

Report on an unannounced inspection of

HMP Risley

by HM Chief Inspector of Prisons

8–19 July 2013

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Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	19
Section 2. Respect	31
Section 3. Purposeful activity	45
Section 4. Resettlement	53
Section 5. Summary of recommendations and housekeeping points	61
Section 6. Appendices	69
Appendix I: Inspection team	69
Appendix II: Progress on recommendations from the last report	71
Appendix III: Prison population profile	79
Appendix IV: Summary of prisoner questionnaires and interviews	83

Introduction

Risley is a large category C prison in Cheshire, holding over 1,000 adult male prisoners. The prison is burdened with a historically poor reputation, but at our last inspection, over two years ago, we found an establishment that had prepared well and noticeably improved. At this inspection we found a prison that was still producing broadly reasonable outcomes, with some evident progress. But there was no disguising clear shortcomings, particularly the attitude of some staff toward prisoners and a lacklustre approach to the provision of education and activity.

Many prisoners at Risley were serving long sentences, many for serious offences, but in our survey most said they felt safe, including those deemed vulnerable due to the nature of their offence. Arrangements to receive prisoners into the establishment were adequate but could be improved. Levels of violence and use of force were not high, despite weak and one dimensional processes designed to promote violence reduction. Investigations into incidents were often perfunctory and prison staff had not consulted prisoners about their perceptions of safety.

Since our last visit there had been three self-inflicted deaths, but the support we observed for those at risk of self-harm was generally good with some excellent multidisciplinary work. There was evidence that the prison had acted on lessons learned and recommendations following investigations into these deaths.

A more risk-based approach to security was leading to positive changes that were supporting the work of the prison, but some practices remained disproportionate, for example the inappropriate use of strip- and squat-searching. Unacceptably, this sometimes took place without the knowledge of managers. The segregation regime and environment were poor, though use of the facility was not excessive. Relationships in the unit were friendly but unchallenging. Prisoners were positive about the support they received generally for substance misuse, but the key work of the prison's drug recovery unit was undermined by the mix of prisoners on the unit and some indifferent staff attitudes to the work.

The environment and living conditions at Risley were mixed and prisoners faced a number of frustrations concerning access to basic amenities and services. Birchwood wing was very poor; the wing should be either refurbished or demolished. Relationships between staff and prisoners were superficially respectful, but prisoners complained of victimisation and of the unhelpful attitude of a small but influential number of staff. Staff were too often merely passive in their support for the work of the prison. The promotion of equality and diversity had improved but remained mixed. There was some good support for disabled and older prisoners, but there were gaps, particularly for foreign nationals. Prisoners lacked confidence in the complaints process but overall, health services were reasonable.

For a training prison we found too many prisoners locked in cells during the working day – on average over a third of the population. The prison had increased the range and number of activity places since the last inspection and had a sound strategy focusing on prisoners' resettlement needs, but too many prisoners did not attend their allocated activity places and punctuality was poor. The management and quality of education required improvement and quality improvement processes were not effectively applied. Too much teaching in education was mundane or inadequate. In contrast, the quality of teaching and coaching in vocational training and in industries was good and prisoners developed skills and a strong work ethic. Those who attended activities regularly did well and achieved qualifications.

Strategic management of resettlement was developing and gathering some momentum, but a whole prison approach to inform and support prisoners was not yet evident. The prison needed to focus more on addressing the needs of prisoners spending short periods of time at the prison prior to

release. Offender management arrangements were generally good, but there was a considerable backlog in assessments and other key processes. Public protection arrangements were robust. The prison offered some good support in the resettlement pathways, but work on children and families needed to be better, as did access to some key work with sex offenders.

This is a mixed report. It was however, reassuring that the Governor and his management team had a solid understanding of the challenges the prison faced. They had a programme for improvement and progress was evident. The prison was soon to go through a radical reorganisation and benchmarking exercise that managers saw as an opportunity to address entrenched practices. The priority was to continue developing the quality of training and the capabilities of resettlement practice. This needed to be underpinned by a more supportive staff culture and operational arrangements that fully facilitated the aims of the prison, while continuing to ensure at least, current levels of safety.

Nick Hardwick
HM Chief Inspector of Prisons

November 2013

Fact page

Task of the establishment

A category C trainer prison.

Prison status

Public

Region

Northwest

Number held

1086 (on 9 July 2013)

Certified normal accommodation

1050

Operational capacity

1095

Date of last full inspection

7–11 February 2011

Brief history

Risley opened in 1964 as a male and female remand centre. In 1989 the male part of the prison became a training prison. Although there were plans in the early 1990s to replace all the original buildings, some are still in use. The training prison was expanded further and refurbished in 2003 with the addition of a new wing (Glazebury). The sex offender population was relocated to separate residential areas in 2009 – Farnworth (now renamed the Fran Atkinson Wing) and Glazebury. In 2009, Risley became a hub for up to 200 foreign national prisoners. The regime at Risley had been enhanced since the last inspection through the development of a drug recovery unit on Culcheth Wing and the introduction of a therapeutic community on Elton Wing.

Short description of residential units

Appleton – a 186-bed unit

Birchwood – a 108-bed unit

Ravensmoor – a 12-bed unit originally intended as a reintegration unit accommodating prisoners not sentenced for sex offences, but considered to be vulnerable

Culcheth – a 196-bed drug recovery unit; the north wing accommodated prisoners on maintenance doses, while the south wing was mainly for support and recovery.

Daresbury – a 196-bed unit, consisting of a first night and induction unit and one care suite and one safer/gated cell

Elton – a 173-bed unit plus 18 beds in the segregation unit attached; one care suite and one safer/gated cell

Croft – an 18-bed segregation unit with one gated cell

Glazebury – a 196-bed unit accommodating sex offenders only

Fran Atkinson – a 28-bed unit accommodating sex offenders only.

Appleton, Culcheth, Daresbury, Elton and Glazebury are newer wings with open landings of two spurs each (North and South). Birchwood and Fran Atkinson, the oldest wings, are smaller and, together with Ravensmoor, consist of single cells only.

Name of governor/director

Jerry Spencer

Escort contractor

GEOAmey and Tascor

Health service provider

Primary health – Bridgewater Community Healthcare NHS Trust

Mental health – 5 Boroughs Partnership NHS Foundation Trust

Learning and skills providers

The Manchester College

Working Links

Independent Monitoring Board chair

Mike Cunliffe

About this inspection and report

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

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

- A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.
- **outcomes for prisoners are good.**
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
 - **outcomes for prisoners are reasonably good.**
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
 - **outcomes for prisoners are not sufficiently good.**
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
 - **outcomes for prisoners are poor.**
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
 - **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
 - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, the majority of our inspections have been full follow-ups of previous inspections, with most unannounced. Previously, inspections were either full (a new inspection of the establishment), full follow-ups (a new inspection of the establishment with an assessment of whether recommendations at the previous inspection had been achieved and investigation of any areas of serious concern previously identified) or short follow-ups (where there were comparatively fewer concerns and establishments were assessed as making either sufficient or insufficient progress against the previous recommendations).

This report

- A8 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

S1 *Prisoners were not given sufficient notice of transfers and some arrivals had long waits on vans outside reception. Reception was welcoming, but there were lengthy delays. First night procedures were reasonable, but induction needed to be more comprehensive. Most prisoners felt safe and the level of violence and number of incidents were not high. Violence reduction processes were inadequate. Support for prisoners at risk of self-harm was good. A risk-based approach to security had led to positive changes, but some practices remained disproportionate. Some elements of the incentives and earned privileges (IEP) scheme were too punitive, but it gave the majority reasonable incentives to progress. Adjudications were well managed and use of force was generally proportionate. The segregation regime and environment were poor. Relationships were reasonable. Prisoners were positive about substance misuse support, but the recovery unit needed attention.*
Outcomes for prisoners were reasonably good against this healthy prison test.

S2 *At the last inspection in 2011 we found that outcomes for prisoners in Risley were reasonably good against this healthy prison test. We made 14 recommendations in the area of safety. At this follow-up inspection we found that six of the recommendations had been achieved, two had been partially achieved and six had not been achieved.*

S3 Prisoners were not given sufficient notice of transfers to and from the prison. It was common for prisoners to wait on locked vans outside reception at lunchtime. Reception was clean and the staff courteous. Peer support was good, but first night interviews were not carried out in private; fewer prisoners than in the comparator said they received information about what was going to happen to them. There was little translated material.

S4 Most prisoners felt safe on their first night, but some could not have a shower. Insiders (prisoners who introduce new arrivals to prison life) delivered induction the day after arrival. The induction room was private but scruffy and prisoners did not receive all the information they needed.

S5 Fewer prisoners than in comparator prisons said that they had ever felt unsafe. Many vulnerable prisoners felt safe despite being integrated into some parts of the main prison regime. The number of assaults was not high and similar to comparator prisons. The strategy to tackle antisocial behaviour (TAB) was overseen by residential managers, but lacked a clear lead staff member. The process did little to address problematic behaviour; behaviour targets were often generic and monitoring entries largely uninformative. Some investigations into incidents were superficial and a number of incidents were not investigated at all.

S6 There had been three self-inflicted deaths since our last inspection. Action plans had been developed and changes were being implemented. During our night visit, a member of staff appropriately entered a cell to assist a prisoner. Rates of self-harm were similar to the comparator, but not all serious incidents were investigated to ensure lessons were learned. Assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm, overall was satisfactory. More reviews involved staff from a range of disciplines than we normally see. Support from the chaplaincy and mental health workers was particularly good. Most care plans included realistic targets and some demonstrated good individual care, although written entries were mixed. The prison monitored the use of gated cells and the number held in segregation while on ACCTs, but documents did not always record what alternative measures had been considered. Those requiring intensive

supervision were given the opportunity to participate in activities. The group of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) felt well supported and said that prisoners had good access to them. The prison had no formal safeguarding policy for vulnerable adults or links to the community. However, induction processes identified needs.

- S7 Security was moving to a more risk-based approach. While arrangements had generally improved, a number remained too restrictive. For example, some strip- and squat-searches were taking place without managers' authorisation or knowledge. The prison did not always act on intelligence from the security information reports received. In our survey, fewer prisoners than in the comparator said it was easy to obtain drugs, but more said it was easy to get alcohol. Random mandatory drug testing rates were low and there was little evidence of major problems with illicit substances, although we had concerns about aspects of in-possession medication. Some suspicion testing had not taken place.
- S8 The IEP scheme was used as a key component of behaviour management. The approach adopted for the small number of very disruptive prisoners was exclusively focused on a punitive response, with little effort to explore and challenge the underlying reasons for problematic behaviour. The scheme provided the majority of prisoners with reasonable incentives to progress.
- S9 The number of adjudications was low compared to similar establishments, reflecting the focus on IEP. Use of force was not high. Film footage we reviewed showed that planned use of force was well managed and proportionate and management oversight reasonable, although some paperwork did not clearly demonstrate whether de-escalation had been used. The segregation unit was poor, with limited natural light and a lack of ventilation. Exercise yards were austere and only a basic regime was offered. Relationships were friendly but failed to address prisoners' underlying behaviour proactively. Mental health staff provided good support and attended all case reviews. The Ravensmoor Unit was effectively an overspill segregation unit, offering a poor regime. It had no clear direction or focus on reintegration.
- S10 While we saw some good work taking place in the recovery unit, the mix of prisoners and some staff were undermining the unit's treatment ethos. Fifty per cent of the prisoners on opiate substitution treatment were on maintenance doses, which was too many, and more needed to be done to encourage prisoners to move into recovery. Services were very well integrated and delivering good outcomes. In our survey, more prisoners than the comparator said they found the support offered helpful.

Respect

- S11 *Living conditions were mixed; Birchwood Wing was very poor. Prisoners faced a number of daily frustrations. Relationships were superficially respectful, but prisoners complained about the attitude of a small but influential minority of staff. This was having a pervasive impact on a number of prisoner outcomes. Equality and diversity support was mixed; the prison offered some good support for older prisoners, but there were gaps, particularly for foreign nationals. Faith provision was excellent. Prisoners lacked confidence in the complaints process and only a minimal legal service was offered. Health services were reasonable overall, although we had some concerns about the management of medications. Prisoners did not like the food and some complained about the items available in the prison shop. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S12 At the last inspection in 2011 we found that outcomes for prisoners in Risley were reasonably good against this healthy prison test. We made 28 recommendations in the area of respect.² At this follow-up inspection we found that 11 of the recommendations had been achieved, six had been partially achieved, 10 had not been achieved and one was no longer relevant.

- S13 The quality of accommodation varied greatly. Birchwood Wing remained very poor and needed substantial refurbishment or demolishing. Ventilation on the Appleton Wing was poor. Newer wings were bright and clean and most cells were in a satisfactory condition, although we found many with broken furniture. Access to showers had generally improved but some needed redecorating and toilets required deep cleaning. The applications system was not robust and prisoners often had difficulties obtaining cleaning materials. Some phones did not work and several had no privacy hood. Prisoners experienced delays in accessing property and receiving mail. Many of these issues had been raised repeatedly but without resolution.
- S14 Most prisoners said that staff treated them with respect and that they had someone to turn to if they needed help. However, prisoners also said that a minority of staff were at best unhelpful and at worst obstructive; more prisoners than we would normally expect felt that staff victimised them. While interactions we observed were mainly appropriate, there was very limited evidence of active engagement. Some discipline staff had low expectations of prisoners. For example, many personal officers we spoke to saw little value in supporting prisoners to change their behaviour. Prisoner consultation was reasonable.
- S15 The strategic management of equality and diversity was improving, but some areas needed development. Diversity representatives were consulted, but there were no general forums for different groups of prisoners. Issues raised in discrimination incident reporting forms were generally minor and responses timely, although prisoners' access to them was poor. Although they were checked by a senior manager, there was no external scrutiny.
- S16 In our survey, black and minority ethnic prisoners were less likely to feel respected and more likely to feel victimised by staff than white men. Those we talked to were largely preoccupied with the same issues as the general population. The prison had no identified lead staff member for foreign nationals and very little displayed in other languages; some prisoners were unaware of their entitlements. However, in our survey, foreign national prisoners were more positive than British nationals about some key outcomes. No independent immigration advice was available. Our survey indicated that disabled prisoners were particularly negative about a range of issues, but each of them had a care plan and support and activity services were good. Support for older prisoners was good but for the remaining protected groups it was limited. Faith provision was good, and prisoners' religious beliefs were respected.
- S17 Complaint forms were available, but prisoners lacked confidence in the process. Responses to complaints varied; some lacked courtesy and failed to deal with the matters raised. Complaints about staff were generally minor, and dealt with by an appropriate manager. The deputy governor reviewed all complaints about staff.
- S18 Legal visits could still not take place in private. There were no formal legal support services, although offender supervisors provided advice and the library held relevant information.

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

- S19 Overall health care was good. The health and social care needs of the prisoners had become more complex. Partnership and governance arrangements were good. Some good levels of care and a wide range of clinics were provided, but some waiting lists were too long, for example for the podiatrist and optician. Prisoners complained about access to GPs and nurses and we noted that the failure to attend rate was high; we found evidence that prisoners were sometimes not informed of appointments. Relationships with local services were good and the prison had employed carers to provide personal care for two prisoners. Health promotion activities and the use of wellbeing mentors were impressive. Pharmacy services were adequate. However, the management of controlled drugs required immediate attention. A large number of addictive medications were held in possession and this needed to be reduced to avoid bullying and trading in medicine. Dental services were good and waiting times short. Mental health services were reasonable overall, although a large number of prisoners with moderate mental health problems did not have their needs met.
- S20 Prisoners were generally dissatisfied with the food, but older, foreign national and Muslim men were more positive. Black and minority ethnic prisoners were more negative about the items sold in the prison shop, but they had been consulted and some changes were planned.

Purposeful activity

- S21 *Time out of cell for those in activities was reasonable, but much worse for a large minority. The management of work and vocational training was good, although in education it needed improvement. There were plans to develop further the range and standard of provision and the prison had sufficient activity places, although these were significantly underused. Too much teaching needed improvement. Attendance and punctuality were poor and some accommodation in education was inadequate. The achievements of those regularly in activities were good and the qualifications offered to sex offenders were equitable. The library was good, but access limited. Physical education (PE) provided a good range of opportunities. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S22 *At the last inspection in 2011 we found that outcomes for prisoners in Risley were reasonably good against this healthy prison test. We made 12 recommendations in the area of purposeful activity. At this follow-up inspection we found that six of the recommendations had been achieved, two had been partially achieved and four had not been achieved.*

- S23 Time out of cell for those in activities was reasonable, but much poorer for approximately a third whom we found locked up during activity periods. Outside exercise or association were rarely cancelled.
- S24 The prison had a sound strategy to improve learning and skills provision, but further work was required to monitor its implementation to ensure it drove improvement. Quality improvement processes continued to be underdeveloped. Education and vocational training were considerably underused. Planned changes from September would potentially increase participation. Punctuality was poor with delays of up to 35 minutes after movements started before activities began, which curtailed the working day. The prison had reviewed its security arrangements and had a measured and appropriate strategy that allowed more prisoners access to work within the prison in trusted jobs. The management of the Offender Learning and Skills Service (OLASS) provision required improvement. Management of vocational training and work was good, but in education too much teaching required improvement.

- S25 The number of activity places had improved significantly since the last inspection and was now reasonable for the population, but more vocational training provision was needed. Industrial workshops were not used to capacity. Some education accommodation was poor.
- S26 Teaching methods lacked variety in too many education classes; staff had low expectations of learners, which often meant prisoners had low expectations of themselves. In the best lessons teachers planned well to meet prisoners' needs using a range of interesting activities to engage prisoners purposefully. Individual learning plans were poor. Peer mentors were used effectively to support prisoners, but their skills were not always accredited. In industrial workshops, prisoners developed a good work ethic. However, the work skills they developed were not recorded. Most vocational tutors linked learning well to employment and industry requirements and prisoners developed good practical skills, for example, in fitted interiors.
- S27 Retention and achievement rates were high. If learners stayed on a programme, they achieved units of qualifications; however, no data was available on how many completed whole qualifications. In some workshops, prisoners developed a high level of skills above and beyond the requirements of the qualification.
- S28 The library was well resourced and stocked. The budget for additional resources was generous and used well. The library provided a range of opportunities, including reading to relax for prisoners with mental health issues and reminiscence workshops for older prisoners. Prisoners had insufficient access to the library, with some only using the facilities once every three weeks.
- S29 PE was well run. The promotion of healthy living was good and wellbeing mentors helped other prisoners make informed and healthy choices to improve their lifestyle. Good use was made of prisoners qualified as gym instructors to supervise others following exercise programmes. Success rates and progression between levels on PE courses was good.

Resettlement

S30 *Strategic management of resettlement was developing, but a whole prison approach was not yet evident. The prison needed to focus more on addressing the needs of prisoners spending short periods of time at the establishment prior to release. Offender management arrangements were generally good, but there was a considerable backlog in assessments and other key processes. Needs were assessed on arrival, but pre-release work needed better coordination. Public protection arrangements were robust. The prison offered some good support in the resettlement pathways but work on children and families needed to be better. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S31 *At the last inspection in 2011 we found that outcomes for prisoners in Risley were reasonably good against this healthy prison test. We made 14 recommendations in the area of resettlement. At this follow-up inspection we found that six of the recommendations had been achieved, two had been partially achieved and six had not been achieved.*

S32 The strategic management of resettlement, based on an adequate needs assessment, was developing. However, the new approach to pathway management needed to be embedded. The needs of prisoners arriving with short periods of time left to serve needed to be proactively addressed. There were some good and developing release on temporary licence (ROTL) opportunities.

- S33 Sentence planning work was generally of a good standard and most risk management plans were robust. A large number of prisoners had no up-to-date offender assessment system document. However, we were assured that prisoners were being referred for appropriate interventions. Public protection arrangements were appropriately robust, but prisoners were not informed if their mail or telephone calls were being monitored. There was a substantial backlog of categorisation and home detention curfew reviews. No specific support was provided for indeterminate sentence prisoners.
- S34 Most prisoners were seen promptly after their arrival by their offender supervisor for a pathway needs assessment, but pre-release work needed better coordination. Appropriately trained peer advisors were available on each wing to support resettlement work.
- S35 Accommodation services were reasonable and although data was unclear, few prisoners were released with no fixed address. The prison needed to improve its coordination of employment, training and education pre-release work. A reasonable pre-release course was offered and ROTL opportunities were developing.
- S36 Pre-release health support was reasonable and links were made to external service providers. Clinical and psychosocial services were delivered by health and social care charity Crime Reduction Initiatives (CRI). The CRI recovery team delivered a wide range of effective resettlement interventions for prisoners with substance misuse issues. Finance, benefit and debt advice was available, but support to open bank accounts had been suspended.
- S37 Family visits for children were held regularly, but were not well advertised and were only available to prisoners on the enhanced regime. The visitors' centre was too small. Visitors waited a long time before visits, but most visits lasted at least 90 minutes. The visits hall was comfortable and the children's play area well presented and appropriately equipped. The prison did not routinely monitor the distance of prisoners' homes from the establishment or identify those who had been primary carers before imprisonment. There was no family support worker, no parenting course, and no opportunity for general relationship counselling. Inter-prison visits by video link had not taken place since April 2013 and accumulated visits were rare. Overall the provision was unimaginative and needed further development.
- S38 The spread of offending behaviour programmes was appropriate and well managed, but a shortage of staff continued to threaten delivery. The Belief in Change programme for prolific offenders was well-received by prisoners. There was no provision for prisoners who were in some stage of denial of their offence.

Main concerns and recommendations

- S39 Concern: The tackling anti social behaviour (TAB) strategy lacked a clear lead staff member. Linked closely to the IEP scheme, it did little to identify or address the underlying reasons for problematic behaviour and was largely punitive. In most cases generic behaviour targets were set, and many booklets consisted largely of uninformative daily monitoring entries that often recorded 'no issues'. Staff had not been trained, and there was little evidence of effective management checks. Some incidents were not investigated.

Recommendation: The strategy to tackle antisocial behaviour should be based on improved investigations, focused on individual behaviour and have good management oversight.

- S40 Concern: Birchmoor Wing remained very poor and needed substantial refurbishment or demolishing. Little had changed since the previous inspection. There were regular

infestations, and a report from a chief fire and rescue advisor indicated that damaged or missing smoke detectors left large areas of the unit without fire detection. Showers were inadequate and general living conditions poor.

Recommendation: Birchmoor Wing should be completely refurbished or replaced. (Repeated recommendation 2.6)

- S41 Concern: Prisoners said most staff were respectful but that a substantial minority of discipline staff were at best unhelpful, and at worst obstructive. More prisoners than we would expect to see felt victimised by staff. As at the previous inspection there was very limited evidence of staff interacting with prisoners. For example, during association staff usually gathered together in small groups or stayed in wing offices instead of talking to prisoners. Some wing-based staff we spoke to had low expectations of prisoners and did not appear to believe they could reinforce positive behaviour change. The impact of this staff culture was pervasive and influenced much of what happened at the prison.

Recommendation: Staff on wings, including personal officers, should interact with prisoners so that they become more aware of their individual circumstances. They should use this knowledge to support work to reduce the risk of reoffending by encouraging prisoners to engage positively with the regime.

- S42 Concern: Despite there being sufficient activity places for the population, a substantial number of prisoners remained locked up during the core day. Education and vocational training places were underused, with participation ranging between 58% and 63% in education and 63% and 80% in vocational training. Morning classes often operated under capacity but demand for afternoon classes often exceeded the allocations available. Industrial workshops were also currently not used to capacity. Movement from the wings to activities was not well managed and punctuality was often poor with delays of up to 35 minutes after prisoners started moving.

