

Report on an unannounced full follow-up
inspection of

HMP The Mount

4–14 October 2011

by HM Chief Inspector of Prisons

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Contents

Introduction	5
Fact page	7
1 Healthy prison summary and progress on main recommendations	9
<hr/>	
2 Progress on other recommendations	
<hr/>	
1 Arrival in custody	21
2 Environment and relationships	27
3 Duty of care	33
4 Diversity	43
5 Health services	53
6 Activities	63
7 Good order	71
8 Services	79
9 Resettlement	83
3 Summary of recommendations	95
<hr/>	
4 Appendices	
<hr/>	
I Inspection team	104
II Prison population profile	105
III Summary of prisoner questionnaires and interviews	108

Introduction

This is a report of our findings from a full unannounced inspection that followed-up a previous visit we made to HMP The Mount in 2009. It is a very good report that reflects significant progress in two of our healthy prison tests, respect, and in particular, safety. Reasonable outcomes have been maintained with regard to activity and resettlement.

Located in Hertfordshire, The Mount is large, sprawling and diverse, with many of its near 800 category C prisoners originating from the London area. The prison is a difficult prison to manage, and on our last inspection, we commented that despite the significant efforts of managers, it was difficult to ensure safety. It is therefore to the considerable credit of managers and staff, that on this inspection, we found improved outcomes for safety to such an extent that we considered them good, which is our highest assessment. In our survey, less than one in 10 prisoners said they felt unsafe, which was significantly fewer than at comparator prisons and when we last inspected.

The installation of high level netting at strategic points around the perimeter had impeded the flow of drugs in to the establishment and far fewer prisoners now believed it was easy to access illicit drugs than before. A prisoner's reception in to custody was reasonably well managed despite some delays, which were seemingly a consequence of recent changes to the escort contract. Arrangements to address the risk of self-harm were effective. Considerable efforts had been made to confront violence and bullying and there was clear evidence of this. Use of force remained unchanged and use of special accommodation was higher than expected, but in all other respects, the number of violent or anti-social incidents was not excessive in light of the size and composition of the population.

Despite our previous criticism and the extent of the challenge, it was commendable that the establishment had sought to address its difficulties not through a reactive and simplistic resort to more restrictive rules, but instead by taking an approach that was measured and proportionate. This was best exemplified during exercise and main movement, where prisoners effectively had free access to the prison grounds. Supervision was thorough but unobtrusive, the atmosphere was relaxed and staff-prisoner relationships appeared reasonably good.

The standard of the environment and accommodation was reasonably good. However, it was disappointing to see that a number of additional cells for single use were being doubled, which we were told was a consequence of the need for space following the public disorder of August 2011. Another exception to this generally positive picture was Howard wing, where poor standards and instances of indifferent staff attitudes stood in sharp contrast to the rest of the prison, a matter which should be addressed without further delay.

The prison had worked hard to address the needs of a diverse population. More than half of all prisoners were from a black or minority ethnic background and about 200 were foreign nationals. Provision for minority groups was generally good, which included meaningful prisoner representation and consultation. The perception of black and minority ethnic and foreign national prisoners was broadly positive across a range of indicators, although this did not extend to Muslim prisoners, many of whom held more negative views which the prison needs to understand and explore further.

Most prisoners, particularly those engaged in activity, had acceptable amounts of time out of cell at about nine hours a day during the working week. Despite this, and the fact that there were broadly enough activity places to meet the needs of the population, we still found about a quarter of all prisoners locked in cells doing nothing during the working part of the day.

Arrangements to coordinate the allocation of activities based on sentence planning needs were commendable but too slow, leaving prisoners idle while they waited. Too many prisoners were recorded as unemployed.

The findings were more encouraging for those engaged in activity. About a third of prisoners were attending well-equipped education classes and achieving reasonable standards in what was an improved curriculum. There was a good range of vocational training, again with good standards and meaningful opportunity for progression. Educational outreach, as well as distance learning and Open University courses, were well supported. Work opportunities were available although too much of it was menial, and in some workshops it was evident there was not always enough to do. Overall the activity on offer was reasonably good, but as a training prison, expectations are higher and it was clear that more was required.

More is needed to be done with regard to resettlement. Outcomes were reasonable, but it was concerning that there remained no meaningful assessment of need. Coordination and strategic management were lacking, while the quality of offender supervision and sentence planning required improvement. Work in respect of the reintegration pathways was mixed, with some very good work in relation to children and families, drugs and health care but evident weakness in respect of some of the other pathways, most notably offending behaviour programmes. However, the development of community partnerships that had yet to come to fruition was encouraging.

The Mount is a much improved establishment and despite our previous criticisms, managers had clearly held their nerve and staff were more confident. The prison is now a much safer place, which has been achieved while maintaining reasonable levels of respect. Further work needs to be done to maximise the use of activity and regime resources, and the prison needs to energise its approach to resettlement. It should, however, approach these ongoing challenges with confidence.

Nick Hardwick
HM Chief Inspector of Prisons

December 2011

Fact page

Task of the establishment

HMP The Mount is a category C adult male training prison.

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

Public

Region/Department

East of England

Number held

770

Certified normal accommodation

747

Operational capacity

786

Date of last full inspection

19–23 October 2009

Brief history

HMP The Mount opened in 1987 as a young offender institution and changed role to a male category C prison in 1989.

Short description of residential units

Lakes, Ellis, Fowler and Brister wings: each has four spurs, with 28 cells on two landings

Annexe: accommodates 36 prisoners on two floors

Howard wing (added in 1995) and Dixon wing (added in 1999): two-landing open gallery wings

Narey wing (added in 2007): 48-bed unit, mainly for indeterminate-sentenced prisoners

Escort contractor

Serco Wincanton

GeoAmey

Health service commissioner and providers

Health service commissioner: NHS Hertfordshire PCT

Health care provider: Hertfordshire Community NHS Trust

Mental health commissioner and provider: Hertfordshire Partnership NHS Foundation Trust

Learning and skills providers

Milton Keynes College

Healthy prison summary

Introduction

- HP1 All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:
- | | |
|----------------------------|---|
| Safety | prisoners, even 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 helped to reduce the likelihood of reoffending. |
- HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.
- **outcomes for prisoners are good against this healthy prison test.**
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
 - **outcomes for prisoners are reasonably good against this healthy prison test.**
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
 - **outcomes for prisoners are not sufficiently good against this healthy prison test.**
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
 - **outcomes for prisoners are poor against this healthy prison test.**
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.
- HP3 The Inspectorate conducts unannounced follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections are proportionate to risk. In full follow-up inspections sufficient inspector time is allocated to enable an assessment of progress and also to allow in-depth analysis of areas of serious concern identified in the previous inspection, particularly on safety and respect, or matters of concern subsequently drawn to the attention of the Chief Inspector. Inspectors use the findings of prisoner surveys (where available), prisoner

focus groups, research analysis of prison data and observation. This enables a reassessment of previous healthy prison assessments held by the Inspectorate on all establishments, and published in reports from 2004 onwards.

- HP4 In 2009, we found that The Mount was not performing sufficiently well (outcomes for prisoners were not sufficiently good) against the healthy prison test of safety. We made 36 recommendations, of which 19 had been achieved, seven had been partially achieved, nine were not achieved and one was no longer relevant. We have made 13 further recommendations.
- HP5 In 2009, we found that The Mount was not performing sufficiently well (outcomes for prisoners were not sufficiently good) against the healthy prison test of respect. We made 112 recommendations, of which 72 had been achieved, 12 had been partially achieved, 25 were not achieved and three were no longer relevant. We have made 22 further recommendations.
- HP6 In 2009, we found that The Mount was performing reasonably well (outcomes for prisoners were reasonably good) against the healthy prison test of purposeful activity. We made 17 recommendations, of which 12 had been achieved, two had been partially achieved and three were not achieved. We have made four further recommendations.
- HP7 In 2009, we found that The Mount was performing reasonably well (outcomes for prisoners were reasonably good) against the healthy prison test of resettlement. We made 33 recommendations, of which 12 had been achieved, three had been partially achieved, 16 were not achieved and two were no longer relevant. We have made 10 further recommendations.

Safety

HP8 The new escort and transfer arrangements were problematic. Reception and first night procedures were good, although some prisoners arriving late received a reduced service. Induction arrangements were adequate but prisoners spent too long locked up. Violence reduction arrangements, particularly processes to address bullying, had improved and few prisoners said that they felt unsafe. Suicide and self-harm arrangements were sound. Security measures were proportionate. The use of segregation had reduced markedly, particularly for those seeking protection, but the use of the special cell was high. Drug supply reduction measures were effective and the availability and use of illicit drugs were low. Integrated drug treatment system arrangements were good. On the basis of this full follow-up inspection, we considered that outcomes for prisoners in this establishment were now good against this healthy prison test.

HP9 The implementation of the new escorting contract for courts and inter-prison transfers had been problematic and had resulted in an unpredictable service for the prison. Communication from the escort provider was poor and its schedule unreliable. There were delays in transferring prisoners to court and other establishments and there had been an increase in the number of prisoners arriving late and missing out on some key services on their first night. Reception staff had responded well to the escort difficulties and worked flexibly to ensure that reception remained open to receive prisoners arriving late.

- HP10 The reception area was small but clean, and adequate for the small number of prisoners usually received at any one time. Holding rooms contained information posters but they were mostly in English. Staff were friendly and respectful and saw all prisoners in private, to review the cell sharing risk assessment and offer individual support. Prisoners were positive about their reception experience. Insiders (prisoner peer supporters) saw all new arrivals and provided support, both in reception and on the first night and induction wing. Reception procedures were not over-long and prisoners were collected by induction staff and moved reasonably quickly to the first night wing.
- HP11 The dedicated first night accommodation was clean but sparsely furnished. Most prisoners felt safe on their first night. Insiders and staff helped prisoners to settle onto the wing, and prisoners were provided with written information, which was available in several languages. Prisoners told us that the induction programme covered everything they needed to know, although they were locked in their cells for long periods during the programme and on its completion while waiting for allocation to work.
- HP12 Few prisoners responding to our survey¹ said that they felt unsafe. There were relatively few reported assaults, fights and unexplained injuries, and little victimisation by prisoners. Perpetrators of violence and bullying were challenged. Although data collection on the number and nature of violent incidents was good and there was good information sharing, the violence reduction strategy was too long and was not based on the observed patterns of violence in the prison. Wing staff were proactive in reporting incidents to the safer custody team, who investigated promptly. There was good case management of individual bullies and victims but support plans were inadequate and there were no formal interventions to address bullying behaviour.
- HP13 Arrangements for the care and support of those at risk of suicide and self-harm were generally good. Levels of self-harm were reasonably low and there had been no recent self-inflicted deaths. There was good data collection and interrogation of individual acts of self-harm but insufficient data analysis at the safer custody meeting to provide information about patterns and trends of self-harming behaviour. The quality of assessment, care in custody and teamwork (ACCT) documentation was generally good. Case reviews were multidisciplinary and the quality of individual care plans was satisfactory. The Listener suite on Howard wing was a bare, uninviting and dirty cell. Listeners (peer supporters committed to those in self-harm crisis) were proactive and felt supported.

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

- HP14 Security arrangements were generally proportionate. Actions to stem the flow of contraband had not unduly restricted prisoner activity and movement. Free-flow arrangements were measured and supervision was good. The installation of netting across the prison had reduced the number of items thrown over the fence from outside the prison, and the drug supply. Closed visits were imposed only when appropriate.
- HP15 The use of segregation had reduced, especially for those seeking protection. The care and separation unit (CSU) was clean and well maintained but cells did not have in-cell electricity. The exercise yard was bleak. The general regime was basic but adequate but there was no association. The unit's smoking ban was an inappropriate deterrent and the consequences had not been fully considered. The recording of formal reintegration planning and of the daily contact with the prisoner, and the setting of individual objectives were underdeveloped, and most prisoners were transferred to another establishment following segregation. The number of adjudications was steadily reducing.
- HP16 The level of use of force had not changed and was comparable to that at other category C establishments. Most events were spontaneous. Planned events, although recorded, were not routinely reviewed. The routine use of handcuffs to walk a prisoner to the CSU was excessive. There was high use of the special accommodation and we were not assured that its use was reviewed with sufficient rigour.
- HP17 The integrated drug treatment system (IDTS) was well established and the treatment regimes were flexible. There were close links with the Rehabilitation of Addicted Prisoners trust (RAPt) and counselling, assessment, referral, advice and throughcare (CARAT) staff, who all attended the review meetings. There was a robust supply reduction strategy. Drug testing rates, drug finds and our prisoner survey all pointed towards a low level of drug availability. Resourcing for the drug testing programmes was tight and too few suspicion tests were completed.

Respect

HP18 The environment and the accommodation was generally well maintained and of a good standard but we had concerns about the cleanliness of Howard wing and the doubling up of some cells. Access to showers, telephones and laundry services was good. Staff-prisoner relationships were mostly positive. Food was generally good and the self-catering facilities were highly valued. Race equality was well managed; black and minority ethnic prisoners and foreign national prisoners reported positively across many areas of the regime but Muslim prisoners were more negative. Provision for gay and bisexual prisoners and those with disabilities was underdeveloped. Faith provision was good. Health services were very good and mental health provision was excellent. On the basis of this full follow-up inspection, we considered that outcomes for prisoners in this establishment were reasonably good against this healthy prison test.

HP19 External areas were clean and enhanced by well-tended gardens. Residential units were clean and well maintained, with the exception of Howard wing. The quality of accommodation on all wings was generally good, particularly on the annexe and Narey wing. The recent increase in the prison's population following the civil

disturbances in August 2011 had resulted in the sharing of some single cells which were too small and inadequately furnished. Access to showers was good and they were all suitably screened but not all in working order. All prisoners, except those on the basic regime, could wear their own clothing but could not have property handed or sent in. Laundry facilities were adequate. Access to telephones was good. Prisoner consultation was well developed.

- HP20 There was a comprehensive incentives and earned privileges (IEP) policy. It was mostly understood by staff and prisoners, although there was some confusion over prisoners retaining enhanced status on their arrival. IEP levels were adequately differentiated and set clear standards of behaviour. Support for the three prisoners on the basic regime lacked realistic and challenging targets to assist them in improving their behaviour.
- HP21 Staff-prisoner relationships were generally good, although prisoners on Howard wing reported less favourably about staff. Prisoners were positive about receiving adequate support from staff. Most prisoners were addressed by their preferred names and staff acted professionally, although some prisoners said that staff used inappropriate and disrespectful language. Most prisoners knew who their personal officer was and said that they were helpful. Personal officer case recording was often detailed and gave a good picture of individual circumstances, including information about sentence plan targets and achievements.
- HP22 Food was generally good and consultation with prisoners informed the menu. Breakfast packs were issued at lunchtime on the previous day. Facilities to dine out of cell were limited. The facility to self-cater was highly valued by prisoners but some equipment was broken.
- HP23 The prison's diversity policy covered all the diversity strands but was out of date. There was an effective group of prisoner diversity representatives, specialising in each strand.
- HP24 Just over half the population were from a black and minority ethnic background, and in our survey they reported more favourably than white prisoners across a number of areas, except about relationships with staff. There was dedicated resettlement and mentoring provision for black and minority ethnic prisoners. Prisoners from a Muslim background were more negative than non-Muslim prisoners about important aspects of the regime such as safety, relationships with staff and access to the regime.
- HP25 The 200 foreign national prisoners were well supported by a full-time coordinator, UK Border Agency staff and a group of prisoner representatives. In our survey, foreign national prisoners were more positive than British prisoners concerning many areas of the regime, including safety and relationships with staff. There was little information available in languages other than English and prisoners were sometimes used inappropriately as interpreters for confidential matters.
- HP26 The disability liaison officer agreed care plans and personal emergency evacuation plans for prisoners with disabilities in consultation with them but we were not assured that they were used by residential staff. There was no adapted accommodation for prisoners with disabilities. Some adaptations were made to standard accommodation according to need but this was not applied consistently.

- HP27 There were no services developed for gay and bisexual prisoners, and insufficient positive images of gay people or notices warning against homophobic bullying.
- HP28 The applications and complaints processes were generally sound and prisoners were reasonably confident about the systems, although in our survey too many prisoners complained that they had been encouraged to withdraw a complaint. Legal services provision was good but not widely advertised.
- HP29 Faith facilities were of a high standard. The chaplaincy was well integrated into the regime. Prisoners had good access to faith leaders and were positive about the services provided. A range of faith groups and programmes were delivered by the chaplaincy team and volunteers. Links had been established with community faith groups to support provision in the prison and resettlement of prisoners on release.
- HP30 Prisoners were generally positive about access to, and communication with, health services staff. Partnership arrangements between commissioners, health services staff and the prison were effective. Health care facilities were satisfactory but difficult to access for those with mobility issues. A wide range of services and clinics were provided in the prison but there were insufficient escorts for external appointments. Prisoners had satisfactory access to the doctor and were also able to self-certify as sick for up to 48 hours. Medicine administration was appropriately supervised, but there were some issues with maintaining patient confidentiality. There was an excellent level of secondary mental health care, with a full-time in-reach service. A good level of mental health awareness training was provided for all prison staff.

Purposeful activity

- HP31 Most prisoners had satisfactory time out of cell for most of the working week, and had good access to the open air and adequate association. There were sufficient activity places for most prisoners but too many were employed in menial wing work or locked up during the core day. Allocation to work took too long for some. For those engaged in learning and skills, the provision was good. The range and quality of education classes were good and achievements high. The range of vocational training available was good and pass rates were high. Workshops were well equipped and effective use was made of peer tutors. Library provision was good. Gym and fitness facilities were inadequate and access was limited. On the basis of this full follow-up inspection, we considered that outcomes for prisoners in this establishment were reasonably good against this healthy prison test.
- HP32 Most prisoners had adequate time out of cell, at nine hours during the week for an employed prisoner. However, this reduced to less than five hours for the large number of prisoners who were unemployed or not required for work. During our checks, we found up to a quarter of prisoners locked up during the core day. Association and exercise were offered daily and rarely cancelled. Staff were proactive in providing supervision and interacted well with prisoners at these times.
- HP33 The leadership and management of learning and skills were good and there was clear strategic planning, which was well informed through prisoner surveys. There were sufficient activity places for most prisoners, although too many were unemployed or not fully occupied. Prisoners were clearly informed at induction about the range of activities available. The allocation process was thorough and well informed by

sentence plans and prisoners' needs but it took too long to get some prisoners into activity. For those attending work or education, attendance and punctuality were good.

- HP34 Almost a third of prisoners were attending education classes. They had access to a good and improved range of courses, with meaningful progression opportunities. Classrooms were well equipped and teaching and learning were mostly satisfactory, with some good aspects. Lessons were planned appropriately, although some were disrupted when learners left to go to the gym. Standards of work were good in most areas. Learning support was similarly good and effective use was made of peer tutors in some classes. There was effective support for those on distance learning and Open University courses. Outreach education provision on the wings and in workshops was good. Pass rates were high on most courses.
- HP35 There was a wide range of accredited vocational training available, with courses offered in most work areas. Pass rates were high and there were good progression opportunities in many areas. The standard of learners' work was high and they developed useful practical skills and a strong work ethic. Good use was made of well-trained peer tutors to support learning, and effective literacy and numeracy support was provided. Workshops were well equipped to commercial standards. There were strong links with employers to support the curriculum in some areas.
- HP36 A wide range of work was available but too many prisoners were insufficiently occupied in low-level cleaning work on the wings and there was sometimes insufficient work to occupy prisoners fully in some of the workshops. The library was spacious and well resourced. Usage was high, and over two-thirds of prisoners were active borrowers.
- HP37 Fitness and gym facilities were inadequate to meet the needs of the population. The proportion of prisoners who could access PE more than once a week was low. However, the limited provision was well managed and prisoner usage was tracked robustly to ensure that access was fair and equitable. The range of accredited PE courses had improved and pass rates were high on most courses.

Resettlement

- HP38 The strategic management of resettlement was weak and uninformed by a recent needs analysis. Offender supervisors' caseloads were too large and they had too little contact with the prisoners in their care. The sharing of information and the quality of local offender assessment system (OASys) assessments and local sentence plans was good but risk of serious harm assessments were weak. There was a large backlog of sentence plan reviews. Public protection arrangements were good. Categorisation processes were sound but category D prisoners waited too long for transfer. Release on temporary licence was used well to maintain family ties but underused for employment and learning opportunities. Good community links were being developed. Some resettlement pathway work was good, particularly relating to drug use, health care and children and families, but there was a lack of provision for those needing support with alcohol, and offending behaviour provision was inadequate. On the basis of this full follow-up inspection, we considered that outcomes for prisoners in this establishment were reasonably good against this healthy prison test.

- HP39 The recently published resettlement policy documents had not been informed by a recent needs analysis. There was no reducing reoffending action plan and no clearly identified leads for each of the resettlement pathways.
- HP40 There was no initial assessment of immediate resettlement needs, and for many prisoners, these needs were not addressed until close to release, through a pre-discharge board. Too many prisoners did not know where to go for advice or how to access resettlement services.
- HP41 Good links with external service providers and potential employers had been fostered and Service Level Agreements had been negotiated but most of the new provision had yet to start. A portfolio of mentoring, including peer mentoring provision, was in its infancy.
- HP42 All prisoners were allocated an offender supervisor on arrival but there was no system to ensure that they were interviewed to identify any immediate resettlement needs. Most offender supervisor caseloads were too large to be managed effectively and they had too little contact with the prisoners in their care. Too many sentence plan reviews were late, most of which were the responsibility of offender managers in the community. Offender assessment system (OASys) assessments were detailed and comprehensive and the quality of some elements of the sentence plan was good but the risk of serious harm assessments were weak. Contributions from other departments were good and the use of P-Nomis to record contacts with prisoners ensured good information sharing with personal officers.
- HP43 Categorisation reviews were conducted on time but some category D prisoners had to wait too long to be transferred to open prisons. Release on temporary licence (ROTL) was used well for resettlement purposes but resettlement leave was not granted over weekend periods, when the benefits would be greatest.
- HP44 Within the establishment, provision for indeterminate-sentenced prisoners was generally adequate, although the lack of offender manager oversight for lifers was of concern. Most prisoners serving indeterminate sentences for public protection were over tariff. They were suitably prioritised for access to offender behaviour programmes.
- HP45 Public protection procedures were well developed, with effective systems for identifying and assessing prisoners presenting a risk of serious harm.
- HP46 Support for prisoners needing accommodation on release was available through Nacro via the pre-release board and few prisoners were released without accommodation. There was insufficient finance and benefit advice but access to banking services was good.
- HP47 The delivery of employment, training and education resettlement provision was disjointed. An employability course was not sufficiently linked to release dates and resettlement needs. High-quality pre-release employment and learning advice was provided by Nacro, although few prisoners accessed the service. Job-search provision was underdeveloped and there were few work placements through ROTL.
- HP48 Pre-release health care planning was effective. A named nurse had the lead for managing the discharge of patients, and provided them with summaries of their care and treatment and details of local GPs.

- HP49 The drug strategy was yet to be informed by a needs analysis and made little mention of alcohol services. Prisoners could access an alcohol education course but the CARAT service remit still excluded ongoing work with the increasing number of prisoners whose primary problem was alcohol. Prisoners had good access to CARAT services and the service had established good coordinated care planning and throughcare links. The RAPt programme was well established, with excellent results, and RAPt orderlies ran peer-led user groups.
- HP50 The visits centre was too small to cater for the number of visitors attending and some had to wait outside. Visits were usually fully booked well in advance, suggesting insufficient provision.
- HP51 The children and families pathway was well developed and in our survey more prisoners than in comparator prisons said that they had been helped to maintain contact with family and friends. Good family support services were available through the community links coordinator and the twice-monthly family days were a popular and effective initiative but available only to enhanced prisoners. Prisoners had good access to courses to develop parenting skills and promote contact with their children.
- HP52 Accredited offending behaviour provision was not based on a needs analysis, and the range and quantity of provision did not meet the needs of the population. Only two programmes were run, offering only 57 places and resulting in long waiting lists and delays in progression for prisoners.

Main concerns and recommendations

- HP53 Concern: The service provided by the new prisoner escort contractor was poor. Prisoners were delayed in being transferred to court and other establishments and some were arriving at the establishment late and missing out on key services.

Recommendation: The quality of the escort service should be reviewed and transfers should be predictable and timely.

- HP54 Concern: The cleanliness of Howard wing was generally very poor; showers in particular were dirty and many did not work. Staff-prisoner relationships on this wing were generally less positive than across the rest of the establishment.

Recommendation: Howard wing should be brought up to, and maintained at, an appropriate standard of cleanliness and the reasons for less positive staff-prisoner relationships explored and addressed.

- HP55 Concern: Muslim prisoners reported more negatively than their non-Muslim counterparts across a range of important areas of the regime, including safety, relationships with staff and access to the regime.

Recommendation: The negative perceptions of Muslim prisoners should be explored and addressed.

- HP56 Concern: Although there were enough activity places for all prisoners, too many prisoners were locked up during the day, unemployed or not required for work. The number of prisoners allocated to menial wing cleaning work was high and they were insufficiently occupied for much of the day. Some prisoners had to wait long periods before being assessed for employment.

Recommendation: The allocation to work process should be expedited. The number of prisoners allocated to menial wing work should be reduced and good quality education, training and/or work places fully utilised.

HP57 Concern: The resettlement strategy and action plans were out of date. An analysis of the needs and risks of the population had not been undertaken and the strategy and some of the reducing reoffending pathways had not been informed by the specific needs of the population.

Recommendation: A resettlement needs analysis should be undertaken to inform the resettlement strategy and development of reducing offending provision.

HP58 Concern: Far too many OASys and sentence plans were out of date. Offender managers often did not complete plans and reviews on time. Offender supervisor caseloads were too large for prisoners to be managed effectively; contact between offender supervisors and prisoners was inadequate; interviews, assessments and reviews were often late; and risk of serious harm assessments were weak.

Recommendation: Offender assessment system (OASys) risk assessments and sentence plans should be complete and up to date for all prisoners. The resources for offender supervisors should be reviewed, to allow them sufficient time to undertake the full requirements of the role.

Progress on main recommendations since the previous report

(The paragraph numbers at the end of each main recommendation refer to its location in the previous inspection report)

Main recommendations

MR1 Prisoners should routinely speak to a member of staff in private on their first night. (HP47)

Achieved. Prisoners met reception staff in private before being moved to first night accommodation. They were offered a second chance to speak to staff in private on arrival on the wing, and induction staff spoke individually to prisoners as they were located in their cells.

MR2 Interpreting services should be used in all cases where confidentiality is required, and more translated information about what is available at the prison should be provided after induction to prisoners for whom English is not a first language. (HP48)

Not achieved. The prison had access to a professional telephone interpreting service but it had been used on only four occasions in the nine months before the inspection. There was a comprehensive list of prisoners who were willing to interpret for others, and staff made good use of this resource, but did not always consider the need for confidentiality. The range of translated written documentation and notices was limited. In the foreign nationals office there was a selection of translated information about immigration matters, and the disability liaison officer had some information for prisoners in a range of languages held on the computer network. The issue was mitigated to some extent by the help and advice provided by foreign national prisoner representatives, who attempted to ensure that prisoners understood the regime.

We repeat the recommendation.

MR3 The prison should take urgent action to ensure that the violence reduction strategy is fully implemented and that the instigators of violence are targeted and challenged. (HP49)

Achieved. At the time of the previous inspection, the violence reduction strategy had only just been implemented and was not fully embedded. Although the policy document was over-long and difficult to understand, considerable attention had been paid towards reducing acts of violence and challenging perpetrators. Additional staff resources had been given to the safer custody team in the form of violence reduction officers, who carried out prompt investigations into violence-related incidents and interviewed all perpetrators and victims. Some staff training had taken place and staff routinely reported acts or allegations of violence to the team. Practical steps had been taken to make prisoners feel safer, such as improved lighting and painting the corridor walls white (see also section on bullying and violence reduction).

MR4 Managers should support staff in ensuring effective supervision and challenging poor behaviour on residential units and during movements. (HP50)

Achieved. Staff supervision had improved considerably on the residential units and during prisoner movements, and we observed good interaction between staff and prisoners during these times (see also recommendation 2.24).

- MR5 **Managers should explore the reasons for the more negative perceptions of black and minority ethnic, foreign national and Muslim prisoners and take appropriate action. (HP51)**

Achieved. A study based on a range of focus groups with prisoners had reported on their perceptions and the attitudes underlying them. The report had identified issues of staff–prisoner interactions which required improvement and the need to communicate more effectively. Examples of appropriate action taken included the establishment of regular cultural consultation groups, diversity representatives and improvement of the celebration of national and religious festivals. Our survey showed marked improvements in the responses of foreign national prisoners since the previous inspection and some progress in the responses of black and minority ethnic prisoners, although some were still considerably more negative than those of white prisoners. The responses of Muslim prisoners in important areas remained far worse than those of non-Muslims (see section on diversity).

- MR6 **All prisoners should have access to at least two sessions of recreational PE every week. (HP52)**

Not achieved. Although all prisoners were able to access the limited PE provision once a week, the proportion that accessed PE more than once a week remained low (see section on physical education and health promotion).

We repeat the recommendation.

