remember</i> .....   | 8%  |
| <b>Q8.2</b> | <b>How helpful do you think your personal officer is?</b>   |     |
|             | <i>Do not have a personal officer</i>   |     |
|             | <i>Very helpful</i>   |     |
|             | <i>Helpful</i>  |     |
|             | <i>Neither</i>  |     |
|             | <i>Not very helpful</i>   |     |
|             | <i>Not at all helpful</i>   |     |
|             | 19%   | 17% |
|             | 35%   | 15% |
|             | 10%   | 5%  |
| <b>Q8.3</b> | <b>Do you have a sentence plan/OASys?</b>   |     |
|             | <i>Not sentenced</i> .....  | 0%  |
|             | <i>Yes</i> .....  | 81% |
|             | <i>No</i> .....   | 19% |
| <b>Q8.4</b> | <b>How involved were you in the development of your sentence plan?</b>  |     |
|             | <i>Do not have a sentence plan/OASys</i> .....  | 19% |
|             | <i>Very involved</i> .....  | 17% |
|             | <i>Involved</i> .....   | 32% |
|             | <i>Neither</i> .....  | 5%  |
|             | <i>Not very involved</i> .....  | 11% |
|             | <i>Not at all involved</i> .....  | 17% |
| <b>Q8.5</b> | <b>Can you achieve all or some of your sentence plan targets in this prison?</b>                                      |     |
|             | <i>Do not have a sentence plan/OASys</i> .....  | 19% |
|             | <i>Yes</i> .....  | 63% |
|             | <i>No</i> .....   | 19% |
| <b>Q8.6</b> | <b>Are there plans for you to achieve all/some of your sentence plan targets in another prison?</b>                   |     |
|             | <i>Do not have a sentence plan/OASys</i> .....  | 19% |
|             | <i>Yes</i> .....  | 24% |
|             | <i>No</i> .....   | 56% |
| <b>Q8.7</b> | <b>Do you feel that any member of staff has helped you to address your offending behaviour whilst at this prison?</b> |     |
|             | <i>Not sentenced</i> .....  | 0%  |

|              |  |          |   |                  |
|--------------|--|----------|---|------------------|
|              | Yes.....   | 33%      |   |                  |
|              | No.....  | 67%      |   |                  |
| <b>Q8.8</b>  | <b>Do you feel that any member of staff has helped you to prepare for your release?</b>  |          |   |                  |
|              | Yes.....   | 20%      |   |                  |
|              | No.....  | 80%      |   |                  |
| <b>Q8.9</b>  | <b>Have you had any problems with sending or receiving mail?</b>   |          |   |                  |
|              | Yes.....   | 40%      |   |                  |
|              | No.....  | 55%      |   |                  |
|              | Don't know.....  | 5%       |   |                  |
| <b>Q8.10</b> | <b>Have you had any problems getting access to the telephones?</b>   |          |   |                  |
|              | Yes.....   | 10%      |   |                  |
|              | No.....  | 87%      |   |                  |
|              | Don't know.....  | 2%       |   |                  |
| <b>Q8.11</b> | <b>Did you have a visit in the first week that you were here?</b>  |          |   |                  |
|              | <b>Not been here a week yet</b> .....  | 7%       |   |                  |
|              | Yes.....   | 30%      |   |                  |
|              | No.....  | 59%      |   |                  |
|              | Don't remember.....  | 4%       |   |                  |
| <b>Q8.12</b> | <b>Does this prison give you the opportunity to have the visits you are entitled to?<br/>(e.g. number and length of visit)</b> |          |   |                  |
|              | <b>Don't know what my entitlement is</b> .....   | 14%      |   |                  |
|              | Yes.....   | 76%      |   |                  |
|              | No.....  | 10%      |   |                  |
| <b>Q8.13</b> | <b>How many visits did you receive in the last week?</b>   |          |   |                  |
|              | <b>Not been in a week</b>  | <b>0</b> | <b>1 to 2</b>   | <b>3 to 4</b>    |
|              | 7%   | 55%      | 36%   | 1%               |
|              |  |          |   | <b>5 or more</b> |
|              |  |          |   | 1%               |
| <b>Q8.14</b> | <b>Have you been helped to maintain contact with your family/friends whilst in this prison?</b>                                |          |   |                  |
|              | Yes.....   | 42%      |   |                  |
|              | No.....  | 58%      |   |                  |
| <b>Q8.15</b> | <b>Do you know who to contact to get help with the following within this prison:<br/>(please tick all that apply)</b>          |          |   |                  |
|              | <b>Don't know who to contact</b> .....   | 43%      | <b>Help with your finances in preparation for release</b> .....           | 16%              |
|              | <b>Maintaining good relationships</b> .....  | 14%      | <b>Claiming benefits on release</b> .....                                 | 42%              |
|              | <b>Avoiding bad relationships</b> .....  | 12%      | <b>Arranging a place at college/continuing education on release</b> ..... | 19%              |

|  |     |  |     |
|--|-----|--|-----|
| <i>Finding a job on release .....</i>        | 34% | <i>Continuity of health services on release.....</i> | 19% |
| <i>Finding accommodation on release.....</i> | 34% | <i>Opening a bank account.....</i>                   | 15% |