Recommendation: Senior managers should implement swiftly their plans to improve aspects of the prison regime to increase participation, attendance and punctuality in all activities.

- S43 Concern: Much teaching lacked variety and too many lessons required improvement. In these classes, the pace of learning was too slow and staff had low expectations of prisoners who in turn had low expectations of themselves. In many lessons prisoners worked individually, with limited opportunities to discuss or share ideas with other prisoners. Learning materials in some compulsory subjects were not put into context, which meant prisoners did not see the relevance or benefits of the qualifications to their future employment.

Recommendation: The college should provide focused training and support to improve the quality of teaching and learning and share more effectively the good practice that some teachers use to provide stimulating, enjoyable and effective learning activities.

- S44 Concern: The prison had not addressed our concerns from the last inspection that prisoners were not adequately supported to maintain contact with family and friends. It did not routinely monitor the distance of prisoners' homes from the prison or identify those who had been primary carers before imprisonment. There was no family support worker, no parenting course, and no opportunity for general relationship counselling. Inter-prison visits via video link had not taken place since April 2013 and accumulated visits were rare. There were some family visits, but they were not available to all or widely advertised, and their

frequency had been reduced. Prisoners elsewhere in the prison who did not have young children had no opportunity to benefit from a more relaxed visit with their families.

Recommendation: Services to help prisoners maintain or rebuild relationships with their children, partners and families should be further developed and include a qualified and experienced family support worker. (Repeated recommendation HP48)

Section 1. Safety

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

Courts, escorts and transfers

Expected outcomes:

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

1.1 *Most prisoners experienced short journeys. Prisoners were locked on vans at lunchtime when the reception was closed. Prisoners were only told of their transfer to and from Risley on the morning of their move.*

1.2 Most prisoners did not have long journeys to the establishment; however, many prisoners convicted of sexual offences travelled to Risley from further afield. This was reflected in our survey where 40% of those on the Fran Atkinson and Glazebury wings said they had had journeys of over two hours compared with 26% on other wings. In the survey, more prisoners than the comparator said they felt safe on their journey.

1.3 Reception was closed between 12.30pm and 1.30pm. Prisoners frequently arrived during this time and were kept waiting in vans. On a very hot day we saw prisoners waiting without air-conditioning for 90 minutes.

1.4 Prisoners were only told of transfers to and from the establishment on the morning of their move and did not have the opportunity to inform anyone. As a training prison the establishment did not expect to receive transfers of prisoners with outstanding court appearances. Despite this, an average of 22 prisoners had attended court each month from January to June 2013. The video link was not used for court purposes.

Recommendations

1.5 Prisoners should not be held in vans for excessive periods awaiting reception.

1.6 Prisoners should be given sufficient notice of planned transfers to enable them to make a call to their family and/or legal advisor subject to well-evidenced security considerations. (To the National Offender Management Service)

Early days in custody

Expected outcomes:

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

- I.7** *Reception was clean and peer support provided, but there could be long delays before prisoners were moved to the first night wing. Interviews did not take place in private and not all prisoners could have a shower. Prisoners generally felt safe and staff were respectful. Induction was adequate but did not cover all pertinent topics.*
- I.8** Reception was clean and staff were courteous. Refreshments were provided and Insiders (prisoners who introduce new arrivals to prison life) offered peer support. In our survey, 70% of prisoners said they were treated well in reception, but this was less than the comparator.
- I.9** Many prisoners were held in reception for three to four hours or more before moving to the first night wing; just 26% of prisoners said they had been in reception for less than two hours against a comparator of 52%.
- I.10** Vulnerable prisoners were held separately and safely. All prisoners were interviewed by a first night officer, who completed an induction passport booklet, which accompanied prisoners to the first night wing. Relevant questions were asked about risks and needs. Interviews took place in an area used as a thoroughfare by staff and prison orderlies, which was inappropriate and unlikely to encourage prisoners to talk openly.
- I.11** We were not assured that telephone interpreting services were used when necessary. Insiders who spoke other languages provided translation services, although this was inappropriate for the confidential nature of the interview. Apart from a copy of the prisoner information booklet in their own language, foreign national prisoners were not provided with anything else (see section on protected characteristics). For example, a Vietnamese prisoner who spoke no English attended induction and although he had received some written information in his own language, the prison did not use a translator so that he could engage in and understand the presentation.
- I.12** Prisoners were offered a reception pack with goods from the prison shop, which might have had to last up to 11 days, depending on their day of arrival. Prisoners went to the first night wing, Daresbury Wing or, if they were a vulnerable prisoner, to Glazebury Wing (G wing). In our survey, prisoners said they generally felt safe on their first night.
- I.13** Prisoners could only have a shower if they arrived on wings before lock up; only 12% of prisoners said they had been able to have a shower against a comparator of 31% and against 20% in 2011. Prisoners were also unable to use the telephone if they arrived after lock up.
- I.14** Two Insiders gave a relaxed, verbal induction presentation the morning after arrival. Gym and education inductions followed later in the week. The induction room was private, but furniture was stained and broken and the environment untidy.
- I.15** The presentation omitted some useful detail: there was no information about personal officer support, diversity and equality, the complaints process or role of the Independent Monitoring Board. In our survey, fewer prisoners than the comparator said they had attended induction or that it covered everything they needed to know.
- I.16** An Insider on G wing provided vulnerable prisoners with information on a one-to-one basis, but in our survey over 30% said they had not had an induction.

Housekeeping points

- I.17 All prisoners should be able to have a shower on the day of their arrival irrespective of what time they arrive.
- I.18 A comprehensive induction programme should be developed in discussion with staff and prisoners, and the induction environment made fit for purpose.
- I.19 All prisoners who do not speak English should receive adequate induction information in a language they understand.

Bullying and violence reduction

Expected outcomes:

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

I.20 *Most prisoners felt safe. The number of incidents was not high, but violence reduction processes were inadequate. Some good data was provided on indicators of violence, but its analysis to inform the violence reduction strategy needed to improve. The prison took a largely punitive approach to violence or bullying and did little to understand or address the underlying reasons for prisoners' behaviour.*

- I.21 The monthly safer custody meeting was chaired by a senior manager and attended by representatives from a range of departments as well as Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). Comprehensive reports were provided by the safer custody team on the operation of safer custody strategies. Procedures were in place to ensure cell-sharing risk assessments were reviewed.
- I.22 A good range of data was provided on indicators of violence, but it was less clear what had been learned from its analysis or what the priorities were and how they informed the strategy to reduce violence further.
- I.23 Fewer prisoners than in comparator prisons said that they felt unsafe. The number of assaults on prisoners was not high, an average of seven each month, which was similar to comparator prisons. The prison had not carried out a survey of prisoners' perceptions of safety since 2010, although prisoners were consulted about safety at community action team meetings. A prison survey might have thrown light on some higher levels of victimisation. CCTV to support safety had not been installed in all units.
- I.24 Many prisoners convicted of sex offences felt safe despite having been integrated into some parts of the main prison regime. However in our survey, 50%, compared to 19% of prisoners from other wings, said that they had been victimised by other prisoners, often experiencing abusive taunts when walking to activities.
- I.25 Violence reduction processes to underpin safety were inadequate. Most investigations into violence were superficial and some incidents were not investigated at all. Fourteen per cent of investigations (nine) between January and June 2013 had not been completed or returned to the safer custody team. We found a case involving an older prisoner who had been bullied

in his workshop; the prison provided him with formal support, but the incident had not been investigated. There were no quality checks of investigations.

- I.26** Most incidents concerned allegations of assaults or fights. Managers thought they were often associated with the possession of illegally held mobile phones or hooch or bullying to obtain medication. There was no substantial evidence of gang conflict. The mix of prisoners on Culcheth Wing caused some concerns (see section on substance misuse).
- I.27** The tackling antisocial behaviour (TAB) strategy was overseen by residential managers but lacked a clear lead staff member. It was linked closely to the incentive and earned privileges (IEP) scheme and involved using monitoring booklets for prisoners suspected of bullying, known bullies or those requiring support because they were victims of bullying. Known bullies were placed on the basic regime for five weeks with the opportunity to earn back privileges. The strategy did little to identify or address the underlying reasons for the problematic behaviour and was largely punitive. In most cases generic behaviour targets were set, such as to 'remain adjudication free' and 'conform to wing regime'. Many consisted of largely uninformative daily monitoring entries often recording 'no issues'. Staff had not been trained, and there was little evidence of effective management checks. Victims received formal support, but few took this up.

Recommendations

- I.28** **The analysis of the indicators of violence should be improved so that it identifies priorities and is used to inform a violence reduction strategy.**
- I.29** **Entries in TAB booklets should demonstrate meaningful interaction focusing on challenging antisocial behaviour, and prisoners should be upgraded as soon as behaviour improves. Management checks of booklets should challenge poor quality entries.**

Self-harm and suicide

Expected outcomes:

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

- I.30** *Levels of care for those considered vulnerable to self-harm were generally good. Following three apparent self-inflicted deaths in recent years there was evidence that the prison was making efforts to learn lessons and implement change, although not all serious self-harm incidents had been investigated. Assessment, care in custody and teamwork (ACCT) case management documents were satisfactory overall and high risk prisoners received some good individual care. Listeners felt well supported.*

- I.31** There had been three self-inflicted deaths since our last inspection. Action plans had been developed and changes were being implemented. One prisoner had died shortly after release; the Prisons and Probation Ombudsman had not been required to investigate this. Lessons could have been learned from the incident. There was a very strong emphasis on learning lessons from investigations of deaths and inquests, the details of which were shared at monthly safer custody meetings. Two apparent self-inflicted deaths had highlighted the

staff's reluctance to enter cells at night. During our night visit a member of staff appropriately entered a cell to assist a prisoner. Some high risk groups, including recalled and foreign national prisoners, were monitored and case studies used to flag up issues and improve care.

- I.32** The rate of self-harm was similar to comparator prisons but, we were told, due to a lack of resources not all serious incidents had been investigated.
- I.33** ACCT procedures overall were satisfactory. More reviews than during the previous inspection involved staff from a variety of disciplines, often including mental health workers and chaplains, who provided prisoners on ACCT documents with daily support. Support for many prisoners at risk of self-harm was mostly good. Most care plans included realistic targets, but entries were mixed. Some demonstrated good individual care. Translation services had been used in some cases to help prisoners at risk whose first language was not English.
- I.34** Some prisoners requiring intensive supervision or who harmed themselves regularly could participate in activities, which had led to a reduction in self-harming behaviour. Twenty-one prisoners were receiving counselling and 20 were on the waiting list, most of whom had been waiting over six months (see section on additional resettlement services).
- I.35** Monitoring of the use of gated cells and the number of prisoners held in segregation while subject to ACCT documents had improved but still needed attention (see section on segregation).
- I.36** The Listener group felt well supported and said that prisoners had good access to them. Occasional reports of prisoners being denied access to Listeners were followed up. Bilingual Listeners were seldom used to support non-English speaking prisoners, nor were they involved in prisoners' early days in custody.

Recommendation

- I.37** **All serious incidents of self-harm should be investigated to establish underlying reasons for them and ensure lessons are learned.**

Safeguarding (protection of adults at risk)

Expected outcomes:

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

- I.38** *There was no formal safeguarding adults' policy. No links had been established with the local authority to develop procedures for the referral of vulnerable prisoners.*

- I.39** There was no formal safeguarding policy for vulnerable adults or links to the community through the local authority's safeguarding adults board to protect and promote the welfare of vulnerable adults. The prison's induction passport helped to identify vulnerabilities,

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

including the needs of older prisoners. Professional standards procedures were in place to report any legitimate concerns staff had about the treatment and management of prisoners.

Recommendation

- I.40 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes.**

Security

Expected outcomes:

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

I.41 *Security was moving to a more risk based approach and some positive changes had been made. Some strip- and squat-searches were taking place without authorisation. Intelligence from security information reports (SIRs) was not always acted on. Mandatory drug testing (MDT) rates were low.*

I.42 Well attended monthly security meetings were chaired by the deputy governor and included discussions and reviews of the supply reduction action plan and security monitoring data. While security arrangements had improved and were now more proportionate, some practices remained too restrictive. For example, some strip- and squat-searches were being carried out without authorisation. There were good working relationships with the police liaison officer and a local community police officer.

I.43 In the last six months, 1671 SIRs had been submitted, but intelligence from the reports was not always acted on. Most SIRs concerned drugs, mobile phones and threats to staff. Target searches resulting from SIRs were not logged, so it could not be determined how many of those requested had been completed. The security department's main concern was trading in prescription medication issued in the prison or brought in from outside. Most search finds in the last three months were of mobile phones and hooch (illicitly brewed alcohol).

I.44 Some positive changes had been made. Risk assessments for activity areas had been reviewed, and there were now no high risk areas. Prison orderlies worked in the governor's administration unit and in the security department. Arrangements for the application of restraints for external escorts were proportionate, and four category C prisoners regularly went to outside hospitals accompanied by staff but without restraints.

I.45 The MDT random positive rate for the six months to June 2013 was low at 2.13%. Prisoners told us that illicit drugs were not widespread. This was supported by our survey where less than the comparator (27% against 31%) said it was easy to get illicit drugs.

I.46 Staff redeployment had meant that the required 14% weekend random testing target had not been met in March, May or June. Fifty suspicion tests were conducted in the same six-month period, with a positive rate of 20%, mainly for cannabis. Some suspicion tests had not been completed as they had fallen outside the required 72-hour window, although the extent of this was not monitored. The MDT suite was clean, tidy and appropriately equipped.

- I.47** In our survey, more than the comparator (21% against 18%) said it was easy to get alcohol. Diverted medication was also a concern. Prisoners told us that a number of medications, including tramadol, were readily available (see section on the pharmacy).
- I.48** Fourteen prisoners were subject to closed visits and eight visitors had been banned. Reviews had not always taken place every month, and one man was subject to closed visits almost two months after this should have ceased. Decisions had been based on intelligence directly related to visits.

Recommendations

- I.49 Strip-searching of prisoners should only be conducted for well-evidenced security reasons. Decisions to squat-search must be supported by specific intelligence and recorded and monitored by the security committee.**
- I.50 The establishment should ensure that the MDT programme is adequately resourced to undertake the required level of weekend and suspicion testing.**

Housekeeping points

- I.51** A log should be maintained of all intelligence-led cell searches and drug testing; it should be monitored for completion.
- I.52** Banned and closed visits should be reviewed at least every 28 days.

Incentives and earned privileges⁴

Expected outcomes:

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

I.53 *The IEP scheme was being used as a key component of the behavioural management approach. More prisoners in our survey than usual said the scheme encouraged them to change their behaviour and a substantial number of prisoners were on the enhanced level. The management of the basic regime did little to challenge the underlying reasons for problematic behaviour. The prison needed to ensure that discretion was properly regulated.*

- I.54** Prisoners retained the enhanced IEP status on transfer from another establishment and signed behaviour compacts during induction. Most prisoners (656) were on the enhanced level, while 22 were on the basic level. In our survey, 56% of prisoners said they had been treated fairly in their experience of the scheme, and 50%, more than the comparator of 47%, said the different levels of the scheme encouraged them to change their behaviour. Prisoners were downgraded after three warnings in three months or following one serious incident, such as an assault.

⁴ In the 2010 report, incentives and earned privileges were covered under the healthy prison area of respect. In our updated Expectations (Version 4, 2012) they now appear under the healthy prison area of safety.

- I.55** The scheme was being used as a key component of the behavioural management approach. The approach adopted for the small number of very disruptive prisoners in the population focused exclusively on a punitive response, and the prison made little effort to explore or challenge the underlying reasons for the problematic behaviour. Despite weekly and fortnightly reviews, prisoners remained on the basic level for a minimum of five weeks. Entries in TAB monitoring booklets, including daily management checks, were poor. Monthly monitoring data did not include all the protected characteristics (see section on bullying and violence reduction).

Housekeeping point

- I.56** IEP monitoring data should include all the protected characteristics.

Discipline

Expected outcomes:

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

- I.57** *The number of adjudications was low compared to similar establishments. Use of force was not high and management oversight was reasonable. The segregation unit was poor, with limited natural light and a lack of ventilation. Relationships were friendly but failed to address prisoners' underlying behaviour. Mental health staff provided good support and attended all case reviews. The Ravensmoor Unit was effectively an overspill segregation unit, offering a poor regime.*

Disciplinary procedures

- I.58** The adjudication room was reasonable, but the small waiting room was austere. There had been 423 adjudications in the last six months, which was low compared to similar establishments. Too many hearings had not been completed because they were out of time. Quarterly adjudication review meetings were chaired by the governor. The deputy governor carried out a quality check of completed adjudication paperwork and provided feedback at the adjudication standards meeting and to individual adjudicators. The standard of paperwork had improved during the last six months. Punishments were generally consistent with the range settings, which had been reviewed in January. Prisoners said that adjudications were fair.

Housekeeping point

- I.59** The adjudication holding room should be made less austere.

The use of force

- I.60** There had been 51 use of force incidents in the last six months, which was not high. Of these, 12 had not involved control and restraint (C&R) techniques. Thirteen incidents had been planned and film footage we saw showed they had been well managed and proportionate. Staff had drawn batons on three occasions in the last year, but not used them; each was justified in the circumstances.

- I.61** Quarterly use of force meetings were well attended. Monitoring was thorough but did not include all the protected characteristics. Most staff were up to date with their C&R training, which included a module on de-escalation. Management oversight of use of force was reasonably good, but film footage had not been reviewed.
- I.62** C&R instructors met monthly to identify lessons from incidents. The governor carried out a quality check of use of force paperwork and discussed his findings at use of force meetings. Notices on key points from C&R incidents were disseminated among staff. Some use of force reports among our sample had not been completed and not all demonstrated that de-escalation had been used; injury reports had not always been completed.

Housekeeping point

- I.63** Scrutiny of use of force paperwork and film footage should take place as soon as possible after incidents have occurred.

Segregation

- I.64** During the last six months, 84 prisoners had been segregated, which was low compared to similar prisons. Nine prisoners had been located in the unit for more than 28 days, and two for more than two months in the last six months. In the same period, 12 prisoners were subject to ACCT procedures. The exceptional circumstances for placing them in segregation had been taken into account, but the alternative locations considered had not been recorded.
- I.65** The segregation unit was poor; it had limited natural light and lacked ventilation. Exercise yards were austere, and only a very basic regime was offered. The gated cell had been used six times in the last six months, mostly for a matter of hours and once for a week. Prisoners were routinely strip-searched on entry to the unit, and some squat-searched, without justification or authorisation (see section on security). Prison records indicated that the special unfurnished cell had not been used for some considerable time.
- I.66** Staff were individually authorised to work in the unit and received a reasonable range of training. Mental health staff provided good support and attended all case reviews. Quarterly well attended segregation review meetings, were chaired by the governor. Monitoring was thorough, but did not include all the protected characteristics.
- I.67** Relationships were friendly but failed to address underlying behaviours. Segregation records showed little meaningful interaction with prisoners. Statutory visits were not always recorded. Standard and enhanced regime prisoners did not have televisions in their cells, even when this was not part of their punishment. Prisoners in the unit said there was little for them to do, but most said staff treated them well.
- I.68** In theory the Ravensmoor Unit was where men who had previously been held in segregation could be moved as a stepping stone to normal location. In reality it was an overspill segregation unit, offering a poor regime and no sense of progression. It had no clear direction or focus on reintegration and men were often held there for long periods of time to little effect. We also pointed this out at our previous inspection. However, we were told that the prison planned to change its use in September.

Recommendations

- I.69** Whenever a prisoner is located in segregation, the exceptional circumstances to justify this should be clearly recorded in the ACCT document.
- I.70** The segregation unit environment should be improved and a better regime provided.
- I.71** Entries recording prisoners' behaviour in the segregation unit should show meaningful interaction focused on dealing with underlying behaviour.
- I.72** The Ravensmoor Unit should not be used as an overspill segregation unit. If it remains open, its function should be made explicit and a decent regime should be provided with a clear emphasis on progression.

Housekeeping point

- I.73** The monitoring of adjudications, use of force and segregation should include all the protected characteristics.

Substance misuse

Expected outcomes:

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

I.74 *Clinical and psychosocial services were very well integrated, although half the prisoners on opiate substitution treatment (OST) were receiving maintenance doses. The recovery unit had an excellent programme, but the mix of prisoners and attitude of some staff undermined the unit's treatment ethos.*

- I.75** Clinical and psychosocial services were delivered by health and social care charity Crime Reduction Initiatives (CRI). Psychosocial services were very well integrated with the clinical provision, delivering good outcomes and high levels of prisoner satisfaction. In our survey, more than the comparator (86% against 80%) said they found the support helpful. A total of 112 prisoners were on OST, the majority of whom were on Culcheth Wing North. Half of them were on maintenance doses, which was unusually high for a category C prison. More could have been done to encourage prisoners to move into recovery.
- I.76** The recovery unit on Culcheth Wing South provided a supportive and therapeutic atmosphere for those in recovery, including 12 places on an intensive three-month programme, which included arts-based therapies and other activities. The quality of this programme was among the best we have seen, but its therapeutic potential was constantly being threatened by the number of prisoners on the wing who were not in recovery. Of the total of 93 prisoners, 49 (53%) were filling spaces and were not involved with the recovery team. Many of these prisoners were known to be involved in drug use, dealing, assaults and other negative behaviour. In addition, operational staff were not specifically selected to work on the wing, and we were concerned about some negative views expressed during the inspection about its treatment ethos. While the recovery unit was doing some good work, the prisoner mix and the negative attitudes of some discipline officers were undermining its success. Senior managers had taken steps to improve this, but progress had been too slow.

- I.77** Alcohol services were integrated into the provision and a dedicated part-time alcohol worker was in place. In the absence of a current needs analysis the establishment did not know the extent of alcohol treatment needs, but in our survey, fewer than the comparator (48% against 65%) said they had received help for an alcohol problem and more than the comparator said it was easy to obtain alcohol in the prison (see paragraph I.47).

Recommendations

- I.78** The prisoner mix in the recovery unit on Culcheth Wing South should be addressed without delay to preserve the integrity of the programme and to give those interested in recovery the best possible chance of success.
- I.79** Discipline staff working on Culcheth Wing should be specifically selected for the role.

Section 2. Respect

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

Residential units

Expected outcomes:

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

- 2.1** *The grounds were pleasant, but living conditions were mixed and Birchmoor Wing was very poor. There was no robust application system. More were able to have a shower every day than when we last inspected.*
- 2.2** The quality of accommodation varied greatly. Birchmoor Wing (including the Ravensmoor Unit) remained very poor and needed substantial refurbishment or demolishing. At previous inspections we described the wing as unfit for purpose. Little had changed. There were regular cockroach infestations and a report from a chief fire and rescue advisor indicated that damaged or missing smoke detectors left large areas of the unit without fire detection. Showers were inadequate and had been raised at community action team (CAT) meetings every month for over a year. Shower facilities, formerly used by staff, had been refurbished but not made available to prisoners. Television reception was very poor. Inadequate ventilation, particularly on the Appleton Wing meant some cells were too warm.
- 2.3** Most cells and communal areas on the newer wings were bright, clean and in a satisfactory condition. Wing painters kept them adequately decorated.
- 2.4** Double cells had poorly screened toilets. Many had broken or insufficient furniture. The use of bed sheets as makeshift curtains made cells look untidy. Material displayed on picture boards conformed to the prison's policy. Cells had televisions and privacy locks, but many had no mirror.
- 2.5** Access to showers had improved and was regularly monitored by the senior management team. Some showers needed redecorating and toilets required deep cleaning. Most communal toilets had no soap dispensers and few working hand dryers.
- 2.6** Most of the areas around the prison were clean, pleasant and well maintained, but litter was continually discarded from cell windows.
- 2.7** There were no procedures to check responses to cell alarm bells. In our survey, fewer than in comparator prisons said that their cell bells were normally answered within five minutes.
- 2.8** The applications system was not robust. Some prisoners said application forms were not always available. Applications were logged in most units, but responses could not be traced once they had been submitted. Only 27%, compared to 49% in comparator prisons, said that they were dealt with promptly.