- MR7 **Offender assessment system (OASys) risk assessments and sentence plans should be complete and up to date for all prisoners. (HP53)**

Not achieved. At the time of the inspection, not all prisoners had an OASys assessment. Prisoners regularly arrived from local prisons in London without having had an initial OASys assessment completed, putting an additional strain on the prison's offender management team. Over 80 sentence plans were late, of which around 80% were the responsibility of the offender manager in the community and 20% the responsibility of the prison (see also recommendation 9.11).

See main recommendation HP58.

- MR8 **Specialist advice on finance and benefits should be available. (HP54)**

Not achieved. No specialist advice on finance and benefits was available. This had previously been provided by Citizens Advice but the arrangement had ended following the removal of funding earlier in 2011. Jobcentre Plus provided a small amount of advice on the claiming of Community Care grants but there was no specific advice available in relation to managing debt or how to claim benefits (see also section on resettlement services).

We repeat the recommendation.

Progress on recommendations since the last report

Section 1: Arrival in custody

Courts, escorts and transfers

Expected outcomes:

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

- 1.1 Prisoners should be given adequate food, drink and comfort breaks when travelling long distances to the establishment. (1.6)

Not achieved. Since the implementation of a new contract to manage prisoner escorts (see additional information), prisoners had not always been given food, drink and comfort breaks during long journeys to the prison (see main recommendation HP53).

- 1.2 Prisoners should only be strip-searched in reception as a result of a risk assessment. (1.7)

Achieved. Risk assessments took place and searching was carried out accordingly.

- 1.3 Reception should be open to receive and process prisoners on the occasions when they arrive during the lunch period or after 5pm. (1.8)

Achieved. Reception staff contacted escorting staff to ascertain arrival times for prisoners on their way to the establishment and ensured that reception was staffed for those arriving during the lunchtime period. The number of late arrivals had reduced considerably until the implementation of the new escorting contract. However, staff ensured that late arrivals were received and processed.

Additional information

- 1.4 Escort services were provided by two providers. Serco Wincanton were responsible for the collection of prisoners for 'in area' moves and for delivery and return from most courts and this contract was running well. GeoAmey, under a newly developed contract, provided inter-prison transfer services. Many problems had arisen with this new contract including non-arrival of scheduled escorts for transfers without prior notification, late arrival of prisoners and lack of communication with the escort providers. This had led to an unpredictable service which resulted in some prisoners not having access to key provision on their first night including health care screening, showers and adequate clothing (see main recommendation HP53).

- 1.5 Reception staff worked diligently to overcome these problems. Interactions with prisoners were excellent, staff were polite and respectful and we saw them giving long explanations to prisoners whose escorts had been cancelled without notice and then rescheduled later.

- 1.6 The cellular vehicles we looked at were reasonably clean, although in our survey only 43% of prisoners, against the 53% comparator, rated the cleanliness of the vehicles as good or very good. Escort staff were polite in their dealing with prisoners.
- 1.7 Documentation was checked thoroughly before prisoners were accepted. In our survey, 89% of prisoners said that their property had arrived at the establishment with them, which was better than at the time of the previous inspection and in line with the comparator. Not all property arrived with prisoners on the days we inspected the reception process but staff made telephone calls to trace missing items and arrange for them to be forwarded to the establishment.
- 1.8 All the prisoners we spoke to had been given at least 24 hours' notice of their transfer to the establishment, and in our survey 23%, better than the 18% comparator, had received advance information about what would happen to them once they arrived. There was a supply of clothing for prisoners on release and they were given holdalls for their property on discharge.

First days in custody

Expected outcomes:

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

Reception

- 1.9 Information should be made available in the most frequently used languages. (1.19)

Achieved. First night information was provided in a range of languages, although some aspects, such as the core day and induction programme, were out of date.

Housekeeping point

- 1.10 The first night information should be reviewed and updated.

- 1.11 The prisoner orderly should not have access to prisoners' property. (1.20)

Achieved. The prisoner orderly had no access to prisoners' property in reception.

- 1.12 Cell sharing risk assessments should always be carried out in private. (1.21)

Achieved. Cell sharing risk assessments were carried out in private in reception.

- 1.13 All prisoners should be able to make a telephone call and take a shower on their first night. (1.22)

Partially achieved. Prisoners were generally able to make a telephone call in reception before going to Dixon wing. However, those who arrived late on a Friday did not always get the chance to have a shower before being locked up on their first night.

We repeat the recommendation.

- 1.14 **Prisoners should be able to receive a full prison shop order within 24 hours of arrival. (1.23)**

Not achieved. Prisoners were given reception packs but were unable to receive a full shop order within 24 hours, despite DHL (the shop provider) being on site.
We repeat the recommendation.

- 1.15 **The length of time that prisoners spend in reception should be minimised. (1.24)**

Achieved. Prisoners were generally dealt with swiftly in reception.

Additional information

- 1.16 The reception area was small but clean, and adequate for the small number of prisoners passing through it. A large holding room, with access to a toilet, was used for new arrivals, and two smaller holding rooms for searching or holding prisoners before being returned to the wing from release on temporary licence. There was a large amount of information available, mostly in English, and a television. A reception video made by the establishment was shown to those who had not been at the prison before. A shower and PIN telephone were available but the shower was not used.
- 1.17 A team of Insiders (peer supporters) and an orderly worked in reception, meeting and greeting all new arrivals. They supported prisoners through the reception process and arranged for clothing to be supplied by the clothing store. However, the unpredictability of the new escort contract (see section on courts, escorts and transfers) had resulted in some prisoners arriving after the store had closed, and supplies of clothing were not kept either in reception or on the induction wing. We found six new receptions who had not received clean clothes for four days, at least two of whom had no clothing of their own to change into. All prisoners were offered a choice of prison shop packs, all of which included open PIN telephone credit for immediate use. The cost was recovered at a reasonable rate.
- 1.18 We observed relaxed interactions between staff and prisoners in reception, with the holding cell door kept open when circumstances allowed. Prisoners we spoke to said that they had been treated well by reception staff. New receptions were offered food and drinks on arrival, and on request after that.
- 1.19 Most prisoners, except those arriving late, were seen by health services staff privately in reception. Those who were not seen on their day of arrival were seen the following day.

Further recommendation

- 1.20 All new prisoners should be provided with clean clothing on arrival.

First night

- 1.21 **The reasons for prisoners having poor perceptions of their first night at the prison, including not feeling safe, should be explored and any necessary remedial action taken. (1.25)**

Achieved. A safety survey had been carried out and analysed. Staff carried out private interviews in reception, and Insiders and induction staff met new receptions and took them to

the induction wing, providing assurances that any uncertainty about safety was mitigated. In our survey, 87% of prisoners reported feeling safe on their first night, which was better than the comparator and than at the time of the previous inspection. However, 80% of Muslim prisoners, compared with 90% of their non-Muslim counterparts, said that they had felt safe on their first night but we were unable to ascertain the reason for this during the inspection.

Additional information

- 1.22 All prisoners were taken to Dixon wing on their first night and located in single cells on the ground floor. Cells were clean but sparsely furnished. Wing staff and Insiders helped new arrivals to settle in. All prisoners who were new to the prison met Insiders in the induction room for an initial talk and were given written information about their first night (see recommendation 1.9 and housekeeping point 1.10). Insiders also provided help with completing forms and explaining rules and regulations. All prisoners were advised of the identity of their personal officer on their first night.

Induction

- 1.23 **The induction booklet should be reviewed and produced in a format suited to those with learning difficulties. (1.26)**

Not achieved. Although detailed and informative, the induction booklet was still in a format unsuitable for those with learning difficulties.
We repeat the recommendation.

Additional information

- 1.24 The induction programme generally started on the next working day after reception. There had been a delay in prisoners accessing the programme in the week before the inspection because of the increase in the operational capacity and an influx of new arrivals. All prisoners were up to date with induction during the inspection.
- 1.25 Induction took part in workshop five, which had been specifically set up for this purpose. The area provided a suitable environment and was large, bright and airy. Induction staff maintained a detailed database on which they recorded prisoners' completion of each induction module. An induction passport was started during induction. In our survey, 98% of respondents said that they had undertaken an induction course, which was better than the 93% comparator, and 64%, similar to the comparator, that it had covered everything they needed to know.
- 1.26 The induction programme covered most aspects of prison life but a key exception was an assessment of initial resettlement needs (see section on offender management and planning). Educational assessments were carried out and prisoners were visited by education, counselling, assessment, referral, advice and throughcare (CARAT), chaplaincy and Tribal (employment and training advisors) staff. There were large gaps in the programme where no activities were scheduled, and prisoners were locked up during these times. They were also locked up while waiting for allocation to activities following induction. Many complained of long waits to get into work at this time (see section on learning and skills and work activities). Information given to prisoners could be translated when required.
- 1.27 Prisoners had continued access to Insiders during induction and were supported by two induction orderlies, who prepared induction packs and offered assistance.

Further recommendation

1.28 Prisoners should be kept fully occupied during induction.

Section 2: Environment and relationships

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.

Accommodation and facilities

2.1 Two prisoners should not share cells meant for one. (2.15)

Not achieved. Single cells continued to be occupied by two prisoners. An increase in the operational capacity following the civil unrest in August 2011, had resulted in some very small cells being used for two prisoners, with insufficient space for the additional furniture required. **We repeat the recommendation.**

2.2 Managers should monitor responses to cell call bells to ensure swift response, including those areas without an automated call system. (2.16)

Not achieved. Managers were unable to show us evidence of monitoring of cell call bells on any of the wings. **We repeat the recommendation.**

2.3 Managers should investigate methods for reducing the noise levels on Howard unit and then implement them. (2.17)

Achieved. A noise reduction policy had been developed and implemented. P-Nomis records showed that staff challenged prisoners under the policy in an attempt to reduce noise levels on this wing. The wings appeared generally quiet during the inspection.

2.4 Sufficient bedding and prison-issue clothing in all sizes should be available. (2.18)

Achieved. A system had been developed and implemented whereby prisoners submitted an order for clothing and bedding. The orders were filled by stores and delivered weekly.

2.5 Prisoners should be able to have clothing sent in through the post and handed in on visits. (2.19)

Not achieved. The policy prohibiting the sending or handing in of property remained in force, except for emergencies. Many prisoners complained about having to buy new clothing when they had sufficient clothing at home. **We repeat the recommendation.**

2.6 Charges for telephone calls should be brought into line with those in the community. (2.20)

Partially achieved. Although some reductions had been made, calls continued to be set at a slightly higher rate.

- 2.7 **Sound-proof booths should be installed in the rooms in which the telephones are located. (2.21)**

Partially achieved. A programme of work was under way to provide individual booths for telephones.

- 2.8 **Telephones should be repaired within 24 hours of being reported as out of order. (2.22)**

Achieved. All telephones were in working order and staff and prisoners said that they were repaired swiftly when problems occurred.

Additional information

- 2.9 External areas were clean and pleasant, with well-planted gardens, benches and informal, unfenced exercise areas. The environment was well maintained and enjoyed by prisoners during external association periods.
- 2.10 Internal areas were generally clean, with the exception of Howard wing, which was dirty and untidy (see main recommendation HP54). The standard of accommodation varied across the residential units. The older accommodation was clean but cells were smaller. Accommodation on Narey wing and the annexe was particularly good, with the former having en-suite showers. Prisoners on Howard wing, Narey wing and the annexe had privacy keys for their cells. Association areas were large and well equipped, and well used by prisoners. There was a range of information displayed on all wings.
- 2.11 The offensive display policy was not consistently enforced and we saw many examples of inappropriate materials displayed in cells.
- 2.12 There was regular consultation with prisoners in the form of monthly meetings with senior officers, bimonthly meetings with residential governors and quarterly meetings with the governing governor. Prisoner representatives complained that some issues took a long time to resolve. Minutes showed that many items were raised at the quarterly meetings with the governor, despite efforts by other managers to persuade prisoners to raise them at the more frequent meetings. We noted that wing issues were dealt with reasonably swiftly when raised in the correct forum.
- 2.13 There was no restriction on the amount of mail that prisoners could send and receive. The prison paid for early delivery of mail and often received a second delivery later in the day.
- 2.14 The mail room was staffed regularly during the week but was often left without staff resources on a Saturday, leading to delays in dealing with weekend mail.
- 2.15 There were robust systems for dealing with legally privileged correspondence, and on the few occasions when it had been opened in error, a letter was sent to the prisoner explaining the circumstances. Mail for prisoners subject to public protection and security measures was treated appropriately, and the information sent to the mail room was updated regularly. Besides this, no more than 5% of mail was read.
- 2.16 Prisoners could choose to have registered or recorded mail opened by two staff in their absence and any monies enclosed sent to the finance office for immediate credit to their accounts. They were also given the option to open their own registered/recorded mail in the presence of staff, and this was carried out in reception. When reception was busy, this could

take up to three days to arrange. While reception staff made efforts to ensure that mail was dealt with quickly, this did not always happen.

- 2.17 There were sufficient telephones for the prison population, and additional telephones had been installed on every wing since the previous inspection. Access to telephones was reasonable for all prisoners, except those on the basic regime (see section on incentives and earned privileges). Prisoners signed a compact advising them that their calls could be monitored and this was explained verbally by induction staff and Insiders.

Housekeeping point

- 2.18 The offensive displays policy should be applied consistently.

Clothing and possessions

No recommendations were made under this heading at the previous inspection.

Additional information

- 2.19 All prisoners, except those on the basic regime, could wear their own clothing. There were adequate laundry facilities on each wing and prisoner orderlies were employed to carry out laundry duties.
- 2.20 Prisoners could make applications to access their stored property. Records showed, and we observed, that these were dealt with in a reasonable time by reception staff. The facilities list gave clear information about the property that prisoners could have in possession, and clothing allowances were adequate.

Hygiene

No recommendations were made under this heading at the previous inspection.

Additional information

- 2.21 Prisoners reported that they had ample access to cleaning materials and sufficient time to keep their cells clean. All prisoners, except those on the basic regime, had sufficient access to baths and showers (see section on incentives and earned privileges). Toilet and shower areas were clean and suitably screened but some showers did not work and water temperatures fluctuated on the older wings.
- 2.22 All wings had been issued with curtains and these were being fitted during the inspection. Prisoners on the standard and enhanced levels of the incentives and earned privileges (IEP) scheme could have duvets.

Further recommendation

- 2.23 Showers should be repaired and supplied with constant water temperatures across the wings.

Staff–prisoner relationships

Expected outcomes:

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

- 2.24 Staff should actively engage with prisoners, particularly during association and exercise time. (2.36)

Achieved. We observed that most staff engaged well with prisoners, particularly during the outside association periods.

- 2.25 Wider consultation, involving different groups represented at the establishment, should take place, both to test out policies and to gain an understanding of prisoners' experience of the prison. (2.37)

Achieved. A range of prisoner committees had been developed, with regular consultation taking place (see sections on residential units and diversity).

- 2.26 Poor behaviour should be actively challenged by staff. (2.38)

Partially achieved. Most staff challenged poor behaviour by prisoners and there was evidence of this in the P-Nomis case records we examined. However, we saw prisoners smoking freely on Howard wing and this went unchallenged by staff (see main recommendation HP54).

Additional information

- 2.27 We observed good–staff prisoner relationships across all wings, with the exception of Howard wing, where some staff appeared indifferent and distant at times. Individual interviews we carried out with 23 prisoners supported our findings, including the negative views about staff on Howard wing (see main recommendation HP54). Prisoners were positive about receiving adequate support from staff, although many said that they would be selective about whom they spoke to. They were mixed in their views about staff interaction, with some saying that contact was limited but positive, and others that staff spent too long in offices using the public address system to communicate with prisoners.
- 2.28 We saw most prisoners being addressed by their preferred names, and staff acting professionally and respectfully, although some prisoners said that staff used inappropriate and disrespectful language.
- 2.29 In our survey, 74% of respondents said that they had a member of staff they could turn to for help, and 77% that most staff treated them with respect, both of which were in line with the comparators. Muslim prisoners were considerably less positive than their non-Muslim counterparts about staff (see section on diversity and main recommendation HP55).

Personal officers

Expected outcomes:

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

- 2.30 All personal officers should introduce themselves to prisoners on their caseload as soon after their arrival on the wing as possible, to establish a working relationship. (2.46)

Achieved. The personal officer scheme required officers to introduce themselves to prisoners within 24 hours of them being assigned, and our examination of case notes showed that most did so. All prisoners were advised of their personal officer by letter on their first night. There were some delays in officers introducing themselves when prisoners changed wings but most did so within a week.

- 2.31 Managers should support personal officers to encourage sustained positive behaviour and challenge poor behaviour, both verbally and in writing, through recommendations for promotion or demotion on the incentives and earned privileges scheme. (2.47)

Achieved. Managers checked IEP reviews to ensure fairness and procedural correctness and gave written and verbal advice and support when required. Managers were required to authorise all promotions and demotions on the IEP scheme and records showed that reviews were carried out when required.

- 2.32 There should be regular and thorough management checks of the personal officer scheme which evaluates the amount of time being spent by personal officers with those on their caseload, as well as the quality of entries in the wing history sheets. (2.48)

Achieved. Managers made regular checks of P-Nomis entries in prisoners' case notes. We saw evidence of encouragement for staff when good entries were made and advice given when more information was needed. A new database had been devised which could be used to highlight a lack of entries in any individual prisoner's case notes.

- 2.33 The role of the personal officer should be extended to support prisoners in achieving targets set, following up referrals and supporting reintegration back into the community. (2.49)

Achieved. The personal officer scheme had been extended to include elements of sentence planning and reintegration. We saw evidence of this in the case notes we examined, where officers regularly commented on progress, resettlement and reintegration needs and support offered.

Additional information

- 2.34 In our survey, 81% of prisoners, more than at comparator establishments (76%), knew who their personal officer was and 66%, in line with the comparator, said that he or she was helpful. The names of personal officers were recorded on most cell cards.

- 2.35 The personal officer scheme was brief but detailed the responsibilities of staff and managers and gave information about what was required under the scheme. The level of engagement with the scheme was generally good. In the 25 files we examined, there were regular

comments; these were generally interactive and showed a good knowledge of the individual circumstances of prisoners.

- 2.36 In our individual interviews with prisoners, they responded positively about personal officers helping and supporting them, with 15 out of 23 saying that they had received help. However, prisoners indicated that much of the initiative for sustaining contact with personal officers came from them.

Section 3: Duty of care

Bullying and violence reduction

Expected outcomes:

Everyone feels safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Active and fair systems to prevent and respond to violence and intimidation are known to staff, prisoners and visitors, and inform all aspects of the regime.

- 3.1 The new violence reduction policy should be implemented in full and training in the new procedures given to all staff. (3.14)

Partially achieved. There was evidence to show that staff were confident reporting incidents of violence to the safer custody team, which also received information routinely from the health care and security departments via unexplained injury forms and security information reports (SIRs). However, only 81 staff had received training on the new procedures since the beginning of 2010 and the policy/strategy was not displayed for the benefit of staff or prisoners (see also recommendation MR3).

- 3.2 Matters discussed at the weekly violence reduction forum should be followed up in full and a record made of all actions taken. (3.15)

Partially achieved. The weekly violence reduction meeting was well attended but the minutes were difficult to follow and in some instances it was not always clear what action had been taken.

We repeat the recommendation.

- 3.3 Perpetrators of violence and bullying should be challenged when there is evidence of inappropriate behaviour. (3.16)

Achieved. Perpetrators of violence and bullying were challenged. This occasionally took the form of case management meetings involving the perpetrator but all perpetrators were interviewed by members of the violence reduction team and reasons sought to explain their behaviour.

- 3.4 Formal interventions for bullies should be introduced. (3.17)

Not achieved. The establishment offered formal courses, such as controlling anger and learning to manage it and the thinking skills programme, but the waiting lists for these were long and they were not necessarily suitable for identified bullies.

We repeat the recommendation.

- 3.5 The findings of the most recent anti-bullying survey should be incorporated into the new violence reduction policy. (3.18)

Not achieved. The most recent anti-bullying survey had been completed in September 2010, resulting in 114 completed questionnaires being analysed, but neither this nor the comprehensive exit survey had been used to inform the violence reduction strategy document

published at the same time (see also additional information).
We repeat the recommendation.

Additional information

- 3.6 Violence reduction procedures had improved considerably. In our survey, 9% of prisoners, better than the comparator (14%) and than at the time of the previous inspection (15%), said that they currently felt unsafe, and only 14% (against 19% at comparator establishments and also at the time of the previous inspection) that they had been victimised by another prisoner. Prisoners we spoke to did not express concerns about safety and said that incidents of bullying were taken seriously by staff.
- 3.7 In the prison's most recent anti-bullying survey in 2010, nearly two-thirds of respondents reported being on the receiving end of at least one incident indicative of bullying, with just over a third saying that they had experienced direct victimisation behaviour. However, the number of reported assaults, fights and unexplained injuries was not excessive, given the size and nature of the establishment, and was considerably lower than at the time of the previous inspection. Fewer prisoners than at the time of the previous inspection requested a move to the care and separation unit (CSU) for their own safety.
- 3.8 The safer custody team consisted of one full-time senior officer, with administrative support. Two violence reduction officers had been appointed since the previous inspection. The work undertaken by the team was comprehensive and wide ranging. A large volume of data was collected and collated by the team for the safer custody meeting and violence reduction forums. A senior manager within the residential function had oversight of safer custody matters.
- 3.9 We examined several entries from wing observation books and found that in most cases details of bullying or violent incidents were referred on appropriately. Violence reduction officers then interviewed the perpetrator and victim and completed a simple investigation, with recommendations for follow-up action. This information was shared with relevant departments in the prison, particularly the sentence management unit, to help to inform sentence planning. Completed investigations frequently resulted in a support plan being opened. For perpetrators, this meant being placed on a level of monitoring; for more serious incidents, they were demoted to the basic regime. Most of the support plans we examined lacked evidence of any meaningful interactions with staff, and it was difficult to see how progress was measured. Case review meetings were well attended and often involved the perpetrator.

Self-harm and suicide

Expected outcomes:

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

- 3.10 All staff should be trained in assessment, care in custody and teamwork (ACCT) procedures. (3.28)

Not achieved. A total of 113 members of staff had received ACCT foundation training since the beginning of 2010 but this figure fell well short of the requirement to train/refresh all staff who had contact with prisoners.

We repeat the recommendation.

3.11 Night time observations for prisoners subject to ACCT support should be unpredictable. (3.29)

Achieved. We examined a number of closed and active ACCT documents and found that night-time observations were unpredictable.

3.12 The constant observation cell on the care and separation unit should be closed. (3.30)

Not achieved. The cell had been used on three occasions since the start of 2011. On one occasion, a prisoner had spent three days in the cell and it was unclear whether twice-daily reviews had taken place. The other two occasions had involved the same prisoner but some documentation was missing in these cases (see additional information and further recommendation 3.19).

Additional information

- 3.13** The meeting was well attended, and the safer custody coordinator presented a detailed monthly report, although there was insufficient data analysis at the meeting to provide information about patterns and trends of self-harming behaviour. The report recorded the number of ACCT documents opened and closed during the preceding month, with a brief summary of prisoners of concern. Samples of closed ACCT documents and violent reduction support plans were discussed as a quality control measure.
- 3.14** The suicide prevention policy was comprehensive but out of date. The number of self-harm incidents was not high. There had been 62 ACCT documents opened in the year to date and two were open at the time of the inspection. There had been no recent self-inflicted deaths and one death by natural causes.
- 3.15** The quality of documentation was generally good. Case reviews were multidisciplinary and the quality of individual care plans was satisfactory. We attended a case review at short notice for a prisoner who had self-harmed and was also the subject of a perpetrator support plan and on the basic regime; this was well attended and supportive.
- 3.16** A database was kept of all prisoners on ACCT documents past and present, which included their location when the ACCT was opened and closed. Of the ACCT documents opened in the year to date, 12 had been initiated for prisoners located in the CSU. One of these had been for a prisoner who had self-harmed while on the unit, and it was suggested in the document that he had done so because of the unit's no-smoking policy; it was not clear from ACCT documentation that alternative accommodation had been considered.
- 3.17** The gated constant observation cell in the CSU was clean but it remained an unsuitable location for a prisoner in crisis. Documentation relating to the use of this cell had been poorly completed and did not record the times when prisoners were located or removed. The constant observation cell on Ellis wing was clean and well appointed and provided good observation from an adjoining cell.
- 3.18** There were 13 Listeners; in our survey, fewer prisoners than at comparator establishments (44% versus 61%) said that they could speak to a Listener at any time. The Listeners we

spoke to reported difficulty in accessing some areas of the prison, particularly the CSU, but this had improved recently. Managers we spoke to explained that Listeners could visit any area of the prison but that the CSU required a pre-arranged appointment. We were assured that there were no restrictions preventing access to Listeners and that those who had encountered difficulties did so during their follow-up visits to prisoners they had supported previously, which were conducted on their own initiative. The Listener suite on Howard wing was a bare, uninviting and dirty cell, with an unscreened toilet.

Further recommendations

- 3.19 The constant observation cell in the CSU should be closed and records should be maintained of the use of the constant observation cell on Ellis wing.
- 3.20 The Listener suite on Howard wing should be made suitable for use.
- 3.21 Alternative accommodation should be considered for prisoners located in the care and separation unit on an open assessment, care in custody and teamwork (ACCT) document if necessary, and this should be evidenced.

Applications and complaints

Expected outcomes:

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

- 3.22 All responses to applications should be logged and followed up after seven days. (3.38)

Not achieved. Each wing had a database of applications logged but there were many gaps, which highlighted responses that had not been followed up within seven days. There was no formal system to follow these up.

We repeat the recommendation.

- 3.23 The reason for the high number of complaints should be investigated and action taken to ensure issues are dealt with at the appropriate level. (3.39)

Achieved. The level and content of complaints was discussed routinely at the monthly senior management team performance meeting. The complaints we sampled showed that they were dealt with at an appropriate level.

- 3.24 All responses to formal complaints should be respectful and address the issues raised. (3.40)

Achieved. We examined 50 complaint forms and, with the exception of one, all were respectful and addressed the issue raised.

- 3.25 Interim replies to complaints should be followed up by a final response, and this response logged. (3.41)

Achieved. From our sample of 50 complaint forms, there were a few for which interim replies

had been issued. In each case, the delay had been justified and followed up by a final response.

Additional information

- 3.26 In our survey, most prisoners said their complaints had been dealt with fairly and more prisoners than at comparator establishments (48% versus 39%) said that their complaint had been dealt with promptly (within seven days)
- 3.27 Some wings were missing either complaint forms, confidential access envelopes or both and the complaints boxes were emptied by the night orderly officer. In our survey, 35% of respondents said that they had been made or encouraged to withdraw a complaint, which was worse than the 24% comparator.
- 3.28 A total of 1,650 stage 1 complaints had been submitted in the year to date, compared with 2,594 at the same stage in 2010. Staff attributed this fall to the number of different application forms available and the willingness of staff to try to resolve issues at the earliest opportunity.
- 3.29 Some qualitative analysis of replies took place at the monthly senior management team performance meeting, and functional heads were required to sample 5% of complaints relating to their areas monthly. Finance and security/operations staff had not completed any qualitative checks for the preceding six months.

Housekeeping points

- 3.30 The prisoner complaints box should be opened daily by someone other than a uniformed member of staff.
- 3.31 The reasons behind prisoners' claims that they had been made or encouraged to withdraw a complaint should be investigated.

Legal rights

Expected outcomes:

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

- 3.32 The time for legal services officers to carry out their duties should be profiled separately from their other duties. (3.48)

Partially achieved. Time for legal services duties was set aside each Wednesday (eight hours) but we were told that the task was usually dropped. On average, the legal services officers received approximately eight hours a month between them to undertake their duties.

- 3.33 The leaflet on legal services provided on induction should be translated into a range of languages appropriate to the prison population. (3.49)

Not achieved. Prisoners were not provided with information on legal services as part of their induction and there were no leaflets available.

We repeat the recommendation.

- 3.34 All prisoners should be provided with free telephone calls to their legal representatives. (3.50)

Achieved. Prisoners requesting a legal telephone call were granted one without charge.

- 3.35 The number of computers and memory sticks available should be sufficient to ensure that any prisoner requiring the resource has ready access to it. (3.51)

Not achieved. There were only three 'Access to Justice' laptop computers available and the legal services officer had to juggle demand, prioritising those with greatest need.

- 3.36 The visits area should be adapted during legal visits to provide privacy for interviews held in the open area. (3.52)

Achieved. Prisoners had access to legal visits on midweek mornings, except Wednesdays. There were three private booths in the visits hall, which ensured privacy but also observation by staff. These booths could be requested by legal representatives.

Additional information

- 3.37 Legal rights services were adequate but most prisoners were unaware of the service. Legal rights staff had completed the relevant training.

- 3.38 A comprehensive legal services log was accessible to both legal services officers. In the year to date, there had been 148 records of contact with prisoners, whether by application or in person. Outcomes for prisoners were supportive and helpful.

- 3.39 In our survey, more prisoners than at comparator prisons (50% versus 41%) said that staff had opened letters from their legal representatives when they were not present. However, there was a clear protocol in the mail room to record such instances (see section on accommodation and facilities).

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.

- 3.40 Chaplains of all faiths should be accessible to prisoners. (3.63)

Partially achieved. The chaplaincy team comprised an Anglican coordinator and a full-time Muslim chaplain. There were also part-time Catholic, Methodist, Baptist and Salvation Army chaplains in post. This team was supported by sessional faith leaders covering all the recognised faiths in the prison, except for Rastafarianism, which 12 prisoners stated was their religion.