**Q8.16 Do you think you will have a problem with any of the following on release from prison? (please tick all that apply)**

|  |     |  |     |
|--|-----|--|-----|
| <b>No problems .....</b>                     | 36% | <i>Help with your finances in preparation for release.....</i>           | 24% |
| <i>Maintaining good relationships.....</i>   | 13% | <i>Claiming benefits on release .....</i>                                | 20% |
| <i>Avoiding bad relationships.....</i>       | 16% | <i>Arranging a place at college/continuing education on release.....</i> | 18% |
| <i>Finding a job on release .....</i>        | 46% | <i>Continuity of health services on release.....</i>                     | 18% |
| <i>Finding accommodation on release.....</i> | 37% | <i>Opening a bank account.....</i>                                       | 31% |

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

|                            |     |
|----------------------------|-----|
| <b>Not sentenced .....</b> | 0%  |
| <b>Yes.....</b>            | 51% |
| <b>No.....</b>             | 49% |

**Thank you for completing this survey**



## Prisoner Survey Responses HMP Everthorpe 2008

**Prisoner Survey Responses** (Missing data has been excluded for each question) Please note: Where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

### Key to tables

|   |   | HMP Everthorpe | Cat C Trainer prisons comparator |
|---|---|----------------|----------------------------------|
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| <b>Number of completed questionnaires returned</b>                                    |   | <b>127</b>     | <b>3665</b>                      |
| <b>SECTION 1: General Information</b>   |   |                |                                  |
| 2   | Are you under 21 years of age?  | 1%             | 1%                               |
| 3a  | Are you sentenced?  | 100%           | 100%                             |
| 3b  | Are you on recall?  | 8%             | 8%                               |
| 4a  | Is your sentence less than 12 months?   | 7%             | 6%                               |
| 4b  | Are you here under an indeterminate sentence for public protection (IPP prisoner)?  | 6%             | 2%                               |
| 5   | Do you have six months or less to serve?  | 40%            | 36%                              |
| 6   | Have you been in this prison less than a month?   | 9%             | 7%                               |
| 7   | Are you a foreign national?   | 7%             | 13%                              |
| 8   | Is English your first language?   | 94%            | 89%                              |
| 9   | Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White other categories) | 18%            | 27%                              |
| 10  | Are you Muslim?   | 10%            | 11%                              |
| 11  | Are you homosexual/gay or bisexual?   | 3%             | 4%                               |
| 12  | Do you consider yourself to have a disability?  | 10%            | 15%                              |
| 13  | Is this your first time in prison?  | 21%            | 35%                              |
| 14  | Have you been in more than 5 prisons this time?   | 12%            | 13%                              |
| 15  | Do you have any children under the age of 18?   | 54%            | 54%                              |
| <b>SECTION 2: Transfers and Escorts</b>   |   |                |                                  |
| For the most recent journey you have made either to or from court or between prisons: |   |                |                                  |
| 1a  | Was the cleanliness of the van good/very good?  | 58%            | 51%                              |
| 1b  | Was your personal safety during the journey good/very good?   | 71%            | 61%                              |
| 1c  | Was the comfort of the van good/very good?  | 20%            | 19%                              |
| 1d  | Was the attention paid to your health needs good/very good?   | 40%            | 32%                              |
| 1e  | Was the frequency of toilet breaks good/very good?  | 14%            | 14%                              |
| 2   | Did you spend more than four hours in the van?  | 6%             | 9%                               |
| 3   | Were you treated well/very well by the escort staff?  | 76%            | 67%                              |
| 4a  | Did you know where you were going when you left court or when transferred from another prison?                                    | 92%            | 82%                              |
| 4b  | Before you arrived here did you receive any written information about what would happen to you?                                   | 30%            | 16%                              |
| 4c  | When you first arrived here did your property arrive at the same time as you?   | 92%            | 87%                              |