- 2.9** Some telephones were broken and a number had no privacy hood. Several managers said additional phones were needed. Calls were time limited to reduce queues. Many prisoners complained about delays in getting telephone numbers approved and in receiving mail.
- 2.10** Most prisoners wore personal clothing. Prison clothing was available and had to be worn by those on the basic regime. Clothing could be sent in during the first 28 days following reception, but prisoners could now have underwear and socks handed in at a visit. Prisoners could exchange prison clothing every week, but there were insufficient towels and bedding, which was raised regularly at CAT meetings.
- 2.11** Prisoners could have their personal laundry washed in wing laundries, but the washing machine on the Appleton Wing was not working, and there had been problems with washing machines and dryers on other wings. The prison was considering washing prisoners' personal clothing in the central prison laundry. There were often delays in prisoners accessing property from reception.
- 2.12** Many told us they often had problems obtaining cleaning materials. The prison had plenty of supplies, but they were not organised well. Most cleaning cupboards had mops and buckets, but they were not correctly stored. The cleaning officer role could have been better managed. There were no barbering services.
- 2.13** Minutes from wing meetings – some going back around 12 months – showed prisoners had raised issues such as broken telephones, poor access to cleaning material, lengthy delays in getting to reception to collect property, problems with showers and an inefficient applications system. Similar issues were raised repeatedly at the monthly CAT meetings with little evidence of progress. Managers regularly inspected residential units.

Recommendations

- 2.14** **Effective wing inspections should identify damaged or missing fabric, furniture and telephones, which should be repaired or replaced.**
- 2.15** **An efficient application process should be introduced and monitored.**
- 2.16** **Prisoners should be able to access stored property within 48 hours of making an application.**
- 2.17** **Prisoners should be able to obtain any relevant cleaning materials.**

Housekeeping point

- 2.18** Soap and hand drying facilities should be provided in all communal areas.

Staff-prisoner relationships

Expected outcomes:

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

2.19 *Staff-prisoner relationships were mixed. While most interactions were superficially respectful, many relationships were distant. Prisoners complained about a minority of staff whom they described as unhelpful or obstructive. The personal officer scheme was doing little to support behaviour change in prisoners. Formal consultation arrangements were reasonable, although some issues remained unresolved for long periods of time.*

2.20 Most prisoners said that staff treated them with respect and that they had someone to turn to for help. However, prisoners said a minority of staff were at best unhelpful and at worst obstructive. More prisoners than we would expect felt victimised by staff. Interactions we observed were mainly friendly and appropriate, but as at the previous inspection, there was very limited evidence of active engagement. For example, during association discipline staff usually gathered together in small groups or stayed in wing offices instead of interacting with prisoners. Some discipline staff had low expectations of prisoners and did not appear to believe they could reinforce positive behaviour change. This was evident in a range of areas from day-to-day interactions to the management of more challenging prisoners (see section on safety). The impact of this staff culture was pervasive and influenced much of what happened at the prison.

2.21 The personal officer scheme did not support work to prepare prisoners for release, and many wing staff we talked to saw little value in the process or could not see how they could influence positive change in prisoners. Prisoner consultation through the Community Action Team (CAT) meetings was reasonable, but some issues remained unresolved for long periods of time (see section on residential units).

Equality and diversity

Expected outcomes:

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

2.22 *The management of diversity had improved since the last inspection, but outcomes remained mixed. The diversity policy did not describe how the needs of all groups would be recognised or met. Systematic monitoring and analysing of race equality treatment (SMART) only covered mandatory areas. Discrimination incident reporting forms (DIRFs) were not freely available. Provision for prisoners who did not speak English continued to be poor. Support for older prisoners and those with a disability was good.*

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

Strategic management

- 2.23** The diversity, equality and inclusion policy (DEIP) covered all protected characteristics but did not describe how the needs of all groups would be recognised or met. It was not based on a needs analysis.
- 2.24** As identified in 2011, SMART data covered mandatory areas only and failed to examine areas of concern in the prison, for example, the prison did not monitor the allocation of jobs. Prisoners queried the lack of black and minority ethnic servery workers and this had then been investigated and action taken to address the shortfall.
- 2.25** SMART statistics were scrutinised by the diversity equality and inclusion team (DEIT) and out of range figures investigated. No similar monitoring was undertaken across all protected characteristics.
- 2.26** DEIT meetings, chaired by the governor, were held bimonthly and included prisoners but no external representatives. Prisoner diversity representatives were consulted at bimonthly Risley equality action team (REAT) meetings. All protected characteristics were standing agenda items at REAT and CAT meetings.
- 2.27** DIRFs were not freely available on all wings; 36 had been submitted from January 2013 up to the inspection week. Most related to minor incidents and were generally adequately and promptly investigated. Completed investigations were not independently scrutinised.
- 2.28** The prison only had specific consultation forums for older prisoners and those with a disability but did consult more generally with prisoner diversity representatives (see 2.26). There were no displays celebrating the diverse population, and external diversity and equality organisations included in the DEIP only supported staff.

Recommendations

- 2.29** **The diversity policy should be based on a needs analysis of all protected characteristics and describe how the needs of each characteristic would be met. (Repeated recommendation 4.7)**
- 2.30** **Monitoring for equality of treatment should be carried out across a range of diversity strands. (Repeated recommendation 4.8)**
- 2.31** **SMART monitoring should include areas of local interest or concern.**

Housekeeping point

- 2.32** The prison should introduce independent scrutiny of completed DIRFs.

Protected characteristics

- 2.33** Eighteen per cent of the population were from black and minority ethnic groups; few black and minority ethnic staff were in contact roles.
- 2.34** In our survey, black and minority ethnic prisoners were less likely than white prisoners to say staff treated them with respect and more likely to say they had been victimised by a

member of staff. In groups and individually black and minority ethnic prisoners were mainly preoccupied with the same issues as the general population.

- 2.35** There were 178 foreign national prisoners from approximately 45 countries, including 28 immigration detainees. The foreign national policy from 2010 was out of date. In our survey, foreign national prisoners were more positive than British nationals across a range of indicators. Foreign nationals received an information booklet in their own language, explaining the work of immigration officers based in the prison and of the three offender supervisors who managed all foreign national prisoners.
- 2.36** Provision for men who did not speak English continued to be poor. In our survey 75% of foreign national respondents said they could speak English, while only 55% said they could read English. Telephone translation services had been used an average of seven times a month from January to June 2013. None of the wing staff asked had used the service, and some said they did not have time to do so. Other prisoners were used as unpaid translators. (See also section on early days in custody.)
- 2.37** No information was displayed in other languages, and although we were told that picture dictionaries and 'flash' cards in different languages were available on wings, this was not the case. Some prisoners were unaware of their entitlements or did not know where to get help. There was no proactive foreign national lead staff member to coordinate support services. Immigration officers provided monthly immigration surgeries, but there continued to be no easy access to independent immigration advice.
- 2.38** Foreign national prisoners received a five-minute call to their home country only if they had not received a domestic visit. The cost of maintaining contact with families was unaffordable for many and no alternative technology, such as Skype, was available. Prisoners were positive about faith provision and did not feel disadvantaged as a result of their faith.
- 2.39** In our survey, 18% of respondents considered they had a disability; this group was particularly negative about a range of issues. The prison had recorded 2.1% with a physical disability, but the mental health team identified an additional 20% as having mental health issues.
- 2.40** Prisoners were asked during their passport interview and health care assessment if they wished to disclose a disability. All who did were interviewed and assessed by a wing officer and a care plan produced for them. Officers had received awareness training.
- 2.41** There were proactive lead staff members for older prisoners and those with a disability and lead nursing staff for those with a learning disability and older prisoners. A programme of suitable activities was available. Representatives from Age UK held bimonthly prisoner meetings, based on topics suggested by prisoners. A team of paid prisoner carers and wellbeing mentors (see section on health care) provided support. Prisoners had received awareness training for this work.
- 2.42** Access for disabled prisoners to all areas of the prison was good, but only G wing had one fully adapted cell and shower. Individual adaptations were provided as necessary. As we reported in 2011, shower facilities were generally poor, with broken shower chairs and few grab rails. Managers were aware that more provision was needed.
- 2.43** Managers told us that retired men and those unable to work were unlocked during the core day. However, this was not consistently the case and prisoners said it depended on the staff on duty. The oldest prisoner was 76. Retirees were charged £1 for their television, but this stopped during the inspection when it was brought to managers' attention.

- 2.44** In the survey, 1% of prisoners identified themselves as gay and 7% bisexual. The prison had unsuccessfully tried to set up prisoner forums. No external groups were working in partnership with the prison, but a lead staff member, appointed in April 2013, was involved in developing services.

Recommendations

- 2.45** Senior managers should investigate and address the perceptions of victimisation identified in the survey by some groups of prisoners.
- 2.46** Wing officers should use telephone interpreting services and other facilities consistently to enable them to communicate with foreign national prisoners.
- 2.47** Prisoners should have access to regular independent immigration advice services. (Repeated recommendation 4.28)
- 2.48** Technology such as Skype should be introduced to help foreign national prisoners stay in touch with family abroad.

Faith and religious activity

Expected outcomes:

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

- 2.49** *Prisoners were very positive about the support provided by the chaplaincy team and could access services easily. Chapel facilities were good.*

- 2.50** In our survey, in groups and individually, prisoners were very positive about the support provided by the chaplaincy team. The coordinating Church of England chaplain was supported by a range of chaplains who met prisoners' needs, including full-time Muslim and Roman Catholic chaplains. The prison was in the process of appointing a pagan chaplain.
- 2.51** New prisoners met a chaplain within 24 hours of arrival, and received verbal and printed information about chaplaincy services and the support available. Prisoners could access services easily, and vulnerable prisoners joined other prisoners at services. Chapel facilities were good, and prisoners could attend evening groups, including Bible study, Qur'an classes, a general discussion group and choir practice.
- 2.52** Chaplains supported prisoners following a death or serious illness, and attended ACCT reviews and equality and diversity and violence reduction meetings. A chaplain saw prisoners subject to ACCTs every day and the coordinating chaplain was a trained ACCT assessor.
- 2.53** Prisoners could keep religious artefacts with them and major religious festivals for all faiths were celebrated. The Muslim chaplain had been consulted and involved in plans for Ramadan.

Complaints

Expected outcomes:

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

2.54 *Complaint forms were available, but prisoners lacked confidence in the process. Some responses to complaints lacked courtesy and failed to deal with the matters raised. Complaints about staff were generally minor and dealt with by an appropriate manager.*

2.55 Complaint forms were available, but prisoners lacked confidence in the complaints process. Only 52%, less than the comparator (61%), said it was easy to make a complaint, and only 29% said they had been dealt with fairly. Only 20% said they had been dealt with promptly, less than the comparator (37%), although prison data showed that 96.6% had been answered on time.

2.56 During the last six months 793 complaints had been submitted, which was low compared to similar prisons. Some responses did not deal with the matters raised, and many lacked courtesy. There had been 26 complaints about staff in the last six months, all for minor issues. Senior managers investigated them and the deputy governor scrutinised responses.

2.57 Complaints were well monitored at senior management team meetings and the equality and diversity manager periodically checked complaints for discrimination relating to the protected characteristics. The deputy governor completed a 10% quality check of all completed complaints.

Recommendation

2.58 **The prison should explore prisoners' negative perceptions of the complaints process to increase confidence in the process.**

Housekeeping point

2.59 Management checks of complaints should challenge lack of courtesy and incomplete responses.

Legal rights

Expected outcomes:

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

2.60 *There was little demand for legal services. It was not possible for prisoners to see their legal representative in private.*

- 2.61** There were no trained legal service officers, but demand among this sentenced population was low. Prisoners' main source of advice was through their offender supervisors. The Citizens Advice Bureau service and a free surgery provided by a local solicitor were no longer available. The library held up-to-date copies of legal reference books and Prison Service orders.
- 2.62** Legal visits took place on Tuesday and Thursday mornings in the visits hall alongside other official visits. There were no private booths.

Recommendation

- 2.63** Prisoners should be able to see their legal representatives in private. (Repeated recommendation 3.55)

Health services

Expected outcomes:

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

2.64 *Health care provision was good and we noted a proactive approach that addressed prisoners' needs. There were good partnership and governance arrangements. A wide range of clinics and new clinics had started. Some waiting lists were too long, particularly for the podiatrist and optician. Prisoners complained about access to GPs and nurses. The 'did not attend' rate was high. There were good relationships with local services and carers had been employed to provide personal care for two prisoners. Health promotion activities and the use of wellbeing mentors were impressive. Pharmacy services were adequate. However, the transporting and administration of controlled drugs required immediate attention. Too many medications held in possession were liable to abuse. Dental services were good and waiting times short. Mental health services were reasonable overall, although a large number of prisoners with moderate mental health needs did not have their needs met.*

Governance arrangements

- 2.65** Primary health care services, including the GP and pharmacy services, were provided by Bridgewater Community Healthcare NHS Trust. Secondary mental health services were provided by 5 Boroughs Partnership NHS Foundation Trust, and Mental Health Matters (a charitable organisation) provided self-guided support.
- 2.66** Overall, governance arrangements were good with reporting undertaken via the prison's partnership board. There was a health needs assessment; however this needed to be updated to address prisoners' complex physical and mental health needs.
- 2.67** A small team of nursing and medical staff provided primary care services for a large number of prisoners. We were impressed with the quality of provision and the proactive approach to health care; however we were concerned that further developments could be hampered by the low number of skilled staff.

- 2.68** Policies and procedures were in place, including on information sharing and communicable diseases. We observed positive leadership and skilled nursing and medical staff. Clinical supervision tended to be informal. Managerial supervision was available as was a good programme of training.
- 2.69** The health care area was clean and generally modern. Regular infection control audits had been undertaken, compliance with infection control standards was satisfactory and action was being taken to improve treatment areas.
- 2.70** The health care department held emergency resuscitation equipment, including oxygen and automated electronic defibrillators (AED), and nursing staff were available 24 hours to respond to clinical emergencies. Oxygen and some emergency equipment were available on the wings; the prison was purchasing more defibrillators. All nurses were up to date with basic life support training, but not with intermediate life support training. This gap was being addressed and plans were in place to ensure that enough officers were up to date with first aid and defibrillator training.
- 2.71** We observed health care staff interacting respectfully with prisoners. We received a number of verbal complaints about long waiting times to see the GP and noted that a large number of prisoners did not attend appointments; prisoners said that they did not always receive their appointment slips. Some waiting lists were too long, particularly for the podiatrist and optician.
- 2.72** In our survey, prisoners were generally dissatisfied with access to health care services and only 43% of prisoners said that the overall quality of health care services was good or very good, although this was similar to the comparator. However, once they had used a service they were generally more positive than the comparator about the care they had received.
- 2.73** When complaints were received, action taken included face-to-face meetings to discuss prisoners' concerns. Prisoners were given information about access to prison health services. Twenty-eight prisoners acted as wellbeing mentors, who worked collaboratively with the health promotion lead staff, running peer based clinics, contributing to health fairs and providing prisoners with one-to-one support. As a result health promotion was very good, and there were good links between the health care department and the gym. Yearly health fairs were held and repeated on the wings to ensure all prisoners had the opportunity to obtain information. A good range of health related information was available, although not always easily available in different languages.

Recommendations

- 2.74** **There should be an up-to-date health needs assessment that addresses the increasing complexity of physical and mental health care needs in the prison population.**
- 2.75** **The NHS commissioner, governor, and heads of service should agree on how to reduce the large number of prisoners not attending appointments.**

Housekeeping points

- 2.76** All registered nurses should be up to date with intermediate life support training.
- 2.77** Health promotion information should be easily available in different languages.

Good practice

- 2.78** *The prison made excellent use of the wellbeing mentor role, supported by the health improvement practitioner and physical activity instructor.*

Delivery of care (physical health)

- 2.79** A robust health care screen was undertaken on reception to identify and document prisoners' needs on arrival. Prisoners' accompanying records were reviewed to determine what treatment they were receiving from previous health care providers. Record keeping using SystemOne, the electronic clinical information system, was generally adequate and records were stored in compliance with data protection and Caldicott guidance (on overseeing the use and confidentiality of personal health information).
- 2.80** Prisoners had good access to a range of nurse-led clinics. An advanced nurse practitioner worked closely with the GP. Two skilled team leaders took on lead roles for long-term conditions and sexual health services. A health care assistant ran an effective service for prisoners over the age of 50; this proactive approach had a positive impact on the health of older prisoners. Carers had been employed to provide two prisoners with personal care.
- 2.81** Prisoners with acute illnesses who required attention attended a 'special sick' clinic (immediate health treatment without an appointment), which was available every morning. The nurse practitioner and GPs could see people in an emergency every day. There were also two other nurse prescribers. However, prisoners with continuing health concerns could wait up to 10 days to see the doctor. Out of hours' and emergency medical cover was effective.
- 2.82** Prisoners had access to a dermatologist, podiatrist, optician and a physiotherapist. The department offered ultrasound services, which reduced the need for prisoners to attend external appointments. Waiting facilities were reasonably good, however prisoners had to wait a long time to be escorted back to the wings; we were informed that a 'free flow' system, allowing prisoners to return to their wings unescorted, was about to commence.
- 2.83** The health care administrators managed hospital appointments. There were four escort opportunities each day, plus one day case admission, which was sufficient. However, we saw evidence that the external provider cancelled appointments without informing the prison and escort staff did not always inform the health care department if a prisoner was not taken to an appointment. The prison had started to monitor the problem.

Recommendation

- 2.84** **The partnership board should review the cause of delays when prisoners require hospital appointments to prevent unnecessary cancellations.**

Good practice

- 2.85** *There was a proactive nurse-led clinic, which supported the health needs of prisoners aged 50 and over.*

Pharmacy

- 2.86** The pharmacy staff had an appropriate skills mix. Standard operating procedures were in place but needed to be reviewed by the new provider. Stock levels were assessed every day. Key security was addressed well. Medicines were administered from two rooms in the health care department. One room served the Appleton, Birchmoor, Culcheth, Daresbury, and Elton wings, while a separate treatment room served the Fran Atkinson and Glazebury wings. Integrated drug treatment system (IDTS) services were provided from a unit on the Culcheth Wing.
- 2.87** There were no formal pharmacist-led clinics, although prisoners could see a pharmacist if they filled in an application form. No formal medicine use reviews were undertaken, but the pharmacist monitored prescribing and advised the medical and non-medical prescribers where relevant. A medicines management committee meeting, chaired by the deputy head of offender health, involved each service provider as well as the pharmacist. Meetings had not been held regularly over the past year.
- 2.88** The majority of medicines were supplied in possession, including a large number of tradable medicines and those liable to be abused. Not all prisoners had access to a secure locker. In-possession risk assessments were carried out by the prescriber and reviewed regularly in consultation with nursing and pharmacy staff. Regular medicine checks were undertaken on the wings. We were assured that prescribers rarely, if ever, prescribed medicines such as gabapentin or tramadol, unless clinically indicated. We were informed that most prisoners had been prescribed these medicines at previous establishments. In-possession risk assessments took into account a prisoner's risk, but not the risk of medicine being traded or the prisoner being bullied for their medication. We observed a list of 'never in possession' medicines.
- 2.89** Privacy and confidentiality were not possible in the main treatment room in the health care department. Prisoners waited in one of two communal areas and prison staff were present when each patient received their medication. However, prisoners could only leave the department once everyone had received their medication, which increased the risk of trading in medicines. Not enough time was allocated to administration, which aggravated supply issues at the main treatment room. Prisoners receiving medicines on the Fran Atkinson and Glazebury wings fared better, as prison staff controlled access to a screened handover point.
- 2.90** Arrangements for IDTS prisoners on the Culcheth Wing were exemplary, providing complete confidentiality. However, a number of prisoners who could not attend the facility, had methadone prepared for them and brought to them. The process of transporting the methadone was potentially unsafe: we saw it taken to the wings in a lockable steel cash box in a shopping bag while prisoners were on association or at work. We observed that administration records were completed before the prisoner had had their methadone.

Recommendations

- 2.91** **The full range of pharmacy standards operating procedures should be ratified by the medicines management committee at the earliest opportunity.**
- 2.92** **Pharmacist-led clinics/formal medicine use reviews should be implemented.**
- 2.93** **The administration processes in the main treatment room should be revised to preserve prisoners' dignity and confidentiality. (Repeated recommendation 5.31)**

- 2.94 The medicines management committee should review the in-possession policy and the number of prisoners on tradable medication.**
- 2.95 The process of transporting and administering methadone should be revised.**

Housekeeping points

- 2.96** The medicines management committee meeting should be re-established on a regular basis.
- 2.97** Medicine charts should only be signed when the administration has been completed and witnessed by the signatory.

Dentistry

- 2.98** Prisoners had access to a dentist three days per week. A dental therapist was available for four sessions per month. Prisoners were seen quickly for emergency treatment and the waiting list for routine treatment was six weeks, which was reasonable. Dental checks and treatment at least to the range available in the NHS were provided and oral health information was provided on a one-to-one basis and at health events. Equipment was maintained and working satisfactorily. Infection control was good and there was a separate decontamination room.

Delivery of care (mental health)

- 2.99** At the time of the inspection officers had not received mental health awareness training, although this was being planned.
- 2.100** The prison had not commissioned a full range of primary mental health services so prisoners with mild to moderate mental health problems only had access to guided self-help. Prisoners with moderate mental health difficulties, such as stress or anxiety or who had difficulties sleeping received limited support. This was a concern as we observed prisoners with complex needs. There were no group or day services. Prisoners had access to counselling services, however the waiting list was long (see section on additional resettlement services).
- 2.101** A nurse had been appointed to work with prisoners with learning disabilities and develop a care pathway. This project was working well and was being evaluated. We observed very positive support for prisoners; however there were difficulties referring them to community services and poor links with forensic psychologists.
- 2.102** Forty-four prisoners were being managed using the care programme approach (mental health services for individuals diagnosed with a mental illness). One prisoner was awaiting transfer to a secure mental health unit; nine had been transferred within the last year and the majority had been transferred within two weeks.

Recommendations

- 2.103 A full range of services for prisoners with moderate mental health needs should be available.**
- 2.104 Services for prisoners with learning disabilities should be developed to include a robust referral process to internal and community services.**

Housekeeping point

2.105 Mental health awareness training should be available for officers.

Good practice

2.106 *The nurse working with prisoners with learning disabilities was developing a care pathway and providing some very good individual care. This initiative was working well and being evaluated.*

Catering

Expected outcomes:

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

2.107 *All diets were catered for. In our survey, only 19% of prisoners said the food was good or very good. Not all serveries were sufficiently well supervised.*

2.108 All diets were catered for. In our survey, only 19% of prisoners said the food was good or very good, less than the comparator (27%). However, foreign national, older and Muslim prisoners were more positive than others.

2.109 The kitchen was clean, well maintained and generally well equipped. Food was appropriately stored and prepared and served from clean serveries. Although servery workers had received training, some prisoners complained about cross contamination when halal food was served, and this had been raised at the CAT meeting in June 2013. Not all serveries were sufficiently well supervised.