- 3.41 The washing facilities in the chapel area should be expanded. (3.64)

Achieved. There was a washing area adjoining the multi-faith room but this was rarely used. The Muslim chaplain had instructed prisoners attending Muslim prayers that they should prepare beforehand and present themselves ready to participate. This arrangement was

satisfactory for most prisoners and the washing facilities were adequate for the occasions when prisoners had not been able to wash beforehand.

3.42 Prisoners should be able to access items that are important for worship through the prison shop list. (3.65)

Achieved. The prison shop list contained a number of items for worship. Any prisoner who required items not on the list was able to buy them from catalogues, and the chaplaincy team also purchased more esoteric items on prisoners' behalf.

3.43 There should be alternatives to freeze-dried meals for fasting prisoners during Ramadan. (3.66)

Achieved. For the observance of Ramadan, the prison had purchased insulated food containers, and meals prepared in the kitchen had been provided.

3.44 More links should be established with external faith communities. (3.67)

Achieved. Christian groups visited the prison and led services and prisoner groups. There was no community chaplaincy but prisoners had been linked with church groups and mosques in the areas to which they were being released.

Additional information

3.45 There was a diverse range of religions represented in the prison population, with 38% recorded as Christian, 24% Muslim and relatively large populations of Sikh, Hindu and Buddhist prisoners.

3.46 In our survey, 67% of prisoners said that they were able to speak to a religious leader of their faith in private, which was better than the 58% comparator. Muslim prisoners were particularly well served in this regard, with 91% reporting positively.

3.47 Prisoners had free access to Muslim prayers and weekend Christian services but had to apply to attend groups which met during the week. Prisoners on the CSU were permitted to attend religious services and prayers, subject to a risk assessment.

3.48 Chaplaincy facilities were excellent, with a large, well-appointed Christian chapel, a multi-faith room which accommodated the large number attending Muslim prayers, spacious meeting rooms used for a range of groups, and office facilities.

3.49 The chaplains worked as an integrated team, covering their general duties on a rota basis for all prisoners who required their assistance, regardless of their faith or denomination. This included those on the CSU, subject to ACCT monitoring or who were sick.

3.50 The coordinating chaplain represented the team at prison management groups, including diversity, resettlement and safer custody. He also attended ACCT reviews. The team also contributed to important assessments and reports, including parole reports, sentence plans and release on temporary licence applications.

3.51 A comprehensive range of classes and groups were provided by the chaplaincy team and volunteers. These included faith development, Arabic classes, meditation and a victim awareness course. A mixed team of trained and student counsellors provided sessions to prisoners who requested them, and prison visitors saw those who did not have other visitors.

Substance use

Expected outcomes:

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

Clinical management

- 3.52 The practice of announcing the start of opiate medication administration over the public address system should be reviewed to ensure a greater level of confidentiality for the prisoners concerned. (3.79)

Achieved. Those requiring substitution therapy were all located on Ellis wing and were unlocked first thing in the morning, so that they could attend the treatment room on the wing to receive their medication.

Additional information

- 3.53 The integrated drug treatment system (IDTS) was well established, with links to other departments in the establishment. At the time of the inspection, 25 prisoners were receiving methadone maintenance treatment, 18 were on a detoxification regime and one was receiving Subutex. Prisoners we spoke to were confident that their drug addiction treatment needs were being met. Secondary detoxification was provided when required. Prisoners were asked to sign their specially designed prescription charts when they had received their substitution medication.
- 3.54 There were 13-week multidisciplinary review meetings for those on the IDTS programme. There was good joint working between health services; counselling, assessment, referral, advice and throughcare (CARAT); and Rehabilitation of Addicted Prisoners trust (RAPt) staff, who all attended the review meetings.
- 3.55 In our survey, 22% of prisoners, similar to the comparator and to the figure at the time of the previous inspection, reported having drug problems on arrival at the establishment. However, more prisoners than at the time of the previous inspection (17% versus 12%) reported problems with alcohol on arrival. Fewer prisoners than at comparator prisons and than at the time of the previous inspection (2% versus 9% and 7%, respectively) said that they had developed a drug problem at the prison.

Good practice

- 3.56 *Prisoners were asked to sign specially designed prescription charts when they had received their substitution medication, which encouraged a collaborative approach to their care.*

Drug testing

- 3.57 Mandatory drug testing should be appropriately staffed to ensure that all testing is carried out appropriately, within identified timescales and without gaps in provision. (3.80)

Partially achieved. Mandatory drug testing (MDT) took place on a random basis. The MDT positive rate was 2.25% year to date and achieved the key performance target each year. However, there had been a reduction in staffing earlier in 2011 from four to two, and the time allocated for MDT suspicion testing was no longer ring-fenced, so staff continued to be cross-deployed, resulting in delays and gaps in provision (see recommendation 3.58).

3.58 A mechanism to manage suspicion testing more effectively should be developed to ensure that tests are undertaken within the required timeframe. (3.81)

Not achieved. Cross-deployment of the staff responsible for drug testing meant that suspicion testing was rarely completed within 72 hours; only 18% of the suspicion tests requested had been completed in the previous six months.

We repeat the recommendation.

Section 4: Diversity

Expected outcomes:

All establishments should be aware of and meet the specific needs of minority groups and implement distinct policies or action plans, which aim to represent their views, meet their needs and offer peer support to ensure all prisoners have equal access to all facilities. Multiple diversity needs should be recognised and met.

Diversity

- 4.1 The diversity policy should be reviewed to ensure that all aspects of diversity are given proper and practical attention. (4.3)

Partially achieved. There was a comprehensive diversity policy, which covered all the diversity strands. While the policy contained an unequivocal commitment to equality of treatment, the structures described were out of date and did not correspond to current arrangements. The policy also lacked a detailed description of services, facilities and responsibilities of staff in certain areas.

We repeat the recommendation.

- 4.2 A full-time diversity manager should be appointed at a senior level. (4.4)

Partially achieved. The diversity manager was a governor who also had responsibility for three residential units and catering. In addition, a senior officer had responsibility for diversity, and also had orderly officer responsibilities. He was supported by the disability liaison officer (DLO) and the foreign nationals coordinator.

- 4.3 Managers should prioritise front-line staff, especially prison officers, for diversity training. (4.21)

Not achieved. There was no specific training for staff in prisoner diversity issues.

- 4.4 Dedicated time should be allocated for the performance of the staff diversity officer role. (4.22)

No longer relevant. The staff diversity officer role had been discontinued.

Additional information

- 4.5 A diversity committee met monthly, chaired by the governor, and included prisoner representatives. Departments represented included activities, security, residential and the Independent Monitoring Board but the prison had not secured the attendance of an independent external organisation. The committee considered some monitoring and the diversity manager's report. The current action plan contained a limited number of appropriate objectives and actions, and was updated with progress reports.
- 4.6 The prisoner diversity representatives were specialised in specific diversity strands, and had access to all wings. They were advertised on noticeboards, with their photographs, on all residential wings.

- 4.7 Diversity incident report forms (DIRFs) were freely available on each wing and there were secure post boxes. A total of 51 DIRFs had been received in the six months before the inspection, which was a reduction from the number at the time of the previous inspection, when there had been more than 10 DIRFs a month.
- 4.8 DIRFs were investigated thoroughly by the diversity officer and responses were reasonable, timely and respectful. When complaints against staff were upheld, they were challenged appropriately and advice was given. All DIRFs were checked by the governor and a quality check of a sample was conducted by an external academic.

Further recommendation

- 4.9 External independent organisations working in the prison with minority groups should be represented at the diversity meeting.

Race equality

- 4.10 **Structured approaches to confronting and addressing racist bullying behaviour should be included in the violence reduction strategy. (4.25)**

Achieved. When an investigation of bullying identified that there was an element of racism, it was reported to the diversity officer. He interviewed all prisoners identified, emphasised that their behaviour was not acceptable and provided guidance on their future conduct. Their cell sharing risk assessment was amended if required and residential staff were alerted both personally and on the prisoner record.

- 4.11 **Managers should commission a staff training needs analysis specifically to identify the deficits in competence and confidence contributing to the consistent negative perceptions of staff held by black and minority ethnic, foreign national and Muslim prisoners, and arrange additional training on the basis of that analysis. (4.19)**

Not achieved. There had not been a training needs analysis in regard to relationships with prisoners from minority backgrounds and there was no specific training for staff in managing prisoners from diverse backgrounds, except for some limited faith awareness training. In our survey, relationships with staff were still reported more negatively by black and minority ethnic and Muslim prisoners compared with their white and non-Muslim counterparts.

We repeat the recommendation.

- 4.12 **Managers should secure regular and consistent engagement with diversity issues in the establishment from at least one external community organisation. (4.20)**

Achieved. A community links manager had convened two conferences, which were attended by external organisations working with minority communities. From the contacts made through the initial conference, the prison had run two 'black self-development' courses, facilitated by the London Action Trust, each for 20 prisoners, and a third was due to start. Work had also started with the Southside Trust to train a black prisoner as a mentor and to continue support post-release, and with Mosaic, a Muslim community group.

- 4.13 **Named liaison officers should be given protected time, in all residential units, to carry out defined race equality duties. (4.23)**

Not achieved. There were named diversity liaison prison officers on each residential unit but they were not allocated time for the task and their role was limited to acting as a conduit for information from the diversity officer.

4.14 The reasons for the ethnic imbalance in segregation should be explored, and actions carried out to address these factors. (4.24)

Not achieved. There had been no exploration of the segregation of prisoners from a black and minority ethnic background. Systematic monitoring and analysing of race equality treatment (SMART) monitoring continued to take place at the diversity meeting and the representation of black and minority ethnic prisoners in segregation had not been out of range in the six months before the inspection.

4.15 Policies and actions to support prisoners from the Gypsy and Traveller community should be introduced, following an impact assessment. (4.26)

Achieved. In our survey, 6% of respondents (45 prisoners) reported that they were from a Gypsy/Traveller background, which was higher than the average for comparable establishments (4%). A prisoner representative from a Traveller background had been appointed and two meetings had been held for such prisoners in the year to date, including a Traveller Day in June 2011.

4.16 Managers should introduce regular consultation with groups of prisoners, including meetings with specific ethnic groups, to identify specific issues and needs and to plan actions accordingly. (4.27)

Achieved. Consultation meetings were held every week with prisoners from different ethnic backgrounds, including African, West Indian, Spanish-speaking, South-East Asian and Indian subcontinent groups (see section on foreign national prisoners).

Additional information

4.17 There were 392 prisoners recorded as being from a black and minority ethnic background, representing 51% of the prison population.

4.18 The representation of prisoners from black and minority ethnic backgrounds in the regime was reported through SMART monitoring to the diversity committee and appropriate action was taken to investigate and rectify the situation when monitoring results were out of range.

4.19 There were no displays in residential areas celebrating racial diversity.

Housekeeping point

4.20 There should be displays in residential areas which celebrate racial diversity.

Religion

4.21 Managers should undertake monitoring and analysis of treatment of prisoners by religion and develop specific strategies for dealing with this.

Not achieved. There was no monitoring of the representation of prisoners by religion in the

regime.

We repeat the recommendation.

Additional information

- 4.22 In our survey, more prisoners than at comparator establishments (63% versus 55%) said that they felt their religious beliefs were respected. However, only 65% of Muslim respondents said that there was a member of staff they could turn to for help with a problem (compared with 78% of non-Muslim prisoners), 35% that they had been victimised by staff (compared with 19% of non-Muslims) and only 63% that staff treated them with respect (compared with 83% of non-Muslims).
- 4.23 The reasons for this negative view were not readily apparent. We did not observe differential treatment and the Muslim chaplain told us that staff were fair in their treatment of all religious groups, including Muslims. He felt that their responses might have been reflective of the experience of Muslims in wider society, who are more likely to feel marginalised and distrusted (see main recommendation HP55).
- 4.24 The chaplaincy had developed training for staff in faith awareness (see recommendation 4.11) but it was not mandatory and few had attended.

Foreign nationals

- 4.25 **Foreign nationals should be treated on the same basis as British nationals in relation to assessment and sentence planning. (4.45)**

Achieved. The sentence management unit allocated prisoners for assessment and sentence planning regardless of their nationality. Foreign national prisoners were not treated as a lower priority, even if their deportation had been recommended.

- 4.26 **The effectiveness of the new practices on category D and release on temporary licence for foreign national prisoners should be monitored, with a formal review after an appropriate interval. (4.46)**

Achieved. The number of foreign national prisoners moved to category D establishments and granted release on temporary licence (ROTL) was monitored and reported to the senior management team every month. In the 12 months before the inspection, 30 foreign national prisoners had been moved to category D establishments and 60 had been granted ROTL for maintaining family ties, to work outside the prison and to attend training courses. Although the UK Border Agency (UKBA) opposed any relaxation of security for foreign national prisoners in whom they had an interest, the prison considered the range of risk factors.

- 4.27 **There should be regular and frequent face to-face access to agencies providing advice on immigration matters. (4.47)**

Not achieved. The frequency of visits to the prison by representatives of independent immigration advisory services had reduced since the previous inspection because there were arrangements in place to finance their provision. In the year to date, the Detention Advisory Service (DAS) had visited once and the Refugee and Migrant Justice organisation had ceased visiting. The International Organisation for Migration no longer provided advice concerning the facilitated return scheme. Prisoners were provided with free access to the DAS telephone helpline and the foreign nationals coordinator provided contact details for specialist solicitors.

4.28 There should be regular consultation meetings with groups of prisoners of particular nationalities or natural groupings of nationalities. (4.48)

Achieved. There were meetings of six different culturally aligned groups of foreign national prisoners weekly in rotation, so that each group met the foreign nationals coordinator approximately every two months. Matters raised in these groups were fed into the foreign national prisoner committee meeting.

Additional information

- 4.29** There were 200 foreign national prisoners at the prison at the time of the inspection. In our survey, responses from foreign national prisoners compared favourably with those from British national prisoners in many important respects. For example, 86% (against 76% of their British national counterparts) said that staff treated them with respect, and 12% (against 27%) that they had been victimised by staff. These indicators represented improvements since the previous inspection, when foreign national prisoners had reported more negatively than British nationals.
- 4.30** There was a comprehensive foreign nationals policy, which outlined specific services and facilities available to this group of prisoners. Governance was through a foreign national prisoners meeting, which was convened quarterly and attended by prisoner representatives.
- 4.31** There was a full-time foreign nationals coordinator, supported by seven foreign national representatives, who provided advice to prisoners and raised any concerns with the coordinator. The representatives were not formally trained but met regularly as a group with the coordinator. There were noticeboards on every residential unit identifying the foreign nationals coordinator and prisoner representatives.
- 4.32** The prison was designated a 'hub' by UKBA, and three UKBA staff were on-site, providing an information conduit with caseworkers and advice on immigration matters. As well as interviewing individual prisoners as required, they provided a weekly surgery which prisoners could attend by application. Although the prison UKBA team provided a valuable service, they were still not receiving decisions about deportation until close to the end of prisoners' sentences. Prisoners approaching the end of their sentence were advised about how to apply for bail if they were detained.
- 4.33** At the start of the inspection, there were five prisoners held beyond the end of their sentence; this reduced to three during the inspection week as deportations were effected. One had been held more than nine months after his sentence expiry because he could not be identified and had not been accepted at any immigration removal centre.
- 4.34** The special facilities available for foreign national prisoners included free air mail letters and free five-minute telephone calls to a foreign country, and those due for deportation could have a case of possessions sent in to the prison for collection on discharge. Free telephone calls were not available for those who received visits.
- 4.35** There had been regular events held to celebrate national days, which had included Nigerian, Jamaican and Colombian prisoners and invited guests.

Further recommendation

- 4.36 Free telephone calls should be provided to prisoners with relatives abroad, regardless of whether they receive visits.

Good practice

- 4.37 *The meetings of cultural groups and celebrations of national days maintained contact between prisoners of the same background.*

Disability and older prisoners

- 4.38 All equality impact assessments should take account of potential and actual impacts on prisoners with disabilities. (4.55)

Not achieved. During the inspection, we were not provided with any current impact assessments, although earlier diversity meeting minutes referred to some which had been started. We were told that the prison had not made a final decision on which areas would be assessed now that the mandatory requirement was not in force.

We repeat the recommendation.

- 4.39 Disability information documents should be available in the main languages spoken by prisoners. (4.56)

Achieved. The DLO had an information booklet published by the Department of Health and Prison Reform Trust in regular and easy-read formats. This was also available in pdf format in 24 languages, which could be printed as required.

- 4.40 There should be accommodation and support for prisoners who need to use a wheelchair. (4.57)

Not achieved. There was no accommodation that was suitable to accommodate a wheelchair, even though there was at least one prisoner using a wheelchair. This prisoner told us that the wheelchair was left outside his cell for movement around his wing but that he could not get it into his cell. His range of movement was limited by steps on the wing, which meant that he could not access external areas.

We repeat the recommendation.

- 4.41 Disability awareness training should be delivered to staff. (4.58)

Not achieved. There was no specific training in disability awareness and we found staff knowledge of assessment and care planning processes to be poor (see recommendation 4.44).

- 4.42 Protected time should be given for the work of the disability liaison officer. (4.59)

Not achieved. Disability liaison duties were carried out by a workshop manager, who was enthusiastic and experienced but had no time allocated to the task. He had to find time from his main job and told us that this often entailed working unpaid overtime.

We repeat the recommendation.

4.43 There should be monitoring by disability, to ensure equality of treatment and of access to the regime. (4.60)

Not achieved. There was no monitoring of the representation of prisoners in the regime by disability. In our survey, prisoners who declared a disability reported less favourably than other prisoners about the incentives and earned privileges (IEP) scheme (only 38% felt that the different levels encouraged them to change their behaviour, compared with 56% of other prisoners) and segregation (23% said that they had been segregated in the previous six months compared with 5% of other prisoners). However, they were more positive about relationships with staff, prison food, health care and access to exercise and the library. **We repeat the recommendation.**

4.44 Older prisoners with specific needs and all those with a disability should have, and be involved in the development and regular update of, a multidisciplinary care plan that sets out how their needs, including their social care needs, will be met. (4.61)

Partially achieved. The DLO met all prisoners who had identified a need during induction. He consulted them about their needs and identified reasonable adjustments, which he recorded on the electronic prisoner case record so that it was accessible to all staff responsible for the prisoner's care. Reasonable adjustments were then applied in the prisoner's initial residential location. However, we met two prisoners who had been moved from their initial location and had not continued to receive the planned level of care or reasonable adjustments. They had both been provided with trays with which to collect their food but these had not come with them to their new accommodation; one with mobility problems was located on a landing above the dining and association areas and the other had not been provided with the bedding required to relieve the symptoms of his condition. When we checked the electronic case record, we found that a care plan specifying these needs was in place but residential staff on the prisoners' current wing had not known to check on their requirements and no alert had been placed on the case record (see recommendation 4.41). **We repeat the recommendation.**

4.45 A carer, mentor or peer supporter scheme should be introduced for older prisoners and those with disabilities. (4.62)

Not achieved. Although we found some informal arrangements to assist prisoners with the collection of their meals, there was no structured scheme which selected appropriate carers, provided them with a specific job description and paid them for the service. **We repeat the recommendation.**

4.46 There should be regular consultation meetings with prisoners with disabilities. (4.63)

Achieved. Meetings had been held with prisoners registered as disabled in November 2010 and June 2011. It was not clear from the notes of the meetings what action had been taken in response to general issues raised by prisoners but individual needs had been noted by the DLO. The meetings had been attended by the diversity manager, the DLO and the prisoner representative but the health care department was not represented.

4.47 The issues raised by older prisoners in the recent questionnaire should form the basis of an action plan to improve conditions for this group. (4.69)

Partially achieved. A questionnaire had been undertaken in June 2010 and identified that the main concerns of older prisoners were that they should have access to dedicated gym sessions and provided with quieter residential areas. There was an action plan to address

these concerns and the findings had been reported back to the diversity committee. As a result, gym sessions had been introduced (see recommendation 4.49). No specific residential area had been allocated for older prisoners but we were told that most of those over the age of 50 were located on enhanced wings, away from noisier locations. Other issues raised as concerns were individual attention by staff, and access to work, health care and clothing but it was not clear what outcomes had resulted from the action specified in the plan.

We repeat the recommendation.

4.48 All equality impact assessments should take account of potential and actual impacts on older prisoners. (4.70)

Not achieved. See recommendation 4.38.

4.49 PE staff should provide sessions suited to all prisoners over 50, consulting them on their preferences. (4.71)

Achieved. A specific gym session was run once a week for prisoners over the age of 50 but they were not excluded from other sessions if spaces were available. Regardless of their age, all prisoners could state a preference for the type of gym activity they wished to undertake and were guaranteed their first choice.

4.50 There should be monitoring by age, to ensure equality of treatment and access to the regime for older prisoners. (4.72)

Not achieved. There was no monitoring which analysed the representation of prisoners in the regime by their age. In our survey, older prisoners were generally more positive than younger prisoners about their treatment, particularly regarding the IEP scheme (100% said that they were enhanced prisoners, compared with 75% of younger prisoners), segregation (none said that they had been segregated in the previous six months, compared with 8% of younger prisoners), relationships with staff, health care and access to association. They reported less favourably than younger prisoners on access to offending behaviour programmes.

We repeat the recommendation.

Additional information

4.51 Although the DLO recorded all prisoners who declared a disability, the prison did not keep an updated record of the number of prisoners with a disability in their current population. The DLO estimated that there were around 130 but in our survey only 10% said that they considered themselves to have a disability, which extrapolated to 77 prisoners.

4.52 Personal emergency evacuation plans (PEEPs) had been prepared for prisoners with disabilities who required them, and in each wing office there was a list of prisoners who required help. However, we found lists which were not up to date and did not correspond with the PEEPs held in the wing file. This discrepancy had arisen through prisoners moving location and information not travelling with them (see also recommendation 4.44).

4.53 Prisoners with disabilities who could not work were not consistently unlocked during the day and we met prisoners who told us that they did not have enough to do to occupy themselves.

4.54 The prison held a young population, with just 70 prisoners over the age of 50 at the time of the inspection. The oldest was 72 years old.

- 4.55 There were no specific activities for retired prisoners who did not work and they were not reliably unlocked during the working day. Retirement pay was £3.50 a week.

Further recommendations

- 4.56 The prison should maintain an up-to-date record of all prisoners who have declared a disability.
- 4.57 Retired prisoners and those with a disability who cannot work should be unlocked during the day and provided with suitable activities.

Housekeeping points

- 4.58 Personal emergency evacuation plans should accompany prisoners when they move location to a different wing.
- 4.59 Consultation meetings with prisoners with disabilities should be attended by a health services representative.

Gender and sexual orientation

- 4.60 **The policy and strategy on sexual orientation should be reviewed to ensure that a clear message is given to staff and prisoners, affirming the equal respect due to all prisoners, including strategies for preventing and dealing with discrimination on the basis of sexual orientation. (4.77)**

Achieved. There was a clear statement in the section of the diversity policy covering sexual orientation that discrimination on these grounds was not acceptable. The policy also described how prisoners and visitors could complain or seek support if they felt they were suffering discrimination.

- 4.61 **Action should be taken to challenge homophobic language and attitudes. (4.78)**

Achieved. There was evidence that homophobic language and behaviour was challenged. A complaint by a gay prisoner that he was being victimised by other prisoners had been dealt with thoroughly and the alleged perpetrators challenged. The complainant was being protected by a heightened level of monitoring and had been able to remain on his landing. Homophobic attitudes were also addressed in the mandatory 'Challenge It, Change It' training but this was directed towards positive work relationships more than the care of prisoners. Staff and some prisoners we spoke to told us that any disrespectful language, including homophobic, was challenged as part of maintaining good order.

- 4.62 **Information should be displayed in prisoner areas affirming equality of respect across the range of sexual orientation, and indicating sources of support and assistance. (4.79)**

Not achieved. Apart from one small notice on Fowler wing, there was no information affirming the right of gay and bisexual prisoners to equal treatment, and the unacceptability of discrimination. We were told that when such material had been displayed, it had been defaced or destroyed by prisoners.

We repeat the recommendation.

Additional information

- 4.63 In our survey, only 1% of respondents declared themselves to be gay or bisexual, which was below the 4% comparator. There were no specific services or facilities for gay and bisexual prisoners, apart from the facility to purchase gay publications from the newsagent. There was, for instance, no support group, no contact with external agencies and no inclusion of gay literature in the library. The diversity manager told us that he recognised that this was an area for development.
- 4.64 There were no transgender prisoners in the prison at the time of the inspection. The diversity policy included a statement of equal treatment of transgender prisoners and guidance for management of their care.

Further recommendation

- 4.65 Services and facilities for gay and bisexual prisoners should be developed.

Section 5: Health services

Expected outcomes:

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

General

- 5.1 The health delivery plan should be updated to reflect the recent health needs analysis. (5.54)

Achieved. The health needs analysis had been completed in 2009 and a new analysis had been commissioned for 2012–2015. The health care development group considered clinical governance issues and informed the partnership board. Prison health performance quality indicators provided data to the meetings and enabled the continuous updating of the health delivery plan.

- 5.2 Arrangements for access to the healthcare department for older prisoners and those with disabilities should be reviewed. (5.55)

Partially achieved. The health care centre was on the first floor and there was limited access for older prisoners and those with disabilities. Arrangements included the opportunity for patients to be seen on their wings. In addition, funding had been acquired from the King's Fund to refurbish a prefabricated building, where clinics could be held for patients who had difficulty in accessing the main health care centre; this was due to open in the month following the inspection.

Additional information

- 5.3 Health care services were commissioned by NHS Hertfordshire Primary Care Trust, with most services provided by Hertfordshire Community NHS Trust. Mental health care was provided by Hertfordshire Partnership NHS Foundation Trust.
- 5.4 In our survey, prisoners were generally positive about access to, and communication with, health services staff. Health services staff also had good relationships with the commissioners and the prison, with good representation at the partnership board.

Clinical governance

- 5.5 All treatment rooms should comply with infection control requirements. (5.56)
- 5.6 **Achieved.** The most recent infection control audit had been completed early 2011 and the health care centre had complied with the requirements, including planned changes to the sinks in the treatment rooms.
- 5.7 Storage facilities should be increased to ensure that corridors are clear and emergency equipment is easily accessible. (5.57)

Achieved. Additional storage facilities had been made available, with a separate room on the ground floor. The main health care corridor allowed access to clinics and offices. Emergency equipment was located in a cabinet near the entrance to the department and was easily accessible. One automated external defibrillator was available, and two more had been purchased and were waiting to be deployed following further training of discipline staff. All resuscitation kit was well maintained and checked appropriately.

5.8 All staff working in the healthcare department should be trained in communication skills and model positive and respectful communication with prisoners. (5.59)

Achieved. All staff in the health care centre demonstrated good communication skills with other staff and patients. We observed some respectful relationships with patients which were also reflected in the comments that we received from patients.

5.9 Future recruitment of nurses should include steps to attract nurses with registered mental health registration into the team. (5.60)

Achieved. Recruitment of nursing staff had focused on the requirement for those with a mental health qualification. One senior nurse with mental health skills had been employed and the advertising of current vacancies was weighted towards the mental health requirement. The department was adequately staffed and there were four vacancies, which were being supported by a regular team of nursing bank staff.

5.10 Wing staff should be taught to recognise medical emergencies and the action to take to protect prisoners. (5.62)

Achieved. Wing staff were provided with information on the recognition of medical emergencies. A programme of training in emergency first aid was available and had been attended by residential staff.

5.11 The primary care trust (PCT) should ensure that the nurse prescribers are able to prescribe. (5.63)

Achieved. The regulations for nurse prescribers had enabled expansion of the role, with access to a greater range of medicines. The nurse prescribers were able to prescribe appropriately, using the prison formulary, within their scope of practice.

5.12 All serious untoward incidents should be collated and analysed to ensure learning for all staff. Reporting of such incidents should be clarified and levels of reporting increased. (5.64)

Achieved. The recording and collation of serious untoward incidents was well organised and enabled analysis by health services staff. Lessons learnt from events were also facilitated.

5.13 All healthcare data should be collated and monitored for equity of access in terms of ethnicity, status, age, wing and foreign or British national status. (5.65)

Achieved. Increased use of the SystmOne electronic record and additional training of staff ensured that a greater amount of personal and clinical data was recorded. This afforded more opportunity to collate and monitor the levels and equity of access to health care services by prisoners.

5.14 The lead for infection control should have appropriate training. (5.66)

Achieved. The lead nurse for infection control had received appropriate training to perform the role.

Additional information

- 5.15** Clinical governance arrangements were well organised, with bimonthly meetings of the health care development group, which provided information to the partnership board. The partnership board was regularly attended by the governor and the head of health care, with standing agenda items to consider high-impact changes resulting from the health needs assessment and commissioning developments.
- 5.16** Staff training requirements were well managed and all staff were in date for their mandatory training. A programme of staff development ensured that the services were provided by staff with specialist qualifications.
- 5.17** Paper clinical records were stored in locked filing cabinets but, apart from the pharmacy, the whole department was accessible on a general prison key, which meant that rooms containing clinical records and equipment did not have their access restricted to health services staff; this did not comply with Caldicott guidelines.
- 5.18** Prisoners did not have access to a health care forum. Patient involvement in Local Improvement Networks (LINKS) had taken place in the past, and an initiative to introduce health care trainers was due to start imminently. Approximately five health care complaints were received monthly and these were managed confidentially through the local prison health care complaints system.