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| <b>SECTION 3: Reception, first night and induction</b> |   |                |                                  |
| <b>1</b>   | In the first 24 hours, did staff ask you if you needed help/support with the following:           |                |                                  |
| <b>1b</b>  | Problems with loss of property?   | 19%            | 13%                              |
| <b>1c</b>  | Housing problems?   | 31%            | 20%                              |
| <b>1d</b>  | Problems contacting employers?  | 15%            | 10%                              |
| <b>1e</b>  | Problems contacting family?   | 53%            | 48%                              |
| <b>1f</b>  | Problems ensuring dependants were looked after?   | 17%            | 13%                              |
| <b>1g</b>  | Money problems?   | 23%            | 16%                              |
| <b>1h</b>  | Problems of feeling depressed/suicidal?   | 61%            | 51%                              |
| <b>1i</b>  | Health problems?  | 66%            | 61%                              |
| <b>1j</b>  | Problems in needing protection from other prisoners?  | 20%            | 20%                              |
| <b>1k</b>  | Problems accessing phone numbers?   | 44%            | 39%                              |
| <b>2</b>   | When you first arrived:   |                |                                  |
| <b>2a</b>  | Did you have any problems?  | 56%            | 58%                              |
| <b>2b</b>  | Did you have any problems with loss of property?  | 15%            | 13%                              |
| <b>2c</b>  | Did you have any housing problems?  | 20%            | 15%                              |
| <b>2d</b>  | Did you have any problems contacting employers?   | 4%             | 4%                               |
| <b>2e</b>  | Did you have any problems contacting family?  | 18%            | 20%                              |
| <b>2f</b>  | Did you have any problems ensuring dependents were being looked after?                            | 1%             | 6%                               |
| <b>2g</b>  | Did you have any money worries?   | 11%            | 17%                              |
| <b>2h</b>  | Did you have any problems with feeling depressed or suicidal?                                     | 9%             | 14%                              |
| <b>2i</b>  | Did you have any health problems?   | 22%            | 18%                              |
| <b>2j</b>  | Did you have any problems with needing protection from other prisoners?                           | 3%             | 5%                               |
| <b>2k</b>  | Did you have problems accessing phone numbers?  | 14%            | 21%                              |
| <b>3a</b>  | Were you seen by a member of health services in reception?  | 92%            | 89%                              |
| <b>3b</b>  | When you were searched in reception, was this carried out in a respectful way?                    | 85%            | 74%                              |
| <b>4</b>   | Were you treated well/very well in reception?   | 80%            | 72%                              |
| <b>5</b>   | On your day of arrival, were offered any of the following information:                            |                |                                  |
| <b>5a</b>  | Information about what was going to happen to you?  | 76%            | 50%                              |
| <b>5b</b>  | Information about what support was available for people feeling depressed or suicidal?            | 73%            | 43%                              |
| <b>5c</b>  | Information about how to make routine requests?   | 67%            | 38%                              |
| <b>5d</b>  | Information about your entitlement to visits?   | 73%            | 45%                              |
| <b>5e</b>  | Information about health services?  | 81%            | 57%                              |
| <b>5f</b>  | Information about the chaplaincy?   | 73%            | 48%                              |

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| <b>SECTION 3: Reception, first night and induction continued</b> |   |                |                                  |
| <b>6</b>   | On your day of arrival, were you offered any of the following:  |                |                                  |
| <b>6a</b>  | A smokers/non-smokers pack?   | 94%            | 80%                              |
| <b>6b</b>  | The opportunity to have a shower?   | 41%            | 42%                              |
| <b>6c</b>  | The opportunity to make a free telephone call?  | 46%            | 50%                              |
| <b>6d</b>  | Something to eat?   | 78%            | 78%                              |
| <b>7</b>   | Within the first 24 hours did you meet any of the following people:                                     |                |                                  |
| <b>7a</b>  | The chaplain or a religious leader?   | 43%            | 50%                              |
| <b>7b</b>  | Someone from health services?   | 91%            | 73%                              |
| <b>7c</b>  | A listener/Samaritans?  | 42%            | 32%                              |
| <b>8</b>   | Did you have access to the prison shop/canteen within the first 24 hours?                               | 6%             | 26%                              |
| <b>9</b>   | Did you feel safe on your first night here?   | 91%            | 83%                              |
| <b>10</b>  | Have you been on an induction course?   | 91%            | 93%                              |
| For those who have been on an induction course:                  |   |                |                                  |
| <b>11</b>  | Did the course cover everything you needed to know about the prison?                                    | 68%            | 63%                              |
| <b>SECTION 4: Legal Rights and Respectful Custody</b>            |   |                |                                  |
| <b>1</b>   | In terms of your legal rights, is it easy/very easy to:   |                |                                  |
| <b>1a</b>  | Communicate with your solicitor or legal representative?  | 46%            | 49%                              |
| <b>1b</b>  | Attend legal visits?  | 61%            | 55%                              |
| <b>1c</b>  | Obtain bail information?  | 20%            | 19%                              |
| <b>2</b>   | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 31%            | 41%                              |
| <b>3</b>   | For the wing/unit you are currently on:   |                |                                  |
| <b>3a</b>  | Are you normally offered enough clean, suitable clothes for the week?                                   | 73%            | 61%                              |
| <b>3b</b>  | Are you normally able to have a shower every day?   | 95%            | 92%                              |
| <b>3c</b>  | Do you normally receive clean sheets every week?  | 85%            | 83%                              |
| <b>3d</b>  | Do you normally get cell cleaning materials every week?   | 84%            | 75%                              |
| <b>3e</b>  | Is your cell call bell normally answered within five minutes?   | 43%            | 40%                              |
| <b>3f</b>  | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?            | 80%            | 70%                              |
| <b>3g</b>  | Can you normally get your stored property, if you need to?  | 31%            | 31%                              |
| <b>4</b>   | Is the food in this prison good/very good?  | 39%            | 31%                              |
| <b>5</b>   | Does the shop/canteen sell a wide enough range of goods to meet your needs?                             | 25%            | 48%                              |
| <b>6a</b>  | Is it easy/very easy to get a complaints form?  | 90%            | 86%                              |
| <b>6b</b>  | Is it easy/very easy to get an application form?  | 94%            | 90%                              |
| <b>7</b>   | Have you made an application?   | 93%            | 85%                              |