2.110 Unchanged from 2011, prisoners received breakfast packs the day before they were eaten, meals continued to be served too early at 11.45am and 4.45pm, and second helpings were not possible as prisoners were locked up as soon as they had collected their meals. Prisoners ate in their cells, which had poorly screened toilets.

2.111 The quality and temperature of food tasted was satisfactory. Food comments books were available on all wings and catering staff checked them regularly and responded. There continued to be few formal complaints. A catering representative attended all CAT and DEIT meetings and food questionnaires had been handed out in June 2013.

2.112 All goods had to be purchased via centrally negotiated contracts, which restricted choice. We were told that there had been a 12% reduction in the food budget, which was now set at £1.96 per prisoner per day.

Recommendations

2.113 **The serving of food should be effectively supervised by staff.**

2.114 **Lunch and dinner should be served at normal meal times.**

Purchases

Expected outcomes:

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

2.115 *In our survey, more prisoners than the comparator said the shop sold a wide enough range of products to meet their needs. Prisoners could order catalogue goods and newspapers.*

2.116 Canteen orders were placed on Fridays and delivered under staff supervision the following Friday. New arrivals were offered canteen packs and informed about how long these would have to last. Prisoners could apply for a free print-out of their accounts. A member of the shop contractor DHL regularly attended the prisoner consultation forum.

2.117 In our survey, 51% of prisoners, more than the comparator (44%), said the shop sold a wide enough range to meet their needs. Black and minority ethnic prisoners were more negative but had been consulted about the product list in June, and their choices were to be included in the updated list after the next quarterly review. Prisoners could order items from five catalogues, and delivery charges were shared between the prisoners placing orders. Newspapers could be ordered from the local newsagent.

Section 3. Purposeful activity

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

Time out of cell

Expected outcomes:

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

3.1 *Time out of cell for those in activities was reasonable but much lower for a large minority whom we found locked up during activity periods. Prisoners did not get one hour's exercise in the open air.*

3.2 When the regime operated to the published times, it provided a maximum of 9.5 hours out of cell time from Monday to Thursday, 8.25 hours on Friday and 7.75 hours at weekends. We completed four roll checks throughout the inspection during activity periods. The number of prisoners locked up was high, ranging from 25% to 44% of the population with an average of 35%.

3.3 Outside exercise or association were rarely cancelled. Exercise was scheduled for only 30 minutes for those not participating in activities. Exercise for prisoners who were in full-time activity consisted of walking to and from the activity. In summer, prisoners had access to fresh air for an hour during evening association, but not in winter. We saw the regime curtailed by late unlocking; prisoners at community action team meetings were told this was because a minimum number of staff needed to be present.

Recommendations

3.4 **Most prisoners should be consistently unlocked for the advertised times during the core day.**

3.5 **Prisoners should have at least one hour a day in the open air. (Repeated recommendation 6.43)**

Learning and skills and work activities

Expected outcomes:

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

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

3.6 *The management and quality of the education provision required improvement. Too many prisoners did not attend their allocated activity places. Punctuality was poor. The prison had increased the range and number of activity places since the last inspection and had a sound strategy focusing on prisoners' resettlement needs. Quality improvement processes were not applied effectively. Too much teaching in education was mundane. By contrast, the quality of teaching and coaching in vocational training and in industries was good and prisoners developed skills and a strong work ethic. Those who attended activities regularly did well and achieved units of qualifications. The library was good, but not all prisoners could use the facilities every week.*

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

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

Management of learning and skills and work

3.8 The prison had a sound learning and skills improvement strategy that focused on resettlement. Further work was required to monitor its implementation. Quality improvement processes continued to be underdeveloped and processes to assess the quality of teaching, learning and assessment had not been applied. The Manchester College provided education and vocational training. In education, some records of observations of teaching and learning graded the provision too highly, leaving The Manchester College with an unrealistic picture of the quality of provision. While senior managers and the education manager were clear about areas within learning and skills that needed improvement and had started to make changes, the overarching self-assessment report did not identify some key weaknesses.

3.9 The management of the Offender Learning and Skills Service (OLASS) provision required improvement. The management of vocational training and work was good. Education and vocational training were underused, with participation as low as 58% of the places available in education and 63% in vocational training over the last five months. Morning classes in particular often operated under capacity, but demand for afternoon classes often exceeded the allocations available. Industrial workshops were also not currently used to capacity. Planned changes in September would potentially increase participation, as the prison was introducing new activities, and an increase in the ratio of learners to staff. Movement from the wings to activities was not well managed. Punctuality was often poor with delays of up to 35 minutes after prisoners started moving before activities began.

3.10 The prison had reviewed its allocation process, which was now more efficient; however, the process needed to be centralised to ensure the system was efficient and that places were allocated equitably. The prison had also reviewed its security arrangements and had a measured and appropriate strategy that allowed more prisoners to access work within the prison in trusted jobs. This strategy was very effectively developing prisoners' sense of responsibility and accountability.

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

- 3.11** Data on success rates was used appropriately to measure learners' achievements and to set improvement targets. Prisoners' views were collected and used to inform changes in the provision. Data collected on prisoners' literacy and numeracy levels enabled managers to match the provision to needs effectively.

Recommendations

- 3.12** The prison should ensure that the learning and skills improvement strategy results in better quality provision and the use of the available activity places.
- 3.13** The observation of teaching and learning process should be implemented across all learning activities in the prison and quality assurance processes should be applied to ensure outcomes give an accurate picture of the quality of teaching and learning.
- 3.14** Work on centralising the allocation process should continue to ensure the system is efficient and equitable.

Provision of activities

- 3.15** The range of activities was fairly broad and met the current population's skills needs. Activity places had increased since the last inspection, and there were sufficient places for most of the population, although not all of these were well used (see paragraph 3.9). Vocational training was offered in three construction workshops, which included fitted interiors, painting and decorating, brickwork and cleaning.
- 3.16** The range of education activities adequately met the needs of prisoners and consisted of functional skills in English and mathematics up to level 2, information technology qualifications from levels 1 to 3, English for speakers of other languages (ESOL) at level 1, iMedia (interactive media), customer services, art and a business venture course. Vulnerable prisoners were offered discrete provision in IT, but other classes mixed different categories of prisoner to ensure equity. Outreach provision in functional English and mathematics was insufficient to meet demands. The prison did not have sufficient computers in information and communications technology classes. Some education accommodation was poor, with furniture in a poor state of repair and peeling paint on walls.
- 3.17** The range of work was good and the prison planned to increase provision with the addition of workshops in a Timpson's dry cleaning academy and a contract with a chocolate manufacturer offering release on temporary licence (ROTL) and employment on release opportunities. Workshops included textiles, the Prisons Information, Communication Technology Academy (PICTA) (involving the use of IT systems, their management and repair), Braille, desk top publishing, breakfast packing, light assembly, polymer recycling and card making. Industries provided work in laundry, kitchens, gardens and recycling.

Recommendation

- 3.18** More education staff should be deployed in workshops and industries to meet the literacy and numeracy needs of prisoners not attending education classes.

Housekeeping points

- 3.19** The number of computers in IT classrooms should be reviewed to ensure it meets needs.
- 3.20** The decorative state of some classrooms should be improved and furniture that is in a poor state of repair replaced.

Quality of provision

- 3.21** In too many education classes, teaching methods lacked variety and too many lessons required improvement. In these classes, the pace of learning was too slow and staff had low expectations of prisoners, who responded by having low expectations of themselves. In many lessons prisoners worked individually, with limited opportunities to discuss or share ideas with other prisoners. Poor punctuality and attendance and weak management at the start of lessons disrupted learning. Learning materials in some compulsory subjects were not put into context, which meant prisoners did not see the relevance or benefits of the qualifications to their future employment.
- 3.22** In the good or better lessons, teachers planned well to meet the needs of all prisoners. Learners were engaged in interesting activities, structured discussions and group work and were motivated and shared their experiences well. Some teachers used innovative projects, such as developing an IT application for the Imperial War Museum or producing a prison magazine, to enthuse prisoners and stimulate learning.
- 3.23** Teachers were unable to plan effectively to meet prisoners' needs at the start of courses because they had not received the results of initial assessments or information on prisoners' previous learning promptly. Individual learning plans lacked detail and targets were insufficiently challenging.
- 3.24** Peer mentors were used effectively in many lessons to support prisoners. They were trained but could not accredit their skills, although some had qualifications that they had gained in other establishments. In some lessons, peer mentors could extend their skills and knowledge, as well as support other learners.
- 3.25** In industrial workshops, prisoners developed a good work ethic, and even where the work was mundane, applied themselves well. Some prisoners took qualifications in performing manufacturing operations, but for too many the work skills they developed were not always recorded. Where professional qualifications existed, for example in laundry, they were not always used to accredit skills. Vocational tutors linked learning well to employment and industry requirements. For example, prisoners in the fitted interiors workshop developed a good understanding of foundations and their impact on building extensions. Some developed practical skills above the level of their qualification, for example, making twisted pillars in bricklaying, but these were not accredited.
- 3.26** Good coaching from instructors and peer mentors helped prisoners develop strong practical skills in workshops, kitchens and industries. They applied their practical skills well, for example, fitting out the new coffee shop. Cleaning courses, which were delivered on accommodation wings, extended training opportunities and gave prisoners the opportunity to learn and work at the same time.
- 3.27** The brick workshop was hot and dusty and had no extractor fan. The upstairs textiles workshop was too hot and the breakfast packing area was hot, dusty and had no natural light.

Recommendations

- 3.28** Learning materials should be put into context so that prisoners understand the purpose of the activities and the relevance of the qualification to their future employment.
- 3.29** The results of learners' initial assessment and prior learning should be entered on an individual learning plan and given to teachers at the start of courses so they can plan individual learning more effectively and set prisoners challenging improvement targets.
- 3.30** The employability skills prisoners develop at work should be recorded.
- 3.31** Qualifications up to level 3 should be available for prisoners who develop high skills levels.
- 3.32** Extractor fans should be provided in the brick work and textile workshops and the breakfast packing workshop moved to an area that provides natural light. (Repeated recommendations 6.15 and 6.21)

Housekeeping points

- 3.33** The skills that peer mentors develop should be accredited.
- 3.34** Accredited qualifications should be reinstated in the laundry.

Education and vocational achievements

- 3.35** Retention and achievement rates were high overall. When prisoners stayed on an education or vocational training programme, they achieved units of qualifications; however, the prison had no data on how many prisoners achieved complete qualifications.
- 3.36** In iMedia, art, brickwork and the Braille workshop, some prisoners developed a high level of skills above and beyond the requirements of the qualification. Success rates and progression between levels was good on PE courses.
- 3.37** A good work ethic was evident in all workshops. Prisoners in the Braille workshop displayed high skill levels and good quality work, while those in the PICTA workshop achieved industry standard qualifications. Prisoners in the laundry workshop developed good industry standard skills. In industries, prisoners taking ESOL received individual support in the workshops and could attend education. The new Greening Outside of Prisons project was already leading to significant improvements at the site and to prisoners' well being and mental health.

Recommendation

- 3.38** The Manchester College should provide data on how many learners achieve full qualifications.

Library

- 3.39** The library was well resourced and stocked with books, magazines, newspapers and DVDs. The stock range met prisoners' differing literacy and language needs. The budget for additional resources was generous and used well. The librarian had responded to requests from gay prisoners to provide gay literature.
- 3.40** The library promoted literacy through initiatives such as: a reading to relax programme for vulnerable prisoners and those with mental health issues; reminiscence workshops for older prisoners; and special events, including the Six Books Challenge reading project and Black History Month. The library managed the Toe by Toe reading scheme (peer mentors provide individual support to prisoners with poor literacy to enhance their skills in this area). There were 27 trained mentors, 15 of whom were working with 22 prisoners to improve their literacy.
- 3.41** Prisoners potentially had weekly access to the library and a rota system operated at weekends. However, due to the number of prisoners on each wing requiring library visits, not all could visit during their allotted time slot. For some, this meant they only visited the library approximately once every three weeks. The library classroom, managed by The Manchester College, was now operating as a virtual campus (internet access for prisoners to community education, training and employment opportunities), but it was not well used.

Recommendation

- 3.42 Prisoners should have weekly access to the library.**

Physical education and healthy living

Expected outcomes:

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

3.43 *PE provision was good. The range of accredited programmes and recreational PE met needs well. Health promotion was good and prisoners who had achieved accredited PE qualifications or training as peer mentors were using their skills effectively to support other prisoners. Links with external agencies were developing prisoners' health and fitness well. Activities for recreational PE were well balanced, but some prisoners emphasised gaining muscle mass over achieving health-related fitness*

- 3.44** PE provision was good. Healthy living was promoted well with 28 men trained and working as wellbeing mentors, supporting other prisoners to make informed and healthy choices to improve their lifestyle. The initiative ran in conjunction with the local council and replicated provision in the community. Prisoners took level 2 qualifications in understanding health improvement and healthy foods and nutrition. Each wing had four wellbeing mentors who acted as health care representatives. The range of accredited programmes was good and good use was made of prisoners who had achieved level 2 gym instructor qualifications to supervise other prisoners following exercise programmes. This allowed the qualified prisoners to maintain and develop their skills.
- 3.45** Other good health promotion initiatives included a programme run in conjunction with Warrington Primary Care Trust, and Warrington Wolves rugby club to help prisoners address their offending behaviour. An anxiety management class had also been offered.

- 3.46** Although the PE team ensured that prisoners undertook other fitness activities other than weights and had a policy not to replace weights of over 30 kilos, prisoners could buy muscle bulking supplements and some emphasised gaining muscle mass over achieving health-related fitness.
- 3.47** A good range of team and individual activities were offered, including those for prisoners over the age of 50 or with cardiac problems. The one and a half day induction included useful Heart Start and manual handling training. Gym facilities were satisfactory.

Section 4. Resettlement

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

- 4.1** *The strategic approach to resettlement was developing but needed to be embedded across the prison. The needs assessment was thorough, but had to be updated to keep abreast of a changing population. Service provision was generally appropriate, but a key strategic decision about how to meet the needs of short-stay prisoners was required.*
- 4.2** The reducing reoffending delivery plan (RRDP) from April 2013 set out development objectives for each resettlement pathway, drawn from a broad spread of needs assessment information. It was informed by a prisoner survey conducted in summer 2012, which included a useful attempt to assess the different needs of specific sections of the population. This did not include details concerning what provision was available for each group or how the offender management unit (OMU) operated.
- 4.3** Some needs assessment data was out of date because the population profile had changed (the prison had fewer indeterminate sentenced prisoners and more prisoners with short periods of time left to serve). The strategy needed to be refocused to ensure that resettlement provision matched the needs of the population. The fact that the prison had been designated a 'resettlement' prison reinforced the need to address this issue.
- 4.4** There was evidence that the RRDP was being used to monitor progress and to drive improvements, but there had only been one meeting of the reducing reoffending policy committee (RRPC) since March, and none in the preceding year. The process for reviewing the pathway action plans set by the head of reducing reoffending was good in principle, but some reviews had not taken place. Some newly appointed pathway lead staff had yet to take ownership of this work.
- 4.5** Although many of the managers in the department were new in post, they understood the prison's approach to resettlement. However, this was not yet sufficiently well understood across the establishment: in our survey, more prisoners than the comparator said that they did not know who to go to for help with resettlement issues, and fewer than the comparator said that their personal officer worked with them to achieve sentence planning targets. We felt that the promotion of resettlement services on the wings was underdeveloped (see section on staff-prisoner relationships, paragraph 2.21).
- 4.6** A few prisoners were on release on temporary licence (ROTL) for work or other resettlement purposes. This was a relatively new initiative, supported by careful, yet proportionate risk assessments. In comparison with other prisons, the number of prisoners involved was very low.

Recommendation

- 4.7 The RRDP should be complemented by a strategy document that sets out the services provided for different groups of prisoners and the role of the OMU in promoting successful resettlement.**

Housekeeping point

- 4.8** Key population data should be regularly updated for consideration by the RRPC in order to inform ongoing needs assessments.

Offender management and planning

Expected outcomes:

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

4.9 *Offender management work was generally good, but there was a backlog of offender assessment, categorisation and home detention curfew work. The management team was new and had not yet developed sufficiently robust performance management systems. Public protection work was strong. There was no specific provision for indeterminate sentence prisoners.*

- 4.10** The structure of the OMU was appropriate. Probation service and prison service offender supervisors worked alongside each other, and a non-specialist approach to case management had been adopted, except in public protection.
- 4.11** In our survey, prisoners reported comparatively positively about contact with and support from offender supervisors and offender managers. Prisoners were seen within a few days of arrival by their offender supervisor and most offender supervisors kept good contact notes on the prison's electronic case note system, including a summary of the prisoners' sentence planning objectives.
- 4.12** However, our survey also showed that prisoners were less positive than in comparator prisons about their involvement in developing their sentence plan and their ability to achieve any of their sentence plan targets. A backlog of offender assessment system (OASys) work and waiting lists for some offending behaviour courses (see section on attitudes, thinking and behaviour) may have been responsible for these perceptions.
- 4.13** Two hundred and eight OASys assessments or reviews were overdue, of which over half were the responsibility of community probation officers. This was mainly because a substantial number of newly received prisoners arrived without an initial OASys assessment and officers were regularly deployed out of the department to cover shortages in other parts of the prison. From January to April, an average of 460 hours per month had been lost. Nevertheless, we were reasonably assured that prisoners were referred for the interventions they required.
- 4.14** OASys formal quality assurance processes were routinely completed; supervising officers regularly returned work they did not consider up to standard, and reported that the quality of work produced had improved since new staffing arrangements in April 2013. Risk

management plans were completed in all cases and the work we saw seemed reasonable. However, none of the offender supervisors, including probation staff, received any routine case supervision, and there was no evidence of regular case sampling.

- 4.15** There were also substantial delays in the home detention curfew (HDC) risk assessment process. This was partly due to prisoners without paperwork arriving at Risley after the assessment should have started. Only 10% of prisoners who were granted HDC were able to go home on their eligibility date. HDC assessments were thorough and decisions generally proportionate.
- 4.16** There had been no regular offender management meetings to monitor performance; the gaps in performance we identified suggested that one was required to ensure resources were appropriately focused on the most appropriate work.

Recommendations

- 4.17 All prisoners sentenced to 12 months or more should have an up-to-date OASys assessment before they are transferred to Risley. (Repeated recommendation 9.29) (To the deputy director of custody).**
- 4.18 There should be routine management oversight of assessment and sentence planning in all high risk of harm cases or those involving child protection issues.**
- 4.19 There should be regular offender management meetings to monitor performance and set priorities.**

Housekeeping point

- 4.20** All offender supervisors should use P-Nomis, the Prison Service IT system, to record prisoner casework activity.

Public protection

- 4.21** All prisoners were assessed for public protection concerns on arrival, and their cases added to the public protection database where necessary. This was available electronically across the prison and was used to ensure that restrictions were enforced.
- 4.22** Fifty-five prisoners were subject to mail and phone monitoring, all of whom received a review every month and decisions about monitoring were approved at the Interdepartmental Risk Management Meeting (IRMM). Prisoners signed a disclaimer on induction to say they understood that their telephone calls and mail might be monitored, but were not informed when a decision to do so was made.
- 4.23** Prisoners subject to restrictions regarding contact with children received a pack explaining the restrictions and were given an opportunity to apply for contact. These applications were managed carefully, and delays were not excessive.
- 4.24** Offender supervisors attended meetings on multi-agency public protection arrangements (MAPPA) level 2 (where the active involvement of one or more agency is required) whenever possible. They attended all meetings on MAPPA level 3 (which covers prisoners on the highest risk level). MAPPA F forms (information sharing reports) were submitted in all

cases. There were sufficient violent and sexual offenders register (VISOR) staff who had a reasonable system for exchanging information with the security team.

- 4.25** The IRMM met monthly and followed an appropriate standing agenda. MAPPA activity was monitored and there were discussions about prisoners who posed concerns, including new arrivals. Attendance was not always sufficient, either from offender supervisors, wing managers or functional heads, suggesting a lack of support across the prison. However, there was evidence of some valuable discussion and good outcomes.

Recommendation

- 4.26 Prisoners should be informed when they are subject to telephone or mail monitoring, except in exceptional circumstances.**

Categorisation

- 4.27** Categorisation reviews were appropriately conducted by offender supervisors and signed off by managers. However, there were substantial backlogs. A new tracking system had been in place for a few months, which meant the prison could establish which reviews were overdue, but the size of the problem was unclear, and fewer than half of the reviews due in June 2013 had been completed within the month.
- 4.28** There were 25 category D prisoners at Risley during our inspection. We were told that over half of these had been returned from open conditions and should have been re-categorised by the sending prison. We felt that prisoners arriving from open conditions should have had their categorisation reviewed at Risley, using information provided by the sending prison. This would have ensured an objective decision was made. There were no substantial delays in transfers out of Risley for sentence planning or progression purposes.

Housekeeping point

- 4.29** All prisoners returned to Risley from open conditions should have their security category formally reviewed once all the information is received from the sending prison.

Indeterminate sentence prisoners

- 4.30** Indeterminate sentenced prisoners accounted for 16% of the population. All had suitably trained offender supervisors, and parole paperwork was up to date. However, there were no regular discussion forums or events designed specifically for them or their families. There were no opportunities for the few indeterminate sentence prisoners who might have been released from Risley to develop or practise independent living skills. However, some eligible men could have escorted absences (visits outside the prison for those who have spent a long time in custody).

Reintegration planning

Expected outcomes:

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

4.31 *Resettlement needs were appropriately assessed on arrival, but the pre-release process was less well coordinated, and prisoners said that they did not know where to find help. Accommodation services appeared satisfactory, but records were poor. Careers information and guidance required improvement with greater joint working between support agencies to meet more prisoners' needs nearing release. Health care discharge arrangements were effective and there were good links to community mental health and palliative care services. The Crime Reduction Initiatives (CRI) recovery pathways team delivered a wide range of effective resettlement interventions and services. Finance, benefit and debt provision was generally sound, but prisoners could not open bank accounts prior to release. Visits provision was reasonable, but services to encourage contact with children and families were basic and uninspiring. An appropriate variety of offending behaviour programmes was available.*

4.32 Resettlement needs were assessed on arrival by offender supervisors. Various other agencies, including prisoner peer advisors, also conducted assessments and generated referrals. An offender supervisor process for checking progress against these needs pre-release had been piloted, but not yet implemented. In our survey, fewer prisoners than in the comparator said that any member of staff had helped them to prepare for release. We felt that more could have been done to promote resettlement services to prisoners by improving publicity and access to service providers. On release, prisoners were provided with discharge grants, holdalls and clothing as necessary.

Accommodation

4.33 Shelter provided accommodation services. All prisoners were seen by trained peer workers on induction, and referred to fully trained staff members where necessary. Some work was required to help prisoners address housing-related debts or to end tenancies to avoid accruing further debt. Most of the work focused on finding accommodation for release.

4.34 There was some unmanaged overlap between the Shelter service, the CRI's housing and debt service for prisoners on the recovery unit and the role of offender managers in finding hostel accommodation for some prisoners. As a result, work was duplicated and there were some errors in records. Shelter's own data suggested that no prisoners had been released without an address, and we were reasonably confident that success rates were high. Some post-release monitoring to check the success of accommodation placements had just begun, but no data was available.

Housekeeping point

4.35 Records kept about discharge addresses should be accurate and comprehensive.

Education, training and employment

4.36 Merseyside Connexions' provided careers information and guidance, but this service required improvement. The team worked well with some prisoners at induction and at the end of their sentence to find employment opportunities. However, there was insufficient joint working between support agencies to ensure that they met more prisoners' needs nearing release.