Further recommendations

- 5.19** Health care rooms containing clinical records and equipment should be secured by a separate health care suite key, with access limited to professionally qualified health services staff.
- 5.20** Prisoners should have access to a dedicated health care forum.

Primary care

5.21 The nurses' room on Narey unit should be moved to the ground floor, to enable older prisoners and those with disabilities to access it easily. (5.58)

No longer relevant. The nurse treatment room on Narey unit was no longer used by health services staff (see also recommendation 5.2).

5.22 The waiting list for physiotherapy should be reviewed to ensure effective allocation of physiotherapy services. (5.67)

Achieved. Additional physiotherapy sessions had been provided, and at the time of the inspection the waiting list was not over-long.

5.23 There should be a written procedure for the triage of healthcare applications to ensure a consistent approach. (5.68)

Achieved. A written procedure was available for the triage of health care applications, and triage algorithms were available to staff, to ensure consistency of advice and treatment.

5.24 There should be a secondary health assessment within 72 hours of the reception health screen. (5.69)

Achieved. All prisoners transferred to the establishment arrived with health care information from their previous prison. A comprehensive health care screen was carried out in reception and prisoners were seen the following day by health services staff during the induction process. They were also given the opportunity to be seen by a GP on the day after reception if required. The requirement for secondary screening of all prisoners was consequently diminished.

5.25 Chronic disease registers should be developed in line with National Service Framework and NHS policy on chronic disease. (5.70)

Achieved. Chronic disease registers had been developed using the patient's electronic record. The data were presented to the partnership board bimonthly.

Additional information

5.26 Primary care services were available at the health care centre; patients who had difficulty in accessing the health care centre were attended to on the wings. Patients used the health care application process if they wished to be seen by health services staff. Prisoners were able to self-certify as sick for up to 48 hours and this was well monitored and did not appear to be abused.

5.27 At the time of the inspection, two regular locum GPs provided daily clinics during the week and action was being taken to employ full-time practitioners. Patients were triaged by nursing staff and sometimes waited for up to seven days to see the doctor for a routine appointment. Two nurse prescribers were also available. Prisoners had access to a wide range of nurse-led and visiting specialist clinics. Older prisoners, patients with lifelong conditions and those with mobility problems were allocated a named nurse for their care. Out-of-hours facilities were provided by the service used in the local community.

5.28 The health care room in reception was adequate to meet the needs of the screening process. Prisoners were not provided with any written health care information as part of the reception process or during their induction.

5.29 Health promotion was managed by one of the nurses. Information was available on the wings and this was updated regularly and included some literature in a range of languages. Limited health promotion literature and notices were available to patients in the waiting area of the health care centre. A number of workshops were provided throughout the year, some of which followed national campaign days. Good relationships were maintained with the gym. Sexual health clinics were delivered by a specialist consultant and nurse each week, providing advice and treatment as required.

Further recommendations

- 5.30 Information should be provided for all prisoners about the health care services and how to access them.
- 5.31 Health promotion literature in a range of languages should be more widely available to prisoners.

Good practice

- 5.32 *The process of self-certification gave prisoners more responsibility for their own health.*

Pharmacy

- 5.33 **The medicines and therapeutics committee should meet regularly, and at least quarterly. (5.81)**

Achieved. The medicines and therapeutics committee met quarterly.

- 5.34 **All pharmacy-related policies should be considered by the medicines and therapeutics committee. (5.82)**

Achieved. Pharmacy-related policies were a standing agenda item for the medicines and therapeutics committee.

- 5.35 **Access to pain and symptom control for prisoners outside pharmacy hours should be improved. (5.61)**

Achieved. Nursing staff utilised patient group directions (PGDs) to supply simple analgesia. Paracetamol was available on the prison shop list (also see recommendation 5.39).

- 5.36 **A written policy should be developed to reflect the process and safeguards for access to pharmacy out of hours, and there should be access to appropriate medication by health services staff outside pharmacy hours. (5.71)**

Partially achieved. A draft standard operating procedure was presented during the inspection which detailed that the out-of-hours doctor would bring medication with them if attending the prison. There was no access to the pharmacy, other than to the health care manager or on-call nurse. However, there did not appear to be a documented policy to cover out-of-hours medicine provision.

Further recommendation

- 5.37 A written policy for access to the pharmacy out of hours should be developed.

- 5.38 **There should be review of the arrangements for supervised medication for prisoners requiring night sedation and medication when the time interval between doses is clinically important. (5.72)**

Achieved. Administration times were 8.30–9am, 11.30–12.15pm and 4–4.30pm, with night-time medication being issued as daily in-possession.

5.39 The in-possession policy, including the risk assessment, should be reviewed, formally ratified and implemented consistently. (5.73)

Partially achieved. While the in-possession policy had been reviewed, ratified and introduced, we could not be certain that it was being implemented consistently. We were told that the doctor made the decision about whether medication should be given in possession but there was no evidence to show that the risk assessment associated with the policy was used. Pharmacy staff said that they used the assessment to attempt to move patients from supervised or daily in-possession to larger quantities in-possession use.

Further recommendation

5.40 The in-possession policy should be implemented consistently.

5.41 A system should be developed to track and follow up on uncollected patient medication, to ensure that prisoners receive appropriate care. (5.74)

Achieved. Uncollected medication was monitored and reviewed regularly by the pharmacy technician.

5.42 All prisoners on in-possession medication should have lockable cabinets in their cells. (5.75)

Achieved. Lockable cabinets were available in the cells for prisoners to store in-possession medicines securely when required.

5.43 Patient group directions for additional medications should be considered, to improve prisoner access, especially outside pharmacy hours. (5.76)

Partially achieved. There were a limited number of PGDs in place, to administer vaccines and to allow nurses to supply paracetamol and ibuprofen out of hours. There was still room to introduce a larger number of PGDs, to allow patients to access medicines that they could obtain from a community pharmacy, thus reducing the number of patients needing to see a prescriber.

Further recommendation

5.44 Patient group directions (PGDs) for additional medications should be introduced, to enable supply of more potent medication by the pharmacy technician and/or nurse, and avoid unnecessary consultations with the doctor. A copy of the original signed PGDs should be present in the pharmacy, and read and signed by all relevant staff.

5.45 Prescribing audits and medication reviews should be carried out. (5.77)

Achieved. Prescribing audits and medication reviews were carried out by the pharmacist.

5.46 Prescribing data should be used to demonstrate effective use of resources for prisoner outcomes. (5.78)

Achieved. The pharmacy used prescription data to demonstrate effective use of resources.

5.47 Lockable cupboards should be installed in the pharmacy, to ensure appropriate storage of medications and limit access to whole pharmacy stock only to pharmacy staff. (5.79)

Partially achieved. Lockable cupboards had been fitted in the pharmacy room but, as the pharmacy services had switched to an external provider, there was less general stock and there were many more named-patient medications. The increased need for storage of dispensed medication meant that many of the lockable units could not be closed. However, the pharmacy room was accessible only to pharmacy staff and had a locked gate.

Further recommendation

5.48 A security assessment should be carried out to ensure that the security of the pharmacy complies with acceptable standards.

5.49 All procedures and policies should be formally reviewed and adopted via the medicines and therapeutics committee. (5.80)

Achieved. All pharmacy policies and procedures were reviewed formally and adopted by the medicines and therapeutics committee as required.

Additional information

5.50 The pharmacy was in good order and kept generally tidy, although the treatment room on Ellis wing was less well kept, and in a poor state of decoration. Pharmacy-related incidents had recently started being recorded and were available for review by the pharmacist.

5.51 Pharmacy services were provided by a local pharmacy supplier, who visited the prison weekly. Prescription items were supplied in a timely manner, with items ordered before 11.30am being delivered on the same day. The medicines supplied were double-checked against the faxed prescriptions by the pharmacy technician. While patients could see the pharmacist on Wednesday mornings, this was not generally realistic, as staff training took place on Wednesday mornings, so prisoner movements were reduced. There were no pharmacist- or pharmacy technician-led clinics.

5.52 The registered pharmacy technician gave out most in-possession medication, assisted with administration and was available to give advice to patients at that time but had not received any formal training on the administration of medicines. Administration took place via a screened hatch from the small pharmacy room. We were told that that multiple patients often crowded into this room and that this adversely affected patient confidentiality. Approximately 40 patients received either daily in-possession or supervised medication during the 30-minute administration time in the morning and staff told us that this did not allow any time to interact properly with patients.

5.53 Prescribing was appropriate to the population. Patients were able to request repeat medication on the wings, using a repeat medication slip. In-possession medication was supplied for discharge or court. For prisoners on the integrated drug treatment system, methadone was given routinely before discharge, and arrangements were made for its continuation on release. In order to facilitate the issuing of medication in the morning, a dose or strip of medication was

prepared on the previous day and placed in a folder with the patient administration sheet. The doses for daily in-possession medication were labelled in accordance with the regulations but the medication for supervised administration was not; this constituted secondary dispensing.

- 5.54 Prescriptions were computer generated. The doctor indicated on the prescription whether the medicine should be supplied as daily, three-times daily, weekly or monthly quantities in possession. There did not appear to be any documented record of the in-possession risk assessment. Special sick (drop-in surgery) supplies were recorded on the front of the patient's prescription chart, and the pharmacist reviewed these records during her visits.

Further recommendations

- 5.55 Prisoners should have access to pharmacy-led clinics.
- 5.56 Patients should be requested to wait at a distance from the medication hatch when not receiving medication, to maintain patient confidentiality. Consideration should be given to the presence of security staff at the pharmacy hatch during medication collection times, in order to minimise potential bullying and diversion of supplies.
- 5.57 The timing and length of the morning administration period should be reviewed, to allow the safe and effective issuing of medication.
- 5.58 Secondary dispensing should not take place.

Housekeeping point

- 5.59 The treatment room on Ellis wing should be redecorated and well maintained.

Dentistry

- 5.60 **The PCT should provide additional resources to reduce the waiting time for routine and urgent dental care. (5.83)**

Achieved. Additional dental sessions were available and an extra dentist had also been provided. One of the dentists was able to undertake some dental surgery and this had greatly improved the service, avoiding the need for some outside hospital appointments. The waiting list for routine treatment had reduced markedly and the waiting times were less than six weeks.

- 5.61 **The dental waiting list should be examined to identify and implement ways to reduce the completion times for treatments. (5.84)**

Achieved. The additional resources provided (see recommendation 5.60) had also reduced the completion times for treatment.

- 5.62 **Prison managers and the PCT should arrange with the local hospital dental service that appointments are scheduled for weekdays only. (5.85)**

Achieved. All dental appointments outside the prison were scheduled for weekdays only.

- 5.63 **There should be a review of the clean/dirty flows in the dental surgery to ensure compliance with new dental practice regulations regarding cross-contamination. (5.86)**

Achieved. The dental suite had been refurbished and redesigned, ensuring that clean and dirty areas complied with infection control regulations.

5.64 Oral health instruction should be provided to the prison population as a whole. (5.87)

Achieved. Oral hygiene promotion was provided, with notices and leaflets in the health care centre and on the wings. Advice was also given to patients during treatment sessions, and written information was available in a range of languages.

Additional information

5.65 Dental services were provided by Hertfordshire Community NHS Trust. Two dentists delivered a total of six sessions each week, supported by a dental nurse, who triaged patients and was available for four days a week. Annual leave and emergency cover were managed by the PCT.

5.66 The dental suite comprised a large, well-equipped room, and all equipment was well maintained and in working order. The suite was clean, bright and well suited for the care and treatment of patients. At the time of the inspection, the waiting list included 27 routine cases and 53 requiring treatment. We observed some good standards of care, and patients were treated respectfully.

Secondary care

No recommendations were made under this heading at the previous inspection.

Additional information

5.67 External hospital appointments were managed effectively by one of the health services administrators. There were only nine escorting opportunities available during the week, which was insufficient and restricted the times when appointments could be made. As part of a short pilot, staff had started to use the 'choose and book' system on behalf of patients and it was envisaged that this would improve the availability of appointments.

Further recommendation

5.68 The prison should provide sufficient escorts to meet the demands of outside hospital appointments and avoid delayed waiting times for patients.

Mental health

5.69 Day care services should be developed. (5.88)

Not achieved. Day care services were not available for patients struggling to cope on the wings. A support forum had been created for mental health patients, providing six sessions of one-to-one cognitive behavioural therapy.

We repeat the recommendation.

Additional information

- 5.70 There was an excellent level of secondary mental health care, with a full-time in-reach service. Prisoners had access to a dynamic mental health team and visiting psychiatrist. The team leader also had responsibility for forensic health care in Hertfordshire. He was supported by two community psychiatric nurses and a clinical psychologist. Care included the assessment and management of prisoners with learning disabilities, for which the department had recently received a national award. Care was multidisciplinary, with regular case conferences. A good level of mental health awareness training was provided for all prison staff.
- 5.71 The average caseload included 35 patients and there was an open referral system. Wing-based clinics were delivered monthly, where the management of up to five prisoners was discussed with discipline staff. Links with community mental health teams were well established and prisoners also had access to counsellors employed through the chaplaincy. Transfers to secure mental health units occurred once or twice each year, with minimal delay.

Good practice

- 5.72 *The care of prisoners with learning disabilities included their assessment and care planning.*

Section 6: Activities

Time out of cell

Expected outcomes:

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

- 6.1 **The published average time unlocked should accurately reflect the reality for prisoners. (6.46)**

Not achieved. The prison was recording an unlock time of over 11 hours per day during the week, but we found that time out of cell for prisoners who were employed or engaged in education was actually about nine hours a day, and for those without purposeful activity was less than five hours a day during the week.

We repeat the recommendation.

- 6.2 **All prisoners should be guaranteed the opportunity of at least one hour of exercise every day, taking into account any other commitments they might have, including meal times. (6.47)**

Achieved. There was good and regular access to time in the open air. In our survey, 61% of respondents, against the 51% comparator, said that they had exercise three times a week.

- 6.3 **The supervision of exercise and association should be reviewed with staff and clear directions issued to improve the effectiveness of their oversight of prisoners. (6.48)**

Achieved. Prisoners had free movement around the prison during the working day and during association and exercise periods. They associated on their units and in the grounds, and staff supervision had improved considerably.

- 6.4 **Prisoners who do not have suitable clothing of their own should have it provided if they wish to exercise outside during inclement weather. (6.49)**

Achieved. Although some prisoners told us that they did not have access to warm clothes for the winter, we saw some applications for winter coats, and on visiting the clothing exchange store we were shown a large collection of fleecy jackets that prisoners could ask to use.

Additional information

- 6.5 The core day had been shortened in May 2011, making it difficult for prisoners to get more than 10 hours out of their cell, and in our survey far fewer prisoners than elsewhere (10% versus 15%) said that they had more than 10 hours out of their cell per day. Too many prisoners did not have access to any purposeful activity, and when we checked during the inspection, we found a quarter of prisoners locked up during the core day (see main recommendation HP56).

- 6.6 Daily routines were adhered to and out-of-cell activities, including association and exercise, were rarely cancelled. Most association areas on the wings were pleasant but activity equipment was limited. Staff engaged well with prisoners during association time. The design

of some of the residential wings made it more difficult to provide supervision but staff were aware of this and ensured that they moved around the wings.

Learning and skills and work activities

Expected outcomes:

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

Leadership and management

- 6.7 The performance of different groups of prisoners in education and skills should be analysed and action taken to address any gaps in performance. (6.18)

Achieved. Better analysis and use was made of data to identify trends in learner performance. Data were discussed at quality improvement group and team meetings and prompt actions were taken to address any gaps in performance between different groups of learners.

Additional information

- 6.8 The learning and skills provision was managed by the head of learning and skills and education, and much of the vocational training was provided by John Laing training. Tribal provided the careers information and advice service (CIAS). The provision was well managed and there was good partnership working between the service providers. There was clear strategic planning, which was well informed through prisoner surveys and local and national priorities.
- 6.9 Quality improvement procedures were generally robust, with good use made of feedback from prisoners, staff and service providers to inform self-assessment and action planning. Observations of teaching and learning were undertaken across the provision, although these did not focus sufficiently on evaluating the impact of the teaching. Attendance and punctuality were good.
- 6.10 There were sufficient activity places for most prisoners. The allocation process was thorough and well informed by sentence plans and prisoners' needs. However, there were sometimes delays in getting prisoners into activities (see main recommendation HP56).

Further recommendation

- 6.11 Observations of teaching and learning should focus more on evaluating and improving learners' development and progress.

Induction

6.12 The resources for information, advice and guidance should be increased. (6.19)

Achieved. Resources for information, advice and guidance (now known as CIAS) had improved and Tribal had employed an additional full-time member of staff since the previous inspection.

Additional information

- 6.13 Induction to learning and skills was thorough and promoted to prisoners the benefits of taking part in education and vocational training. Tribal and Milton Keynes College gave clear advice and guidance, and ensured that prisoners were aware of the range of activities and options available to them. Only prisoners without the results of previous assessments in literacy and numeracy were required to take an initial assessment. The results were used to allocate prisoners appropriately to education, work or training. In education, learners completed a further diagnostic assessment to identify their literacy, numeracy or language development needs. Individual learning plans were well recorded and provided clear learning goals and short- and long-term targets.

Work

6.14 All work and training areas should implement the bonus scheme for prisoners achieving a qualification. (6.25)

Achieved. The pay policy and procedures had improved and prisoners now received a bonus on gaining a qualification.

Additional information

- 6.15 There was a wide range of work activities, where prisoners developed good employability skills. However, too many prisoners were insufficiently occupied in low-level cleaning work on the wings (see main recommendation HP56). Although there was sometimes not enough work to occupy prisoners fully in some workshops, plans were advanced to rectify this. Around 78% of the prison population was employed, a slightly lower proportion than at the time of the previous inspection.
- 6.16 Good use was made of prisoners' skills to improve the prison environment and gardens. Prisoner pay was generally satisfactory, although was higher in the DHL prison shop workshop, which discouraged some prisoners from participating in vocational training or education.

Vocational training

6.17 A suitable process for recognising and recording progress and achievement for those not on accredited qualifications should be introduced. (6.21)

Partially achieved. Processes for recognising, recording and certificating the achievements of prisoners not on accredited courses had been implemented successfully in one of the

workshops in which low-skilled work was carried out. There were plans to extend this scheme to other work areas once its effectiveness had been evaluated.

6.18 Links with employers that result in tangible outcomes for prisoners should continue to be developed. (6.23)

Not achieved. There had been good progress in building links with a range of external agencies and employers but these had not yet led to tangible outcomes for prisoners. **We repeat the recommendation.**

Additional information

6.19 The wide range of accredited vocational training continued, with courses offered in most work areas. Pass rates on vocational courses were consistently high, averaging 85%, and there were good progression opportunities in many areas. The standard of learners' work was high and they developed good craft skills and a strong work ethic.

6.20 Teaching and coaching were good and learning was well planned. Staff were enthusiastic, well qualified and occupationally experienced. Good use was made of well-trained peer tutors to support learning in many vocational areas, and effective literacy and numeracy support was provided in the workplace by education staff. Workshops were well equipped to commercial standards. There were strong links with employers to support the curriculum in some work areas. However, the engineering training workshop was not operating at full capacity due to insufficient cover for staff on long-term sickness.

Further recommendation

6.21 Appropriate qualified staff cover should be provided in workshops, to ensure continuity of provision.

Education

6.22 All teachers and instructors should make use of prisoners' initial assessment results when planning learning. (6.20)

Achieved. Results from the initial assessment of literacy, numeracy and language were recorded on prisoners' individual learning plans. The results were interpreted well and appropriate support was provided where needed.

6.23 The learning and skills provision in entry level literacy and in the kitchens should be improved. (6.22)

Achieved. Learners on entry level programmes in literacy made good progress towards their individual learning goals, and achievement of qualifications was good. Classes included a range of interesting learning activities and there was good support from teachers and peer mentors. Prisoners on accredited courses in the kitchen had access to this provision and were also well supported on their course.

Additional information

- 6.24 Education was well managed. Good use was made of the qualifications credit framework, to ensure that prisoners could work on modules of courses that were relevant to their individual needs, especially in employability and social development. There was a wide and improved range of courses, with good progression opportunities. Over 280 prisoners were on education courses, and about a third were studying full time. Pass rates were high on most courses and had improved considerably in literacy and numeracy, where they were over 90%.
- 6.25 Classrooms were well equipped. Some had been improved with the addition of interactive whiteboards and others refurbished. Staff were well qualified and made satisfactory use of information and communications technology in lessons. Outreach education provision on the wings and in workshops was good and additional funding had enabled a larger proportion of prisoners to access it.
- 6.26 Teaching and learning were mostly satisfactory, with some good aspects. Lessons were planned appropriately, although some were disrupted when learners left to go to the gym. Standards of work were good in most areas. Peer tutors received good training through a well-designed programme leading to national qualifications in teaching, and they provided effective support. The 43 learners who were completing distance learning and Open University courses were also well supported.

Further recommendation

- 6.27 Learning and skills activities should not be disrupted by recreational gym sessions.

Library

- 6.28 **Library staff should be involved in the prison induction, to inform new prisoners of the service available. (6.24)**

Achieved. Induction to the library had improved. Library orderlies provided information to all new prisoners on the range of books and facilities available. Enrolments to the library had increased.

- 6.29 **Use of the library by different groups should be analysed and action taken to address any significant variations. (6.26)**

Achieved. Data on the ethnicity of prisoners using the library were readily available and analysed to identify significant variations in use by different groups. Appropriate actions were taken to address any differences found.

Additional information

- 6.30 The library was run by the Hertfordshire Library Service. There was a good selection of books, newspapers and magazines, and materials in languages other than English. The library was bright and well laid out, following a large investment in lighting. The reference section had a satisfactory range of the required resources, such as legal reference books, Prison Service

Orders and foreign language dictionaries. Arrangements for prisoners to order books from the county loan service were effective.

- 6.31 Since May 2011, the library had been fully staffed with qualified librarians for the first time in three years. This had allowed staff to introduce computerised stock systems and promote the library. The four orderlies were experienced and had, or were working towards, appropriate qualifications in library skills.
- 6.32 Usage was high, with around 69% of prisoners regularly using the library service. Access to the library was satisfactory, being open five mornings, four afternoons and four evenings each week. Prisoners in the care and separation unit were able to access books from the library. Successful initiatives, such as Storybook Dads and author-in-residence sessions, were well used by prisoners.

Physical education and health promotion

Expected outcomes:

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

- 6.33 Robust systems should be implemented to ensure that access to PE is fairly allocated when there are more prisoners wanting to attend than places available. (6.34)

Achieved. The PE senior officer had developed a sophisticated database which was able to track individual prisoners' usage of the gym and PE sessions. Access was through a centralised booking system and was fair and equitable (see also recommendation MR6).

- 6.34 There should be sufficient showers for the number of prisoners using the gym. (6.35)

Not achieved. The number of showers had not been increased, although most prisoners were able to shower on their wings. The shower and changing room facilities had deteriorated and were now in need of refurbishment.

Further recommendation

- 6.35 Shower and changing room facilities should be refurbished.

- 6.36 More resources should be provided to increase the number of employment-related courses in PE. (6.36)

Achieved. PE courses had been introduced since the previous inspection, to improve prisoners' chances of employment. The range of courses was good and included awards from levels 1 to 3. Courses included gym instructors' awards, personal training, coaching and first aid at work. Approximately 145 prisoners had completed courses in the previous year and pass rates were high on most courses, at over 87%.

Additional information

- 6.37** Fitness and gym facilities were inadequate to meet the needs of the population. However, the limited provision was well managed, and run by one senior officer and seven PE officers. Six prisoner orderlies were employed full time and a further four were employed to run the small gyms on three of the wings. Induction to PE was good and there were links with the health care department for remedial PE. There was a suitable range of recreational PE. In our survey, only 46%, against a comparator of 55%, said that they accessed the gym at least twice a week (see recommendation MR6).
- 6.38** The PE facilities were mostly satisfactory, although the weights room was often cramped and busy. Prisoners had adequate access to PE kit, although most used their own. There had been a recent spate of serious injuries, mainly associated with rugby, although these had been recorded appropriately and investigated thoroughly.

Section 7: Good order

Security and rules

Expected outcomes:

Security and good order are maintained through positive staff-prisoner relationships based on mutual respect as well as attention to physical and procedural matters. Rules and routines are well-publicised, proportionate, fair and encourage responsible behaviour.

Security

- 7.1 **There should be limits on the amount of money allowed to be sent in to prisoners, and action taken if intelligence indicates that money sent in is debt related. (7.15)**

Partially achieved. National guidance did not set a limit on the amount of money that a prisoner could have sent in each week and no limit was set by the establishment. Staff in the mail room monitored activity closely and identified concerns, and if they came across any large amount of money or suspicious activity they submitted a security information report (SIR). We reviewed seven SIRs related to the sending in of money and found that appropriate action had been taken as result of the information gathered.

- 7.2 **There should be effective arrangements for enhanced supervision during visits of prisoners known to be involved in drug activity. (7.16)**

Achieved. We saw good supervision of visits, with staff actively patrolling the hall and giving consideration to the seating arrangements for some prisoners. Staff were alerted to any prisoners or visitors who presented concerns based on intelligence gathered. When necessary, an application was made for the use of the directed surveillance using closed-circuit television cameras. These were checked and authorised by a governor grade. Closed visits were used following a drug dog indication, and imposed for longer following additional intelligence. The drug dog was used extensively. Finds were appropriately reported to the police and action taken against the perpetrators.

- 7.3 **Prisoners should be informed of the supply reduction initiative and it should be fully implemented by staff to ensure that those prisoners involved in drug activities receive appropriate sanctions. (7.17)**

Partially achieved. Although a notice had been issued in 2008 to inform all prisoners about the supply reduction initiative, it had not been re-issued since then. Those identified under the initiative were sanctioned appropriately by being placed on the care and separation unit (CSU) and either recategorised or transferred to another category C prison to disrupt their activities. Some of the prisoners located in the CSU during the inspection had been placed there in response to activity related to drugs.

- 7.4 **Duty governors should meet new prisoners to set out standards of behaviour expected, as specified in the induction timetable. (7.18)**

No longer relevant. While governors met new arrivals to the prison, the induction programme did not place an expectation on them to explain rules to prisoners, as this was done by other staff and Insiders.

Additional information

- 7.5 An extensive netting programme covering the most vulnerable parts of the prison grounds had been completed and had considerably reduced the number of items thrown over the fence from outside the prison. In our survey, fewer prisoners (21%) than elsewhere (31%) and than at the time of the previous inspection (33%) said that it was easy to get illegal drugs in the prison. The use of drug and mobile telephone detection dogs was another valuable resource, and links with the local police meant that there was a presence at the prison when required.
- 7.6 The security committee met monthly and membership was appropriate. However, attendance was sometimes limited, with, on average, half of the members listed not attending. Objectives were identified each month and changed in priority, depending on the intelligence. Over the previous three months, the main objectives had involved the production of hooch (home-made alcohol), the exchange of medication, thefts and the possession of telephones and drugs. Security objectives were displayed in the gate via the television but other ways of reminding staff about objectives were less well developed.
- 7.7 The searching of prisoners, cells and other areas of the prison was proactive. Staff searching was also proactive and undertaken randomly, at different places and at different times of the day or night.
- 7.8 Dynamic security was effective; for example, supervision during free flow had improved and staff we observed mixed with prisoners on association (see also recommendation MR4).
- 7.9 The number of SIRs submitted between January and September 2011 was slightly lower than in the same period in the previous year (3,632 versus 3,910). The main concerns prompting a SIR remained the use of drugs, threats to staff and prisoners, trafficking of money and bullying. SIRs were processed promptly.
- 7.10 At the time of the inspection, there were 10 prisoners subject to closed visits, the reasons for which were appropriate and linked to incidents occurring during visits. Although closed visits were reviewed monthly, none was removed before completing an initial three months, even if there was no further intelligence to suggest ongoing risks. There were 29 banned visitors, some bans being carried over from other establishments. Too many of these had been banned indefinitely, without regular reviews being undertaken.
- 7.11 Prisoners were fully informed about the prison rules during induction and reminded of them by staff on the wings; however, they were not displayed on wing noticeboards. Prisoners in our groups did not complain about any inconsistent application of the rules, although we observed differing levels of enforcement of the smoking rules on Howard wing (see section on residential units).

Further recommendation

- 7.12 All visiting restrictions should be subject to regular review.

Housekeeping point

- 7.13 Rules should be clearly displayed on all wings.

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.

Disciplinary procedures

- 7.14 All staff in the care and separation unit (CSU) should complete adjudication liaison officer and control and restraint refresher training. (7.41)

Achieved. A rolling programme of adjudication liaison officer training was being delivered and all but one new officer in the CSU had completed it. All CSU staff were up to date with the control and restraint basic module refresher training.

- 7.15 The number of adjudications dismissed should be monitored and reduced. (7.42)

Partially achieved. The number of adjudications dismissed was monitored at the adjudications standardisation meeting. The number proven had increased to 80% in 2010, from 75% in the previous year. However, too many were still being dismissed because of incorrectly completed paperwork. For example, in April 2011, 11 out of 58 adjudications completed by prison governors had been dismissed or not proceeded with, and the following month a third had been dismissed. There was a discrepancy in the numbers recorded as proven and dismissed on P-Nomis compared with the information held by the CSU.

We repeat the recommendation.

Housekeeping point

- 7.16 The discrepancy in the data in P-Nomis and that held by the CSU about the number of adjudications being dismissed should be explored and rectified.