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| <b>SECTION 4: Legal Rights and Respectful Custody continued</b>                                   |  |                                  |     |
| For those who have made an application:   |  |                                  |     |
| <b>8a</b>   | Do you feel applications are dealt with fairly?  | 74%                              | 58% |
| <b>8b</b>   | Do you feel applications are dealt with promptly? (within 7 days)                                    | 69%                              | 52% |
| <b>9</b>  | Have you made a complaint?   | 45%                              | 57% |
| For those who have made a complaint:  |  |                                  |     |
| <b>10a</b>  | Do you feel complaints are dealt with fairly?  | 31%                              | 36% |
| <b>10b</b>  | Do you feel complaints are dealt with promptly? (within 7 days)                                      | 42%                              | 39% |
| <b>11</b>   | Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison? | 16%                              | 23% |
| <b>10c</b>  | Were you given information about how to make an appeal?  | 31%                              | 32% |
| <b>12</b>   | Is it easy/very easy to see the Independent Monitoring Board?  | 33%                              | 39% |
| <b>13a</b>  | Do you feel your religious beliefs are respected?  | 59%                              | 55% |
| <b>13b</b>  | Are you able to speak to a religious leader of your faith in private if you want to?                 | 64%                              | 59% |
| <b>14</b>   | Are you able to speak to a Listener at any time, if you want to?                                     | 56%                              | 64% |
| <b>15a</b>  | Is there a member of staff, in this prison, that you can turn to for help if you have a problem?     | 82%                              | 72% |
| <b>15b</b>  | Do most staff, in this prison, treat you with respect?   | 86%                              | 74% |
| <b>SECTION 5: Safety</b>  |  |                                  |     |
| <b>1</b>  | Have you ever felt unsafe in this prison?  | 18%                              | 29% |
| <b>2</b>  | Do you feel unsafe in this prison at the moment?   | 6%                               | 15% |
| <b>4</b>  | Have you been victimised by another prisoner?  | 13%                              | 20% |
| <b>5</b>  | Since you have been here, has another prisoner:  |                                  |     |
| <b>5a</b>   | Made insulting remarks made about you, your family or friends?                                       | 6%                               | 10% |
| <b>5b</b>   | Hit, kicked or assaulted you?  | 5%                               | 5%  |
| <b>5c</b>   | Sexually abused you?   | 0%                               | 1%  |
| <b>5d</b>   | Victimised you because of your race or ethnic origin?  | 2%                               | 4%  |
| <b>5e</b>   | Victimised you because of drugs?   | 1%                               | 3%  |
| <b>5f</b>   | Taken your canteen/property?   | 2%                               | 3%  |
| <b>5g</b>   | Victimised you because you were new here?  | 2%                               | 4%  |
| <b>5h</b>   | Victimised you because of your sexuality?  | 0%                               | 1%  |
| <b>5i</b>   | Victimised you because you have a disability?  | 0%                               | 2%  |
| <b>5j</b>   | Victimised you because of your religion/religious beliefs?   | 1%                               | 3%  |
| <b>5k</b>   | Victimised you because you were from a different part of the country?                                | 6%                               | 5%  |
| <b>5l</b>   | Victimised you because of your offence/crime?  | 0%                               | 4%  |