4.37 The employability course, run by The Manchester College, provided prisoners with a wide range of stimulating and effective activities to prepare them for employment on release. The

course had good links with Merseyside Connexions to develop jointly the interview skills of prisoners through mock interviews; these were evaluated effectively and provided prisoners with good feedback on how they could improve.

- 4.38** ROTL had improved and some good initiatives were developing through links with employers, but they were at an early stage of development (see paragraph 3.17).

Recommendation

- 4.39 Merseyside Connexions should work more closely with other agencies to ensure that they better meet the needs of all prisoners.**

Health care

- 4.40** Discharge arrangements were effective and prisoners were given information about relevant health services. There were good links with community mental health services. Building work on an end of life care suite had commenced and links with local palliative care services were very good.

Drugs and alcohol

- 4.41** A peer mentoring scheme carried out some excellent work on the recovery unit. The CRI recovery pathways team delivered a wide range of effective resettlement interventions and services, which were linked with CRI services at nearby HMP Thorn Cross and in the local community, as well as with other agencies. Specialist roles in the CRI team included: alcohol, crack and ecstasy (ACE) work, peer mentoring coordination, family support, housing and debt advice and employment, training and education referrals. An independent living worker and a bridging coordinator, who would deal with referrals, were both due to start work in the next few weeks.

Finance, benefit and debt

- 4.42** Shelter provided a debt advisor three days a week to take referrals from the trained peer workers, offender supervisors and prisoners themselves. On average, the advisor dealt with six debt cases each month. She also delivered training courses to small groups of prisoners, such as on housing rights advice and budgeting skills; 95 men had benefited in the previous six months. Benefits advice was available from Jobcentre Plus, and prisoners could apply to purchase a citizen's card (proof of identity). A service to open bank accounts prior to release had been temporarily suspended because of a change in provider.

Recommendation

- 4.43 Prisoners should be able to open bank accounts before their release date.**

Children, families and contact with the outside world

- 4.44** Management responsibility for this pathway was changing, and there was little evidence of a strategic lead staff member. In our survey, fewer prisoners than in the comparator said staff had helped them maintain contact with their family and friends. The prison did not routinely

monitor the distance of prisoners' homes from the prison or identify those who had been primary carers before imprisonment. There was no family support worker, no parenting course and no opportunity for general relationship counselling. Inter-prison visits by video link had not taken place since April 2013 and accumulated visits were rare.

- 4.45** However, the prison had engaged the Partners of Prisoners and Families Support Group (POPS) to run the visitors' centre and provide crèche and refreshment facilities in the visits hall. The group supported a quarterly family forum and ran children's visits every quarter for prisoners with school-aged children. They were not widely advertised, and demand seemed to have fallen over the last six months, since the frequency of these visits had been reduced. Family visits involving children were held regularly, but were not well advertised and were only available to prisoners on the enhanced regime. Prisoners on the recovery unit, and graduates from the Belief in Change programme (see paragraph 4.54) could also have special visits once every three months, but these were not restricted to prisoners with young children. Prisoners elsewhere in the prison who did not have young children, had no opportunity to have a more relaxed visit with their families. Prison visitors (ordinary members of the public who offer friendship and commitment to prisoners) were available.
- 4.46** The visitors' centre was too small, but POPS staff offered a warm and friendly welcome. We were told that the adjacent building would soon be refurbished to expand the space available. Some visitors arrived as early as 11.30am for a 2.30pm visit, which meant they waited a long time. For these visitors, visits generally started on time, and they could even purchase refreshments before the prisoners arrived. However, on busy days, some visitors would not get into the prison until 30 minutes or more after the start time.
- 4.47** Only visiting entitlements for enhanced regime prisoners met our expectation of a weekly visit for a minimum of an hour, but all prisoners understood their entitlements, which were more generous than we sometimes see, because most visits lasted at least 90 minutes. Prisoners booked their own visits. They were involved in a consultation about reducing the large number of visitors who failed to attend visits and the demand at weekends, which meant weekend visits had to be booked over a fortnight in advance.
- 4.48** The visits room was clean and well-decorated, with soft chairs positioned around low tables. Vulnerable prisoners had visits in the same room, but were separated from the main location population by a row of high tables. A pleasant and well-equipped crèche area was staffed on a daily basis. Some prisoners told us that when the visits room was full, it was too noisy. Visitors complained about waiting times, but were otherwise generally positive. A survey conducted in June 2013 mirrored our findings.
- 4.49** It was disproportionate that prisoners were required to wear coloured sashes in visits and that some prisoners were routinely strip- and squat-searched after visits (see paragraph 1.42). However, it was good that children under the age of three were not routinely searched.

Recommendation

- 4.50** **The visitors' centre should be large enough to accommodate all the visitors using it, and waiting times for visitors should be reduced. (Repeated recommendation 9.86)**

Housekeeping point

- 4.51** Prisoners should not be required to wear sashes during visits.

Attitudes, thinking and behaviour

- 4.52** An appropriate range of accredited offending behaviour courses was available, but in the past year staffing shortages had affected delivery. Waiting lists for thinking skills and anger management courses were manageable. Lists for most sex offender programmes were longer, but still shorter than we often see. However, there was a waiting list of several years for the intensive one-to-one Healthy Sexual Functioning course.
- 4.53** Lists were carefully managed to maximise harm reduction and prioritise post-tariff prisoners. If prisoners could not receive treatment before their release date, arrangements were made to deliver the course in the community during their licence period. There were no interventions for prisoners who were in some stage of denial of their offence.
- 4.54** A six-month faith informed programme Belief in Change was being piloted on Elton wing. Aimed at prolific offenders, it combined community living, life skills, personal coaching and elements of restorative practice to support prisoners' successful reintegration into the community and employment prospects. There had been 36 graduates since October 2012. To date, there was no hard outcome data, but prisoners and some staff said that the wing was now calmer and safer.

Recommendation

- 4.55 Adequate provision should be available for prisoners convicted of sexual offences to address their areas of risk without undue delay, and to work with those at some stage of denial. (To the National Offender Management Service)**

Additional resettlement services

- 4.56** A counselling service was available, but was heavily over-subscribed. Twenty men were on the waiting list and most had been waiting over six months. There was no specialist counselling to meet the needs of prisoners who had post traumatic stress disorder or for those who had been sexually abused.

Recommendation

- 4.57 Prisoners should have better access to counselling services.**

Section 5. Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report, and in the previous report where recommendations have been repeated.

Main recommendations

To the governor

- 5.1** The strategy to tackle antisocial behaviour should be based on improved investigations, focused on individual behaviour and have good management oversight. (S39)
- 5.2** Birchmoor Wing should be completely refurbished or replaced. (S40, repeated recommendation 2.6)
- 5.3** Staff on wings, including personal officers, should interact with prisoners so that they become more aware of their individual circumstances. They should use this knowledge to support work to reduce the risk of reoffending by encouraging prisoners to engage positively with the regime. (S41)
- 5.4** Senior managers should implement swiftly their plans to improve aspects of the prison regime to increase participation, attendance and punctuality in all activities. (S42)
- 5.5** The college should provide focused training and support to improve the quality of teaching and learning and share more effectively the good practice that some teachers use to provide stimulating, enjoyable and effective learning activities. (S43)
- 5.6** Services to help prisoners maintain or rebuild relationships with their children, partners and families should be further developed and include a qualified and experienced family support worker. (S44, repeated recommendation HP48)

Recommendations

Courts, escort and transfers

- 5.7** Prisoners should not be held in vans for excessive periods awaiting reception. (1.5)
- 5.8** Prisoners should be given sufficient notice of planned transfers to enable them to make a call to their family and/or legal advisor subject to well-evidenced security considerations. (To the National Offender Management Service (NOMS)) (1.6)

Early days in custody

- 5.9** All prisoners who do not speak English should receive adequate induction information in a language they understand. (1.19, repeated recommendation 1.18)
- 5.10** All prisoners should be able to have a shower on the day of their arrival irrespective of what time they arrive. (1.17)

Bullying and violence reduction

- 5.11** The analysis of the indicators of violence should be improved so that it identifies priorities and is used to inform a violence reduction strategy. (I.28)
- 5.12** Entries in TAB booklets should demonstrate meaningful interaction focusing on challenging antisocial behaviour, and prisoners should be upgraded as soon as behaviour improves. Management checks of booklets should challenge poor quality entries. (I.29)

Self-harm and suicide

- 5.13** All serious incidents of self-harm should be investigated to establish underlying reasons for them and ensure lessons are learned. (I.37)

Safeguarding

- 5.14** The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (I.40)

Security

- 5.15** Strip-searching of prisoners should only be conducted for well-evidenced security reasons. Decisions to squat-search must be supported by specific intelligence and recorded and monitored by the security committee. (I.49)
- 5.16** The establishment should ensure that the MDT programme is adequately resourced to undertake the required level of weekend and suspicion testing. (I.50)

Discipline

- 5.17** Whenever a prisoner is located in segregation, the exceptional circumstances to justify this should be clearly recorded in the ACCT document. (I.69)
- 5.18** The segregation unit environment should be improved and a better regime provided. (I.70)
- 5.19** Entries recording prisoners' behaviour in the segregation unit should show meaningful interaction focused on dealing with underlying behaviour. (I.71)
- 5.20** The Ravensmoor Unit should not be used as an overspill segregation unit. If it remains open, its function should be made explicit and a decent regime should be provided with a clear emphasis on progression. (I.72)

Substance misuse

- 5.21** The prisoner mix in the recovery unit on Culcheth Wing South should be addressed without delay to preserve the integrity of the programme and to give those interested in recovery the best possible chance of success. (I.78)
- 5.22** Discipline staff working on Culcheth Wing should be specifically selected for the role. (I.79)

Residential units

- 5.23** Effective wing inspections should identify damaged or missing fabric, furniture and telephones, which should be repaired or replaced. (2.14)
- 5.24** An efficient application process should be introduced and monitored. (2.15)
- 5.25** Prisoners should be able to access stored property within 48 hours of making an application. (2.16)
- 5.26** Prisoners should be able to obtain any relevant cleaning materials. (2.17)

Equality and diversity

- 5.27** The diversity policy should be based on a needs analysis of all protected characteristics and describe how the needs of each characteristic would be met. (2.29, repeated recommendation 4.7)
- 5.28** Monitoring for equality of treatment should be carried out across a range of diversity strands. (2.30, repeated recommendation 4.8)
- 5.29** SMART monitoring should include areas of local interest or concern. (2.31)
- 5.30** Senior managers should investigate and address the perceptions of victimisation identified in the survey by some groups of prisoners. (2.45)
- 5.31** Wing officers should use telephone interpreting services and other facilities consistently to enable them to communicate with foreign national prisoners. (2.46)
- 5.32** Prisoners should have access to regular independent immigration advice services. (2.47, repeated recommendation 4.28)
- 5.33** Technology such as Skype should be introduced to help foreign national prisoners stay in touch with family abroad. (2.48)

Complaints

- 5.34** The prison should explore prisoners' negative perceptions of the complaints process to increase confidence in the process. (2.58)

Legal rights

- 5.35** Prisoners should be able to see their legal representatives in private. (2.63, repeated recommendation 3.55)

Health services

- 5.36** There should be an up-to-date health needs assessment that addresses the increasing complexity of physical and mental health care needs in the prison population. (2.74)
- 5.37** The NHS commissioner, governor, and heads of service should agree on how to reduce the large number of prisoners not attending appointments. (2.75)

- 5.38** The partnership board should review the cause of delays when prisoners require hospital appointments to prevent unnecessary cancellations. (2.84)
- 5.39** The full range of pharmacy standards operating procedures should be ratified by the medicines management committee at the earliest opportunity. (2.91)
- 5.40** Pharmacist-led clinics/formal medicine use reviews should be implemented. (2.92)
- 5.41** The administration processes in the main treatment room should be revised to preserve prisoners' dignity and confidentiality. (2.93, repeated recommendation 5.31)
- 5.42** The medicines management committee should review the in-possession policy and the number of prisoners on tradable medication. (2.94)
- 5.43** The process of transporting and administering methadone should be revised. (2.95)
- 5.44** A full range of services for prisoners with moderate mental health needs should be available. (2.103)
- 5.45** Services for prisoners with learning disabilities should be developed to include a robust referral process to internal and community services. (2.104)

Catering

- 5.46** The serving of food should be effectively supervised by staff. (2.113)
- 5.47** Lunch and dinner should be served at normal meal times. (2.114)

Time out of cell

- 5.48** Most prisoners should be consistently unlocked for the advertised times during the core day. (3.4)
- 5.49** Prisoners should have at least one hour a day in the open air. (3.5, repeated recommendation 6.43)

Learning and skills and work activities

- 5.50** The prison should ensure that the learning and skills improvement strategy results in better quality provision and the use of the available activity places. (3.12)
- 5.51** The observation of teaching and learning process should be implemented across all learning activities in the prison and quality assurance processes should be applied to ensure outcomes give an accurate picture of the quality of teaching and learning. (3.13)
- 5.52** Work on centralising the allocation process should continue to ensure the system is efficient and equitable. (3.14)
- 5.53** More education staff should be deployed in workshops and industries to meet the literacy and numeracy needs of prisoners not attending education classes. (3.18)
- 5.54** Learning materials should be put into context so that prisoners understand the purpose of the activities and the relevance of the qualification to their future employment. (3.28)

- 5.55** The results of learners' initial assessment and prior learning should be entered on an individual learning plan and given to teachers at the start of courses so they can plan individual learning more effectively and set prisoners challenging improvement targets. (3.29)
- 5.56** The employability skills prisoners develop at work should be recorded. (3.30)
- 5.57** Qualifications up to level 3 should be available for prisoners who develop high skills levels. (3.31)
- 5.58** Extractor fans should be provided in the brick work and textile workshops and the breakfast packing workshop moved to an area that provides natural light. (3.32, repeated recommendations 6.15 and 6.21)
- 5.59** The Manchester College should provide data on how many learners achieve full qualifications. (3.38)
- 5.60** Prisoners should have weekly access to the library. (3.42)

Strategic management of resettlement

- 5.61** The RRDP should be complemented by a strategy document that sets out the services provided for different groups of prisoners and the role of the OMU in promoting successful resettlement. (4.7)

Offender management and planning

- 5.62** All prisoners sentenced to 12 months or more should have an up-to-date OASys assessment before they are transferred to Risley. (4.17, repeated recommendation 9.29) (To the deputy director of custody).
- 5.63** There should be routine management oversight of assessment and sentence planning in all high risk of harm cases or those involving child protection issues. (4.18)
- 5.64** There should be regular offender management meetings to monitor performance and set priorities. (4.19)
- 5.65** Prisoners should be informed when they are subject to telephone or mail monitoring, except in exceptional circumstances. (4.26)

Reintegration planning

- 5.66** Merseyside Connexions should work more closely with other agencies to ensure that they better meet the needs of all prisoners. (4.39)
- 5.67** Prisoners should be able to open bank accounts before their release date. (4.43)
- 5.68** The visitors' centre should be large enough to accommodate all the visitors using it, and waiting times for visitors should be reduced. (4.50, repeated recommendation 9.86)
- 5.69** Adequate provision should be available for prisoners convicted of sexual offences to address their areas of risk without undue delay, and to work with those at some stage of denial. (To NOMS) (4.55)
- 5.70** Prisoners should have better access to counselling services. (4.57)

Housekeeping points

Early days in custody

- 5.71** All prisoners should be able to have a shower on the day of their arrival irrespective of what time they arrive. (1.17)
- 5.72** A comprehensive induction programme should be developed in discussion with staff and prisoners, and the induction environment made fit for purpose. (1.18)
- 5.73** All prisoners who do not speak English should receive adequate induction information in a language they understand. (1.19)

Security

- 5.74** A log should be maintained of all intelligence-led cell searches and drug testing; it should be monitored for completion. (1.51)
- 5.75** Banned and closed visits should be reviewed at least every 28 days. (1.52)

Incentives and earned privileges

- 5.76** IEP monitoring data should include all the protected characteristics. (1.56)

Discipline

- 5.77** The adjudication holding room should be made less austere. (1.59)
- 5.78** Scrutiny of use of force paperwork and film footage should take place as soon as possible after incidents have occurred. (1.63)
- 5.79** The monitoring of adjudications, use of force and segregation should include all the protected characteristics. (1.73)

Residential units

- 5.80** Soap and hand drying facilities should be provided in all communal areas. (2.18)

Equality and diversity

- 5.81** The prison should introduce independent scrutiny of completed DIRFs. (2.32)

Complaints

- 5.82** Management checks of complaints should challenge lack of courtesy and incomplete responses. (2.59)

Health services

- 5.83** All registered nurses should be up to date with intermediate life support training. (2.76)
- 5.84** Health promotion information should be easily available in different languages. (2.77)

- 5.85** The medicines management committee meeting should be re-established on a regular basis. (2.96)
- 5.86** Medicine charts should only be signed when the administration has been completed and witnessed by the signatory. (2.97)
- 5.87** Mental health awareness training should be available for officers. (2.105)

Learning and skills and work activities

- 5.88** The number of computers in IT classrooms should be reviewed to ensure it meets needs. (3.19)
- 5.89** The decorative state of some classrooms should be improved and furniture that is in a poor state of repair replaced. (3.20)
- 5.90** The skills that peer mentors develop should be accredited. (3.33)
- 5.91** Accredited qualifications should be reinstated in the laundry. (3.34)

Strategic management of resettlement

- 5.92** Key population data should be regularly updated for consideration by the RRPC in order to inform ongoing needs assessments. (4.8)

Offender management and planning

- 5.93** All offender supervisors should use P-Nomis, the Prison Service IT system, to record prisoner casework activity. (4.20)
- 5.94** All prisoners returned to Risley from open conditions should have their security category formally reviewed once all the information is received from the sending prison. (4.29)

Reintegration planning

- 5.95** Records kept about discharge addresses should be accurate and comprehensive. (4.35)
- 5.96** Prisoners should not be required to wear sashes during visits. (4.51)

Examples of good practice

- 5.97** The prison made excellent use of the wellbeing mentor role, supported by the health improvement practitioner and physical activity instructor. (2.78)
- 5.98** There was a proactive nurse-led clinic, which supported the health needs of prisoners aged 50 and over. (2.85)
- 5.99** The nurse working with prisoners with learning disabilities was developing a care pathway and providing some very good individual care. This initiative was working well and being evaluated. (2.106)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief inspector
Sean Sullivan	Team leader
Rosemarie Bugdale	Inspector
Joss Crosbie	Inspector
Paul Fenning	Inspector
Jeanette Hall	Inspector
Hayley Cripps	Researcher
Annie Crowley	Researcher
Ewan Kennedy	Researcher

Specialist inspectors

Paul Roberts	Substance misuse inspector
Helen Carter	Health services inspector
Stephen Brandwood	Pharmacist
Kathleen Byrne	Care Quality Commission
Bryan Davies	Ofsted inspector
Marina Gaze	Ofsted inspector
Sheila Willis	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2011, appropriate reception and first night arrangements were backed up by good induction. Prisoners' perceptions of safety were much improved. Bullying was challenged through an anti-social behaviour scheme but better oversight was needed to ensure its fair operation. Assessment, care in custody and teamwork processes were mostly good. There was low use of segregation. Use of force was not high but not all incidents were necessary. Clinical management for substance users had improved with the introduction of the integrated drug treatment system and there had been a significant reduction in the availability of illicit drugs. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Senior managers should quality check all records of use of force to ensure that force is used only as a last resort, that its use is justified and lawful and that all prisoners involved are seen by a health care professional. (HP44)

Partially achieved

Recommendations

All prisoners who do not speak English should receive adequate induction information in a language they understand. (1.18)

Not achieved (now housekeeping point, 1.19)

Decisions to demote prisoners to basic under the tackling anti-social behaviour procedures should be supported by good quality thorough investigations. (3.17)

Not achieved

Anti-social behaviour procedures should focus more on challenging and altering poor behaviour and include individual targets for change. (3.18)

Not achieved

The role of R wing should be clarified to ensure that vulnerable prisoners held there receive appropriate support. (3.19)

Not achieved

Death in custody action plans should be reviewed periodically to ensure continued compliance with previous recommendations. (3.35)

Achieved

The number of prisoners who arrive at Risley shortly after an assessment, care in custody and teamwork document has been closed and without prior notification should be monitored. Concerns should be raised with the governor of sending prisons. (3.36)

Achieved

The use of gated cells and the segregation unit for prisoners on assessment, care in custody and teamwork documents should be closely monitored at the suicide and self-harm meeting. (3.37)

Achieved

Non-English speaking prisoners should have appropriate Listener support. (3.38)

Not achieved

Effective emergency response procedures, including sufficient first aid-trained staff, should operate at all times. (3.39)

Not achieved

Punishments involving forfeiture of privileges and exclusion from activities should not amount to cellular confinement by other means and should not exceed 21 days. (7.14)

Achieved

The regime for segregated prisoners should be improved to include daily showers and visits comparable to those of other prisoners. (7.34)

Achieved

All staff on the segregation unit should as a minimum be trained and regularly refreshed in race equality and diversity, suicide prevention, mental health awareness, motivational interviewing and control and restraint. (7.35)

Partially achieved

Joint working between the clinical integrated drug treatment system, counselling, assessment, referral, advice and throughcare and mental health teams should be further improved and formalised to facilitate the care coordination of prisoners with substance and mental health-related problems. (3.65)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2011, staff-prisoner relationships had improved but there was relatively little active engagement and personal officer work needed further development. The prison was very clean. The IEP scheme needed better governance to ensure fairness. Some of the diversity work was very recent and the perceptions of minority groups were less good than others in a range of areas. More support for foreign national prisoners was needed, particularly for those who did not speak or understand English well. Health services were generally good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Personal officers should interact regularly with their designated prisoners and get to know their individual circumstances. They should support them in maintaining family contact and meeting resettlement objectives and reflect this in regular good quality entries in wing files. (HP45)

Not achieved

An effective foreign national strategy should be developed with regular consultation with foreign national prisoners to ensure their specific needs are identified and met appropriately within the prison. (HP46)

Not achieved

Recommendations

BI and RI units should be completely refurbished or replaced. (2.6)

Not achieved (recommendation repeated, S40)

Cell alarm calls should be answered promptly. (2.7)

Partially achieved

Prisoners should have improved access to showers. (2.17)

Partially achieved

The incentives and earned privileges scheme should be reviewed in consultation with prisoners to ensure that prisoners on the basic regime have daily opportunities to shower, use the telephone and participate in a regime that allows them to demonstrate improvement. Managers should ensure that the scheme operates consistently and fairly across the prison. (7.47)

Achieved

Prisoners on basic regime should not be placed on an assessment, care in custody and teamwork document, or vice versa, without full consideration of their circumstances, which should be fully justified and recorded on both assessment, care in custody and teamwork and incentives and earned privileges records. (7.48)

Achieved

Efforts should be made to improve the quality of and satisfaction with the good, including through effective consultation with prisoners and minority groups. (8.7)

Achieved

Black and minority ethnic prisoners should be consulted separately about the range of goods stocked by the shop. (8.14)

Achieved

A diversity policy for prisoners should outline how the needs of all prisoners in each diversity strand will be identified and met. (4.7)

Not achieved (recommendation repeated, 2.29)

Monitoring for equality of treatment should be carried out across a range of diversity strands. (4.8)

Not achieved (recommendation repeated, 2.30)

There should be regular formal consultation with black and minority ethnic prisoners to discuss the perceptions of treatment. Issues arising should be discussed at the race equality action team, incorporated into the race equality action plan and used to determine additional areas requiring monitoring. (4.19)