- 7.17 Alternate punishments should not be imposed when cellular confinement is the most appropriate and proportionate punishment. (7.43)

Achieved. As the CSU had been full at the time of the previous inspection, the awarding of cellular confinement had not been possible, so alternative punishments had been imposed. On average, between six and 12 prisoners had been held in the CSU each month during 2011 to date, which represented a reduction on the numbers previously held. This made it possible to hold prisoners on the unit on cellular confinement.

Additional information

- 7.18 The number of adjudications was steadily reducing, from a high of 1,365 in 2009 to a projected total of around 900 expected for the full year 2011. The most common charges were for possession of an unauthorised article (mobile telephone, DVD or hooch), disobeying a lawful order and threatening or insulting behaviour. Charges for the possession and/or use of prohibited drugs had fallen.

- 7.19 The adjudications room was furnished appropriately. We observed some adjudications and found them to be mostly well managed. No verbal explanation of the appeal process was given following the conclusion of the process but prisoners were given a written explanation after the hearing.
- 7.20 The head of operations performed a quality check of adjudications paperwork each month and reported to the quarterly adjudications standardisation meeting, which was attended by a member of the Independent Monitoring Board (IMB). The adjudication records we reviewed had been completed to a satisfactory standard.

The use of force

- 7.21 **Planned incidents should be recorded and reviewed for learning points. (7.44)**
- Not achieved.** Planned incidents were recorded but not reviewed routinely to identify learning points.
We repeat the following part of the recommendation: Planned incidents should be reviewed for learning points.
- 7.22 **Prisoners should have the opportunity to see a member of health services staff when force is used. (7.45)**
- Achieved.** Use of force paperwork and monitoring data showed that prisoners were seen by a member of health services staff as soon as possible following the use of force.

Additional information

- 7.23 In our survey, 4% of respondents said that they had experienced use of force in the previous six months, which was in line with the comparator and with the figure at the time of the previous inspection. There had been 101 uses of force in 2010/11 and most incidents had been spontaneous. De-escalation had been successful in a large number of instances.
- 7.24 Use of force information was presented to the use of force committee. Membership was appropriate and attendance good. While data were analysed, they were not aggregated year on year, to identify any trends or themes. We looked at some completed use of force paperwork and found that it had sometimes been certified by the same officer who had authorised the use of force.
- 7.25 Special accommodation had been used nine times in the year to date, which seemed excessive, although the length of stays in the cells had been relatively short. We were not assured that the use of the special cell was monitored robustly to ensure that it was used only as a last resort. Some of the paperwork we examined was incomplete, missing the date and time of release and whether strip clothing had been issued. Ongoing monitoring of prisoners in the special cell was undertaken frequently and recorded appropriately.
- 7.26 All prisoners being moved to the CSU following control and restraint incidents were routinely handcuffed, regardless of the level of compliance evident.

Further recommendations

- 7.27 Robust governance arrangements should ensure that the use of the special cell is reduced, authorised only as a last resort and that all paperwork is fully completed.
- 7.28 The use of handcuffs when walking a prisoner to the care and separation unit (CSU) should be based on a risk assessment and clearly authorised.

Housekeeping points

- 7.29 Data on the use of force should be aggregated year on year, to identify trends and issues.
- 7.30 Use of force paperwork should not be certified by an officer involved in the incident.

Segregation unit

- 7.31 **An alternative process for managing prisoners seeking their own protection should be sought, to prevent their location in the CSU for long periods. (7.46)**

Achieved. The violence and supply reduction strategies had contributed to a large reduction in the number of prisoners entering the CSU for their own protection. In the six months before the inspection, only 10 prisoners had been placed there for their own protection, equivalent to under two per month, in contrast to the situation in 2009, when over half the cells in the unit had been regularly occupied by those seeking their own protection.

- 7.32 **Individual objectives should be set for prisoners located in the CSU according to their needs and risks. (7.47)**

Not achieved. The paperwork we examined and the reviews we attended showed that the objectives set for prisoners located in the CSU were generic, rather than individualised. Most referred to compliance with the regime and rules, rather than changes in specific behaviour aimed at promoting a successful reintegration to the main prison.

We repeat the recommendation.

- 7.33 **Prisoners' well-being should be monitored and care planning documents used to support them while located in the CSU on their own protection. (7.48)**

Not achieved. Care planning was not used in any formal way to support prisoners and offer them additional protection.

- 7.34 **Contact with prisoners should be adequately recorded in prisoners' history sheets and associated paperwork. (7.49)**

Partially achieved. Contact with prisoners on the CSU was generally logged but the entries did not evidence the quality of the contact or any specific focus or outcome.

Further recommendation

- 7.35 Contact logs should evidence the quantity and quality of contact with prisoners on the CSU.

Additional information

- 7.36 The CSU had a total of 18 cells, including four special cells and a constant observation cell. One of the special cells was used for searching prisoners on arrival to the unit and another had been adapted as a holding cell for prisoners waiting for adjudications. There was a comprehensive staff selection policy for the unit.
- 7.37 The CSU had a strict policy forbidding prisoners to smoke, even in their cells. We were told that this was to deter prisoners from seeking sanctuary and seeing the CSU as a soft option. However, we were concerned that it was an inappropriate deterrent and that the consequences of the policy had not been fully explored. At least one prisoner had self-harmed because of the ban (see paragraph 3.16).
- 7.38 All prisoners arriving on the unit were strip-searched; we were told that this was to detect any smoking materials that would contravene the unit's no-smoking policy. Staff on the CSU had differing understanding of the strip-searching policy, with some saying that it was based on a risk assessment and others that it was undertaken on all prisoners arriving on the unit. The paperwork we reviewed showed that all those entering the CSU had been strip-searched.
- 7.39 The CSU was well decorated and clean, with cells being prepared in advance of new arrivals. However, some mattresses were old and in a poor state of repair, and prisoners told us that the cells were particularly cold in the winter. The cells did not have electric sockets. The communal areas were clean and well decorated. Prisoners arriving on the unit were issued with an information booklet which provided an overview of the regime and who would visit them during their stay. Prisoners were mostly referred to by surname, and preferred names were not recorded on cell cards.
- 7.40 The regime was basic but adequate, with daily access to exercise, showers, telephones and the gym, but there was no facility for any activities in association. Some basic in-cell education was provided and we saw prisoners undertaking it. However, there was no opportunity for work, either in cell or off the unit. A small selection of books was available and prisoners could also order from the library. The exercise yard was of an adequate size but had a metal grid over the roof and was bare, with no benches or exercise equipment.
- 7.41 Reintegration procedures were limited, leading to too many (around two-thirds) prisoners on the unit being transferred to other prisons. When transfers were agreed, there were often subsequent waits of up to three months in the CSU for the transfer to be arranged.
- 7.42 Personal officers were allocated to prisoners on the CSU. However, the relatively small number of prisoners being admitted meant that they could approach any member of staff for help. We witnessed positive interactions between officers and prisoners and a good level of knowledge about each prisoner in their care.
- 7.43 CSU reports were completed quarterly and presented to the monitoring and review meeting. They were detailed, analysing the use of the unit and identifying necessary actions. Staff training, with the exception of first-aid training, was up to date and included diversity and mental health awareness.

Further recommendations

- 7.44 The ban on prisoners smoking in their cells should be withdrawn.

7.45 Prisoners should not be routinely strip-searched on entry to the CSU.

7.46 Reintegration planning for prisoners on the CSU should be formalised.

Incentives and earned privileges

Expected outcomes:

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

7.47 Prisoners and staff should be informed of the timeframe in which prisoners can apply for enhanced status. (7.61)

Achieved. The incentives and earned privileges (IEP) policy clearly stated the timeframe in which prisoners could apply for enhanced status after arrival at the establishment.

7.48 Prisoners should not have their IEP level automatically downgraded once located in the CSU, and any demotions should only take place after an IEP board. (7.62)

Achieved. Downgrades in all residential areas, including the CSU, were carried out as a result of a thorough review.

7.49 Prisoners who do not meet the expected standard of behaviour should have their IEP level reviewed. (7.63)

Achieved. Our examination of prisoner case notes showed that IEP reviews were carried out when required. Each wing kept a record of all reviews carried out, and managerial checks of personal officer case notes gave further assurance that reviews were instigated when a pattern of poor behaviour had been recorded.

7.50 Prisoners should be made aware of red entries are made in the history sheets, so that they can address their behaviour and be aware that they are at risk of receiving a warning. (7.64)

Achieved. The IEP scheme had been reviewed and a system of red, amber and green warnings implemented, with green being a first, amber a second and red a final warning. This meant that prisoners knew when they were close to having their IEP status reviewed. Prisoners we spoke to said that they were generally told when they had received a warning of any type.

7.51 Entries into basic booklets should demonstrate that prisoners are being spoken to, and objectives set should clearly outline what the prisoner is required to do. (7.65)

Not achieved. There were three prisoners on the basic regime at the time of the inspection. Objectives were general and did not specifically address or challenge the reasons why they had been downgraded. One prisoner had been the subject of bullying and was in debt, and there was no mention of this in either his basic booklet or his victim support booklet, and he received inadequate support to deal with his problems.

We repeat the recommendation.

Additional information

- 7.52 There was a comprehensive IEP policy, which consisted of the usual three levels of behaviour – basic, standard and enhanced – and set out clearly the privileges that prisoners could expect on each level of the scheme. All prisoners received at the establishment were placed on the standard level, unless there was evidence that they had been on enhanced at their previous establishment. However, there was some confusion over prisoners retaining enhanced status on their arrival; some were able to remain enhanced with a review after 28 days, while others waited until the review date, to see if it was appropriate for them to be promoted back to enhanced.
- 7.53 Two of the residential wings were classed as enhanced wings – Fowler and Brister – and the annexe was considered to be ‘super enhanced’. Facilities on the enhanced wings were generally the same as those on other wings, while prisoners on the annexe had a greater amount of freedom on the unit. Prisoners were not prevented from achieving enhanced status if the enhanced wings were full.
- 7.54 Prisoner views of the IEP scheme were mixed. In our individual interviews, nine out of 23 prisoners (39%) said that staff were not fair in IEP write-ups and rewards, and some reported a lack of understanding by staff of individual prisoners’ circumstances leading to a particular behaviour.
- 7.55 Reviews were appropriately carried out by wing managers. Targets set were general and mostly related to abiding by the regime and applying for a place on one of the enhanced wings. Prisoners were given information on how to appeal if they so wished. Appeals were dealt with by a different manager to the person carrying out the initial review and some were upheld when procedural errors were found or fairness had not been applied.

Further recommendation

- 7.56 Prisoners who have been on the enhanced level of the incentives and earned privileges scheme at their previous establishment should retain that status on arrival at The Mount.

Section 8: Services

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.

- 8.1 Prisoners should be provided with a well-balanced, nutritional meal and fewer processed, fatty foods. (8.11)

Achieved. The catering manager was able to provide examples of amendments to the menu to support a more balanced diet, such as an increase in the range of pasta and rice, and the provision of salads. The menus we saw were adequate, enabling prisoners to select healthier options; however, those we spoke to said that there was still too much fatty and processed food.

- 8.2 Two choices of vegetables should be available with the evening meal. (8.12)

Not achieved. Two choices of vegetables were not always available with the evening meal.

- 8.3 The nutritional advice from health services staff should be followed and recommendations implemented. (8.13)

Not achieved. Consultation with the local primary care trust had been undertaken, to assess the nutritional value of the menu, but the recommendations had proved too expensive to implement within the food budget.

- 8.4 Prisoners with specialist diets should have a varied menu choice that meets their needs. (8.14)

Partially achieved. While some changes had been made to improve the diversity of meals, prisoners requiring kosher and vegan meals told us that the variety remained limited, despite recognising the improvements that had been made.

Additional information

- 8.5 The main kitchen was clean but limited in size, making it challenging to cater for the increasing population. Serveries were generally clean and adequately equipped, with separate utensils for halal food. Prisoners working behind the serveries were dressed appropriately and the serving of meals was well supervised by staff. The temperature of food was taken before serving and recorded in the wing servery books, for review by the catering manager. The provision of self-catering facilities on some wings was appreciated by prisoners but some of the equipment on the wings had been out of service for some time.

- 8.6 Despite the addition of some dining out facilities on the wings, this provision remained limited, with most prisoners eating in their cells. The food we tasted was adequate, and in our survey more prisoners than at the time of the previous inspection (29% versus 24%) said that the food was good or very good. Menus were on a four-week cycle. The menu sheets provided a visual description of the meal – for example, halal or vegetarian.

- 8.7 Regular prisoner surveys were completed and some changes made as a result of these. Comments books were available on the wings and were reviewed by managers. The catering manager aimed to visit each wing monthly to check on the food serveries, and attended the monthly prisoner representative meetings.
- 8.8 There had been good responses to recent festivals, where prisoners had helped to cook meals. The recent Ramadan period had produced positive comments from prisoners.
- 8.9 Meals were generally served on time, with the exception of breakfast packs, which were issued at lunchtime on the previous day. Prisoners could make toast to supplement the breakfast packs.

Housekeeping points

- 8.10 Wing self catering equipment should be repaired swiftly.
- 8.11 The breakfast pack should be issued on the morning it is to be eaten.

Prison shop

Expected outcomes:

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

- 8.12 **A survey should be carried out to ascertain the views of prisoners about the prison shop and range of goods offered. (8.24)**

Partially achieved. A formal survey had been completed before DHL took on the contract but had not been repeated since. However, the bimonthly prisoner representatives meetings enabled regular feedback and comments to be submitted and acted on. In our survey, far more prisoners than at the time of the previous inspection (56% versus 34%) were satisfied with the range of goods on sale.

- 8.13 **The range of goods for black and minority ethnic prisoners should be increased in consultation with prisoners from this group. (8.25)**

Partially achieved. Access to religious articles had improved with the introduction of the Azhar catalogue. Our survey showed that a similar percentage of black and minority ethnic and white prisoners felt that the shop sold a wide enough range of goods but far fewer foreign national prisoners said this (40% compared with 59% of British nationals). Foreign national representatives had recently been asked to identify additional specialist suppliers to support their needs but this had not yet resulted in any changes.

Further recommendation

- 8.14 A range of goods to meet the needs of foreign national prisoners should be provided through the prison shop and catalogues.

8.15 Prisoners should not be charged an administration fee for catalogue orders. (8.26)

Achieved. No administrative fee was charged by the prison for ordering from catalogues. However, the postage and packing fee applied by the catalogue companies was unavoidable.

Additional information

8.16 The shop operated on site and was run by DHL, covering five prisons in the region and dealing with over 3,000 orders a week. The workshop was well managed and processes were adequately supervised, including the searching of prisoners on leaving and the handling of high value goods by staff only.

8.17 Prisoners we spoke to said that prison shop goods were expensive and that many had recently increased in price. Distribution was well supervised by staff.

8.18 A range of catalogues was available, including those providing hobby materials, music and clothing.

Section 9: Resettlement

Strategic management of resettlement

Expected outcomes:

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

- 9.1 The resettlement policy should be revised to take account of the regional resettlement strategy. (9.14)

No longer relevant. There was no longer a regional resettlement strategy, following the reorganisation of regional offices.

- 9.2 A further resettlement needs analysis should be undertaken which identifies the needs of specific types of prisoner and incorporates information from OASys assessments. (9.15)

Not achieved. No further needs analysis specific to the prison had been conducted since the previous inspection. The prison had contributed to a regional needs analysis but the results of this had only recently been made available to the prison and, despite providing a comprehensive dataset, this had not been used to inform strategy or current resettlement or programme provision (see main recommendation HP57).

- 9.3 The resettlement committee should include prisoner representatives. (9.16)

Not achieved. There were no prisoners included in the resettlement committee at the time of the inspection and a review of minutes of resettlement meetings for 2011 did not evidence prisoners attending any of the bimonthly meetings.

- 9.4 The resettlement committee should set up further mechanisms to monitor the views and outcomes for prisoners of resettlement services. (9.17)

Not achieved. A prisoner survey had been conducted during the pre-release assessment/interviews which considered outcomes for prisoners against each of the pathways but this had lapsed and had not been conducted for some time.

We repeat the recommendation.

- 9.5 All relevant departments should be represented at discharge boards and this should be accurately recorded. (9.18)

Not achieved. There were no records of who attended the discharge board, other than the chairperson.

We repeat the recommendation.

- 9.6 All prisoners due for discharge should be considered at the discharge board, regardless of their nationality. (9.19)

Achieved. All prisoners, regardless of nationality, were invited to attend the discharge boards

and, where practicable, foreign national prisoners were afforded the same level of support as British nationals.

Additional information

- 9.7 The recently published resettlement policy document did not identify any key deliverables within the strategy. There was no accompanying action plan and only a broad explanation of the aims of the strategy. The resettlement pathways were only briefly referred to and, although there was a supporting pathways document, this was out of date and did not reflect current provision (see main recommendation HP57). It was unclear from the policy document, and also from the inspection, who the strategic leads were for some of the pathways.
- 9.8 The activity allocation panel was chaired by the deputy head of the sentence management unit (SMU) and was attended by key departments, ensured that allocations to work, education and programmes were well sequenced and reflected prisoners' needs, as defined in their sentence plans.
- 9.9 The community engagement manager had developed a large number of links with external agencies; these supported the work of some of the pathways and provided many volunteers, who came into the prison to provide assistance in the visitors centre and chaplaincy. Some effective initiatives had provided a few training and work opportunities in the community. A programme of mentoring provision was also being developed but this had yet to fully be implemented.

Offender management and planning

Expected outcomes:

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

Sentence planning and offender management

- 9.10 **Prisoners who are to be subject to a paper review should be interviewed and have the reasons explained to them. (9.53)**

Not achieved. Prisoners were invited to make written representations to recategorisation boards and also release on temporary licence (ROTL) reviews. Prisoners continued to receive only written confirmation of the outcome of the reviews, with no personal interview to discuss the outcome.

- 9.11 **Managers should chase up late offender assessment system (OASys) assessments from offender managers. (9.54)**

Achieved. Offender supervisors attempted to obtain updates from offender managers in the community, when required, and in general there was good liaison between the prison and community managers. When necessary, the offender supervisors' managers escalated issues to senior probation officers but there remained too many late OASys assessments (see also recommendation MR7 and main recommendation HP58).

9.12 Contact logs in offender management files should record all activity relating to the case. (9.55)

Achieved. Offender supervisors no longer used separate contact logs but used P-Nomis to maintain a log of contacts. This enabled all prison staff with access to the system to keep updated with sentence- and resettlement-related issues, as well as providing good two-way sharing of general information about the prisoner. General contributions from other departments were similarly recorded on P-Nomis and there was a good understanding of the need to update offender supervisors about prisoner achievements and other key events.

Good practice

9.13 *The use of P-Nomis by offender supervisors provided wider dissemination of prisoner information.*

9.14 Sentence plan targets should include outcome-focused objectives and defined roles and responsibilities for all of those involved in the case. (9.56)

Not achieved. Some of the offender manager-generated targets we saw were unspecific, in some cases simply comprising, 'reduce risk'. Locally written sentence plans were much better, with all targets observed being specific about outcomes, dates and method of completion.

Further recommendation

9.15 The validity and quality of offender manager-generated sentence plans should be reviewed soon after reception and efforts made to improve them where necessary.

9.16 Prisoners should be involved in setting their sentence plan targets. (9.57)

Achieved. Copies of the sentence plans we observed demonstrated prisoner involvement in both offender-managed and offender-supervised records.

9.17 Offender managers should meet prisoners regularly to support and encourage their progress between formal reviews. (9.58)

Not achieved. There was no strategy of regular engagement between offender supervisors and prisoners between reviews. This was mainly because of large caseloads – in some cases, of over 100 prisoners (see main recommendation HP58).

Additional information

9.18 The prison's population consisted of men serving sentences of over 12 months, up to life imprisonment. At the time of the inspection, there were 150 prisoners serving indeterminate sentences (ISPs). A total of 342 prisoners were in scope of phase two of offender management and therefore were managed by the community-based offender managers.

9.19 All prisoners were allocated an offender supervisor on arrival but there was no system to ensure that they were interviewed to identify any immediate resettlement needs or to review OASys files. Approximately 97% of the population had OASys assessments, of which all but 29 had sentence plan targets. In-scope lifers received little support from offender managers

and were integrated into the offender supervisors' caseloads, to manage in custody; this arrangement did not sufficiently meet the needs of life-sentenced prisoners.

- 9.20 The sentence management team was made up of a probation officer, five Probation Service officers, a senior prison officer and four officers. Three of the officers were offender supervisor trained and one was responsible for coordinating category D applications. The officers were frustrated at the lack of continuity of their work allocations, as they were never certain when they would be on offender supervisor duties and so were unable reliably to make appointments with prisoners. The core working day of the offender supervisors was also broken up by the requirement to work in other areas for short periods.
- 9.21 In our survey, more prisoners than at comparator prisons said that they had a sentence plan and were able to complete most/all of their sentence plan targets. Plans that we looked at that had been generated or reviewed at the establishment were comprehensive and maximised the use of the prison's resources. When there was a requirement for courses that were not offered locally, we saw evidence of prisoners being transferred to facilitate this.
- 9.22 The deputy head of the SMU regularly quality checked 10% of OASys documentation and maintained a record of each quality check. There were clear outcomes from the quality assurance exercise and offender supervisors were advised of improvements required.
- 9.23 ROTL was well used for maintaining family ties but underdeveloped for work and training opportunities. In the six months before the inspection, 93 prisoners had been granted ROTL, mainly for resettlement/home leave. The prison did not allow home leave to be taken over the weekend period, when it would be of the most benefit in developing and maintaining family ties. On average, three prisoners per month were in work/training placements, mainly working on the external gardens (see section on resettlement pathways).
- 9.24 A small number of prisoners (35) had been eligible to apply for home detention curfew during the previous six months and the prison's response in these cases had been proportionate and not risk averse, releasing 22 (around 66%) under the scheme.
- 9.25 The prison had identified a Veterans in Custody Support (VICS) coordinator, who had arranged for a member of the Soldiers, Sailors, Airmen and Families Association (SSAFA) to attend twice monthly to meet veterans and see if the charity could assist with their resettlement needs. Prisoners were asked if they had a service background during the reception screening process but appeared to be reluctant to identify themselves as such. The coordinator had had a degree of success with this project, and was actively pursuing ways to engage with veterans. The group usually ran with around four or five prisoners. Links had also been established with Hertfordshire Primary Care Trust, which was also keen to offer support to veterans in custody.

Further recommendations

- 9.26 An initial assessment of individual prisoners' resettlement needs should be carried out on induction and appropriate support offered where required.
- 9.27 Offender managers should retain the case responsibility for life-sentenced prisoners during the custodial phase of sentence.
- 9.28 The prison should allow home leave over weekend periods.

Categorisation

No recommendations were made under this heading at the previous inspection.

Additional information

- 9.29 The number of category D prisoners held had been 70 at the end of September 2011 and 60, on average, throughout the six months before the inspection. There was an effective system to prompt reviews, which were mostly held on time, with around 21% of prisoners being granted category D status. On average, 14 prisoners were transferred out each month, although this had not been the case in August 2011, when there had been no spaces in open prisons. The closure of HMP Latchmere House, general population pressures and, more recently, the allocation to open prisons of many of those sentenced following the recent civil disturbances had all contributed to the difficulty in moving prisoners to open conditions. The movement of prisoners serving indeterminate sentences for public protection (IPP), who had previously been the most difficult group to secure places for, had been recently taken over by the Population Management Section of NOMS and it was anticipated that this would expedite transfers of some of the prisoners who had waited for long periods.

Further recommendation

- 9.30 There should be an appropriate amount of category D provision to facilitate the progression of prisoners to open conditions.

Public protection

No recommendations were made under this heading at the previous inspection.

Additional information

- 9.31 Files relating to all new prisoners were initially screened by night staff on the day of reception. Prisoners arriving who had previously been identified as posing a risk of harm to the public were maintained under the restrictions that had been previously applied and were subsequently reviewed periodically. When prisoners arrived with no previous intelligence to suggest the need for public protection measures to be imposed, they were assessed at a weekly multidisciplinary screening panel and, if any concerns were raised, were referred to the interdepartmental risk management team for consideration; this occasionally included attendance from offender managers. Risks were clearly indicated by alert markers on P-Nomis.
- 9.32 We reviewed 10 OASys documents in relation to risk management plans and found these to be weak, demonstrating a requirement for further training of offender supervisors in this area.
- 9.33 Some offender supervisors raised concerns that offender managers' assessment of risk was too low, leading to less offender manager involvement during the sentence, and the level being raised before release. In two cases we examined, we considered the risk level to be incorrect and we were not assured that there were appropriately robust systems to challenge these with offender managers.
- 9.34 Multi-agency public protection arrangements (MAPPA) were good and the prison took on the responsibility of pre-alerting offender managers before six-month pre-release reviews were

due. Offender supervisors made written contributions to MAPPA 2 reviews and the deputy head of the SMU attended MAPPA 3 meetings.

Further recommendations

- 9.35 Offender supervisors should be appropriately trained in risk management.
- 9.36 Robust challenges should be made to offender managers' assessed levels of risk when they are considered to be incorrect.

Indeterminate-sentenced prisoners

- 9.37 **There should be a greater focus on work with life- and indeterminate-sentenced prisoners, including a dedicated team of officers and regular forums for these prisoners. (9.59)**

Not achieved. There was no dedicated staff group to work with the large number of ISPs. Each wing had a nominated officer but it was not clear what they achieved and they had not received training for the role. Some forums for ISPs had been held earlier in 2011 but they did not take place regularly and the next one was not due to take place until 2012.

We repeat the recommendation.

- 9.38 **Days for lifers and indeterminate-sentenced prisoners, which provide advice and guidance on risk reduction and reintegration, should be held at least twice a year. (9.60)**

Achieved. Four ISP days (including lifers and IPP prisoners) had been held in 2011. These were popular with the lifers we spoke to and had been beneficial for maintaining family ties.

- 9.39 **Dossiers for reviews of life-sentenced prisoners and those serving an indeterminate sentence for public protection (IPP) should be prepared on time. (9.61)**

Achieved. A review of parole dossiers and management information showed that 100% of parole dossiers for ISPs had been submitted on time.

- 9.40 **IPP prisoners should have their sentence plan in place within 14 days of arrival. (9.62)**

Not achieved. Although all IPP prisoners were the responsibility of offender managers and therefore should have arrived at the establishment with sentence plans in place, this was not the case. One prisoner had been in custody for over four months but still did not have a sentence plan.

We repeat the recommendation.

Additional information

- 9.41 Life-sentenced prisoners told us that they were frustrated at the lack of availability of, and access to, courses to assist them in progressing through the system. IPP prisoners were prioritised for courses, although there were still many on the waiting lists, and over half of the IPP prisoners were over tariff, many because they had not completed programme-based sentence plan targets.

Resettlement pathways

Expected outcomes:

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

Reintegration planning

Accommodation

- 9.42 Prisoner orderlies working in resettlement should receive formal training which leads to an accredited award. (9.76)

No longer relevant. Following the cessation of the Foundation Training Course, there were no longer any prisoners working in the resettlement workshop.

- 9.43 Case records of referrals for accommodation should allocate tasks to specific staff and track the outcome of actions taken. (9.77)

Achieved. Comprehensive case records were maintained for prisoners who engaged with the Nacro worker. These set out what actions were required, by whom and the date they were to be carried out. Actions were recorded, in addition to any further referrals that were made.

Additional information

- 9.44 All prisoners were invited to attend the pre-discharge interview, which included a section on accommodation. At the time of the inspection, the part-time Nacro worker was involved in obtaining accommodation for 25 prisoners. She had ensured that none of the prisoners who had engaged with her had been released with no fixed abode.

- 9.45 Information relating to Nacro was posted on residential units and effective links ensured that referrals were received from other agencies where appropriate.

Education, training and employment

For further details, see Learning and skills and work activities in Section 6

No recommendations were made under this heading at the previous inspection.

Additional information

- 9.46 Prisoners had good access to a range of accredited social and life skills courses through the education department. However, the delivery of the education, training and employment pathway was uncoordinated. The employability course was not sufficiently linked to release dates and resettlement needs.

- 9.47 Prisoners were given high-quality pre-release employment and learning advice by Nacro and Tribal, the careers information and advice service provider, although only a few accessed the

Nacro service. There was appropriate access to Jobcentre Plus, which visited the prison weekly. Job-search provision was underdeveloped and insufficient use was made of the virtual learning environment, whereby prisoners could access and apply for jobs online.

- 9.48 The proportion of prisoners who accessed work placements through ROTL was low (see section on offender management and planning).

Further recommendations

- 9.49 The prison should ensure better coordination of all key agencies involved in the education, training and employment resettlement pathway and better promotion and use should be made of the Nacro pre-release information service and the virtual learning environment.
- 9.50 The prison should increase the availability and use of release on temporary licence work placements.

Mental and physical health

- 9.51 **Healthcare staff should attend or hold pre-release boards or clinics. (9.79)**

Achieved. Pre-release health care planning was well organised, with adequate preparation made for the issue of any medication. Health services staff attended the pre-release board two months before the release of prisoners.

Additional information

- 9.52 A named nurse had the lead for managing the discharge of patients, and provided them with summaries of their care and treatment and details of local GPs. The care programme approach was used for patients with enduring mental health problems. Palliative care and end-of-life care policies had been developed.