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| <b>SECTION 5: Safety continued</b>  |   |                |                                  |
| 6   | Have you been victimised by a member of staff?  | 15%            | 21%                              |
| 7   | Since you have been here, has a member of staff:  |                |                                  |
| 7a  | Made insulting remarks made about you, your family or friends?                                    | 7%             | 10%                              |
| 7b  | Hit, kicked or assaulted you?   | 1%             | 2%                               |
| 7c  | Sexually abused you?  | 2%             | 1%                               |
| 7d  | Victimised you because of your race or ethnic origin?   | 2%             | 4%                               |
| 7e  | Victimised you because of drugs?  | 1%             | 3%                               |
| 7f  | Victimised you because you were new here?   | 1%             | 5%                               |
| 7g  | Victimised you because of your sexuality?   | 0%             | 1%                               |
| 7h  | Victimised you because you have a disability?   | 2%             | 2%                               |
| 7i  | Victimised you because of your religion/religious beliefs?  | 0%             | 3%                               |
| 7j  | Victimised you because you were from a different part of the country?                             | 2%             | 4%                               |
| 7k  | Victimised you because of your offence/crime?   | 1%             | 5%                               |
| For those who have been victimised by staff or other prisoners:   |   |                |                                  |
| 8   | Did you report any victimisation that you have experienced?                                       | 32%            | 39%                              |
| 9   | Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?     | 14%            | 23%                              |
| 10  | Have you ever felt threatened or intimidated by a member of staff in here?                        | 11%            | 18%                              |
| 11  | Is it easy/very easy to get illegal drugs in this prison?   | 43%            | 32%                              |
| <b>SECTION 6: Healthcare</b>  |   |                |                                  |
| 1a  | Is it easy/very easy to see the doctor?   | 43%            | 33%                              |
| 1b  | Is it easy/very easy to see the nurse?  | 72%            | 60%                              |
| 1c  | Is it easy/very easy to see the dentist?  | 19%            | 11%                              |
| 1d  | Is it easy/very easy to see the optician?   | 21%            | 18%                              |
| 2   | Are you able to see a pharmacist?   | 70%            | 51%                              |
| For those who have been to the following services, do you think the quality of the health service from following is good/very good: |   |                |                                  |
| 3a  | The doctor?   | 57%            | 52%                              |
| 3b  | The nurse?  | 78%            | 67%                              |
| 3c  | The dentist?  | 74%            | 44%                              |
| 3d  | The optician?   | 55%            | 48%                              |
| 4   | The overall quality of health services?   | 58%            | 47%                              |

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| <b>Healthcare continued</b>  |   |                |                                     |
| <b>5</b>   | Are you currently taking medication?  | 33%            | 42%                                 |
| For those currently taking medication:   |   |                |                                     |
| <b>6</b>   | Are you allowed to keep possession of your medication in your own cell?                           | 91%            | 90%                                 |
| <b>7</b>   | Do you feel you have any emotional well being/mental health issues?                               | 22%            | 25%                                 |
| For those with emotional well being/mental health issues, are these being addressed by any of the following: |   |                |                                     |
| <b>8a</b>  | Not receiving any help?   | 42%            | 32%                                 |
| <b>8b</b>  | A doctor?   | 42%            | 26%                                 |
| <b>8c</b>  | A nurse?  | 23%            | 19%                                 |
| <b>8d</b>  | A psychiatrist?   | 15%            | 19%                                 |
| <b>8e</b>  | The Mental Health In-Reach Team?  | 27%            | 35%                                 |
| <b>8f</b>  | A counsellor?   | 8%             | 9%                                  |
| <b>9a</b>  | Did you have a drug problem when you came into this prison?                                       | 30%            | 14%                                 |
| <b>9b</b>  | Did you have an alcohol problem when you came into this prison?                                   | 22%            | 7%                                  |
| <b>10a</b>   | Have you developed a drug problem since you have been in this prison?                             | 14%            | 10%                                 |
| <b>10b</b>   | Have you developed an alcohol problem since you have been in this prison?                         | 2%             | 2%                                  |
| For those with drug or alcohol problems:   |   |                |                                     |
| <b>11</b>  | Do you know who to contact in this prison for help?   | 87%            | 84%                                 |
| <b>12</b>  | Have you received any help or intervention whilst in this prison?                                 | 80%            | 75%                                 |
| For those who have received help or intervention with their drug or alcohol problem:                         |   |                |                                     |
| <b>13</b>  | Was this intervention or help useful?   | 77%            | 68%                                 |
| <b>14a</b>   | Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)      | 26%            | 22%                                 |
| <b>14b</b>   | Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)    | 20%            | 16%                                 |
| For those who may have a drug or alcohol problem on release, do you know who in this prison:                 |   |                |                                     |
| <b>15</b>  | Can help you contact external drug or alcohol agencies on release?                                | 81%            | 53%                                 |
| <b>SECTION 7: Purposeful Activity</b>  |   |                |                                     |
| <b>1</b>   | Are you currently involved in any of the following activities:                                    |                |                                     |
| <b>1a</b>  | A prison job?   | 53%            | 67%                                 |
| <b>1b</b>  | Vocational or skills training?  | 18%            | 20%                                 |
| <b>1c</b>  | Education (including basic skills)?   | 15%            | 37%                                 |
| <b>1d</b>  | Offending Behaviour Programmes?   | 16%            | 18%                                 |