Partially achieved

A database should be kept of all prisoners who do not speak English and professional interpreting services used to identify emerging issues and take appropriate action to address them. The personal officer policy should include guidance to this effect. (4.27)

Partially achieved

Prisoners should have access to regular independent immigration advice services. (4.28)

Not achieved (recommendation repeated, 2.47)

The prison should identify prisoners who may have additional support needs due to age or disability and such prisoners should have a routinely reviewed care plan and personal evacuation plan where appropriate. (4.35)

Partially achieved

Accommodation and wing facilities for prisoners with a disability or poor mobility should be improved. (4.36)

Not achieved

There should be appropriate consultation with prisoners with disabilities to help develop relevant services to meet their needs. (4.37)

Achieved

Appropriate support services such as access to external agencies should be provided for gay and bisexual prisoners after consultation with them to determine their needs. (4.41)

Not achieved

All complaints, particularly about staff, should be thoroughly investigated and receive a polite reply covering the issues raised and stating whether or not the complaint has been upheld and clearly explaining what action has been taken. (3.49)

Achieved

Prisoners should be able to see their legal representatives in private. (3.55)

Not achieved (recommendation repeated, 2.63)

Prisoners transferred between prisons should be accompanied by sufficient information to allow uninterrupted continuity of care and avoid missed appointments. (5.21) (To the deputy director of custody)

Achieved

The walls of the health centre consultation and treatment rooms should be soundproofed to ensure patient confidentiality. (5.5)

Achieved

A patient forum representative of the prison population should be established. (5.13)

Achieved

Triage protocols and algorithms should be introduced and nurses trained to use them. (5.22)

Achieved

Arrangements for collection of medications should ensure confidentiality. (5.31)

Not achieved (recommendation repeated, 2.93)

The formulary for prisoners reporting sick should be reviewed and extended with appropriate medication incorporated for additional symptoms, such as Loperamide for the treatment of diarrhoea. (5.32)

Achieved

A full surgery inspection should be carried out by/on behalf of the Warrington Primary Care Trust. (5.39)

No longer relevant

Staff working with prisoners should be trained to recognise and take appropriate action when a prisoner may have mental health problems and work effectively with health staff to ensure a prisoner's care. (5.47)

Partially achieved

Purposeful activity

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

At the last inspection, in 2011, Time out of cell was satisfactory for most prisoners who were in employment but poor for almost a quarter of the population. Prisoners had too little time in the open air and relatively short association times during the week. Education and training was of a good standard and the overall quality of work had improved. There was a satisfactory library service. PE provision was good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

More purposeful activity places should be provided so that all prisoners are fully occupied. (HP47)

Achieved

Recommendations

Prisoners should have at least one hour a day in the open air. (6.43)

Not achieved (recommendation repeated, 3.4)

Quality improvement processes should be fully implemented across all learning and skills provision and effective use made of available data to set programme management targets. (6.7)

Partially achieved

Only prisoners who are processed through the established allocation arrangements should be placed in purposeful activity. (6.8)

Partially achieved

Waiting lists should be reduced, particularly in education for level 1 programmes. (6.9)

Not achieved

Access to vocational training for sex offenders should be extended by offering more flexibly timetabled provision. (6.10)

Achieved

Adequate space and natural light should be introduced in the breakfast packing workshop. (6.15)

Not achieved (recommendation repeated, 3.32)

Appropriate information technology should be introduced to support vocational training. (6.20)

Achieved

Ventilation in the bricks and plastering workshop should be improved. (6.21)

Not achieved (recommendation repeated, 3.32)

Education equipment should be fit for purpose. (6.25)

Achieved

The library classroom should be used as a learning resource and library users should have access to computer-based reference and learning materials. (6.29)

Achieved

Adequate changing and shower facilities should be provided. (6.38)

Achieved

Resettlement

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

At the last inspection, in 2011, The reducing reoffending strategy covered all pathways, with regularly updated action plans. Offender management and sentence planning were of a good standard and prisoners were able to make progress through participation in appropriate programmes. Public protection arrangements were sound. Reintegration services were satisfactory. There were some good drug services but insufficient provision for men with alcohol problems. The children and families pathway needed further development. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Services to help prisoners maintain or rebuild relationships with their children, partners and families should be further developed and include a qualified and experienced family support worker. (HP48)

Not achieved (recommendation repeated, S44)

Recommendations

The reducing reoffending delivery plan should be based on a comprehensive analysis of needs using OASys data and outline how the needs of different groups of prisoners will be met. (9.9)

Partially achieved

The deputy director for custody should impress on the local prisons sending prisoners to Risley the need to ensure that all prisoners arrive with an up-to-date OASys assessment. (9.29).

Not achieved (recommendation repeated, 4.17)

Prison officer offender supervisors should not be redeployed from the offender management unit. (9.30)

Not achieved

Sentence plans should include objectives to address child protection concerns in all relevant cases and targets should include planned levels of contact. (9.31)

Achieved

A structured assessment of potential diversity issues, such as learning needs and learning styles, or of discriminatory and disadvantaging factors and other individual needs should be carried out and held on file in all relevant cases. (9.32)

Achieved

Comprehensive risk management plans, supported by detailed risk analysis, should be completed for all prisoners assessed as medium, high and very high risk of harm to others and should accurately describe how the objectives of the sentence plan and other activities address the risk of harm to others and protect actual and potential victims. (9.44)

Achieved

Regular events designed specifically for lifer and IPP prisoners should be held. (9.51)

Not achieved

Pre-release arrangements should include appropriate, including money management and job search support backed up by effective CIAS advice. (9.60)

Partially achieved

The remit of the CARAT service should include ongoing work with primary problem alcohol users. (9.75)

Achieved

The visitors' centre should be large enough to accommodate all the visitors using it. (9.86)

Not achieved (recommendation repeated, 4.50)

The prison should ensure that the route from the visitors' car park to the visitors' centre is safe, particularly for young children. (9.87)

Not achieved

The visits booking system should be easily accessible. (9.88)

Achieved

Regular family days should be held. (9.89)

Achieved

Appendix III: Prison population profile

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

Status	18–20 yr olds	21 and over	%
Sentenced		1027	93.5
Recall		66	6.0
Convicted unsentenced			
Remand			
Other		4	0.4
Civil prisoners			
Detainees		1	0.1
Total		1098	100

Sentence	18–20 yr olds	21 and over	%
Unsentenced			
Less than 6 months		25	2.3
6 months to less than 12 months		23	2.1
12 months to less than 2 years		105	9.6
2 years to less than 4 years		248	22.6
4 years to less than 10 years		466	42.4
10 years and over (not life)		53	4.8
ISPP		120	10.9
Life		58	5.3
Total		1098	100

Age	Number of prisoners	%
Please state minimum age	21	
Under 21 years		
21 years to 29 years	444	40.4
30 years to 39 years	312	28.4
40 years to 49 years	209	19.0
50 years to 59 years	78	7.1
60 years to 69 years	41	3.7
70 plus years	14	1.3
Please state maximum age	76	
Total	1098	100

Nationality	18–20 yr olds	21 and over	%
British		920	83.8
Foreign nationals		178	16.2
Not stated			
Total		1098	100

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced		4	0.4
Uncategorised sentenced		1	0.1
Cat A			
Cat B			
Cat C		1059	96.4
Cat D		29	2.6
Unclassified		3	0.3
Closed YOI		1	0.1
Other Open YOI		1	0.1
Total		1098	100

Ethnicity	18–20 yr olds	21 and over	%
White			
British		828	75.4
Irish		7	0.6
Other White		66	6.0
Mixed			
White and Black Caribbean		12	1.1
White and Black African		2	0.2
White and Asian		4	0.4
Other mixed		8	0.7
Asian or Asian British			
Indian		18	1.6
Pakistani		40	3.6
Bangladeshi		9	0.8
Other Asian		24	2.2
Black or Black British			
Caribbean		29	2.6
African		18	1.6
Other Black		15	1.4
Chinese or other ethnic group			
Chinese		2	0.2
Arab		1	0.1
Other ethnic group		11	1.1
Not stated		4	0.4
Total		1098	100

Religion	18–20 yr olds	21 and over	%
Baptist		2	0.2

Church of England		271	24.7
Roman Catholic		295	26.9
Other Christian denominations		66	6.0
Muslim		114	10.4
Sikh		6	0.5
Hindu		3	0.3
Buddhist		25	2.3
Jewish		3	0.3
Other		14	1.3
Not stated		3	0.3
No religion		296	27.0
Total		1098	100

Other demographics	18–20 yr olds	21 and over	%
Gypsy/Romany/Traveller		2	0.2
Total		2	0.2

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)		8	0.7
Total		8	0.7

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month			139	12.7
1 month to 3 months			210	19.1
3 months to 6 months			205	18.7
6 months to 1 year			265	24.1
1 year to 2 years			182	16.6
2 years to 4 years			67	6.1
4 years or more			30	2.7
Total			1098	100

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry			
Public protection cases		114	10.4
Total		114	10.4

Main offence	18–20 yr olds	21 and over	%
Violence against the person		187	17.0
Sexual offences		69	6.3
Burglary		108	9.8
Robbery		160	14.6
Theft and handling		43	3.9
Fraud and forgery		5	0.5
Drugs offences		115	10.5
Other offences		104	9.5
Civil offences			
Offence not recorded/holding warrant		307	28.0
Total		1098	100

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

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

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 8 July 2013 the prisoner population at HMP Risley was 1081. Using the method described above, questionnaires were distributed to a sample of 216 prisoners.

We received a total of 197 completed questionnaires, a response rate of 91%. This included one questionnaire completed via interview. Seven respondents refused to complete a questionnaire, nine questionnaires were not returned and three were returned blank.

Wing/Unit	Number of completed survey returns
A	33
B	14
C	36
D	35
E	33
F	6

G	37
Segregation Unit	1
Ravenscroft	2

Presentation of survey results and analyses

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

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

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

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Risley in 2013 compared with responses from prisoners surveyed in all other category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 39 category C trainer prisons since April 2008.
- The current survey responses from HMP Risley in 2013 compared with the responses of prisoners surveyed at HMP Risley in 2011.
- A comparison within the 2013 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2013 survey between those who are British and those who are foreign nationals.
- A comparison within the 2013 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2013 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2013 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2013 survey between those who reside on the vulnerable prisoner wings those that reside on the main residential wings.

Survey summary

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 everyone across all areas of prison life. Your responses to these questions will remain both anonymous and confidential.

Q1.1 What wing or houseblock are you currently living on?

See shortened methodology.

Q1.2 How old are you?

<i>Under 21</i>	0 (0%)
<i>21 - 29</i>	71 (37%)
<i>30 - 39</i>	51 (26%)
<i>40 - 49</i>	44 (23%)
<i>50 - 59</i>	13 (7%)
<i>60 - 69</i>	13 (7%)
<i>70 and over</i>	2 (1%)

Q1.3 Are you sentenced?

<i>Yes</i>	173 (91%)
<i>Yes - on recall</i>	16 (8%)
<i>No - awaiting trial</i>	0 (0%)
<i>No - awaiting sentence</i>	0 (0%)
<i>No - awaiting deportation</i>	2 (1%)

Q1.4 How long is your sentence?

<i>Not sentenced</i>	2 (1%)
<i>Less than 6 months</i>	5 (3%)
<i>6 months to less than 1 year</i>	9 (5%)
<i>1 year to less than 2 years</i>	10 (5%)
<i>2 years to less than 4 years</i>	49 (25%)
<i>4 years to less than 10 years</i>	75 (39%)
<i>10 years or more</i>	6 (3%)
<i>IPP (indeterminate sentence for public protection)</i>	26 (13%)
<i>Life</i>	11 (6%)

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

<i>Yes</i>	29 (15%)
<i>No</i>	163 (85%)

Q1.6 Do you understand spoken English?

<i>Yes</i>	186 (96%)
<i>No</i>	7 (4%)

Q1.7	Do you understand written English?		
	Yes	180 (93%)	
	No	14 (7%)	
Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	143 (73%)	<i>Asian or Asian British - Chinese</i> 1 (1%)
	<i>White - Irish</i>	1 (1%)	<i>Asian or Asian British - other</i> 0 (0%)
	<i>White - other</i>	13 (7%)	<i>Mixed race - white and black Caribbean</i> 4 (2%)
	<i>Black or black British - Caribbean</i>	4 (2%)	<i>Mixed race - white and black African</i> 2 (1%)
	<i>Black or black British - African ..</i>	4 (2%)	<i>Mixed race - white and Asian ...</i> 0 (0%)
	<i>Black or black British - other</i>	1 (1%)	<i>Mixed race - other</i> 0 (0%)
	<i>Asian or Asian British - Indian ...</i>	3 (2%)	<i>Arab</i> 1 (1%)
	<i>Asian or Asian British - Pakistani</i>	10 (5%)	<i>Other ethnic group</i> 6 (3%)
	<i>Asian or Asian British - Bangladeshi</i>	3 (2%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes	6 (3%)	
	No	183 (97%)	
Q1.10	What is your religion?		
	<i>None</i>	49 (26%)	<i>Hindu</i> 0 (0%)
	<i>Church of England</i>	65 (34%)	<i>Jewish</i> 0 (0%)
	<i>Catholic</i>	39 (20%)	<i>Muslim</i> 19 (10%)
	<i>Protestant</i>	6 (3%)	<i>Sikh</i> 2 (1%)
	<i>Other Christian denomination .</i>	3 (2%)	<i>Other</i> 5 (3%)
	<i>Buddhist</i>	4 (2%)	
Q1.11	How would you describe your sexual orientation?		
	<i>Heterosexual/ Straight</i>	182 (95%)	
	<i>Homosexual/Gay</i>	2 (1%)	
	<i>Bisexual</i>	7 (4%)	
Q1.12	Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs)		
	Yes	34 (18%)	
	No	157 (82%)	
Q1.13	Are you a veteran (ex- armed services)?		
	Yes	7 (4%)	
	No	186 (96%)	
Q1.14	Is this your first time in prison?		
	Yes	74 (38%)	
	No	119 (62%)	

Q1.15	Do you have children under the age of 18?	
	Yes	93 (48%)
	No	99 (52%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?	
	<i>Less than 2 hours</i>	127 (65%)
	<i>2 hours or longer</i>	56 (29%)
	<i>Don't remember</i>	13 (7%)
Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	127 (66%)
	Yes	41 (21%)
	No	18 (9%)
	<i>Don't remember</i>	7 (4%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	127 (66%)
	Yes	3 (2%)
	No	59 (31%)
	<i>Don't remember</i>	3 (2%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	118 (62%)
	No	62 (33%)
	<i>Don't remember</i>	10 (5%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	164 (85%)
	No	26 (14%)
	<i>Don't remember</i>	2 (1%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	53 (27%)
	<i>Well</i>	87 (45%)
	<i>Neither</i>	39 (20%)
	<i>Badly</i>	9 (5%)
	<i>Very badly</i>	5 (3%)
	<i>Don't remember</i>	2 (1%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (please tick all that apply to you.)	
	<i>Yes, someone told me</i>	113 (59%)
	<i>Yes, I received written information</i>	9 (5%)
	<i>No, I was not told anything</i>	68 (35%)
	<i>Don't remember</i>	3 (2%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	172 (90%)
	No	15 (8%)
	<i>Don't remember</i>	5 (3%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?		
	<i>Less than 2 hours</i>		50 (26%)
	<i>2 hours or longer</i>		133 (69%)
	<i>Don't remember</i>		9 (5%)
Q3.2	When you were searched, was this carried out in a respectful way?		
	<i>Yes</i>		167 (87%)
	<i>No</i>		19 (10%)
	<i>Don't remember</i>		7 (4%)
Q3.3	Overall, how were you treated in reception?		
	<i>Very well</i>		39 (20%)
	<i>Well</i>		97 (50%)
	<i>Neither</i>		38 (19%)
	<i>Badly</i>		13 (7%)
	<i>Very badly</i>		3 (2%)
	<i>Don't remember</i>		5 (3%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)		
	<i>Loss of property</i>	28 (15%)	<i>Physical health</i>
	<i>Housing problems</i>	16 (9%)	<i>Mental health</i>
	<i>Contacting employers</i>	3 (2%)	<i>Needing protection from other prisoners</i>
	<i>Contacting family</i>	34 (18%)	<i>Getting phone numbers</i>
	<i>Childcare</i>	1 (1%)	<i>Other</i>
	<i>Money worries</i>	32 (17%)	<i>Did not have any problems</i>
	<i>Feeling depressed or suicidal</i> .	25 (13%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	<i>Yes</i>		34 (18%)
	<i>No</i>		68 (37%)
	<i>Did not have any problems</i>		84 (45%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	<i>Tobacco</i>		157 (81%)
	<i>A shower</i>		24 (12%)
	<i>A free telephone call</i>		81 (42%)
	<i>Something to eat</i>		108 (56%)
	<i>PIN phone credit</i>		117 (60%)
	<i>Toiletries/ basic items</i>		64 (33%)
	<i>Did not receive anything</i>		9 (5%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)		
	<i>Chaplain</i>		94 (50%)
	<i>Someone from health services</i>		131 (70%)
	<i>A Listener/Samaritans</i>		52 (28%)

<i>Prison shop/ canteen.....</i>	28 (15%)
<i>Did not have access to any of these.....</i>	32 (17%)

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

<i>What was going to happen to you.....</i>	81 (43%)
<i>What support was available for people feeling depressed or suicidal.....</i>	60 (32%)
<i>How to make routine requests (applications).....</i>	87 (46%)
<i>Your entitlement to visits.....</i>	75 (40%)
<i>Health services</i>	89 (47%)
<i>Chaplaincy</i>	87 (46%)
<i>Not offered any information.....</i>	55 (29%)

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

<i>Yes.....</i>	161 (83%)
<i>No.....</i>	22 (11%)
<i>Don't remember.....</i>	10 (5%)

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

<i>Have not been on an induction course.....</i>	33 (17%)
<i>Within the first week</i>	88 (46%)
<i>More than a week</i>	59 (31%)
<i>Don't remember.....</i>	11 (6%)

Q3.11 Did the induction course cover everything you needed to know about the prison?

<i>Have not been on an induction course.....</i>	33 (17%)
<i>Yes.....</i>	85 (45%)
<i>No.....</i>	56 (29%)
<i>Don't remember.....</i>	17 (9%)

Q3.12 How soon after you arrived here did you receive an education ('skills for life') assessment?

<i>Did not receive an assessment.....</i>	52 (28%)
<i>Within the first week</i>	37 (20%)
<i>More than a week</i>	68 (37%)
<i>Don't remember.....</i>	27 (15%)

Section 4: Legal rights and respectful custody

Q4.1 How easy is it to.....

	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>N/A</i>
<i>Communicate with your solicitor or legal representative?</i>	21 (12%)	55 (30%)	22 (12%)	36 (20%)	33 (18%)	15 (8%)
<i>Attend legal visits?</i>	22 (14%)	64 (41%)	22 (14%)	17 (11%)	10 (6%)	23 (15%)
<i>Get bail information?</i>	5 (3%)	12 (8%)	16 (11%)	22 (15%)	20 (14%)	68 (48%)

Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?			
	<i>Not had any letters</i>			31 (17%)
	<i>Yes</i>			81 (43%)
	<i>No</i>			75 (40%)
Q4.3	Can you get legal books in the library?			
	<i>Yes</i>			83 (45%)
	<i>No</i>			9 (5%)
	<i>Don't know</i>			94 (51%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:			
		Yes	No	Don't know
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	121 (65%)	61 (33%)	4 (2%)
	<i>Are you normally able to have a shower every day?</i>	166 (89%)	20 (11%)	0 (0%)
	<i>Do you normally receive clean sheets every week?</i>	158 (86%)	22 (12%)	3 (2%)
	<i>Do you normally get cell cleaning materials every week?</i>	105 (57%)	76 (41%)	3 (2%)
	<i>Is your cell call bell normally answered within five minutes?</i>	49 (26%)	110 (59%)	27 (15%)
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	123 (66%)	60 (32%)	2 (1%)
	<i>If you need to, can you normally get your stored property?</i>	26 (14%)	112 (61%)	46 (25%)
Q4.5	What is the food like here?			
	<i>Very good</i>			6 (3%)
	<i>Good</i>			30 (16%)
	<i>Neither</i>			45 (23%)
	<i>Bad</i>			62 (32%)
	<i>Very bad</i>			49 (26%)
Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?			
	<i>Have not bought anything yet/ don't know</i>			2 (1%)
	<i>Yes</i>			98 (51%)
	<i>No</i>			91 (48%)
Q4.7	Can you speak to a Listener at any time, if you want to?			
	<i>Yes</i>			107 (56%)
	<i>No</i>			12 (6%)
	<i>Don't know</i>			72 (38%)
Q4.8	Are your religious beliefs respected?			
	<i>Yes</i>			106 (56%)
	<i>No</i>			18 (10%)
	<i>Don't know/ N/A</i>			65 (34%)

Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	102 (54%)
	No	13 (7%)
	Don't know/ N/A.....	73 (39%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	48 (25%)
	<i>Very easy</i>	32 (17%)
	<i>Easy</i>	44 (23%)
	<i>Neither</i>	11 (6%)
	<i>Difficult</i>	6 (3%)
	<i>Very difficult</i>	6 (3%)
	<i>Don't know</i>	46 (24%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?			
	Yes	149 (79%)		
	No	32 (17%)		
	Don't know.....	8 (4%)		
Q5.2	Please answer the following questions about applications (<i>If you have not made an application please tick the 'not made one' option.</i>)			
		Not made one		
		Yes		
		No		
	Are <i>applications</i> dealt with fairly?	11 (6%)	81 (47%)	82 (47%)
	Are <i>applications</i> dealt with quickly (within seven days)?	11 (6%)	43 (25%)	116 (68%)
Q5.3	Is it easy to make a complaint?			
	Yes	96 (52%)		
	No	36 (19%)		
	Don't know.....	53 (29%)		
Q5.4	Please answer the following questions about complaints (<i>If you have not made a complaint please tick the 'not made one' option.</i>)			
		Not made one	Yes	No
	Are <i>complaints</i> dealt with fairly?	88 (50%)	26 (15%)	63 (36%)
	Are <i>complaints</i> dealt with quickly (within seven days)?	88 (51%)	17 (10%)	69 (40%)
Q5.5	Have you ever been prevented from making a complaint when you wanted to?			
	Yes	29 (17%)		
	No	142 (83%)		
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?			
	<i>Don't know who they are</i>	57 (31%)		
	<i>Very easy</i>	11 (6%)		
	<i>Easy</i>	29 (16%)		
	<i>Neither</i>	48 (27%)		
	<i>Difficult</i>	26 (14%)		
	<i>Very difficult</i>	10 (6%)		

Section 6: Incentive and earned privileges scheme

- Q6.1 Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels)**
- | | |
|--|-----------|
| <i>Don't know what the IEP scheme is</i> | 15 (8%) |
| Yes | 105 (56%) |
| No | 45 (24%) |
| <i>Don't know</i> | 23 (12%) |
- Q6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)**
- | | |
|--|----------|
| <i>Don't know what the IEP scheme is</i> | 15 (8%) |
| Yes | 92 (50%) |
| No..... | 55 (30%) |
| <i>Don't know</i> | 21 (11%) |
- Q6.3 In the last six months have any members of staff physically restrained you (C&R)?**
- | | |
|-----------|-----------|
| Yes | 6 (3%) |
| No..... | 182 (97%) |
- Q6.4 If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?**
- | | |
|--|-----------|
| <i>I have not been to segregation in the last 6 months</i> | 156 (87%) |
| <i>Very well</i> | 1 (1%) |
| <i>Well</i> | 7 (4%) |
| <i>Neither</i> | 9 (5%) |
| <i>Badly</i> | 2 (1%) |
| <i>Very badly</i> | 4 (2%) |