Finance, benefit and debt

- 9.53 **Resettlement services should be provided with internet access to aid their work. (9.78)**

Achieved. Broadband internet was available for the agencies that carried out resettlement work in the prison, including Jobcentre Plus, Tribal and Nacro.

- 9.54 **Prisoners should be able to open a bank account. (9.80)**

Achieved. There were links with the local Barclays Bank, through the 'Unlock' agreement, which enabled a bank account to be opened within 12 weeks of release. Where necessary – that is, at short notice – this process could be expedited.

Additional information

- 9.55 Finance, benefit and debt support was poor (see recommendation MR8). A basic finance awareness course was run in the Virtual Campus Suite and a short course had been run in relation to understanding how tax is paid and how to understand a pay slip.

Drugs and alcohol

- 9.56 The drug strategy document should be updated, include alcohol services and contain detailed action plans and performance measures. (9.88)

Partially achieved. While the drug strategy document had been updated and reviewed in August 2011, it included little about alcohol services, as it stated that the establishment was not funded to work with clients who were solely alcohol dependent. There were no detailed action plans or performance measures.

We repeat the following part of the recommendation: The drug strategy document should include alcohol services and contain detailed action plans and performance measures.

- 9.57 A comprehensive needs analysis of the prison's population should be carried out to inform the drug and alcohol strategy and future service provision. (9.89)

Partially achieved. At the time of the inspection, a needs analysis had been undertaken and was in draft form, awaiting comments and additional information from a variety of managers, prior to final sign-off.

- 9.58 The establishment should repeat its substance use needs analysis annually to ensure that service provision matches the current needs of the prisoner population. (9.90)

Partially achieved. While the substance use needs analysis had been repeated, it had highlighted that alcohol was a cause for concern at the establishment, with 5% of the population having alcohol as the dominant causal factor in their offending, according to OASys assessments. However, service provision did not match the needs.

Further recommendation

- 9.59 The establishment should address the current insufficient level of services for prisoners with primary alcohol problems and ensure that services are developed to meet the need.

- 9.60 The compact-based drug testing programme should be reviewed as soon as possible to ensure that it has the capacity to support prisoners with a history of drug use. (9.91)

Not achieved. As a result of cost-saving measures that had been introduced earlier in 2011, little compact-based drug testing took place at the establishment, except on Dixon wing, as part of the Rehabilitation of Addicted Prisoners trust (RAPt) 12-step rehabilitation programme.

Additional information

- 9.61 In our survey, 22% of prisoners reported having a drug problem on arrival at the establishment, and 17% an alcohol problem, both figures being in line with the comparators. Eighty-seven per cent of prisoners with drug or alcohol problems said that they knew whom to go to in the prison for help, and more prisoners than at comparator prisons said that they had received help, with most saying that the help had been useful.

- 9.62 The counselling, assessment, referral, advice and throughcare (CARAT) service was run by Phoenix Futures. They had a total caseload of 380 clients and were actively involved with 150 of them. They were not funded for primary alcohol users. They had meetings with the clinical

integrated drug treatment system (IDTS) team every two weeks and were also involved in safer custody meetings.

- 9.63 The CARAT team saw all new arrivals at the establishment as part of the induction programme and took self-referrals, as well as referrals from other sources. They were able to offer group work for IDTS clients and one-to-one work for all clients. They referred clients to the RAPt programme, as well as to the two courses run by the education department, 'alcohol and offending behaviour' (a nine-session course) and an alcohol and drug awareness course (a 20-session course). They provided a focus group, which was open to all, once a week and a drop-in session specifically for IDTS clients. Good links had been established with drug intervention programme (DIP) workers in both the local area and parts of London, and they told us that some DIP case managers visited the establishment to meet prisoners before their release.
- 9.64 The RAPt programme was well established and was exceeding its targets. In the year to date, 42 prisoners had completed the course. During the inspection, three of the prisoners on the programme attended the RAPt graduation in London, with a further 12 participating via a teleconference link. Prisoners we spoke to were enthusiastic about the experience.
- 9.65 The RAPt orderlies spoke to all new arrivals on induction and ran peer-led user groups on Ellis wing for IDTS clients once a fortnight. Prisoners had to be drug free before they could start the programme. If an IDTS client was to start the programme, efforts were made to ensure that he was able to move to Dixon wing and start it as soon as he finished his detoxification programme, to ensure that he received maximum support.
- 9.66 RAPt staff had piloted having a family member attending reviews and also had a wide range of external speakers for the programme, many of whom were ex-offenders who had successfully completed it. Once prisoners had completed the programme, they were encouraged to stay on Dixon wing to support others. On release, RAPt staff recommended that they attended a secondary care course in the community, and organised for them to be collected from the gate and taken to the residential course. Links were also being established with resettlement agencies. One prisoner who responded to our survey said, '*RAPT is a life changing programme and I feel that without it I would be in a worse state*'.
- 9.67 A range of other voluntary support groups attended the establishment, including Alcoholics Anonymous, Narcotics Anonymous and Cocaine Anonymous.

Children and families of offenders

- 9.68 **The visitors centre should have sufficient space to accommodate all visitors. (9.102)**
- Not achieved.** The visitors centre was too small to accommodate all those waiting for visits. The situation had been exacerbated by the reduction in the number of visit sessions (see additional information), which meant that more visitors attended the remaining sessions. On the day we attended, there were many visitors waiting outside, which they said was a problem in bad weather.
- We repeat the recommendation.**
- 9.69 **Visitors should be taken to a private space to discuss sensitive issues. (9.103)**
- Not achieved.** There was a private interview and searching room but it was not used to discuss initial concerns following an indication by the drug dog.
- We repeat the recommendation.**

9.70 Visits should start on time. (9.104)

Achieved. During the inspection, the visits session started on time, at 2.15pm. However, the large number of visitors being searched meant that the last ones did not get into the visits hall until slightly before 3pm, although they were still afforded at least an hour on visits.

9.71 Family visits should be available to all prisoners. (9.105)

Not achieved. Family days were available twice monthly, only to those on the enhanced level of incentives and earned privileges (IEP) scheme and to life-sentenced prisoners.
We repeat the recommendation.

Additional information

- 9.72** The number of visit sessions had been reduced and they were available only on Friday afternoons, and Saturday and Sunday mornings and afternoons, providing a total of five sessions a week of two hours each. Each session could accommodate up to 53 prisoners, providing a total of 265 places for a population of 786 prisoners. Visitors could book by telephone, email or through the visitors centre, before leaving. When we called the telephone booking line it was answered promptly and we could have booked a visit for the Friday of the inspection. However, we were told that generally visits were booked up quickly, so some visitors had to wait to get an available slot. During the inspection, the weekend afternoon visits had all been allocated by mid-morning on the Monday preceding the weekend.
- 9.73** Information for visitors was included on the back of the visiting order. Some information held in the visitors centre had been translated into languages other than English. A free minibus operated on Fridays between the train station and the prison but was not available at weekends.
- 9.74** All visitors, including children, were marked with a fluorescent marker, which was checked before entering the searching area. Visitors who were indicated by the drugs dog were interviewed and offered a closed visit.
- 9.75** The prisoners' holding room at the rear of the visits hall was bare, uncomfortable and too small to accommodate the number waiting. To manage this, staff left the door unlocked, to provide more room and fresh air. When the visits hall was full, it was noisy and prisoners were seated close together, limiting privacy. Staff supervised the hall well and we saw good interactions with prisoners and their visitors. Some 57% of prisoners replying to our survey said that their visitors had been treated with respect. There was no limit on the number of children who could visit a prisoner at any one time.
- 9.76** The refreshment bar in the visits hall was not always open and staffing was limited to one person, which resulted in long queues, with up to a half hour wait to be served. The children's play area was well equipped and supervised by staff from the Community Development Agency in Hertfordshire. Prisoners had to wear prison shirts, even if they were on the enhanced level of the IEP scheme. However, they could wear their own clothes during family days.
- 9.77** Information about child protection and the vulnerability of prisoners was communicated to the staff supervising visits and consideration was given to prisoners' seating arrangements (see also recommendation 7.2). Child protection procedures were appropriate and well managed.

9.78 The Storybook Dads course was run via the library and a 'Fathers Inside' course was available. Two of these courses had been run in 2011, with 20 prisoners on each. Families were invited to the graduation ceremonies.

9.79 In our survey, more prisoners than at comparator prisons said that they had been helped to maintain contact with family and friends. Good family support services were available through the community links coordinator, who had facilitated links with other external bodies, including the Pre-School Alliance, which provided family support to those with children under five years old, and a referral service to other child support agencies across the country. The prison fellowship's 'Angel Tree' provided Christmas gifts for the children of prisoners at the establishment.

Attitudes, thinking and behaviour

9.80 **The number of enhanced thinking skills (ETS) and controlling anger and learning to manage it (CALM) places should be increased so that prisoners can complete programmes which are targets in their sentence plans. (9.113)**

Not achieved. The prison delivered a combined total of only 57 places in the thinking skills programme (formally ETS) and CALM. Waiting lists remained long and at the time of the inspection there were over 70 prisoners on waiting lists for these courses. The establishment's target was not based on any needs analysis of the prison's population but was allocated as an integral part of the regional programme delivery policy.

We repeat the recommendation.

9.81 **The A to Z motivation programme should be run often enough to meet the need of prisoners. (9.114)**

Achieved. Two of the psychology staff had been trained as facilitators to deliver the course. At the time of the inspection there was no waiting list and the small number of referred prisoners had been able to access the course mainly as a precursor to attending either of the two offending behaviour programmes (OBPs) on offer.

Additional information

9.82 A number of non-accredited programmes were run, including the A to Z course (see recommendation 9.81), and some restorative justice courses, run by the chaplaincy. According to the resettlement policy, prisoners were prioritised for OBPs by the criteria of release dates and: (1) prolific or priority offenders; (2) ISPs; (3) offenders who present a high or very high risk of serious harm.

9.83 When prisoners could not access OBPs, offender supervisors attempted to arrange for them to take alternative programmes, such as the assertiveness and decision-making or anger management courses offered by the education department. In-scope prisoners who could not access the programmes usually had their sentence plans amended, to enable them to access courses on licence at the end of their sentence under the supervision of offender managers.

Section 10: Summary of recommendations, housekeeping points and good practice

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

Main recommendation

To NOMS

-
- 10.1 The quality of the escort service should be reviewed and transfers should be predictable and timely. (HP53)

Main recommendations

To the governor

-
- 10.2 Howard wing should be brought up to, and maintained at, an appropriate standard of cleanliness and the reasons for less positive staff–prisoner relationships explored and addressed. (HP54)
- 10.3 The negative perceptions of Muslim prisoners should be explored and addressed. (HP55)
- 10.4 The allocation to work process should be expedited. The number of prisoners allocated to menial wing work should be reduced and good quality education, training and/or work places fully utilised. (HP56)
- 10.5 A resettlement needs analysis should be undertaken to inform the resettlement strategy and development of reducing offending provision. (HP57)
- 10.6 Offender assessment system (OASys) risk assessments and sentence plans should be complete and up to date for all prisoners. The resources for offender supervisors should be reviewed, to allow them sufficient time to undertake the full requirements of the role. (HP58)

Recommendations

To NOMS

-
- 10.7 Offender managers should retain the case responsibility for life-sentenced prisoners during the custodial phase of sentence. (9.27)
- 10.8 There should be an appropriate amount of category D provision to facilitate the progression of prisoners to open conditions. (9.30)

Recommendations

To the governor

First days in custody

-
- 10.9 All prisoners should be able to make a telephone call and take a shower on their first night. (1.13)
- 10.10 Prisoners should be able to receive a full prison shop order within 24 hours of arrival. (1.14)

- 10.11 All new prisoners should be provided with clean clothing on arrival. (1.20)
- 10.12 The induction booklet should be reviewed and produced in a format suited to those with learning difficulties. (1.23)
- 10.13 Prisoners should be kept fully occupied during induction. (1.28)

Residential units

- 10.14 Two prisoners should not share cells meant for one. (2.1)
- 10.15 Managers should monitor responses to cell call bells to ensure swift response, including those areas without an automated call system. (2.2)
- 10.16 Prisoners should be able to have clothing sent in through the post and handed in on visits. (2.5)
- 10.17 Showers should be repaired and supplied with constant water temperatures across the wings. (2.23)

Bullying and violence reduction

- 10.18 Matters discussed at the weekly violence reduction forum should be followed up in full and a record made of all actions taken. (3.2)
- 10.19 Formal interventions for bullies should be introduced. (3.4)
- 10.20 The findings of the most recent anti-bullying survey should be incorporated into the new violence reduction policy. (3.5)

Self-harm and suicide

- 10.21 All staff should be trained in assessment, care in custody and teamwork (ACCT) procedures. (3.10)
- 10.22 The constant observation cell in the CSU should be closed and records should be maintained of the use of the constant observation cell on Ellis wing. (3.19)
- 10.23 The Listener suite on Howard wing should be made suitable for use. (3.20)
- 10.24 Alternative accommodation should be considered for prisoners located in the care and separation unit on an open assessment, care in custody and teamwork (ACCT) document if necessary, and this should be evidenced. (3.21)

Applications and complaints

- 10.25 All responses to applications should be logged and followed up after seven days. (3.22)

Legal rights

- 10.26 The leaflet on legal services provided on induction should be translated into a range of languages appropriate to the prison population. (3.33)

Substance use: drug testing

- 10.27 A mechanism to manage suspicion testing more effectively should be developed to ensure that tests are undertaken within the required timeframe. (3.58)

Diversity

- 10.28 The diversity policy should be reviewed to ensure that all aspects of diversity are given proper and practical attention. (4.1)
- 10.29 External independent organisations working in the prison with minority groups should be represented at the diversity meeting. (4.9)

Diversity: race equality

- 10.30 Managers should commission a staff training needs analysis specifically to identify the deficits in competence and confidence contributing to the consistent negative perceptions of staff held by black and minority ethnic, foreign national and Muslim prisoners, and arrange additional training on the basis of that analysis. (4.11)

Diversity: religion

- 10.31 Managers should undertake monitoring and analysis of treatment of prisoners by religion and develop specific strategies for dealing with this. (4.21)

Diversity: foreign nationals

- 10.32 Interpreting services should be used in all cases where confidentiality is required, and more translated information about what is available at the prison should be provided after induction to prisoners for whom English is not a first language. (MR2)
- 10.33 Free telephone calls should be provided to prisoners with relatives abroad, regardless of whether they receive visits. (4.36)

Diversity: disability and older prisoners

- 10.34 All equality impact assessments should take account of potential and actual impacts on prisoners with disabilities. (4.38)
- 10.35 There should be accommodation and support for prisoners who need to use a wheelchair. (4.40)
- 10.36 Protected time should be given for the work of the disability liaison officer. (4.42)

- 10.37 There should be monitoring by disability, to ensure equality of treatment and of access to the regime. (4.43)
- 10.38 Older prisoners with specific needs and all those with a disability should have, and be involved in the development and regular update of, a multidisciplinary care plan that sets out how their needs, including their social care needs, will be met. (4.44)
- 10.39 A carer, mentor or peer supporter scheme should be introduced for older prisoners and those with disabilities. (4.45)
- 10.40 The issues raised by older prisoners in the recent questionnaire should form the basis of an action plan to improve conditions for this group. (4.47)
- 10.41 There should be monitoring by age, to ensure equality of treatment and access to the regime for older prisoners. (4.50)
- 10.42 The prison should maintain an up-to-date record of all prisoners who have declared a disability. (4.56)
- 10.43 Retired prisoners and those with a disability who cannot work should be unlocked during the day and provided with suitable activities. (4.57)

Diversity: gender and sexual orientation

- 10.44 Information should be displayed in prisoner areas affirming equality of respect across the range of sexual orientation, and indicating sources of support and assistance. (4.62)
- 10.45 Services and facilities for gay and bisexual prisoners should be developed. (4.65)

Health services

- 10.46 Health care rooms containing clinical records and equipment should be secured by a separate health care suite key, with access limited to professionally qualified health services staff. (5.19)
- 10.47 Prisoners should have access to a dedicated health care forum. (5.20)
- 10.48 Information should be provided for all prisoners about the health care services and how to access them. (5.30)
- 10.49 Health promotion literature in a range of languages should be more widely available to prisoners. (5.31)
- 10.50 A written policy for access to the pharmacy out of hours should be developed. (5.37)
- 10.51 The in-possession policy should be implemented consistently. (5.40)
- 10.52 Patient group directions (PGDs) for additional medications should be introduced, to enable supply of more potent medication by the pharmacy technician and/or nurse, and avoid unnecessary consultations with the doctor. A copy of the original signed PGDs should be present in the pharmacy, and read and signed by all relevant staff. (5.44)

- 10.53 A security assessment should be carried out to ensure that the security of the pharmacy complies with acceptable standards. (5.48)
- 10.54 Prisoners should have access to pharmacy-led clinics. (5.55)
- 10.55 Patients should be requested to wait at a distance from the medication hatch when not receiving medication, to maintain patient confidentiality. Consideration should be given to the presence of security staff at the pharmacy hatch during medication collection times, in order to minimise potential bullying and diversion of supplies. (5.56)
- 10.56 The timing and length of the morning administration period should be reviewed, to allow the safe and effective issuing of medication. (5.57)
- 10.57 Secondary dispensing should not take place. (5.58)
- 10.58 The prison should provide sufficient escorts to meet the demands of outside hospital appointments and avoid delayed waiting times for patients. (5.68)
- 10.59 Day care services should be developed. (5.69)

Time out of cell

- 10.60 The published average time unlocked should accurately reflect the reality for prisoners. (6.1)

Learning and skills and work activities

- 10.61 Observations of teaching and learning should focus more on evaluating and improving learners' development and progress. (6.11)
- 10.62 Links with employers that result in tangible outcomes for prisoners should continue to be developed. (6.18)
- 10.63 Appropriate qualified staff cover should be provided in workshops, to ensure continuity of provision. (6.21)
- 10.64 Learning and skills activities should not be disrupted by recreational gym sessions. (6.27)

Physical education and health promotion

- 10.65 All prisoners should have access to at least two sessions of recreational PE every week. (MR6)
- 10.66 Shower and changing room facilities should be refurbished. (6.35)

Security and rules

- 10.67 All visiting restrictions should be subject to regular review. (7.12)
- 10.68 The number of adjudications dismissed should be monitored and reduced. (7.15)

Discipline

- 10.69 Planned incidents should be reviewed for learning points. (7.21)
- 10.70 Robust governance arrangements should ensure that the use of the special cell is reduced, authorised only as a last resort and that all paperwork is fully completed. (7.27)
- 10.71 The use of handcuffs when walking a prisoner to the care and separation unit (CSU) should be based on a risk assessment and clearly authorised. (7.28)
- 10.72 Individual objectives should be set for prisoners located in the CSU according to their needs and risks. (7.32)
- 10.73 Contact logs should evidence the quantity and quality of contact with prisoners on the CSU. (7.35)
- 10.74 The ban on prisoners smoking in their cells should be withdrawn. (7.44)
- 10.75 Prisoners should not be routinely strip-searched on entry to the CSU. (7.45)
- 10.76 Reintegration planning for prisoners on the CSU should be formalised. (7.46)

Incentives and earned privileges

- 10.77 Entries into basic booklets should demonstrate that prisoners are being spoken to, and objectives set should clearly outline what the prisoner is required to do. (7.51)
- 10.78 Prisoners who have been on the enhanced level of the incentives and earned privileges scheme at their previous establishment should retain that status on arrival at The Mount. (7.56)

Prison shop

- 10.79 A range of goods to meet the needs of foreign national prisoners should be provided through the prison shop and catalogues. (8.14)

Strategic management of resettlement

- 10.80 The resettlement committee should set up further mechanisms to monitor the views and outcomes for prisoners of resettlement services. (9.4)
- 10.81 All relevant departments should be represented at discharge boards and this should be accurately recorded. (9.5)

Offender management and planning

- 10.82 The validity and quality of offender manager-generated sentence plans should be reviewed soon after reception and efforts made to improve them where necessary. (9.15)
- 10.83 An initial assessment of individual prisoners' resettlement needs should be carried out on induction and appropriate support offered where required. (9.26)

- 10.84 The prison should allow home leave over weekend periods. (9.28)
- 10.85 Offender supervisors should be appropriately trained in risk management. (9.35)
- 10.86 Robust challenges should be made to offender managers' assessed levels of risk when they are considered to be incorrect. (9.36)
- 10.87 There should be a greater focus on work with life- and indeterminate-sentenced prisoners, including a dedicated team of officers and regular forums for these prisoners. (9.37)
- 10.88 IPP prisoners should have their sentence plan in place within 14 days of arrival. (9.40)

Resettlement pathways

- 10.89 Specialist advice on finance and benefits should be available. (MR8)
- 10.90 The prison should ensure better coordination of all key agencies involved in the education, training and employment resettlement pathway and better promotion and use should be made of the Nacro pre-release information service and the virtual learning environment. (9.49)
- 10.91 The prison should increase the availability and use of release on temporary licence work placements. (9.50)
- 10.92 The drug strategy document should include alcohol services and contain detailed action plans and performance measures. (9.56)
- 10.93 The establishment should address the current insufficient level of services for prisoners with primary alcohol problems and ensure that services are developed to meet the need. (9.59)
- 10.94 The visitors centre should have sufficient space to accommodate all visitors. (9.68)
- 10.95 Visitors should be taken to a private space to discuss sensitive issues. (9.69)
- 10.96 Family visits should be available to all prisoners. (9.71)
- 10.97 The number of enhanced thinking skills (ETS) and controlling anger and learning to manage it (CALM) places should be increased so that prisoners can complete programmes which are targets in their sentence plans. (9.80)

Housekeeping points

Courts, escorts and transfers

- 10.98 The first night information should be reviewed and updated.(1.10)

Residential units

- 10.99 The offensive displays policy should be applied consistently. (2.18)

Applications and complaints

- 10.100 The prisoner complaints box should be opened daily by someone other than a uniformed member of staff. (3.30)
- 10.101 The reasons behind prisoners' claims that they had been made or encouraged to withdraw a complaint should be investigated. (3.31)

Diversity: race equality

- 10.102 There should be displays in residential areas which celebrate racial diversity. (4.20)

Diversity: disability and older prisoners

- 10.103 Personal emergency evacuation plans should accompany prisoners when they move location to a different wing. (4.58)
- 10.104 Consultation meetings with prisoners with disabilities should be attended by a health services representative. (4.59)

Health services

- 10.105 The treatment room on Ellis wing should be redecorated and well maintained. (5.59)

Security and rules

- 10.106 Rules should be clearly displayed on all wings. (7.13)

Discipline

- 10.107 The discrepancy in the data in P-Nomis and that held by the CSU about the number of adjudications being dismissed should be explored and rectified. (7.16)
- 10.108 Data on the use of force should be aggregated year on year, to identify trends and issues. (7.29)
- 10.109 Use of force paperwork should not be certified by an officer involved in the incident. (7.30)

Catering

- 10.110 Wing self catering equipment should be repaired swiftly. (8.10)
- 10.111 The breakfast pack should be issued on the morning it is to be eaten. (8.11)

Examples of good practice

Substance use: clinical management

10.112 Prisoners were asked to sign specially designed prescription charts when they had received their substitution medication, which encouraged a collaborative approach to their care. (3.56)

Diversity: foreign nationals

10.113 The meetings of cultural groups and celebrations of national days maintained contact between prisoners of the same background. (4.37)

Health services

10.114 The process of self-certification gave prisoners more responsibility for their own health. (5.32)

10.115 The care of prisoners with learning disabilities included their assessment and care planning. (5.72)

Offender management and planning

10.116 The use of P-Nomis by offender supervisors provided wider dissemination of prisoner information. (9.13)

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Paul Rowlands	Inspector
Michael Calvert	Inspector
Andrew Rooke	Inspector
Sandra Fieldhouse	Inspector
Karen Dillon	Inspector
Amy Summerfield	Senior researcher
Jess Broughton	Researcher
Alice Reid	Researcher
Hayley Cripps	Researcher

Specialist inspectors

Elizabeth Tysoe	Drugs inspector
Michael Bowen	Health services inspector
Peter Gibbs	Pharmacist
Neil Edwards	Ofsted inspector
Nic Brown	Ofsted inspector
Karen Adriaanse	Ofsted inspector

Appendix II: Prison population profile

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

Status	18-20-year-olds	21 and over	%
Sentenced		729	94.8
Recall		33	4.3
Convicted unsentenced		0	
Remand		0	
Civil prisoners		0	
Detainees		4	0.5
Other		3	0.4
Total		769	100

Sentence	18-20-year-olds	21 and over	%
Unsentenced		5	0.7
Less than 6 months		0	
6 months to less than 12 months		0	
12 months to less than 2 years		4	0.5
2 years to less than 3 years		34	4.4
3 years to less than 4 years		69	9
4 years to less than 10 years		412	53.6
10 years and over (not life)		95	12.4
Life		150	19.5
Total		769	100

Age	Number of prisoners	%
Minimum age;	21	
21 years to 29 years	288	37.5
30 years to 39 years	241	31.3
40 years to 49 years	170	22.1
50 years to 59 years	51	6.6
60 years to 69 years	16	2.1
70 plus years	3	0.4
Under 21	0	
maximum age;	72	
Total	769	100

Nationality	18-20-year-olds	21 and over	%
British		575	74.8
Foreign nationals		192	25
Not stated		2	0.2
Total		769	100

Security category	18-20-year olds	21 and over	%
Category A exceptional		0	
Category A high risk		0	
Category A provisional		0	
Category A standard		0	
Category B		4	0.5
Category C		680	88.4

Category D		75	9.8
Female closed		0	
Female open		0	
Female semi		0	
Other		0	
Uncategorised sentenced		0	
Uncategorised sentenced male		3	0.4
Uncategorised unsentenced		0	
Unclassified		1	0.1
Unsentenced		3	0.4
YOI closed		3	0.4
YOI open		0	
Total		769	100

Religion	18-20-year-olds	21 and over	%
Baptist		2	0.3
Buddhist		17	2.2
Church of England		150	19.5
Hindu		12	1.6
Jewish		4	0.5
Muslim		187	24.3
No religion		156	20.3
Not Stated		5	0.7
Other		85	11
Roman Catholic		140	18.2
Sikh		11	1.4
Total		769	100

Ethnicity	18-20-year-olds	21 and over	%
<i>Asian or Asian British</i>			
Bangladeshi		10	1.3
Indian		18	2.3
Other		34	4.4
Pakistani		21	2.7
Total		83	10.7
<i>Black or black British</i>			
African		81	10.5
Caribbean		135	17.6
Other black		40	5.2
Total		256	33.3
<i>Chinese or other ethnic group</i>		16	2.1
Chinese		2	0.3
Total		18	2.4
<i>Mixed</i>			
African		3	0.4
Asian		2	0.3
Caribbean		18	2.3
Other mixed		12	1.6
Total		35	4.6
<i>White</i>			
British		295	38.4
Irish		11	1.4

Other white		61	7.9
Total		367	47.7
Not stated - code missing		10	1.3
Total		10	1.3
Total		769	100

Sentenced prisoners only

Length of stay	18-20-year-olds		21 and over	
	Number	%	Number	%
1 month to 3 months			107	13.9
1 year to 2 years			140	19.5
2 years to 4 years			210	27.3
3 months to 6 months			178	23.1
4 years or more			57	7.4
6 months to 1 year			1	0.1
Less than 1 month			61	7.9
Total			764	99.3

Unsentenced prisoners only

Length of stay	18-20-year-olds		21 and over	
	Number	%	Number	%
1 month to 3 months				
1 year to 2 years			2	40
2 years to 4 years			3	60
3 months to 6 months				
4 years or more				
6 months to 1 year				
Less than 1 month				
Total			5	0.7

Appendix III: 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.

Choosing the sample size

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

At the time of the survey on 4 October 2011, the prisoner population at HMP The Mount was 771. The sample size was 207. Overall, this represented 27% of the prisoner population.

Selecting the sample

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

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

Interviews were carried out with any respondents with literacy difficulties. No respondents requested an interview.

Methodology

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

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

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

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

Response rates

In total, 171 respondents completed and returned their questionnaires. This represented 22% of the prison population. The response rate was 83%. In addition to the nine respondents who refused to complete a questionnaire, 22 questionnaires were not returned and five were returned blank.

Comparisons

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

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

The following analyses have been conducted:

- The current survey responses in 2011 against comparator figures for all prisoners surveyed in category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 39 category C trainer prisons since April 2006.
- The current survey responses in 2011 against the responses of prisoners surveyed at HMP The Mount in 2009.
- A comparison within the 2011 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2011 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2011 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2011 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 2011 survey between those who are aged 50 and over and those under 50.