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| <b>Purposeful Activity continued</b>   |   |                   |  |
| 2ai  | Have you had a job whilst in prison?  | 69%               | 86%                                    |
| For those who have had a prison job whilst in prison:                                |   |                   |  |
| 2aii   | Do you feel the job will help you on release?   | 44%               | 44%                                    |
| 2bi  | Have you been involved in vocational or skills training whilst in prison?   | 58%               | 75%                                    |
| For those who have had vocational or skills training whilst in prison:               |   |                   |  |
| 2bii   | Do you feel the vocational or skills training will help you on release?   | 62%               | 56%                                    |
| 2ci  | Have you been involved in education whilst in prison?   | 60%               | 82%                                    |
| For those who have been involved in education whilst in prison:                      |   |                   |  |
| 2cii   | Do you feel the education will help you on release?   | 66%               | 62%                                    |
| 2di  | Have you been involved in offending behaviour programmes whilst in prison?  | 53%               | 72%                                    |
| For those who have been involved in offending behaviour programmes whilst in prison: |   |                   |  |
| 2dii   | Do you feel the offending behaviour programme(s) will help you on release?  | 62%               | 53%                                    |
| 3  | Do you go to the library at least once a week?  | 50%               | 47%                                    |
| 4  | On average, do you go to the gym at least twice a week?   | 62%               | 55%                                    |
| 5  | On average, do you go outside for exercise three or more times a week?  | 61%               | 51%                                    |
| 6  | On average, do you spend ten or more hours out of your cell on a weekday?   | 5%                | 18%                                    |
| 7  | On average, do you go on association more than five times each week?  | 91%               | 74%                                    |
| 8  | Do staff normally speak to you most of the time/all of the time during association?                                 | 21%               | 19%                                    |
| <b>SECTION 8: Resettlement</b>   |   |                   |  |
| 1  | Do you have a personal officer?   | 81%               | 71%                                    |
| For those with a personal officer:   |   |                   |  |
| 2  | Do you think your personal officer is helpful/very helpful?   | 63%               | 64%                                    |
| For those who are sentenced:   |   |                   |  |
| 3  | Do you have a sentence plan?  | 81%               | 60%                                    |
| For those with a sentence plan?  |   |                   |  |
| 4  | Were you involved/very involved in the development of your plan?  | 60%               | 63%                                    |
| 5  | Can you achieve some/all of you sentence plan targets in this prison?   | 77%               | 68%                                    |
| 6  | Are there plans for you to achieve some/all your targets in another prison?   | 30%               | 36%                                    |
| For those who are sentenced:   |   |                   |  |
| 7  | Do you feel that any member of staff has helped you address your offending behaviour whilst at this prison?         | 33%               | 30%                                    |
| 8  | Do you feel that any member of staff has helped you to prepare for release?   | 20%               | 16%                                    |
| 9  | Have you had any problems with sending or receiving mail?   | 40%               | 37%                                    |
| 10   | Have you had any problems getting access to the telephones?   | 11%               | 21%                                    |
| 11   | Did you have a visit in the first week that you were here?  | 30%               | 24%                                    |
| 12   | Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit) | 76%               | 69%                                    |