Section 7: Relationships with staff

- Q7.1 Do most staff treat you with respect?**
- | | |
|-----------|-----------|
| Yes | 140 (76%) |
| No..... | 45 (24%) |
- Q7.2 Is there a member of staff you can turn to for help if you have a problem?**
- | | |
|----------|-----------|
| Yes..... | 136 (75%) |
| No..... | 46 (25%) |
- Q7.3 Has a member of staff checked on you personally in the last week to see how you are getting on?**
- | | |
|-----------|-----------|
| Yes | 37 (20%) |
| No..... | 148 (80%) |
- Q7.4 How often do staff normally speak to you during association?**
- | | |
|---------------------------------------|----------|
| <i>Do not go on association</i> | 6 (3%) |
| <i>Never</i> | 42 (23%) |
| <i>Rarely</i> | 64 (34%) |
| <i>Some of the time</i> | 44 (24%) |
| <i>Most of the time</i> | 19 (10%) |
| <i>All of the time</i> | 11 (6%) |

Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	69 (38%)
	<i>In the first week</i>	47 (26%)
	<i>More than a week</i>	53 (29%)
	<i>Don't remember</i>	15 (8%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	69 (38%)
	<i>Very helpful</i>	29 (16%)
	<i>Helpful</i>	32 (18%)
	<i>Neither</i>	26 (14%)
	<i>Not very helpful</i>	13 (7%)
	<i>Not at all helpful</i>	11 (6%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	<i>Yes</i>	52 (28%)
	<i>No</i>	132 (72%)
Q8.2	Do you feel unsafe now?	
	<i>Yes</i>	22 (12%)
	<i>No</i>	157 (88%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	<i>Never felt unsafe</i>	132 (76%)
	<i>Everywhere</i>	9 (5%)
	<i>Segregation unit</i>	3 (2%)
	<i>Association areas</i>	11 (6%)
	<i>Reception area</i>	7 (4%)
	<i>At the gym</i>	5 (3%)
	<i>In an exercise yard</i>	8 (5%)
	<i>At work</i>	10 (6%)
	<i>During movement</i>	19 (11%)
	<i>At education</i>	9 (5%)
	<i>At meal times</i>	3 (2%)
	<i>At health services</i>	12 (7%)
	<i>Visits area</i>	7 (4%)
	<i>In wing showers</i>	8 (5%)
	<i>In gym showers</i>	1 (1%)
	<i>In corridors/stairwells</i>	5 (3%)
	<i>On your landing/wing</i>	8 (5%)
	<i>In your cell</i>	4 (2%)
	<i>At religious services</i>	5 (3%)
Q8.4	Have you been victimised by other prisoners here?	
	<i>Yes</i>	49 (27%)
	<i>No</i>	135 (73%)
Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	24 (13%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	8 (4%)
	<i>Sexual abuse</i>	4 (2%)
	<i>Feeling threatened or intimidated</i>	31 (17%)
	<i>Having your canteen/property taken</i>	3 (2%)
	<i>Medication</i>	7 (4%)
	<i>Debt</i>	1 (1%)
	<i>Drugs</i>	1 (1%)
	<i>Your race or ethnic origin</i>	5 (3%)
	<i>Your religion/religious beliefs</i>	3 (2%)

<i>Your nationality</i>	2 (1%)
<i>You are from a different part of the country than others</i>	3 (2%)
<i>You are from a traveller community</i>	0 (0%)
<i>Your sexual orientation</i>	2 (1%)
<i>Your age</i>	5 (3%)
<i>You have a disability</i>	5 (3%)
<i>You were new here</i>	1 (1%)
<i>Your offence/ crime</i>	16 (9%)
<i>Gang related issues</i>	8 (4%)

Q8.6 Have you been victimised by staff here?

Yes	60 (33%)
No.....	122 (67%)

Q8.7 If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)

<i>Insulting remarks (about you or your family or friends)</i>	26 (14%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	4 (2%)
<i>Sexual abuse</i>	1 (1%)
<i>Feeling threatened or intimidated</i>	26 (14%)
<i>Medication</i>	5 (3%)
<i>Debt</i>	1 (1%)
<i>Drugs</i>	3 (2%)
<i>Your race or ethnic origin</i>	7 (4%)
<i>Your religion/religious beliefs</i>	3 (2%)
<i>Your nationality</i>	3 (2%)
<i>You are from a different part of the country than others</i>	3 (2%)
<i>You are from a traveller community</i>	0 (0%)
<i>Your sexual orientation</i>	0 (0%)
<i>Your age</i>	1 (1%)
<i>You have a disability</i>	7 (4%)
<i>You were new here</i>	3 (2%)
<i>Your offence/ crime</i>	12 (6%)
<i>Gang related issues</i>	5 (3%)

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

<i>Not been victimised</i>	111 (67%)
Yes	22 (13%)
No.....	33 (20%)

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

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
The doctor	19 (10%)	6 (3%)	41 (23%)	22 (12%)	67 (37%)	27 (15%)
The nurse	19 (11%)	13 (7%)	64 (36%)	31 (17%)	36 (20%)	15 (8%)
The dentist	17 (9%)	5 (3%)	19 (11%)	17 (9%)	44 (24%)	78 (43%)

Q9.2	What do you think of the quality of the health service from the following people?					
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>
		<i>Very bad</i>				
	The doctor	30 (16%)	20 (11%)	68 (37%)	21 (11%)	27 (15%)
	The nurse	32 (18%)	21 (12%)	60 (33%)	23 (13%)	32 (18%)
	The dentist	49 (27%)	17 (9%)	42 (23%)	19 (11%)	27 (15%)
		25 (14%)				
Q9.3	What do you think of the overall quality of the health services here?					
	<i>Not been</i>					19 (10%)
	<i>Very good</i>					16 (9%)
	<i>Good</i>					56 (30%)
	<i>Neither</i>					37 (20%)
	<i>Bad</i>					31 (17%)
	<i>Very bad</i>					26 (14%)
Q9.4	Are you currently taking medication?					
	Yes					100 (54%)
	No					84 (46%)
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?					
	<i>Not taking medication</i>					84 (46%)
	<i>Yes, all my meds</i>					76 (41%)
	<i>Yes, some of my meds</i>					12 (7%)
	<i>No</i>					12 (7%)
Q9.6	Do you have any emotional or mental health problems?					
	Yes					53 (29%)
	No					129 (71%)
Q9.7	Are your being helped/ supported by anyone in this prison? (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff.)					
	<i>Do not have any emotional or mental health problems</i>					129 (71%)
	Yes					24 (13%)
	No					28 (15%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?		
	Yes		39 (21%)
	No		143 (79%)
Q10.2	Did you have a problem with alcohol when you came into this prison?		
	Yes		26 (14%)
	No		157 (86%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?		
	<i>Very easy</i>		24 (13%)
	<i>Easy</i>		25 (14%)
	<i>Neither</i>		15 (8%)
	<i>Difficult</i>		8 (4%)
	<i>Very difficult</i>		8 (4%)

	<i>Don't know</i>	101 (56%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	<i>Very easy</i>	20 (11%)
	<i>Easy</i>	18 (10%)
	<i>Neither</i>	12 (7%)
	<i>Difficult</i>	14 (8%)
	<i>Very difficult</i>	17 (9%)
	<i>Don't know</i>	101 (55%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	<i>Yes</i>	5 (3%)
	<i>No</i>	176 (97%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	<i>Yes</i>	9 (5%)
	<i>No</i>	169 (95%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	136 (76%)
	<i>Yes</i>	30 (17%)
	<i>No</i>	13 (7%)
Q10.8	Have you received any support or help (for example substance misuse teams for your alcohol problem, whilst in this prison?	
	<i>Did not / do not have an alcohol problem</i>	157 (86%)
	<i>Yes</i>	12 (7%)
	<i>No</i>	13 (7%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	144 (80%)
	<i>Yes</i>	31 (17%)
	<i>No</i>	5 (3%)

Section 11: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?					
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>
						<i>Very difficult</i>
	Prison job	15 (8%)	18 (10%)	37 (21%)	31 (18%)	52 (29%)
	Vocational or skills training	32 (19%)	13 (8%)	35 (21%)	30 (18%)	38 (22%)
	Education (including basic skills)	19 (11%)	21 (13%)	64 (38%)	27 (16%)	19 (11%)
	Offending behaviour programmes	44 (26%)	8 (5%)	19 (11%)	18 (11%)	41 (24%)

- Q11.2 Are you currently involved in the following? (Please tick all that apply to you.)**
- | | |
|---|-----------|
| <i>Not involved in any of these</i> | 23 (13%) |
| Prison job | 108 (62%) |
| Vocational or skills training | 19 (11%) |
| Education (including basic skills) | 50 (29%) |
| Offending behaviour programmes | 16 (9%) |
- Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?**
- | | <i>Not been involved</i> | Yes | No | <i>Don't know</i> |
|------------------------------------|--------------------------|----------|----------|-------------------|
| Prison job | 24 (16%) | 57 (37%) | 57 (37%) | 16 (10%) |
| Vocational or skills training | 35 (26%) | 59 (44%) | 26 (20%) | 13 (10%) |
| Education (including basic skills) | 29 (21%) | 66 (48%) | 28 (20%) | 14 (10%) |
| Offending behaviour programmes | 44 (32%) | 51 (38%) | 32 (24%) | 9 (7%) |
- Q11.4 How often do you usually go to the library?**
- | | |
|------------------------------------|----------|
| <i>Don't want to go</i> | 28 (15%) |
| <i>Never</i> | 33 (18%) |
| <i>Less than once a week</i> | 55 (30%) |
| <i>About once a week</i> | 55 (30%) |
| <i>More than once a week</i> | 11 (6%) |
- Q11.5 Does the library have a wide enough range of materials to meet your needs?**
- | | |
|---------------------------|----------|
| <i>Don't use it</i> | 41 (23%) |
| Yes | 85 (48%) |
| No | 52 (29%) |
- Q11.6 How many times do you usually go to the gym each week?**
- | | |
|-------------------------------|----------|
| <i>Don't want to go</i> | 44 (24%) |
| 0 | 51 (28%) |
| 1 to 2 | 30 (16%) |
| 3 to 5 | 57 (31%) |
| <i>More than 5</i> | 1 (1%) |
- Q11.7 How many times do you usually go outside for exercise each week?**
- | | |
|-------------------------------|----------|
| <i>Don't want to go</i> | 18 (10%) |
| 0 | 16 (9%) |
| 1 to 2 | 51 (28%) |
| 3 to 5 | 51 (28%) |
| <i>More than 5</i> | 46 (25%) |
- Q11.8 How many times do you usually have association each week?**
- | | |
|-------------------------------|-----------|
| <i>Don't want to go</i> | 6 (3%) |
| 0 | 6 (3%) |
| 1 to 2 | 5 (3%) |
| 3 to 5 | 21 (11%) |
| <i>More than 5</i> | 146 (79%) |

Q11.9	How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc)	
	<i>Less than 2 hours</i>	35 (19%)
	<i>2 to less than 4 hours</i>	26 (14%)
	<i>4 to less than 6 hours</i>	29 (16%)
	<i>6 to less than 8 hours</i>	43 (23%)
	<i>8 to less than 10 hours</i>	15 (8%)
	<i>10 hours or more</i>	28 (15%)
	<i>Don't know</i>	7 (4%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	54 (30%)
	<i>No</i>	126 (70%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	94 (52%)
	<i>No</i>	88 (48%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	70 (38%)
	<i>No</i>	115 (62%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	44 (24%)
	<i>Very easy</i>	12 (6%)
	<i>Easy</i>	41 (22%)
	<i>Neither</i>	18 (10%)
	<i>Difficult</i>	28 (15%)
	<i>Very difficult</i>	38 (21%)
	<i>Don't know</i>	4 (2%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	2 (1%)
	<i>Yes</i>	144 (80%)
	<i>No</i>	33 (18%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (please tick all that apply)	
	<i>Not sentenced/ NA</i>	35 (19%)
	<i>No contact</i>	43 (24%)
	<i>Letter</i>	60 (33%)
	<i>Phone</i>	31 (17%)
	<i>Visit</i>	60 (33%)

Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	139 (80%)
	No	35 (20%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	2 (1%)
	Yes	128 (72%)
	No	48 (27%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	50 (28%)
	<i>Very involved</i>	25 (14%)
	<i>Involved</i>	35 (20%)
	<i>Neither</i>	17 (10%)
	<i>Not very involved</i>	21 (12%)
	<i>Not at all involved</i>	28 (16%)
Q13.6	Who is working with you to achieve your sentence plan targets? (please tick all that apply to you.)	
	<i>Do not have a sentence plan/ not sentenced</i>	50 (28%)
	<i>Nobody</i>	58 (33%)
	<i>Offender supervisor</i>	51 (29%)
	<i>Offender manager</i>	38 (22%)
	<i>Named/ personal officer</i>	11 (6%)
	<i>Staff from other departments</i>	18 (10%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	50 (29%)
	Yes	75 (43%)
	No	27 (16%)
	<i>Don't know</i>	21 (12%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	50 (28%)
	Yes	24 (14%)
	No	76 (43%)
	<i>Don't know</i>	26 (15%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	50 (28%)
	Yes	34 (19%)
	No	51 (29%)
	<i>Don't know</i>	42 (24%)
Q13.10	Do you have a needs based custody plan?	
	Yes	11 (6%)
	No	80 (46%)
	<i>Don't know</i>	84 (48%)

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

Yes 23 (13%)
 No 156 (87%)

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

	<i>Do not need help</i>	Yes	No
Employment	25 (15%)	42 (25%)	103 (61%)
Accommodation	32 (19%)	42 (25%)	94 (56%)
Benefits	28 (17%)	44 (26%)	95 (57%)
Finances	33 (20%)	23 (14%)	108 (66%)
Education	38 (22%)	31 (18%)	100 (59%)
Drugs and alcohol	48 (30%)	40 (25%)	72 (45%)

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

Not sentenced 2 (1%)
 Yes 93 (55%)
 No 74 (44%)

Main comparator and comparator to last time



Prisoner survey responses HMP Risley 2013

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

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		197	6346	197	194
SECTION 1: General information					
1.2	Are you under 21 years of age?	0%	2%	0%	0%
1.3	Are you sentenced?	99%	100%	99%	100%
1.3	Are you on recall?	8%	10%	8%	7%
1.4	Is your sentence less than 12 months?	7%	6%	7%	5%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	14%	9%	14%	18%
1.5	Are you a foreign national?	15%	10%	15%	18%
1.6	Do you understand spoken English?	96%	99%	96%	
1.7	Do you understand written English?	93%	98%	93%	
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	20%	27%	20%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	4%	3%	2%
1.1	Are you Muslim?	10%	13%	10%	9%
1.11	Are you homosexual/gay or bisexual?	5%	3%	5%	2%
1.12	Do you consider yourself to have a disability?	18%	18%	18%	15%
1.13	Are you a veteran (ex-armed services)?	4%	6%	4%	
1.14	Is this your first time in prison?	38%	37%	38%	34%
1.15	Do you have any children under the age of 18?	48%	52%	48%	50%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	29%	46%	29%	25%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	62%	73%	62%	
2.3	Were you offered a toilet break?	5%	9%	5%	
2.4	Was the van clean?	62%	69%	62%	
2.5	Did you feel safe?	85%	81%	85%	
2.6	Were you treated well/very well by the escort staff?	72%	70%	72%	68%
2.7	Before you arrived here were you told that you were coming here?	59%	61%	59%	
2.7	Before you arrived here did you receive any written information about coming here?	5%	19%	5%	
2.8	When you first arrived here did your property arrive at the same time as you?	90%	89%	90%	89%

Main comparator and comparator to last time

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SECTION 3: Reception, first night and induction				
3.1 Were you in reception for less than 2 hours?	26%	52%	26%	
3.2 When you were searched in reception, was this carried out in a respectful way?	87%	83%	87%	81%
3.3 Were you treated well/very well in reception?	70%	73%	70%	74%
When you first arrived:				
3.4 Did you have any problems?	55%	62%	55%	64%
3.4 Did you have any problems with loss of property?	15%	16%	15%	16%
3.4 Did you have any housing problems?	9%	15%	9%	12%
3.4 Did you have any problems contacting employers?	2%	3%	2%	4%
3.4 Did you have any problems contacting family?	18%	21%	18%	26%
3.4 Did you have any problems ensuring dependants were being looked after?	1%	3%	1%	4%
3.4 Did you have any money worries?	17%	14%	17%	15%
3.4 Did you have any problems with feeling depressed or suicidal?	13%	13%	13%	13%
3.4 Did you have any physical health problems?	6%	12%	6%	
3.4 Did you have any mental health problems?	11%	12%	11%	
3.4 Did you have any problems with needing protection from other prisoners?	3%	4%	3%	6%
3.4 Did you have problems accessing phone numbers?	21%	18%	21%	25%
For those with problems:				
3.5 Did you receive any help/ support from staff in dealing with these problems?	33%	37%	33%	
When you first arrived here, were you offered any of the following:				
3.6 Tobacco?	81%	75%	81%	84%
3.6 A shower?	12%	31%	12%	20%
3.6 A free telephone call?	42%	42%	42%	56%
3.6 Something to eat?	56%	65%	56%	75%
3.6 PIN phone credit?	60%	49%	60%	
3.6 Toiletries/ basic items?	33%	44%	33%	

Main comparator and comparator to last time

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SECTION 3: Reception, first night and induction continued					
	When you first arrived here did you have access to the following:				
	3.7 The chaplain or a religious leader?	50%	52%	50%	
	3.7 Someone from health services?	70%	70%	70%	
	3.7 A Listener/Samaritans?	28%	31%	28%	
	3.7 Prison shop/ canteen?	15%	20%	15%	5%
	When you first arrived here were you offered information about any of the following:				
	3.8 What was going to happen to you?	43%	51%	43%	60%
	3.8 Support was available for people feeling depressed or suicidal?	32%	43%	32%	51%
	3.8 How to make routine requests?	46%	45%	46%	52%
	3.8 Your entitlement to visits?	40%	44%	40%	57%
	3.8 Health services?	47%	54%	47%	68%
	3.8 The chaplaincy?	46%	49%	46%	58%
	3.9 Did you feel safe on your first night here?	83%	83%	83%	83%
	3.10 Have you been on an induction course?	83%	91%	83%	96%
	For those who have been on an induction course:				
	3.11 Did the course cover everything you needed to know about the prison?	54%	63%	54%	69%
	3.12 Did you receive an education (skills for life) assessment?	72%	84%	72%	
SECTION 4: Legal rights and respectful custody					
	In terms of your legal rights, is it easy/very easy to:				
	4.1 Communicate with your solicitor or legal representative?	42%	48%	42%	43%
	4.1 Attend legal visits?	54%	52%	54%	56%
	4.1 Get bail information?	12%	15%	12%	14%
	4.2 Have staff ever opened letters from your solicitor or legal representative when you were not with them?	43%	41%	43%	43%
	4.3 Can you get legal books in the library?	45%	43%	45%	
	For the wing/unit you are currently on:				
	4.4 Are you normally offered enough clean, suitable clothes for the week?	65%	66%	65%	60%
	4.4 Are you normally able to have a shower every day?	89%	93%	89%	79%
	4.4 Do you normally receive clean sheets every week?	86%	78%	86%	86%
	4.4 Do you normally get cell cleaning materials every week?	57%	72%	57%	70%
	4.4 Is your cell call bell normally answered within five minutes?	26%	38%	26%	27%
	4.4 Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	67%	69%	67%	75%
	4.4 Can you normally get your stored property, if you need to?	14%	27%	14%	24%
	4.5 Is the food in this prison good/very good?	19%	27%	19%	15%
	4.6 Does the shop/canteen sell a wide enough range of goods to meet your needs?	51%	44%	51%	51%
	4.7 Are you able to speak to a Listener at any time, if you want to?	56%	56%	56%	57%
	4.8 Are your religious beliefs are respected?	56%	53%	56%	52%
	4.9 Are you able to speak to a religious leader of your faith in private if you want to?	54%	59%	54%	55%
	4.10 Is it easy/very easy to attend religious services?	39%	51%	39%	

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SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	79%	83%	79%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	50%	61%	50%	59%
5.2	Do you feel applications are dealt with quickly (within seven days)?	27%	49%	27%	43%
5.3	Is it easy to make a complaint?	52%	61%	52%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	29%	34%	29%	27%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	20%	37%	20%	25%
5.5	Have you ever been prevented from making a complaint when you wanted to?	17%	17%	17%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	22%	29%	22%	23%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	56%	54%	56%	57%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	50%	47%	50%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	5%	3%	5%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	35%	41%	35%	
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	76%	77%	76%	75%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	75%	75%	75%	77%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	20%	29%	20%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	16%	20%	16%	18%
7.5	Do you have a personal officer?	63%	73%	63%	81%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	55%	64%	55%	57%

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SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	28%	32%	28%	37%
8.2	Do you feel unsafe now?	12%	13%	12%	15%
8.4	Have you been victimised by other prisoners here?	27%	22%	27%	22%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	13%	10%	13%	8%
8.5	Hit, kicked or assaulted you?	4%	6%	4%	3%
8.5	Sexually abused you?	2%	1%	2%	0%
8.5	Threatened or intimidated you?	17%	13%	17%	
8.5	Taken your canteen/property?	2%	4%	2%	3%
8.5	Victimised you because of medication?	4%	4%	4%	
8.5	Victimised you because of debt?	1%	3%	1%	
8.5	Victimised you because of drugs?	1%	3%	1%	1%
8.5	Victimised you because of your race or ethnic origin?	3%	3%	3%	4%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%	2%	3%
8.5	Victimised you because of your nationality?	1%	2%	1%	
8.5	Victimised you because you were from a different part of the country?	2%	4%	2%	5%
8.5	Victimised you because you are from a Traveller community?	0%	1%	0%	
8.5	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.5	Victimised you because of your age?	3%	2%	3%	1%
8.5	Victimised you because you have a disability?	3%	2%	3%	1%
8.5	Victimised you because you were new here?	1%	4%	1%	5%
8.5	Victimised you because of your offence/crime?	9%	4%	9%	7%
8.5	Victimised you because of gang related issues?	4%	3%	4%	2%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	33%	27%	33%	21%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	14%	10%	14%	8%
8.7	Hit, kicked or assaulted you?	2%	3%	2%	2%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	14%	12%	14%	
8.7	Victimised you because of medication?	3%	4%	3%	
8.7	Victimised you because of debt?	1%	2%	1%	
8.7	Victimised you because of drugs?	2%	3%	2%	1%
8.7	Victimised you because of your race or ethnic origin?	4%	5%	4%	5%
8.7	Victimised you because of your religion/religious beliefs?	2%	3%	2%	2%
8.7	Victimised you because of your nationality?	2%	3%	2%	
8.7	Victimised you because you were from a different part of the country?	2%	4%	2%	3%
8.7	Victimised you because you are from a Traveller community?	0%	1%	0%	
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	2%
8.7	Victimised you because of your age?	1%	2%	1%	1%
8.7	Victimised you because you have a disability?	4%	2%	4%	1%
8.7	Victimised you because you were new here?	2%	5%	2%	4%
8.7	Victimised you because of your offence/crime?	7%	4%	7%	4%
8.7	Victimised you because of gang related issues?	3%	2%	3%	1%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	40%	38%	40%	30%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	26%	32%	26%	30%
9.1	Is it easy/very easy to see the nurse?	43%	55%	43%	44%
9.1	Is it easy/very easy to see the dentist?	13%	13%	13%	11%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	56%	47%	56%	53%
9.2	The nurse?	55%	60%	55%	51%
9.2	The dentist?	45%	41%	45%	46%
9.3	The overall quality of health services?	43%	43%	43%	39%
9.4	Are you currently taking medication?	54%	47%	54%	45%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	88%	85%	88%	
9.6	Do you have any emotional well being or mental health problems?	29%	26%	29%	26%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	46%	49%	46%	
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	21%	23%	21%	24%
10.2	Did you have a problem with alcohol when you came into this prison?	14%	17%	14%	18%
10.3	Is it easy/very easy to get illegal drugs in this prison?	27%	31%	27%	21%
10.4	Is it easy/very easy to get alcohol in this prison?	21%	18%	21%	
10.5	Have you developed a problem with drugs since you have been in this prison?	3%	8%	3%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	6%	5%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	70%	65%	70%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	48%	65%	48%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	86%	80%	86%	85%