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

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

Summary

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

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

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

Summary of prisoner survey results

Section 1: About you

Q1.2	How old are you?	
	<i>Under 21</i>	2 (1%)
	<i>21 - 29</i>	67 (40%)
	<i>30 - 39</i>	49 (29%)
	<i>40 - 49</i>	34 (20%)
	<i>50 - 59</i>	14 (8%)
	<i>60 - 69</i>	2 (1%)
	<i>70 and over</i>	1 (1%)
Q1.3	Are you sentenced?	
	<i>Yes</i>	162 (95%)
	<i>Yes - on recall</i>	8 (5%)
	<i>No - awaiting trial</i>	0 (0%)
	<i>No - awaiting sentence</i>	0 (0%)
	<i>No - awaiting deportation</i>	0 (0%)
Q1.4	How long is your sentence?	
	Not sentenced	0 (0%)
	<i>Less than 6 months</i>	0 (0%)
	<i>6 months to less than 1 year</i>	0 (0%)
	<i>1 year to less than 2 years</i>	5 (3%)
	<i>2 years to less than 4 years</i>	29 (17%)
	<i>4 years to less than 10 years</i>	75 (44%)
	<i>10 years or more</i>	24 (14%)
	<i>IPP (Indeterminate Sentence for Public Protection)</i>	28 (16%)
	<i>Life</i>	9 (5%)
Q1.5	Approximately, how long do you have left to serve (if you are serving life or IPP, please use the date of your next board)?	
	Not sentenced	0 (0%)
	<i>6 months or less</i>	32 (26%)
	<i>More than 6 months</i>	93 (74%)
Q1.6	How long have you been in this prison?	
	<i>Less than 1 month</i>	6 (4%)
	<i>1 to less than 3 months</i>	11 (7%)
	<i>3 to less than 6 months</i>	20 (12%)
	<i>6 to less than 12 months</i>	31 (18%)
	<i>12 months to less than 2 years</i>	47 (28%)
	<i>2 to less than 4 years</i>	32 (19%)
	<i>4 years or more</i>	22 (13%)
Q1.7	Are you a foreign national? (i.e. do not hold UK citizenship)	
	<i>Yes</i>	29 (18%)

No..... 134 (82%)

Q1.8 Is English your first language?

Yes..... 140 (84%)
 No..... 26 (16%)

Q1.9 What is your ethnic origin?

<i>White - British</i>	67 (39%)	<i>Asian or Asian British - Bangladeshi</i>	4 (2%)
<i>White - Irish</i>	6 (4%)	<i>Asian or Asian British - Other</i>	3 (2%)
<i>White - Other</i>	17 (10%)	<i>Mixed race - White and black Caribbean</i>	7 (4%)
<i>Black or black British - Caribbean</i>	28 (16%)	<i>Mixed race - White and black African</i>	2 (1%)
<i>Black or black British - African</i>	17 (10%)	<i>Mixed race - White and Asian</i>	1 (1%)
<i>Black or black British - Other</i>	3 (2%)	<i>Mixed race - Other</i>	0 (0%)
<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Chinese</i>	1 (1%)
<i>Asian or Asian British - Pakistani</i>	8 (5%)	<i>Other ethnic group</i>	5 (3%)

Q1.10 Do you consider yourself to be Gypsy/Romany/Traveller?

Yes..... 9 (6%)
 No..... 140 (94%)

Q1.11 What is your religion?

<i>None</i>	33 (20%)	<i>Hindu</i>	2 (1%)
<i>Church of England</i>	29 (17%)	<i>Jewish</i>	2 (1%)
<i>Catholic</i>	30 (18%)	<i>Muslim</i>	47 (28%)
<i>Protestant</i>	4 (2%)	<i>Sikh</i>	1 (1%)
<i>Other Christian denomination</i>	11 (7%)	<i>Other</i>	5 (3%)
<i>Buddhist</i>	4 (2%)		

Q1.12 How would you describe your sexual orientation?

Heterosexual/straight..... 161 (99%)
Homosexual/gay..... 0 (0%)
Bisexual..... 0 (0%)
Other..... 1 (1%)
If other, please specify..... 4 (100%)

Q1.13 Do you consider yourself to have a disability?

Yes..... 17 (10%)
 No..... 150 (90%)

Q1.14 How many times have you been in prison before?

<i>0</i>	<i>1</i>	<i>2 to 5</i>	<i>More than 5</i>
67 (39%)	37 (22%)	45 (26%)	21 (12%)

Q1.15 Including this prison, how many prisons have you been in during this sentence/remand time?

1 7 (4%)	2 to 5 124 (76%)	More than 5 32 (20%)
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Q1.16 Do you have any children under the age of 18?

Yes	90 (53%)
No	79 (47%)

Section 2: Courts, transfers and escorts

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

	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>	<i>Don't remember</i>	<i>N/A</i>
The cleanliness of the van	11 (7%)	61 (37%)	31 (19%)	36 (22%)	24 (14%)	3 (2%)	0 (0%)
Your personal safety during the journey	12 (8%)	72 (49%)	23 (16%)	25 (17%)	14 (10%)	1 (1%)	0 (0%)
The comfort of the van	4 (3%)	15 (9%)	22 (14%)	52 (33%)	65 (41%)	2 (1%)	0 (0%)
The attention paid to your health needs	9 (6%)	42 (28%)	41 (28%)	26 (17%)	25 (17%)	2 (1%)	4 (3%)
The frequency of toilet breaks	3 (2%)	17 (11%)	33 (21%)	22 (14%)	62 (39%)	3 (2%)	19 (12%)

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

<i>Less than 1 hour</i>	<i>Over 1 hour to 2 hours</i>	<i>Over 2 hours to 4 hours</i>	<i>More than 4 hours</i>	<i>Don't remember</i>
11 (7%)	74 (45%)	65 (39%)	12 (7%)	4 (2%)

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

<i>Very well</i>	<i>Well</i>	<i>Neither</i>	<i>Badly</i>	<i>Very badly</i>	<i>Don't remember</i>
20 (12%)	88 (52%)	34 (20%)	13 (8%)	12 (7%)	2 (1%)

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

	<i>Yes</i>	<i>No</i>	<i>Don't remember</i>
Did you know where you were going when you left court or when transferred from another prison?	149 (90%)	15 (9%)	2 (1%)
Before you arrived here did you receive any written information about what would happen to you?	37 (23%)	122 (76%)	2 (1%)
When you first arrived here did your property arrive at the same time as you?	144 (89%)	16 (10%)	1 (1%)

Section 3: Reception, first night and induction

- Q3.1 In the first 24 hours, did staff ask you if you needed help or support with the following? (Please tick all that apply to you.)**
- | | | | |
|--|----------|--|----------|
| Didn't ask about any of these | 39 (26%) | <i>Money worries</i> | 22 (14%) |
| <i>Loss of property</i> | 27 (18%) | <i>Feeling depressed or suicidal</i> | 51 (34%) |
| <i>Housing problems</i> | 32 (21%) | <i>Health problems</i> | 86 (57%) |
| <i>Contacting employers</i> | 20 (13%) | <i>Needing protection from other prisoners</i> | 23 (15%) |
| <i>Contacting family</i> | 50 (33%) | <i>Accessing phone numbers</i> | 52 (34%) |
| <i>Ensuring dependants were being looked after</i> | 18 (12%) | <i>Other</i> | 4 (3%) |
| <i>If Other (please specify in box)</i> | | | |
- Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)**
- | | | | |
|--|----------|--|----------|
| Didn't have any problems | 48 (35%) | <i>Money worries</i> | 27 (19%) |
| <i>Loss of property</i> | 24 (17%) | <i>Feeling depressed or suicidal</i> | 20 (14%) |
| <i>Housing problems</i> | 27 (19%) | <i>Health problems</i> | 36 (26%) |
| <i>Contacting employers</i> | 8 (6%) | <i>Needing protection from other prisoners</i> | 6 (4%) |
| <i>Contacting family</i> | 37 (27%) | <i>Accessing phone numbers</i> | 35 (25%) |
| <i>Ensuring dependants were looked after</i> | 8 (6%) | <i>Other</i> | 0 (0%) |
- Q3.3 Please answer the following questions about reception:**
- | | Yes | No | Don't remember |
|---|-----------|----------|----------------|
| Were you seen by a member of health services? | 162 (98%) | 2 (1%) | 2 (1%) |
| When you were searched, was this carried out in a respectful way? | 134 (85%) | 21 (13%) | 3 (2%) |
- Q3.4 Overall, how well did you feel you were treated in reception?**
- | | Very well | Well | Neither | Badly | Very badly | Don't remember |
|--|-----------|----------|----------|---------|------------|----------------|
| | 26 (16%) | 92 (55%) | 30 (18%) | 11 (7%) | 8 (5%) | 0 (0%) |
- Q3.5 On your day of arrival, were you offered information on the following? (Please tick all that apply to you.)**
- | | |
|--|-----------|
| <i>Information about what was going to happen to you</i> | 96 (62%) |
| <i>Information about what support was available for people feeling depressed or suicidal</i> | 71 (46%) |
| <i>Information about how to make routine requests</i> | 73 (47%) |
| <i>Information about your entitlement to visits</i> | 84 (54%) |
| <i>Information about health services</i> | 98 (63%) |
| <i>Information about the chaplaincy</i> | 103 (66%) |
| Not offered anything | 19 (12%) |

Q3.6	On your day of arrival, were you offered any of the following? (Please tick all that apply to you.)	
	<i>A smokers/non-smokers pack.....</i>	139 (83%)
	<i>The opportunity to have a shower.....</i>	62 (37%)
	<i>The opportunity to make a free telephone call.....</i>	69 (41%)
	<i>Something to eat.....</i>	108 (64%)
	<i>Did not receive anything.....</i>	13 (8%)
Q3.7	Did you meet any of the following people within the first 24 hours of your arrival at this prison? (Please tick all that apply to you.)	
	<i>Chaplain or religious leader</i>	103 (62%)
	<i>Someone from health services</i>	138 (84%)
	<i>A Listener/Samaritans.....</i>	52 (32%)
	<i>Did not meet any of these people.....</i>	11 (7%)
Q3.8	Did you have access to the prison shop/canteen within the first 24 hours of your arrival at this prison?	
	<i>Yes.....</i>	22 (13%)
	<i>No.....</i>	141 (87%)
Q3.9	Did you feel safe on your first night here?	
	<i>Yes.....</i>	142 (87%)
	<i>No.....</i>	17 (10%)
	<i>Don't remember.....</i>	5 (3%)
Q3.10	How soon after your arrival did you go on an induction course?	
	<i>Have not been on an induction course.....</i>	4 (2%)
	<i>Within the first week</i>	133 (81%)
	<i>More than a week</i>	23 (14%)
	<i>Don't remember.....</i>	5 (3%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course.....</i>	4 (2%)
	<i>Yes.....</i>	101 (62%)
	<i>No.....</i>	44 (27%)
	<i>Don't remember.....</i>	13 (8%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is to?					
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
						<i>N/A</i>
	Communicate with your solicitor or legal representative?	16 (10%)	59 (37%)	28 (17%)	26 (16%)	13 (8%)
	Attend legal visits?	14 (10%)	69 (47%)	23 (16%)	11 (7%)	2 (1%)
	Obtain bail information?	2 (2%)	14 (11%)	31 (23%)	10 (8%)	12 (9%)
						63 (48%)

Q4.2 Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?

Not had any letters 17 (11%)
 Yes 80 (50%)
 No 64 (40%)

Q4.3 Please answer the following questions about the wing/unit you are currently living on:

	Yes	No	Don't know	N/A
Are you normally offered enough clean, suitable clothes for the week?	95 (60%)	42 (26%)	9 (6%)	13 (8%)
Are you normally able to have a shower every day?	160 (98%)	4 (2%)	0 (0%)	0 (0%)
Do you normally receive clean sheets every week?	116 (72%)	26 (16%)	5 (3%)	15 (9%)
Do you normally get cell cleaning materials every week?	135 (84%)	24 (15%)	1 (1%)	0 (0%)
Is your cell call bell normally answered within five minutes?	60 (37%)	64 (40%)	24 (15%)	14 (9%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	110 (69%)	47 (30%)	1 (1%)	1 (1%)
Can you normally get your stored property if you need to?	56 (35%)	66 (41%)	26 (16%)	12 (8%)

Q4.4 What is the food like here?

Very good *Good* *Neither* *Bad* *Very bad*
 6 (4%) 42 (25%) 54 (33%) 32 (19%) 31 (19%)

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

Have not bought anything yet 1 (1%)
 Yes 90 (56%)
 No 70 (43%)

Q4.6 Is it easy or difficult to get either

	Very easy	Easy	Neither	Difficult	Very difficult	Don't know
A complaint form	65 (39%)	75 (45%)	10 (6%)	5 (3%)	3 (2%)	8 (5%)
An application form	78 (50%)	65 (41%)	9 (6%)	2 (1%)	1 (1%)	2 (1%)

Q4.7 Have you made an application?

Yes 153 (95%)
 No 8 (5%)

Q4.8 Please answer the following questions concerning applications:

(If you have not made an application please tick the 'not made one' option.)

	Not made one	Yes	No
Do you feel <i>applications</i> are dealt with fairly?	8 (5%)	93 (57%)	62 (38%)

Do you feel <i>applications</i> are dealt with promptly? (Within seven days)	8 (5%)	77 (51%)	66 (44%)
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Q4.9 Have you made a complaint?

Yes	80 (50%)
No	80 (50%)

Q4.10 Please answer the following questions concerning complaints:

(If you have not made a complaint please tick the 'not made one' option.)

	Not made one	Yes	No
Do you feel <i>complaints</i> are dealt with fairly?	80 (48%)	27 (16%)	58 (35%)
Do you feel <i>complaints</i> are dealt with promptly? (Within seven days)	80 (50%)	38 (24%)	42 (26%)
Were you given information about how to make an appeal?	46 (30%)	52 (34%)	53 (35%)

Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?

Not made a complaint	80 (48%)
Yes	30 (18%)
No	55 (33%)

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

<i>Don't know who they are</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
30 (19%)	9 (6%)	34 (22%)	49 (31%)	22 (14%)	14 (9%)

Q4.13 What level of the IEP scheme are you on now?

Don't know what the IEP scheme is	3 (2%)
<i>Enhanced</i>	129 (77%)
<i>Standard</i>	34 (20%)
<i>Basic</i>	2 (1%)
<i>Don't know</i>	0 (0%)

Q4.14 Do you feel you have been treated fairly in your experience of the IEP scheme?

Don't know what the IEP scheme is	3 (2%)
Yes	89 (55%)
No	55 (34%)
<i>Don't know</i>	16 (10%)

Q4.15 Do the different levels of the IEP scheme encourage you to change your behaviour?

Don't know what the IEP scheme is	3 (2%)
Yes	86 (53%)
No	60 (37%)
<i>Don't know</i>	12 (7%)

Q4.16	Please answer the following questions about this prison?		
		Yes	No
	In the last six months have any members of staff physically restrained you (C&R)?	7 (4%)	157 (96%)
	In the last six months have you spent a night in the segregation/care and separation unit?	11 (7%)	150 (93%)
Q4.17	Please answer the following questions about your religious beliefs?		
		Yes	No
			<i>Don't know/ N/A</i>
	Do you feel your religious beliefs are respected?	102 (63%)	31 (19%)
	Are you able to speak to a religious leader of your faith in private if you want to?	102 (67%)	40 (26%)
Q4.18	Can you speak to a listener at any time, if you want to?		
	Yes	No	<i>Don't know</i>
	73 (44%)	11 (7%)	82 (49%)
Q4.19	Please answer the following questions about staff in this prison?		
		Yes	No
	Is there a member of staff you can turn to for help if you have a problem?	122 (74%)	42 (26%)
	Do most staff treat you with respect?	125 (77%)	38 (23%)

Section 5: Safety

Q5.1	Have you ever felt unsafe in this prison?		
	Yes	51 (30%)	
	No	117 (70%)	
Q5.2	Do you feel unsafe in this prison at the moment?		
	Yes	14 (8%)	
	No	151 (92%)	
Q5.3	In which areas of this prison do you/have you ever felt unsafe? (Please tick all that apply to you.)		
	Never felt unsafe	117 (74%)	
	<i>Everywhere</i>	8 (5%)	
	<i>Segregation unit</i>	4 (3%)	
	<i>Association areas</i>	15 (9%)	
	<i>Reception area</i>	3 (2%)	
	<i>At the gym</i>	11 (7%)	
	<i>In an exercise yard</i>	15 (9%)	
	<i>At work</i>	8 (5%)	
	<i>During movement</i>	14 (9%)	
	<i>At education</i>	4 (3%)	
	<i>At mealtimes</i>	4 (3%)	
	<i>At health services</i>	4 (3%)	
	<i>Visit's area</i>	5 (3%)	
	<i>In wing showers</i>	7 (4%)	
	<i>In gym showers</i>	5 (3%)	
	<i>In corridors/stairwells</i>	11 (7%)	
	<i>On your landing/wing</i>	7 (4%)	
	<i>In your cell</i>	4 (3%)	
	<i>At religious services</i>	2 (1%)	
Q5.4	Have you been victimised by another prisoner or group of prisoners here?		
	Yes	23 (14%)	

No..... 140 (86%) **If No, go to question 5.6**

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

<i>Insulting remarks (about you or your family or friends).....</i>	12 (7%)	<i>Because of your sexuality.....</i>	1 (1%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	8 (5%)	<i>Because you have a disability...</i>	1 (1%)
<i>Sexual abuse.....</i>	1 (1%)	<i>Because of your religion/religious beliefs.....</i>	4 (2%)
<i>Because of your race or ethnic origin.....</i>	5 (3%)	<i>Because of your age.....</i>	3 (2%)
<i>Because of drugs.....</i>	5 (3%)	<i>Being from a different part of the country than others.....</i>	5 (3%)
<i>Having your canteen/property taken.....</i>	6 (4%)	<i>Because of your offence/crime..</i>	2 (1%)
<i>Because you were new here.....</i>	4 (2%)	<i>Because of gang related issues</i>	6 (4%)

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

Yes 38 (24%)
 No..... 120 (76%) **If No, go to question 5.8**

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

<i>Insulting remarks (about you or your family or friends).....</i>	13 (8%)	<i>Because you have a disability</i>	1 (1%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	1 (1%)	<i>Because of your religion/religious beliefs.....</i>	8 (5%)
<i>Sexual abuse.....</i>	1 (1%)	<i>Because if your age.....</i>	6 (4%)
<i>Because of your race or ethnic origin.....</i>	15 (9%)	<i>Being from a different part of the country than others.....</i>	7 (4%)
<i>Because of drugs.....</i>	6 (4%)	<i>Because of your offence/crime.....</i>	2 (1%)
<i>Because you were new here..</i>	8 (5%)	<i>Because of gang related issues.....</i>	2 (1%)
<i>Because of your sexuality.....</i>	0 (0%)		

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

Not been victimised 105 (67%)
 Yes 15 (10%)
 No..... 36 (23%)

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

Yes 29 (18%)
 No..... 136 (82%)

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

Yes 31 (19%)

No..... 134 (81%)

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

<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>Don't know</i>
20 (12%)	13 (8%)	13 (8%)	6 (4%)	14 (9%)	95 (59%)

Section 6: Health services

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

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
The doctor	7 (4%)	12 (7%)	57 (35%)	17 (10%)	53 (32%)	18 (11%)
The nurse	5 (3%)	19 (12%)	90 (58%)	16 (10%)	21 (13%)	5 (3%)
The dentist	7 (5%)	3 (2%)	18 (12%)	12 (8%)	64 (42%)	50 (32%)
The optician	43 (28%)	5 (3%)	22 (14%)	11 (7%)	42 (27%)	31 (20%)

Q6.2 Are you able to see a pharmacist?

Yes..... 108 (75%)
 No..... 36 (25%)

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

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
The doctor	15 (9%)	21 (13%)	61 (38%)	21 (13%)	22 (14%)	20 (13%)
The nurse	5 (3%)	24 (15%)	76 (49%)	18 (12%)	16 (10%)	16 (10%)
The dentist	35 (23%)	17 (11%)	38 (25%)	24 (16%)	18 (12%)	19 (13%)
The optician	50 (34%)	12 (8%)	33 (23%)	23 (16%)	13 (9%)	15 (10%)

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

<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
3 (2%)	15 (9%)	60 (37%)	31 (19%)	32 (20%)	22 (13%)

Q6.5 Are you currently taking medication?

Yes..... 71 (44%)
 No..... 90 (56%)

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

Not taking medication 90 (57%)
 Yes..... 62 (39%)
 No..... 6 (4%)

Q6.7 Do you feel you have any emotional wellbeing/mental health issues?

Yes..... 31 (20%)
 No..... 127 (80%)

Q6.8 Are your emotional wellbeing/mental health issues being addressed by any of the following? (Please tick all that apply to you.)

Do not have any issues/not receiving any help 130 (85%)
Doctor 12 (8%)
Nurse..... 8 (5%)

Psychiatrist.....	1 (1%)
Mental health in-reach team.....	6 (4%)
Counsellor.....	11 (7%)
Other.....	0 (0%)

- Q6.9 Did you have a problem with either of the following when you came into this prison?**
- | | Yes | No |
|---------|----------|-----------|
| Drugs | 35 (22%) | 122 (78%) |
| Alcohol | 24 (17%) | 119 (83%) |
- Q6.10 Have you developed a problem with drugs since you have been in this prison?**
- | | |
|----------|-----------|
| Yes..... | 3 (2%) |
| No..... | 157 (98%) |
- Q6.11 Do you know who to contact in this prison to get help with your drug or alcohol problem?**
- | | |
|--|-----------|
| Yes..... | 40 (25%) |
| No..... | 6 (4%) |
| <i>Did not/do not have a drug or alcohol problem</i> | 112 (71%) |
- Q6.12 Have you received any intervention or help (including, CARATs, Health Services etc.) for your drug/alcohol problem while in this prison?**
- | | |
|--|-----------|
| Yes..... | 41 (26%) |
| No..... | 6 (4%) |
| <i>Did not/do not have a drug or alcohol problem</i> | 112 (70%) |
- Q6.13 Was the intervention or help you received while in this prison helpful?**
- | | |
|--|-----------|
| Yes..... | 38 (24%) |
| No..... | 1 (1%) |
| <i>Did not have a problem/have not received help</i> | 118 (75%) |
- Q6.14 Do you think you will have a problem with either of the following when you leave this prison?**
- | | Yes | No | Don't know |
|---------|--------|-----------|------------|
| Drugs | 3 (2%) | 136 (87%) | 18 (11%) |
| Alcohol | 0 (0%) | 137 (91%) | 14 (9%) |
- Q6.15 Do you know who in this prison can help you contact external drug or alcohol agencies on release?**
- | | |
|----------|-----------|
| Yes..... | 18 (12%) |
| No..... | 8 (5%) |
| N/A..... | 130 (83%) |

Section 7: Purposeful activity

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

Prison job	89 (56%)
Vocational or skills training.....	26 (16%)
Education (including basic skills).....	52 (33%)
Offending behaviour programmes.....	38 (24%)
Not involved in any of these	21 (13%)

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

	Not been involved	Yes	No	Don't know
Prison job	7 (6%)	58 (48%)	42 (35%)	13 (11%)
Vocational or skills training	11 (11%)	66 (69%)	15 (16%)	4 (4%)
Education (including basic skills)	11 (10%)	74 (69%)	16 (15%)	6 (6%)
Offending behaviour programmes	7 (6%)	75 (65%)	22 (19%)	11 (10%)

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

Don't want to go	21 (13%)
<i>Never</i>	14 (9%)
<i>Less than once a week</i>	48 (31%)
<i>About once a week</i>	33 (21%)
<i>More than once a week</i>	28 (18%)
<i>Don't know</i>	13 (8%)

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

Don't want to go	0	1	2	3 to 5	More than 5	Don't know
20 (13%)	23 (14%)	40 (25%)	50 (31%)	20 (13%)	3 (2%)	3 (2%)

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

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
3 (2%)	6 (4%)	47 (30%)	64 (41%)	32 (20%)	5 (3%)

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

<i>Less than 2 hours</i>	4 (3%)
<i>2 to less than 4 hours</i>	21 (13%)
<i>4 to less than 6 hours</i>	36 (23%)
<i>6 to less than 8 hours</i>	34 (22%)
<i>8 to less than 10 hours</i>	35 (22%)
<i>10 hours or more</i>	15 (10%)
<i>Don't know</i>	11 (7%)

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

Don't want to go	0	1 to 2	3 to 5	More than 5	Don't know
0 (0%)	0 (0%)	7 (4%)	21 (13%)	120 (76%)	10 (6%)

Q7.8	How often do staff normally speak to you during association time?	
	<i>Do not go on association</i>	3 (2%)
	<i>Never</i>	28 (19%)
	<i>Rarely</i>	31 (21%)
	<i>Some of the time</i>	62 (41%)
	<i>Most of the time</i>	18 (12%)
	<i>All of the time</i>	9 (6%)

Section 8: Resettlement

Q8.1	When did you first meet your personal officer?	
	<i>Still have not met him/her</i>	30 (19%)
	<i>In the first week</i>	72 (46%)
	<i>More than a week</i>	31 (20%)
	<i>Don't remember</i>	25 (16%)

Q8.2	How helpful do you think your personal officer is?					
	<i>Do not have a personal officer/ still have not met him/her</i>	<i>Very helpful</i>	<i>Helpful</i>	<i>Neither</i>	<i>Not very helpful</i>	<i>Not at all helpful</i>
	30 (19%)	41 (26%)	41 (26%)	20 (13%)	17 (11%)	6 (4%)

Q8.3	Do you have a sentence plan/OASys?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	132 (84%)
	<i>No</i>	25 (16%)

Q8.4	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/OASys</i>	25 (16%)
	<i>Very involved</i>	43 (28%)
	<i>Involved</i>	43 (28%)
	<i>Neither</i>	8 (5%)
	<i>Not very involved</i>	21 (14%)
	<i>Not at all involved</i>	13 (8%)

Q8.5	Can you achieve all or some of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/OASys</i>	25 (17%)
	<i>Yes</i>	98 (65%)
	<i>No</i>	28 (19%)

Q8.6	Are there plans for you to achieve all/some of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/OASys</i>	27 (18%)
	<i>Yes</i>	51 (34%)
	<i>No</i>	73 (48%)

Q8.7	Do you feel that any member of staff has helped you to address your offending behaviour while at this prison?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	61 (40%)

	No.....	92 (60%)		
Q8.8	Do you feel that any member of staff has helped you to prepare for your release?			
	Yes.....	33 (21%)		
	No.....	122 (79%)		
Q8.9	Have you had any problems with sending or receiving mail?			
	Yes.....	61 (38%)		
	No.....	93 (58%)		
	Don't know.....	6 (4%)		
Q8.10	Have you had any problems getting access to the telephones?			
	Yes.....	34 (21%)		
	No.....	124 (77%)		
	Don't know.....	3 (2%)		
Q8.11	Did you have a visit in the first week that you were here?			
	Not been here a week yet	2 (1%)		
	Yes.....	51 (32%)		
	No.....	100 (62%)		
	Don't remember.....	8 (5%)		
Q8.12	How many visits did you receive in the last week?			
	Not been in a week	0	1 to 2	3 to 4
	2 (1%)	88 (59%)	59 (40%)	0 (0%)
				5 or more
				0 (0%)
Q8.13	How are you and your family/friends usually treated by visits staff?			
	Not had any visits	18 (11%)		
	Very well.....	15 (9%)		
	Well.....	66 (42%)		
	Neither.....	27 (17%)		
	Badly.....	8 (5%)		
	Very badly.....	11 (7%)		
	Don't know.....	14 (9%)		
Q8.14	Have you been helped to maintain contact with your family/friends while in this prison?			
	Yes.....	71 (45%)		
	No.....	86 (55%)		
Q8.15	Do you know who to contact to get help with the following within this prison: (Please tick all that apply to you.)			
	Don't know who to contact .	83 (64%)	Help with your finances in preparation for release	20 (15%)
	Maintaining good relationships	24 (18%)	Claiming benefits on release ..	30 (23%)
	Avoiding bad relationships	17 (13%)	Arranging a place at college/continuing education on release	19 (15%)

<i>Finding a job on release</i>	34 (26%)	<i>Continuity of health services on release.....</i>	21 (16%)
<i>Finding accommodation on release.....</i>	28 (22%)	<i>Opening a bank account</i>	29 (22%)

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

<i>No problems.....</i>	60 (41%)	<i>Help with your finances in preparation for release</i>	44 (30%)
<i>Maintaining good relationships.....</i>	13 (9%)	<i>Claiming benefits on release..</i>	37 (26%)
<i>Avoiding bad relationships</i>	15 (10%)	<i>Arranging a place at college/continuing education on release.....</i>	23 (16%)
<i>Finding a job on release</i>	71 (49%)	<i>Continuity of health services on release.....</i>	20 (14%)
<i>Finding accommodation on release.....</i>	60 (41%)	<i>Opening a bank account</i>	45 (31%)

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

<i>Not sentenced.....</i>	0 (0%)
<i>Yes</i>	90 (63%)
<i>No.....</i>	52 (37%)