**Key to tables**

|                               |   | HMP Everthorpe | Cat C Trainer prisons comparator |
|-------------------------------|---|----------------|----------------------------------|
|                               | Any percent highlighted in green is significantly better  |                |                                  |
|                               | Any percent highlighted in blue is significantly worse  |                |                                  |
|                               | Any percent highlighted in orange shows a significant difference in prisoners' background details         |                |                                  |
|                               | Percentages which are not highlighted show there is no significant difference                             |                |                                  |
| <b>Resettlement continued</b> |   |                |                                  |
| <b>13</b>                     | Did you receive one or more visits in the last week?  | <b>38%</b>     | <b>30%</b>                       |
| <b>14</b>                     | Have you been helped to maintain contact with family/friends whilst in this prison?                       | <b>42%</b>     | <b>40%</b>                       |
| <b>15</b>                     | Do you know who to contact within this prison to get help with the following:                             |                |                                  |
| <b>15b</b>                    | Maintaining good relationships?   | <b>14%</b>     | <b>16%</b>                       |
| <b>15c</b>                    | Avoiding bad relationships?   | <b>12%</b>     | <b>11%</b>                       |
| <b>15d</b>                    | Finding a job on release?   | <b>34%</b>     | <b>49%</b>                       |
| <b>15e</b>                    | Finding accommodation on release?   | <b>34%</b>     | <b>50%</b>                       |
| <b>15f</b>                    | With money/finances on release?   | <b>16%</b>     | <b>37%</b>                       |
| <b>15g</b>                    | Claiming benefits on release?   | <b>43%</b>     | <b>48%</b>                       |
| <b>15h</b>                    | Arranging a place at college/continuing education on release?   | <b>19%</b>     | <b>37%</b>                       |
| <b>15i</b>                    | Accessing health services on release?   | <b>19%</b>     | <b>41%</b>                       |
| <b>15j</b>                    | Opening a bank account on release?  | <b>15%</b>     | <b>33%</b>                       |
| <b>16</b>                     | Do you think you will have a problem with any of the following on release from prison?                    |                |                                  |
| <b>16b</b>                    | Maintaining good relationships?   | <b>13%</b>     | <b>15%</b>                       |
| <b>16c</b>                    | Avoiding bad relationships?   | <b>16%</b>     | <b>14%</b>                       |
| <b>16d</b>                    | Finding a job?  | <b>46%</b>     | <b>45%</b>                       |
| <b>16e</b>                    | Finding accommodation?  | <b>37%</b>     | <b>42%</b>                       |
| <b>16f</b>                    | Money/finances?   | <b>24%</b>     | <b>45%</b>                       |
| <b>16g</b>                    | Claiming benefits?  | <b>20%</b>     | <b>32%</b>                       |
| <b>16h</b>                    | Arranging a place at college/continuing education?  | <b>18%</b>     | <b>28%</b>                       |
| <b>16i</b>                    | Accessing health services?  | <b>18%</b>     | <b>21%</b>                       |
| <b>16j</b>                    | Opening a bank account?   | <b>31%</b>     | <b>37%</b>                       |
| For those who are sentenced:  |   |                |                                  |
| <b>17</b>                     | Have you done anything, or has anything happened to you here to make you less likely to offend in future? | <b>51%</b>     | <b>58%</b>                       |



**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**

|  |  | BME prisoners | White prisoners | Muslim Prisoners | Non-Muslim Prisoners |
|--|--|---------------|-----------------|------------------|----------------------|
|  | Any percent highlighted in green is significantly better   |               |                 |                  |                      |
|  | Any percent highlighted in blue is significantly worse   |               |                 |                  |                      |
|  | Any percent 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>22</b>     | <b>104</b>      | <b>13</b>        | <b>114</b>           |
| 1.3  | Are you sentenced?   | 100%          | 100%            | 100%             | 100%                 |
| 1.7  | Are you a foreign national?  | 19%           | 4%              | 8%               | 7%                   |
| 1.8  | Is English your first language?  | 68%           | 100%            | 61%              | 97%                  |
| 1.9  | Are you from a minority ethnic group? Including all those who did not tick White British, White Irish or White other categories. |               |                 | 100%             | 8%                   |
| 1.10   | Are you Muslim?  | 59%           | 0%              |                  |                      |
| 1.13   | Is this your first time in prison?   | 34%           | 17%             | 46%              | 18%                  |
| 2.3  | Were you treated well/very well by the escort staff?   | 77%           | 77%             | 84%              | 75%                  |
| 2.4a   | Did you know where you were going when you left court or when transferred from another prison?                                   | 91%           | 92%             | 84%              | 93%                  |
| 3.2a   | Did you have any problems when you first arrived?  | 61%           | 56%             | 60%              | 56%                  |
| 3.3a   | Were you seen by a member of healthcare staff in reception?  | 91%           | 92%             | 93%              | 92%                  |
| 3.3b   | When you were searched in reception, was this carried out in a respectful way?   | 82%           | 85%             | 100%             | 83%                  |
| 3.4  | Were you treated well/very well in reception?  | 86%           | 79%             | 93%              | 79%                  |
| 3.9  | Did you feel safe on your first night here?  | 82%           | 93%             | 84%              | 91%                  |
| 3.10   | Have you been on an induction course?  | 100%          | 89%             | 100%             | 90%                  |
| 4.1a   | Is it easy/very easy to communicate with your solicitor or legal representative?   | 46%           | 46%             | 77%              | 42%                  |
| 4.3a   | Are you normally offered enough clean, suitable clothes for the week?  | 73%           | 73%             | 70%              | 74%                  |
| 4.3b   | Are you normally able to have a shower every day?  | 91%           | 96%             | 93%              | 96%                  |