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Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities				
Is it very easy/ easy to get into the following activities:				
11.1 A prison job?	31%	41%	31%	
11.1 Vocational or skills training?	28%	36%	28%	
11.1 Education (including basic skills)?	51%	51%	51%	
11.1 Offending behaviour programmes?	16%	20%	16%	
Are you currently involved in any of the following activities:				
11.2 A prison job?	62%	60%	62%	58%
11.2 Vocational or skills training?	11%	17%	11%	15%
11.2 Education (including basic skills)?	29%	27%	29%	29%
11.2 Offending behaviour programmes?	9%	13%	9%	17%
11.3 Have you had a job while in this prison?	84%	82%	84%	83%
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	44%	43%	44%	45%
11.3 Have you been involved in vocational or skills training while in this prison?	74%	73%	74%	75%
For those who have had vocational or skills training while in this prison:				
11.3 Do you feel the vocational or skills training will help you on release?	60%	60%	60%	67%
11.3 Have you been involved in education while in this prison?	79%	79%	79%	86%
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	61%	61%	61%	68%
11.3 Have you been involved in offending behaviour programmes while in this prison?	68%	71%	68%	77%
For those who have been involved in offending behaviour programmes while in this prison:				
11.3 Do you feel the offending behaviour programme(s) will help you on release?	55%	54%	55%	61%
11.4 Do you go to the library at least once a week?	36%	48%	36%	53%
11.5 Does the library have a wide enough range of materials to meet your needs?	48%	45%	48%	
11.6 Do you go to the gym three or more times a week?	32%	37%	32%	42%
11.7 Do you go outside for exercise three or more times a week?	53%	46%	53%	19%
11.8 Do you go on association more than five times each week?	79%	76%	79%	82%
11.9 Do you spend ten or more hours out of your cell on a weekday?	15%	16%	15%	6%
SECTION 12: Friends and family				
12.1 Have staff supported you and helped you to maintain contact with family/friends while in this prison?	30%	35%	30%	35%
12.2 Have you had any problems with sending or receiving mail?	52%	44%	52%	53%
12.3 Have you had any problems getting access to the telephones?	38%	23%	38%	55%
12.4 Is it easy/ very easy for your friends and family to get here?	29%	28%	29%	

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Risley 2013	Cat C training prisons comparator	HMP Risley 2013	HMP Risley 2011
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	81%	82%	81%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	30%	34%	30%	
13.2	Contact by letter?	41%	38%	41%	
13.2	Contact by phone?	21%	25%	21%	
13.2	Contact by visit?	41%	33%	41%	
13.3	Do you have a named offender supervisor in this prison?	80%	65%	80%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	73%	70%	73%	74%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	48%	56%	48%	49%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	46%	47%	46%	
13.6	Offender supervisor?	41%	35%	41%	
13.6	Offender manager?	30%	26%	30%	
13.6	Named/ personal officer?	9%	13%	9%	
13.6	Staff from other departments?	14%	17%	14%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	61%	65%	61%	76%
13.8	Are there plans for you to achieve any of your targets in another prison?	19%	22%	19%	
13.9	Are there plans for you to achieve any of your targets in the community?	27%	29%	27%	
13.10	Do you have a needs based custody plan?	6%	6%	6%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	17%	13%	
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	29%	35%	29%	
13.12	Accommodation?	31%	38%	31%	
13.12	Benefits?	32%	39%	32%	
13.12	Finances?	18%	28%	18%	
13.12	Education?	24%	35%	24%	
13.12	Drugs and alcohol?	36%	45%	36%	
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	56%	55%	56%	56%

Diversity analysis



Key question responses (ethnicity, foreign national and religion) HMP Risley 2013

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

Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim Prisoners	Non-muslim Prisoners
Any percentage highlighted in blue is significantly worse							
Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
Number of completed questionnaires returned		39	157	29	163	19	173
1.3	Are you sentenced?	95%	100%	92%	100%	89%	100%
1.5	Are you a foreign national?	50%	7%			42%	12%
1.6	Do you understand spoken English?	87%	99%	75%	100%	89%	97%
1.7	Do you understand written English?	77%	97%	55%	99%	74%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			65%	12%	95%	12%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	3%	14%	1%	0%	2%
1.1	Are you Muslim?	46%	1%	29%	7%		
1.12	Do you consider yourself to have a disability?	11%	20%	18%	18%	0%	20%
1.13	Are you a veteran (ex-armed services)?	2%	4%	3%	4%	0%	4%
1.14	Is this your first time in prison?	63%	32%	82%	30%	67%	35%
2.6	Were you treated well/very well by the escort staff?	67%	73%	69%	73%	74%	72%
2.7	Before you arrived here were you told that you were coming here?	63%	58%	60%	58%	50%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	87%	93%	86%	95%	86%
3.3	Were you treated well/very well in reception?	69%	70%	76%	70%	89%	68%
3.4	Did you have any problems when you first arrived?	57%	55%	55%	54%	59%	54%
3.7	Did you have access to someone from health care when you first arrived here?	74%	69%	64%	71%	78%	70%
3.9	Did you feel safe on your first night here?	78%	85%	82%	84%	78%	85%
3.10	Have you been on an induction course?	98%	79%	89%	83%	100%	81%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	39%	42%	48%	41%	44%	42%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim Prisoners	Non-muslim Prisoners
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
4.4	Are you normally offered enough clean, suitable clothes for the week?	64%	65%	68%	64%	65%	66%
4.4	Are you normally able to have a shower every day?	92%	87%	97%	88%	100%	88%
4.4	Is your cell call bell normally answered within five minutes?	35%	24%	45%	23%	39%	24%
4.5	Is the food in this prison good/very good?	21%	18%	38%	15%	26%	17%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	45%	53%	50%	52%	50%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	53%	57%	64%	54%	44%	58%
4.8	Do you feel your religious beliefs are respected?	74%	51%	83%	51%	95%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	53%	55%	36%	57%	67%	54%
5.1	Is it easy to make an application?	74%	80%	64%	82%	84%	78%
5.3	Is it easy to make a complaint?	54%	51%	57%	50%	53%	51%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	53%	57%	50%	56%	67%	55%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	60%	48%	42%	52%	67%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	3%	7%	2%	5%	3%
7.1	Do most staff, in this prison, treat you with respect?	69%	77%	75%	76%	74%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	69%	76%	85%	74%	76%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	16%	16%	11%	18%	11%	16%
7.4	Do you have a personal officer?	71%	60%	61%	64%	72%	62%
8.1	Have you ever felt unsafe here?	22%	30%	26%	28%	28%	28%
8.2	Do you feel unsafe now?	12%	13%	15%	11%	12%	12%
8.3	Have you been victimised by other prisoners?	23%	28%	11%	29%	17%	28%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	14%	18%	8%	18%	17%	17%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	12%	1%	4%	2%	0%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	1%	0%	2%	0%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	1%	0%	1%	0%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	3%	0%	3%	0%	3%

Diversity analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim Prisoners	Non-muslim Prisoners
	Any percentage highlighted in green is significantly better						
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
8.6	Have you been victimised by a member of staff?	42%	31%	15%	35%	47%	32%
8.7	Have you ever felt threatened or intimidated by staff here?	22%	12%	11%	15%	29%	13%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	17%	1%	8%	3%	24%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	8%	0%	4%	1%	12%	1%
8.7	Have you been victimised because of your nationality? (By staff)	6%	1%	0%	1%	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	3%	4%	0%	4%	0%	4%
9.1	Is it easy/very easy to see the doctor?	38%	23%	54%	21%	44%	24%
9.1	Is it easy/ very easy to see the nurse?	54%	40%	52%	42%	67%	40%
9.4	Are you currently taking medication?	43%	57%	42%	55%	47%	54%
9.6	Do you feel you have any emotional well being/mental health issues?	19%	32%	23%	30%	12%	32%
10.3	Is it easy/very easy to get illegal drugs in this prison?	11%	31%	16%	28%	17%	28%
11.2	Are you currently working in the prison?	48%	65%	54%	64%	47%	64%
11.2	Are you currently undertaking vocational or skills training?	8%	11%	12%	10%	12%	11%
11.2	Are you currently in education (including basic skills)?	40%	26%	42%	26%	36%	28%
11.2	Are you currently taking part in an offending behaviour programme?	3%	11%	4%	10%	0%	10%
11.4	Do you go to the library at least once a week?	47%	34%	40%	35%	44%	35%
11.6	Do you go to the gym three or more times a week?	40%	30%	42%	30%	39%	30%
11.7	Do you go outside for exercise three or more times a week?	64%	50%	52%	53%	71%	52%
11.8	On average, do you go on association more than five times each week?	84%	79%	66%	82%	89%	78%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	13%	16%	23%	15%	12%	15%
12.2	Have you had any problems sending or receiving mail?	43%	54%	33%	54%	29%	54%
12.3	Have you had any problems getting access to the telephones?	27%	41%	19%	41%	12%	40%

Diversity Analysis



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

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

Key to tables

		Consider themselves to have a disability		Do not consider themselves to have a disability		Prisoners aged 50 and over		Prisoners under the age of 50	
	Any percentage highlighted in green is significantly better								
	Any percentage highlighted in blue is significantly worse								
	Any percentage highlighted in orange shows a significant difference in prisoners' background details								
	Percentages which are not highlighted show there is no significant difference								
Number of completed questionnaires returned		34	157			26	168		
1.3	Are you sentenced?	100%	99%			100%	99%		
1.5	Are you a foreign national?	15%	15%			11%	16%		
1.6	Do you understand spoken English?	94%	97%			97%	96%		
1.7	Do you understand written English?	94%	93%			93%	93%		
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	12%	21%			7%	22%		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	3%			3%	3%		
1.1	Are you Muslim?	0%	12%			7%	10%		
1.12	Do you consider yourself to have a disability?					45%	14%		
1.13	Are you a veteran (ex-armed services)?	6%	3%			15%	2%		
1.14	Is this your first time in prison?	29%	41%			48%	37%		
2.6	Were you treated well/very well by the escort staff?	65%	74%			82%	70%		
2.7	Before you arrived here were you told that you were coming here?	53%	60%			55%	60%		
3.2	When you were searched in reception, was this carried out in a respectful way?	88%	87%			93%	86%		
3.3	Were you treated well/very well in reception?	64%	72%			79%	69%		
3.4	Did you have any problems when you first arrived?	85%	48%			55%	54%		
3.7	Did you have access to someone from health care when you first arrived here?	70%	72%			67%	70%		
3.9	Did you feel safe on your first night here?	77%	86%			79%	84%		
3.10	Have you been on an induction course?	76%	84%			78%	84%		
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	39%	43%			50%	41%		

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	67%	66%	84%	62%
4.4	Are you normally able to have a shower every day?	82%	91%	89%	89%
4.4	Is your cell call bell normally answered within five minutes?	19%	28%	20%	28%
4.5	Is the food in this prison good/very good?	24%	18%	32%	17%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	61%	50%	78%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	64%	54%	74%	53%
4.8	Do you feel your religious beliefs are respected?	59%	56%	70%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	53%	55%	69%	52%
5.1	Is it easy to make an application?	73%	81%	89%	77%
5.3	Is it easy to make a complaint?	57%	52%	48%	52%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	58%	56%	50%	56%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	51%	49%	50%	50%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	3%	3%	3%
7.1	Do most staff, in this prison, treat you with respect?	75%	76%	85%	74%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	72%	76%	92%	72%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	12%	17%	31%	14%
7.4	Do you have a personal officer?	70%	62%	89%	59%
8.1	Have you ever felt unsafe here?	53%	22%	45%	25%
8.2	Do you feel unsafe now?	20%	10%	12%	12%
8.3	Have you been victimised by other prisoners?	55%	21%	37%	25%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	32%	13%	26%	16%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	3%	0%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	1%	3%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	1%	0%	1%
8.5	Have you been victimised because of your age? (By prisoners)	9%	1%	15%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	16%	0%	11%	1%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability		
	Any percentage highlighted in blue is significantly worse			Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	53%	29%	33%	33%
8.7	Have you ever felt threatened or intimidated by staff here?	19%	13%	15%	14%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	5%	0%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	2%	0%	2%
8.7	Have you been victimised because of your nationality? (By staff)	3%	1%	0%	2%
8.7	Have you been victimised because of your age? (By staff)	3%	0%	3%	0%
8.7	Have you been victimised because you have a disability? (By staff)	19%	1%	11%	3%
9.1	Is it easy/very easy to see the doctor?	19%	27%	41%	24%
9.1	Is it easy/ very easy to see the nurse?	42%	43%	58%	41%
9.4	Are you currently taking medication?	91%	47%	84%	49%
9.6	Do you feel you have any emotional well being/mental health issues?	66%	20%	27%	30%
10.3	Is it easy/very easy to get illegal drugs in this prison?	52%	22%	24%	27%
11.2	Are you currently working in the prison?	61%	63%	77%	60%
11.2	Are you currently undertaking vocational or skills training?	13%	9%	15%	10%
11.2	Are you currently in education (including basic skills)?	22%	30%	27%	28%
11.2	Are you currently taking part in an offending behaviour programme?	22%	6%	15%	8%
11.4	Do you go to the library at least once a week?	43%	36%	41%	35%
11.6	Do you go to the gym three or more times a week?	22%	34%	0%	38%
11.7	Do you go outside for exercise three or more times a week?	45%	55%	48%	53%
11.8	On average, do you go on association more than five times each week?	70%	82%	67%	82%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	13%	16%	15%	16%
12.2	Have you had any problems sending or receiving mail?	53%	50%	54%	51%
12.3	Have you had any problems getting access to the telephones?	45%	35%	42%	37%

Main comparator and comparator to last time



Prisoner survey responses (VP Wings) HMP Risley 2013

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

Key to tables

Any percentage highlighted in green is significantly better		Vulnerable Prisoner Wings (F & G)	Main Population Wings (A, B, C, D, E & F)
Any percentage highlighted in blue is significantly worse			
Any percentage highlighted in orange shows a significant difference in prisoners' background details			
Percentages which are not highlighted show there is no significant difference			
Number of completed questionnaires returned		43	153
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	0%
1.3	Are you sentenced?	98%	99%
1.3	Are you on recall?	10%	8%
1.4	Is your sentence less than 12 months?	0%	9%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	33%	8%
1.5	Are you a foreign national?	10%	17%
1.6	Do you understand spoken English?	98%	96%
1.7	Do you understand written English?	98%	91%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	7%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	3%
1.1	Are you Muslim?	7%	11%
1.11	Are you homosexual/gay or bisexual?	14%	2%
1.12	Do you consider yourself to have a disability?	28%	14%
1.13	Are you a veteran (ex-armed services)?	7%	3%
1.14	Is this your first time in prison?	56%	34%
1.15	Do you have any children under the age of 18?	35%	53%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	40%	26%
2.5	Did you feel safe?	84%	87%
2.6	Were you treated well/very well by the escort staff?	86%	68%
2.7	Before you arrived here were you told that you were coming here?	65%	57%
2.7	Before you arrived here did you receive any written information about coming here?		
2.8	When you first arrived here did your property arrive at the same time as you?	91%	89%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	Vulnerable Prisoner Wings (F & G)	Main Population Wings (A, B, C, D, E & R)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	25%	26%
3.2	When you were searched in reception, was this carried out in a respectful way?	93%	85%
3.3	Were you treated well/very well in reception?	81%	66%
	When you first arrived:		
3.4	Did you have any problems?	58%	54%
3.4	Did you have any problems with loss of property?	14%	15%
3.4	Did you have any housing problems?	5%	10%
3.4	Did you have any problems contacting employers?	5%	1%
3.4	Did you have any problems contacting family?	16%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	1%
3.4	Did you have any money worries?	14%	18%
3.4	Did you have any problems with feeling depressed or suicidal?	14%	13%
3.4	Did you have any physical health problems?	7%	6%
3.4	Did you have any mental health problems?	14%	10%
3.4	Did you have any problems with needing protection from other prisoners?	2%	2%
3.4	Did you have problems accessing phone numbers?	23%	20%
	For those with problems:		
3.5	Did you receive any help/ support from staff in dealing with these problems?		
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	58%	87%
3.6	A shower?	7%	14%
3.6	A free telephone call?	35%	44%
3.6	Something to eat?	61%	54%
3.6	PIN phone credit?	14%	73%
3.6	Toiletries/ basic items?	42%	30%

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better	Vulnerable Prisoner Wings (F & G)	Main Population Wings (A, B, C, D, E & R)
Any percentage highlighted in blue is significantly worse		
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SECTION 3: Reception, first night and induction continued		
When you first arrived here did you have access to the following people:		
3.7 The chaplain or a religious leader?	53%	49%
3.7 Someone from health services?	70%	69%
3.7 A Listener/Samaritans?	25%	29%
3.7 Prison shop/ canteen?	9%	17%
When you first arrived here were you offered information about any of the following:		
3.8 What was going to happen to you?	37%	45%
3.8 Support was available for people feeling depressed or suicidal?	37%	30%
3.8 How to make routine requests?	37%	48%
3.8 Your entitlement to visits?	37%	41%
3.8 Health services?	53%	45%
3.8 The chaplaincy?	44%	46%
3.9 Did you feel safe on your first night here?	91%	81%
3.10 Have you been on an induction course?	77%	85%
For those who have been on an induction course:		
3.11 Did the course cover everything you needed to know about the prison?		
3.12 Did you receive an education (skills for life) assessment?	67%	74%
SECTION 4: Legal rights and respectful custody		
In terms of your legal rights, is it easy/very easy to:		
4.1 Communicate with your solicitor or legal representative?	52%	39%
4.1 Attend legal visits?	53%	56%
4.1 Get bail information?	3%	15%
4.2 Have staff ever opened letters from your solicitor or legal representative when you were not with them?	39%	45%
4.3 Can you get legal books in the library?	63%	39%
For the wing/unit you are currently on:		
4.4 Are you normally offered enough clean, suitable clothes for the week?	86%	60%
4.4 Are you normally able to have a shower every day?	91%	89%
4.4 Do you normally receive clean sheets every week?	86%	87%
4.4 Do you normally get cell cleaning materials every week?	71%	54%
4.4 Is your cell call bell normally answered within five minutes?	29%	26%
4.4 Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	79%	63%
4.4 Can you normally get your stored property, if you need to?	21%	12%
4.5 Is the food in this prison good/very good?	37%	14%
4.6 Does the shop/canteen sell a wide enough range of goods to meet your needs?	75%	44%
4.7 Are you able to speak to a Listener at any time, if you want to?	70%	52%
4.8 Are your religious beliefs are respected?	64%	53%
4.9 Are you able to speak to a religious leader of your faith in private if you want to?	67%	50%
4.10 Is it easy/very easy to attend religious services?	49%	37%

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SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	93%	75%
5.3	Is it easy to make a complaint?	57%	50%
5.5	Have you ever been prevented from making a complaint when you wanted to?	11%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	32%	19%
SECTION 6: Incentives and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	63%	54%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	58%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	4%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	84%	73%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	95%	68%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	35%	16%
7.4	Do staff normally speak to you most of the time/all of the time during association?	21%	15%
7.5	Do you have a personal officer?	84%	56%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	43%	23%
8.2	Do you feel unsafe now?	10%	13%
8.4	Have you been victimised by other prisoners here?	50%	19%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	33%	7%
8.5	Hit, kicked or assaulted you?	7%	4%
8.5	Sexually abused you?	2%	1%
8.5	Threatened or intimidated you?	31%	13%
8.5	Taken your canteen/property?	0%	1%
8.5	Victimised you because of medication?	5%	4%
8.5	Victimised you because of debt?	0%	1%
8.5	Victimised you because of drugs?	0%	1%
8.5	Victimised you because of your race or ethnic origin?	0%	4%
8.5	Victimised you because of your religion/religious beliefs?	2%	1%
8.5	Victimised you because of your nationality?	0%	1%
8.5	Victimised you because you were from a different part of the country?	2%	1%
8.5	Victimised you because you are from a Traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	5%	0%
8.5	Victimised you because of your age?	10%	1%
8.5	Victimised you because you have a disability?	7%	1%
8.5	Victimised you because you were new here?	0%	1%
8.5	Victimised you because of your offence/crime?	36%	1%
8.5	Victimised you because of gang related issues?	2%	5%

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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	36%	32%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	17%	14%
8.7	Hit, kicked or assaulted you?	2%	2%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	19%	13%
8.7	Victimised you because of medication?	2%	3%
8.7	Victimised you because of debt?	0%	1%
8.7	Victimised you because of drugs?	0%	2%
8.7	Victimised you because of your race or ethnic origin?	2%	4%
8.7	Victimised you because of your religion/religious beliefs?	5%	1%
8.7	Victimised you because of your nationality?	0%	2%
8.7	Victimised you because you were from a different part of the country?	0%	2%
8.7	Victimised you because you are from a Traveller community?	0%	0%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	2%	0%
8.7	Victimised you because you have a disability?	7%	3%
8.7	Victimised you because you were new here?	0%	2%
8.7	Victimised you because of your offence/crime?	17%	4%
8.7	Victimised you because of gang related issues?	2%	3%

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SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	24%	27%
9.1	Is it easy/very easy to see the nurse?	46%	42%
9.1	Is it easy/very easy to see the dentist?	20%	12%
9.4	Are you currently taking medication?	62%	53%
9.6	Do you have any emotional well being or mental health problems?	21%	31%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	10%	25%
10.2	Did you have a problem with alcohol when you came into this prison?	17%	14%
10.3	Is it easy/very easy to get illegal drugs in this prison?	17%	30%
10.4	Is it easy/very easy to get alcohol in this prison?	17%	22%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	7%	4%

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SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	61%	22%
11.1	Vocational or skills training?	36%	27%
11.1	Education (including basic skills)?	65%	47%
11.1	Offending behaviour programmes?	23%	14%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	84%	55%
11.2	Vocational or skills training?	12%	11%
11.2	Education (including basic skills)?	29%	29%
11.2	Offending behaviour programmes?	17%	7%
11.4	Do you go to the library at least once a week?	55%	31%
11.5	Does the library have a wide enough range of materials to meet your needs?	57%	45%
11.6	Do you go to the gym three or more times a week?	19%	36%
11.7	Do you go outside for exercise three or more times a week?	52%	54%
11.8	Do you go on association more than five times each week?	76%	81%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	16%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	51%	24%
12.2	Have you had any problems with sending or receiving mail?	50%	53%
12.3	Have you had any problems getting access to the telephones?	33%	39%
12.4	Is it easy/ very easy for your friends and family to get here?	24%	30%

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SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	100%	73%
13.10	Do you have a needs based custody plan?	5%	7%
13.11	Do you feel that any member of staff has helped you to prepare for release?	20%	11%