## Key to tables

|       |   | BME prisoners | White prisoners | Muslim Prisoners | Non-Muslim Prisoners |
|-------|---|---------------|-----------------|------------------|----------------------|
|       | Any percent highlighted in green is significantly better  |               |                 |                  |                      |
|       | Any percent highlighted in blue is significantly worse  |               |                 |                  |                      |
|       | Any percent highlighted in orange shows a significant difference in prisoners' background details       |               |                 |                  |                      |
|       | Percentages which are not highlighted show there is no significant difference                           |               |                 |                  |                      |
| 4.3e  | Is your cell call bell normally answered within five minutes?   | 43%           | 44%             | 54%              | 42%                  |
| 4.4   | Is the food in this prison good/very good?  | 36%           | 40%             | 46%              | 38%                  |
| 4.5   | Does the shop/canteen sell a wide enough range of goods to meet your needs?                             | 18%           | 26%             | 23%              | 25%                  |
| 4.6a  | Is it easy/very easy to get a complaints form?  | 86%           | 90%             | 93%              | 90%                  |
| 4.6b  | Is it easy/very easy to get an application form?  | 90%           | 95%             | 100%             | 94%                  |
| 4.9   | Have you made a complaint?  | 27%           | 50%             | 16%              | 49%                  |
| 4.13a | Do you feel your religious beliefs are respected?   | 68%           | 57%             | 77%              | 57%                  |
| 4.13b | Are you able to speak to a religious leader of your faith in private if you want to?                    | 54%           | 67%             | 77%              | 63%                  |
| 4.15a | Is there a member of staff you can turn to for help if you have a problem in this prison?               | 77%           | 83%             | 77%              | 83%                  |
| 4.15b | Do <b>most</b> staff, in this prison, treat you with respect?   | 73%           | 89%             | 70%              | 88%                  |
| 5.1   | Have you ever felt unsafe in this prison?   | 23%           | 18%             | 0%               | 20%                  |
| 5.2   | Do you feel unsafe in this prison at the moment?  | 9%            | 5%              | 0%               | 6%                   |
| 5.4   | Have you been victimised by another prisoner?   | 18%           | 12%             | 7%               | 13%                  |
| 5.5d  | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 9%            | 0%              | 7%               | 1%                   |
| 5.5j  | Have you been victimised because of your religion/religious beliefs? (By prisoners)                     | 4%            | 0%              | 7%               | 0%                   |
| 5.6   | Have you been victimised by a member of staff?  | 14%           | 15%             | 7%               | 15%                  |
| 5.7d  | Have you been victimised because of your race or ethnic origin since you have been here? (By staff)     | 9%            | 1%              | 7%               | 2%                   |
| 5.7i  | Have you been victimised because of your religion/religious beliefs? (By staff)                         | 0%            | 0%              | 0%               | 0%                   |
| 5.9   | Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?           | 18%           | 13%             | 7%               | 14%                  |
| 5.10  | Have you ever felt threatened or intimidated by a member of staff in here?                              | 14%           | 10%             | 7%               | 11%                  |

## Key to tables

|      |   | BME prisoners | White prisoners | Muslim Prisoners     |
|------|---|---------------|-----------------|----------------------|
|      |   |               |                 | Non-Muslim Prisoners |
|      | Any percent highlighted in green is significantly better  |               |                 |                      |
|      | Any percent highlighted in blue is significantly worse  |               |                 |                      |
|      | Any percent highlighted in orange shows a significant difference in prisoners' background details                         |               |                 |                      |
|      | Percentages which are not highlighted show there is no significant difference   |               |                 |                      |
| 5.11 | Is it easy/very easy to get illegal drugs in this prison?   | 27%           | 47%             | 16%                  |
| 6.1a | Is it easy/very easy to see the doctor?   | 46%           | 43%             | 46%                  |
| 6.1b | Is it easy/ very easy to see the nurse?   | 77%           | 72%             | 93%                  |
| 6.7  | Do you feel you have any emotional well being/mental health issues?   | 24%           | 22%             | 7%                   |
| 7.1a | Are you currently working in the prison?  | 46%           | 55%             | 46%                  |
| 7.1b | Are you currently undertaking vocational or skills training?  | 14%           | 19%             | 16%                  |
| 7.1c | Are you currently in education (including basic skills)?  | 32%           | 11%             | 30%                  |
| 7.1d | Are you currently taking part in an Offending Behaviour Programme?  | 14%           | 17%             | 7%                   |
| 7.3  | Do you go to the library at least once a week?  | 46%           | 52%             | 46%                  |
| 7.4  | On average, do you go to the gym at least twice a week?   | 73%           | 60%             | 84%                  |
| 7.6  | On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc) | 0%            | 6%              | 0%                   |
| 7.7  | On average, do you go on association more than five times each week?  | 77%           | 93%             | 77%                  |
| 7.8  | Do staff normally speak to you at least most of the time during association time? (most/all of the time)                  | 9%            | 24%             | 16%                  |
| 8.1  | Do you have a personal officer?   | 81%           | 81%             | 83%                  |
| 8.9  | Have you had any problems sending or receiving mail?  | 28%           | 43%             | 23%                  |
| 8.10 | Have you had any problems getting access to the telephones?   | 9%            | 11%             | 7%                   |
| 8.12 | Does this prison give you the opportunity to have the visits you are entitled to? (e.g. number and length of visit)       | 54%           | 82%             | 61%                  |