Main comparator and comparator to last time



Prisoner survey responses HMP The Mount 2011

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

Key to tables

		HMP The Mount 2011	Cat. C Trainer comparator	HMP The Mount 2011	HMP The Mount 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		171	5068	171	108
SECTION 1: General information					
2	Are you under 21 years of age?	1%	2%	1%	0%
3a	Are you sentenced?	100%	100%	100%	98%
3b	Are you on recall?	5%	11%	5%	2%
4a	Is your sentence less than 12 months?	0%	5%	0%	1%
4b	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	16%	7%	16%	15%
5	Do you have six months or less to serve?	26%	39%	26%	29%
6	Have you been in this prison less than a month?	4%	7%	4%	6%
7	Are you a foreign national?	18%	12%	18%	23%
8	Is English your first language?	84%	91%	84%	84%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	47%	25%	47%	56%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	6%	4%	6%	3%
11	Are you Muslim?	28%	10%	28%	31%
12	Are you homosexual/gay or bisexual?	1%	4%	1%	1%
13	Do you consider yourself to have a disability?	10%	15%	10%	9%
14	Is this your first time in prison?	39%	34%	39%	33%
15	Have you been in more than five prisons this time?	20%	13%	20%	17%
16	Do you have any children under the age of 18?	53%	52%	53%	62%
SECTION 2: Transfers and escorts					
For the most recent journey you have made either to or from court or between prisons:					
1a	Was the cleanliness of the van good/very good?	43%	53%	43%	58%
1b	Was your personal safety during the journey good/very good?	57%	63%	57%	55%
1c	Was the comfort of the van good/very good?	12%	18%	12%	19%
1d	Was the attention paid to your health needs good/very good?	34%	32%	34%	30%
1e	Was the frequency of toilet breaks good/very good?	13%	12%	13%	9%
2	Did you spend more than four hours in the van?	7%	8%	7%	14%
3	Were you treated well/very well by the escort staff?	64%	66%	64%	67%
4a	Did you know where you were going when you left court or when transferred from another prison?	90%	83%	90%	88%
4b	Before you arrived here did you receive any written information about what would happen to you?	23%	18%	23%	22%
4c	When you first arrived here did your property arrive at the same time as you?	89%	88%	89%	83%

Main comparator and comparator to last time

Key to tables

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Percentages which are not highlighted show there is no significant difference					
SECTION 3: Reception, first night and induction					
1	In the first 24 hours, did staff ask you if you needed help/support with the following:				
1b	Problems with loss of property?	18%	14%	18%	17%
1c	Housing problems?	21%	19%	21%	23%
1d	Problems contacting employers?	13%	10%	13%	7%
1e	Problems contacting family?	33%	44%	33%	35%
1f	Problems ensuring dependants were looked after?	12%	11%	12%	11%
1g	Money problems?	15%	15%	15%	14%
1h	Problems of feeling depressed/suicidal?	34%	46%	34%	40%
1i	Health problems?	57%	58%	57%	61%
1j	Problems in needing protection from other prisoners?	15%	17%	15%	16%
1k	Problems accessing phone numbers?	34%	35%	34%	38%
2	When you first arrived:				
2a	Did you have any problems?	66%	61%	66%	64%
2b	Did you have any problems with loss of property?	17%	16%	17%	24%
2c	Did you have any housing problems?	20%	16%	20%	24%
2d	Did you have any problems contacting employers?	6%	4%	6%	7%
2e	Did you have any problems contacting family?	27%	23%	27%	26%
2f	Did you have any problems ensuring dependants were being looked after?	6%	5%	6%	8%
2g	Did you have any money worries?	20%	15%	20%	16%
2h	Did you have any problems with feeling depressed or suicidal?	14%	14%	14%	8%
2i	Did you have any health problems?	26%	22%	26%	21%
2j	Did you have any problems with needing protection from other prisoners?	4%	5%	4%	8%
2k	Did you have problems accessing phone numbers?	25%	22%	25%	24%
3a	Were you seen by a member of health services in reception?	98%	89%	98%	96%
3b	When you were searched in reception, was this carried out in a respectful way?	85%	78%	85%	78%
4	Were you treated well/very well in reception?	71%	70%	71%	67%
5	On your day of arrival, were you offered information about any of the following:				
5a	What was going to happen to you?	62%	53%	62%	59%
5b	Support was available for people feeling depressed or suicidal?	46%	47%	46%	56%
5c	How to make routine requests?	47%	42%	47%	48%
5d	Your entitlement to visits?	54%	47%	54%	55%
5e	Health services?	63%	59%	63%	71%
5f	The chaplaincy?	66%	51%	66%	62%

Main comparator and comparator to last time

Key to tables

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SECTION 3: Reception, first night and induction continued					
6	On your day of arrival, were you offered any of the following:				
6a	A smokers/non-smokers pack?	83%	84%	83%	84%
6b	The opportunity to have a shower?	37%	40%	37%	34%
6c	The opportunity to make a free telephone call?	41%	47%	41%	33%
6d	Something to eat?	64%	77%	64%	66%
7	Within the first 24 hours did you meet any of the following people:				
7a	The chaplain or a religious leader?	62%	45%	62%	49%
7b	Someone from health services?	84%	76%	84%	82%
7c	A Listener/Samaritans?	32%	29%	32%	36%
8	Did you have access to the prison shop/canteen within the first 24 hours?	14%	19%	14%	13%
9	Did you feel safe on your first night here?	87%	83%	87%	79%
10	Have you been on an induction course?	98%	93%	98%	96%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	64%	65%	64%	63%
SECTION 4: Legal rights and respectful custody					
1	In terms of your legal rights, is it easy/very easy to:				
1a	Communicate with your solicitor or legal representative?	47%	49%	47%	52%
1b	Attend legal visits?	56%	53%	56%	58%
1c	Obtain bail information?	12%	17%	12%	16%
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	50%	41%	50%	44%
3	For the wing/unit you are currently on:				
3a	Are you normally offered enough clean, suitable clothes for the week?	60%	60%	60%	47%
3b	Are you normally able to have a shower every day?	98%	92%	98%	96%
3c	Do you normally receive clean sheets every week?	72%	80%	72%	64%
3d	Do you normally get cell cleaning materials every week?	84%	74%	84%	82%
3e	Is your cell call bell normally answered within five minutes?	37%	40%	37%	38%
3f	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	70%	69%	65%
3g	Can you normally get your stored property, if you need to?	35%	29%	35%	31%
4	Is the food in this prison good/very good?	29%	29%	29%	24%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	56%	47%	56%	34%
6a	Is it easy/very easy to get a complaints form?	84%	86%	84%	89%
6b	Is it easy/very easy to get an application form?	91%	90%	91%	95%
7	Have you made an application?	95%	89%	95%	92%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 4: Legal rights and respectful custody continued					
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	60%	61%	60%	59%
8b	Do you feel applications are dealt with promptly (within seven days)?	54%	52%	54%	41%
9	Have you made a complaint?	50%	54%	50%	60%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	32%	33%	32%	27%
10b	Do you feel complaints are dealt with promptly (within seven days)?	48%	39%	48%	39%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	35%	24%	35%	34%
10c	Were you given information about how to make an appeal?	35%	29%	35%	33%
12	Is it easy/very easy to see the Independent Monitoring Board?	27%	34%	27%	36%
13	Are you on the enhanced (top) level of the IEP scheme?	77%	57%	77%	67%
14	Do you feel you have been treated fairly in your experience of the IEP scheme?	55%	55%	55%	46%
15	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	48%	53%	44%
16a	In the last six months have any members of staff physically restrained you (C&R)?	4%	5%	4%	6%
16b	In the last six months have you spent a night in the segregation/care and separation unit?	7%	10%	7%	9%
13a	Do you feel your religious beliefs are respected?	63%	55%	63%	57%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	67%	58%	67%	63%
14	Are you able to speak to a Listener at any time, if you want to?	44%	61%	44%	53%
15a	Is there a member of staff in this prison that you can turn to for help if you have a problem?	74%	74%	74%	71%
15b	Do most staff in this prison treat you with respect?	77%	74%	77%	74%
SECTION 5: Safety					
1	Have you ever felt unsafe in this prison?	30%	31%	30%	37%
2	Do you feel unsafe in this prison at the moment?	9%	14%	9%	15%
4	Have you been victimised by another prisoner?	14%	19%	14%	19%
5	Since you have been here, has another prisoner:				
5a	Made insulting remarks about you, your family or friends?	7%	9%	7%	7%
5b	Hit, kicked or assaulted you?	5%	5%	5%	6%
5c	Sexually abused you?	1%	1%	1%	0%
5d	Victimised you because of your race or ethnic origin?	3%	4%	3%	7%
5e	Victimised you because of drugs?	3%	2%	3%	2%
5f	Taken your canteen/property?	4%	4%	4%	4%
5g	Victimised you because you were new here?	2%	4%	2%	2%
5h	Victimised you because of your sexuality?	1%	1%	1%	0%
5i	Victimised you because you have a disability?	1%	2%	1%	2%
5j	Victimised you because of your religion/religious beliefs?	2%	2%	2%	4%
5k	Victimised you because of your age?	2%	2%	2%	2%
5l	Victimised you because you were from a different part of the country?	3%	5%	3%	2%
5m	Victimised you because of your offence/crime?	1%	4%	1%	2%
5n	Victimised you because of gang related issues?	4%	3%	4%	5%

Main comparator and comparator to last time

Key to tables

		HMP The Mount 2011	Cat C Trainer comparator	HMP The Mount 2011	HMP The Mount 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Safety continued					
6	Have you been victimised by a member of staff?	24%	22%	24%	28%
7	Since you have been here, has a member of staff:				
7a	Made insulting remarks about you, your family or friends?	8%	10%	8%	10%
7b	Hit, kicked or assaulted you?	1%	3%	1%	4%
7c	Sexually abused you?	1%	1%	1%	1%
7d	Victimised you because of your race or ethnic origin?	10%	5%	10%	17%
7e	Victimised you because of drugs?	4%	3%	4%	2%
7f	Victimised you because you were new here?	5%	4%	5%	7%
7g	Victimised you because of your sexuality?	0%	1%	0%	1%
7h	Victimised you because you have a disability?	1%	2%	1%	1%
7i	Victimised you because of your religion/religious beliefs?	5%	3%	5%	7%
7j	Victimised you because of your age?	4%	2%	4%	1%
7k	Victimised you because you were from a different part of the country?	5%	4%	5%	3%
7l	Victimised you because of your offence/crime?	1%	4%	1%	3%
7m	Victimised you because of gang related issues?	1%	2%	1%	3%
For those who have been victimised by staff or other prisoners:					
8	Did you report any victimisation that you have experienced?	30%	40%	30%	41%
9	Have you ever felt threatened or intimidated by another prisoner/ group of prisoners in here?	18%	21%	18%	24%
10	Have you ever felt threatened or intimidated by a member of staff in here?	19%	19%	19%	25%
11	Is it easy/very easy to get illegal drugs in this prison?	21%	31%	21%	33%
SECTION 6: Health services					
1a	Is it easy/very easy to see the doctor?	42%	39%	42%	34%
1b	Is it easy/very easy to see the nurse?	70%	61%	70%	65%
1c	Is it easy/very easy to see the dentist?	14%	15%	14%	5%
1d	Is it easy/very easy to see the optician?	18%	18%	18%	16%
2	Are you able to see a pharmacist?	75%	53%	75%	64%
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:					
3a	The doctor?	57%	52%	57%	51%
3b	The nurse?	67%	65%	67%	68%
3c	The dentist?	47%	46%	47%	37%
3d	The optician?	47%	47%	47%	48%
4	The overall quality of health services?	47%	45%	47%	48%

Main comparator and comparator to last time

Key to tables

		HMP The Mount 2011	Cat C Trainer comparator	HMP The Mount 2011	HMP The Mount 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Health services continued					
5	Are you currently taking medication?	44%	45%	44%	39%
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	91%	87%	91%	82%
7	Do you feel you have any emotional wellbeing/mental health issues?	20%	26%	20%	16%
For those with emotional wellbeing/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	15%	35%	15%	31%
8b	A doctor?	42%	31%	42%	54%
8c	A nurse?	27%	17%	27%	31%
8d	A psychiatrist?	4%	16%	4%	23%
8e	The mental health in-reach team?	23%	33%	23%	23%
8f	A counsellor?	39%	11%	39%	23%
9a	Did you have a drug problem when you came into this prison?	22%	21%	22%	20%
9b	Did you have an alcohol problem when you came into this prison?	17%	14%	17%	12%
10a	Have you developed a drug problem since you have been in this prison?	2%	9%	2%	7%
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	87%	89%	87%	92%
12	Have you received any help or intervention while in this prison?	87%	80%	87%	67%
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	97%	79%	97%	75%
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	13%	21%	13%	10%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	9%	16%	9%	8%
For those who may have a drug or alcohol problem on release, do you know who in this prison:					
15	Can help you contact external drug or alcohol agencies on release?	69%	61%	69%	44%

Main comparator and comparator to last time

Key to tables

		HMP The Mount 2011	Cat C Trainer comparator	HMP The Mount 2011	HMP The Mount 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 7: Purposeful activity					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	56%	64%	56%	61%
1b	Vocational or skills training?	16%	19%	16%	27%
1c	Education (including basic skills)?	33%	30%	33%	37%
1d	Offending Behaviour Programmes?	24%	16%	24%	20%
2ai	Have you had a job while in this prison?	94%	87%	94%	84%
For those who have had a prison job while in this prison:					
2aii	Do you feel the job will help you on release?	51%	46%	51%	45%
2bi	Have you been involved in vocational or skills training while in this prison?	89%	78%	89%	66%
For those who have had vocational or skills training while in this prison:					
2bii	Do you feel the vocational or skills training will help you on release?	78%	66%	78%	96%
2ci	Have you been involved in education while in this prison?	90%	83%	90%	77%
For those who have been involved in education while in this prison:					
2cii	Do you feel the education will help you on release?	77%	67%	77%	81%
2di	Have you been involved in offending behaviour programmes while in this prison?	94%	76%	94%	60%
For those who have been involved in offending behaviour programmes while in this prison:					
2dii	Do you feel the offending behaviour programme(s) will help you on release?	69%	59%	69%	78%
3	Do you go to the library at least once a week?	39%	48%	39%	45%
4	On average, do you go to the gym at least twice a week?	46%	55%	46%	25%
5	On average, do you go outside for exercise three or more times a week?	61%	51%	61%	65%
6	On average, do you spend ten or more hours out of your cell on a weekday?	10%	15%	10%	7%
7	On average, do you go on association more than five times each week?	76%	76%	76%	79%
8	Do staff normally speak to you most of the time/all of the time during association?	18%	20%	18%	17%
SECTION 8: Resettlement					
1	Do you have a personal officer?	81%	76%	81%	64%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	66%	62%	66%	59%
For those who are sentenced:					
3	Do you have a sentence plan?	84%	68%	84%	92%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	67%	56%	67%	59%
5	Can you achieve some/all of your sentence plan targets in this prison?	78%	70%	78%	68%
6	Are there plans for you to achieve some/all your targets in another prison?	41%	36%	41%	43%
For those who are sentenced:					
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	40%	32%	40%	33%
8	Do you feel that any member of staff has helped you to prepare for release?	21%	19%	21%	9%
9	Have you had any problems with sending or receiving mail?	38%	40%	38%	35%
10	Have you had any problems getting access to the telephones?	21%	24%	21%	16%
11	Did you have a visit in the first week that you were here?	32%	22%	32%	31%
12	Did you receive one or more visits in the last week?	40%	30%	40%	44%

Main comparator and comparator to last time

Key to tables

		HMP The Mount 2011	Cat C Trainer comparator	HMP The Mount 2011	HMP The Mount 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Resettlement continued					
For those who have had visits:					
13	How are you and your family/friends usually treated by visits staff? (Very well/well)	57%	54%	57%	50%
14	Have you been helped to maintain contact with family/friends whilst in this prison?	45%	37%	45%	36%
15	Do you know who to contact within this prison to get help with the following:				
15b	Maintaining good relationships?	18%	17%	18%	18%
15c	Avoiding bad relationships?	13%	13%	13%	15%
15d	Finding a job on release?	26%	36%	26%	26%
15e	Finding accommodation on release?	22%	39%	22%	26%
15f	With money/finances on release?	15%	27%	15%	19%
15g	Claiming benefits on release?	23%	39%	23%	30%
15h	Arranging a place at college/continuing education on release?	15%	25%	15%	21%
15i	Accessing health services on release?	16%	27%	16%	18%
15j	Opening a bank account on release?	22%	27%	22%	19%
16	Do you think you will have a problem with any of the following on release from prison?				
16b	Maintaining good relationships?	9%	11%	9%	9%
16c	Avoiding bad relationships?	10%	12%	10%	6%
16d	Finding a job?	49%	45%	49%	41%
16e	Finding accommodation?	41%	38%	41%	27%
16f	Money/finances?	30%	31%	30%	22%
16g	Claiming benefits?	26%	27%	26%	24%
16h	Arranging a place at college/continuing education?	16%	20%	16%	18%
16i	Accessing health services?	14%	17%	14%	11%
16j	Opening a bank account?	31%	30%	31%	24%
For those who are sentenced:					
17	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	63%	55%	63%	60%

Diversity Analysis



Key question responses (ethnicity, nationality and religion) HMP The Mount 2011

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

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British national 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						
Number of completed questionnaires returned		81	90	29	134	47	121
1.3	Are you sentenced?	100%	100%	100%	100%	100%	100%
1.7	Are you a foreign national?	26%	10%			25%	15%
1.8	Is English your first language?	79%	89%	55%	91%	65%	92%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?			69%	42%	75%	36%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	3%	9%	0%	7%	5%	7%
1.11	Are you Muslim?	44%	14%	39%	25%		
1.12	Do you consider yourself to have a disability?	9%	12%	4%	11%	11%	10%
1.13	Is this your first time in prison?	47%	33%	62%	32%	53%	34%
2.1d	Was the attention paid to your health needs good/very good on your journey here?	31%	37%	31%	35%	27%	37%
2.3	Were you treated well/very well by the escort staff?	69%	59%	62%	65%	62%	65%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	86%	93%	89%	92%	91%	89%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	31%	35%	38%	33%	29%	34%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	35%	33%	46%	32%	19%	39%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	60%	53%	50%	57%	50%	59%
3.2a	Did you have any problems when you first arrived?	64%	67%	52%	69%	70%	63%
3.3a	Were you seen by a member of health care staff in reception?	96%	99%	93%	99%	98%	98%
3.3b	When you were searched in reception, was this carried out in a respectful way?	84%	85%	96%	84%	79%	88%
3.4	Were you treated well/very well in reception?	71%	70%	79%	70%	65%	74%
3.7b	Did you have access to someone from health care within the first 24 hours?	81%	86%	85%	85%	71%	88%
3.9	Did you feel safe on your first night here?	84%	89%	93%	86%	80%	90%
3.10	Have you been on an induction course?	97%	98%	100%	97%	98%	97%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	51%	42%	54%	45%	54%	43%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British national 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						
4.3a	Are you normally offered enough clean, suitable clothes for the week?	52%	67%	69%	58%	56%	61%
4.3b	Are you normally able to have a shower every day?	100%	95%	100%	97%	100%	97%
4.3e	Is your cell call bell normally answered within five minutes?	39%	36%	41%	36%	39%	37%
4.4	Is the food in this prison good/very good?	28%	30%	29%	28%	23%	31%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	54%	58%	40%	59%	53%	57%
4.6a	Is it easy/very easy to get a complaints form?	84%	85%	81%	85%	80%	86%
4.6b	Is it easy/very easy to get an application form?	90%	92%	88%	92%	85%	93%
4.9	Have you made a complaint?	47%	53%	46%	49%	45%	51%
4.13	Are you on the enhanced (top) level of the IEP scheme?	80%	74%	93%	73%	76%	77%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	55%	54%	65%	53%	52%	56%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	57%	50%	60%	52%	54%	53%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	4%	5%	4%	5%	7%	3%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	5%	9%	4%	7%	7%	7%
4.17a	Do you feel your religious beliefs are respected?	71%	55%	76%	58%	76%	57%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	70%	63%	73%	63%	91%	57%
4.18	Are you able to speak to a Listener at any time if you want to?	35%	52%	39%	45%	43%	44%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	73%	76%	73%	75%	65%	78%
4.19b	Do most staff in this prison treat you with respect?	73%	80%	86%	76%	63%	83%
5.1	Have you ever felt unsafe in this prison?	26%	34%	21%	33%	30%	30%
5.2	Do you feel unsafe in this prison at the moment?	9%	8%	7%	9%	11%	8%
5.4	Have you been victimised by another prisoner?	12%	16%	8%	16%	16%	13%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	4%	4%	3%	7%	2%
5.5i	Have you been victimised because you have a disability? (By prisoners)	0%	1%	0%	1%	0%	1%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	1%	0%	3%	7%	1%
5.6	Have you been victimised by a member of staff?	29%	20%	12%	27%	35%	19%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	13%	6%	7%	10%	21%	5%

Diversity Analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British national 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						
5.7h	Have you been victimised because you have a disability? (By staff)	0%	1%	0%	1%	0%	1%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	7%	4%	0%	6%	14%	2%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	10%	24%	7%	21%	17%	17%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	26%	13%	15%	20%	34%	12%
5.11	Is it easy/very easy to get illegal drugs in this prison?	15%	26%	12%	24%	14%	24%
6.1a	Is it easy/very easy to see the doctor?	39%	45%	46%	39%	33%	47%
6.1b	Is it easy/ very easy to see the nurse?	71%	69%	80%	68%	70%	69%
6.2	Are you able to see a pharmacist?	69%	81%	78%	74%	68%	77%
6.5	Are you currently taking medication?	36%	51%	27%	46%	39%	45%
6.7	Do you feel you have any emotional wellbeing/mental health issues?	11%	27%	4%	24%	16%	21%
7.1a	Are you currently working in the prison?	53%	59%	59%	55%	62%	54%
7.1b	Are you currently undertaking vocational or skills training?	12%	21%	15%	17%	18%	15%
7.1c	Are you currently in education (including basic skills)?	42%	24%	48%	30%	40%	30%
7.1d	Are you currently taking part in an offending behaviour programme?	26%	22%	19%	26%	27%	22%
7.3	Do you go to the library at least once a week?	45%	34%	50%	36%	27%	42%
7.4	On average, do you go to the gym at least twice a week?	54%	39%	61%	41%	46%	46%
7.5	On average, do you go outside for exercise three or more times a week?	64%	59%	73%	57%	68%	59%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	11%	8%	4%	11%	9%	10%
7.7	On average, do you go on association more than five times each week?	73%	79%	73%	77%	64%	81%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	19%	17%	29%	16%	12%	20%
8.1	Do you have a personal officer?	81%	81%	82%	80%	77%	82%
8.9	Have you had any problems sending or receiving mail?	34%	42%	15%	41%	38%	39%
8.10	Have you had any problems getting access to the telephones?	16%	26%	8%	24%	18%	23%

Diversity Analysis - Disability



Key questions (disability analysis) HMP The Mount 2011

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

		Consider themselves to have a disability	Do not consider themselves to have a disability
	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		17	150
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	7%	19%
1.8	Is English your first language?	93%	84%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	42%	49%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	8%	6%
1.11	Are you Muslim?	30%	28%
1.14	Is this your first time in prison?	18%	42%
2.1d	Was the attention paid to your health needs good/very good?	29%	35%
2.3	Were you treated well/very well by the escort staff?	70%	63%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	88%	90%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	22%	34%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	43%	33%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	100%	52%
3.2a	Did you have any problems when you first arrived?	71%	64%
3.3a	Were you seen by a member of health care staff in reception?	100%	98%
3.3b	When you were searched in reception, was this carried out in a respectful way?	88%	85%
3.4	Were you treated well/very well in reception?	77%	70%
3.7b	Did you have access to someone from health care within the first 24 hours?	77%	85%
3.9	Did you feel safe on your first night here?	81%	88%
3.10	Have you been on an induction course?	94%	98%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	44%	47%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.3a	Are you normally offered enough clean, suitable clothes for the week?	60%	61%
4.3b	Are you normally able to have a shower every day?	100%	97%
4.3e	Is your cell call bell normally answered within five minutes?	53%	36%
4.4	Is the food in this prison good/very good?	53%	27%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	32%	59%
4.6a	Is it easy/very easy to get a complaints form?	82%	84%
4.6b	Is it easy/very easy to get an application form?	100%	90%
4.9	Have you made a complaint?	60%	49%
4.13	Are you on the enhanced (top) level of the IEP scheme?	65%	78%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	44%	56%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	56%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	18%	3%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	23%	5%
4.17a	Do you feel your religious beliefs are respected?	58%	63%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	75%	66%
4.18	Are you able to speak to a Listener at any time, if you want to?	65%	42%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	70%	74%
4.19b	Do most staff, in this prison, treat you with respect?	88%	75%
5.1	Have you ever felt unsafe in this prison?	35%	29%
5.2	Do you feel unsafe in this prison at the moment?	12%	8%
5.4	Have you been victimised by another prisoner?	42%	11%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	4%
5.5i	Victimised you because you have a disability?	0%	1%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	3%
5.6	Have you been victimised by a member of staff?	18%	25%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	7%	10%
5.7h	Victimised you because you have a disability?	0%	1%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	7%	5%

Diversity Analysis - Disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	23%	17%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	7%	21%
5.11	Is it easy/very easy to get illegal drugs in this prison?	18%	21%
6.1a	Is it easy/very easy to see the doctor?	58%	41%
6.1b	Is it easy/ very easy to see the nurse?	93%	68%
6.2	Are you able to see a pharmacist?	76%	75%
6.5	Are you currently taking medication?	70%	40%
6.7	Do you feel you have any emotional well being/mental health issues?	38%	17%
7.1a	Are you currently working in the prison?	47%	57%
7.1b	Are you currently undertaking vocational or skills training?	12%	17%
7.1c	Are you currently in education (including basic skills)?	23%	34%
7.1d	Are you currently taking part in an offending behaviour programme?	7%	26%
7.3	Do you go to the library at least once a week?	53%	38%
7.4	On average, do you go to the gym at least twice a week?	35%	48%
7.5	On average, do you go outside for exercise three or more times a week?	77%	60%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	7%	10%
7.7	On average, do you go on association more than five times each week?	82%	75%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	34%	17%
8.1	Do you have a personal officer?	81%	82%
8.9	Have you had any problems sending or receiving mail?	30%	39%
8.10	Have you had any problems getting access to the telephones?	30%	20%



Diversity Analysis - Age
Key question responses (Age- over 50) HMP The Mount 2011

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

		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		17	152
1.3	Are you sentenced?	100%	100%
1.7	Are you a foreign national?	26%	17%
1.8	Is English your first language?	93%	83%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	30%	49%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	15%	5%
1.11	Are you Muslim?	12%	30%
1.13	Do you consider yourself to have a disability?	12%	10%
1.14	Is this your first time in prison?	47%	39%
2.1d	Was the attention paid to your health needs good/very good?	40%	34%
2.3	Were you treated well/very well by the escort staff?	47%	66%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	87%	90%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	21%	35%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	27%	35%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	47%	59%
3.2a	Did you have any problems when you first arrived?	50%	67%
3.3a	Were you seen by a member of health care staff in reception?	100%	97%
3.3b	When you were searched in reception, was this carried out in a respectful way?	88%	84%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	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		
3.4	Were you treated well/very well in reception?	82%	70%
3.7b	Did you have access to someone from health care within the first 24 hours?	93%	83%
3.9	Did you feel safe on your first night here?	87%	86%
3.10	Have you been on an induction course?	100%	97%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	60%	46%
4.3a	Are you normally offered enough clean, suitable clothes for the week?	74%	58%
4.3b	Are you normally able to have a shower every day?	93%	98%
4.3e	Is your cell call bell normally answered within five minutes?	43%	37%
4.4	Is the food in this prison good/very good?	44%	27%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	60%	56%
4.6a	Is it easy/very easy to get a complaints form?	88%	84%
4.6b	Is it easy/very easy to get an application form?	92%	91%
4.9	Have you made a complaint?	43%	51%
4.13	Are you on the enhanced (top) level of the IEP scheme?	100%	75%
4.14	Do you feel you have been treated fairly in your experience of the IEP scheme?	63%	54%
4.15	Do the different levels of the IEP scheme encourage you to change your behaviour?	43%	54%
4.16a	In the last six months have any members of staff physically restrained you (C&R)?	0%	5%
4.16b	In the last six months have you spent a night in the segregation/care and separation unit?	0%	8%
4.17a	Do you feel your religious beliefs are respected?	75%	61%
4.17b	Are you able to speak to a religious leader of your faith in private if you want to?	78%	65%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	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		
4.18	Are you able to speak to a Listener at any time, if you want to?	63%	42%
4.19a	Is there a member of staff you can turn to for help if you have a problem in this prison?	93%	73%
4.19b	Do most staff in this prison treat you with respect?	79%	77%
5.1	Have you ever felt unsafe in this prison?	19%	31%
5.2	Do you feel unsafe in this prison at the moment?	7%	9%
5.4	Have you been victimised by another prisoner?	0%	15%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	4%
5.5i	Victimised you because you have a disability?	0%	1%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	3%
5.5k	Have you been victimised because of your age? (By prisoners)	0%	2%
5.6	Have you been victimised by a member of staff?	13%	26%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	7%	10%
5.7h	Victimised you because you have a disability?	0%	1%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	6%
5.7j	Have you been victimised because of your age? (By staff)	0%	4%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	13%	18%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	7%	20%
5.11	Is it easy/very easy to get illegal drugs in this prison?	13%	21%
6.1a	Is it easy/very easy to see the doctor?	75%	38%
6.1b	Is it easy/ very easy to see the nurse?	79%	68%

Diversity Analysis - Age

Key to tables

	Any percentage highlighted in green is significantly better	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		
6.2	Are you able to see a pharmacist?	74%	75%
6.5	Are you currently taking medication?	66%	42%
6.7	Do you feel you have any emotional wellbeing/mental health issues?	19%	20%
7.1a	Are you currently working in the prison?	63%	56%
7.1b	Are you currently undertaking vocational or skills training?	25%	16%
7.1c	Are you currently in education (including basic skills)?	38%	32%
7.1d	Are you currently taking part in an offending behaviour programme?	13%	25%
7.3	Do you go to the library at least once a week?	47%	39%
7.4	On average, do you go to the gym at least twice a week?	44%	46%
7.5	On average, do you go outside for exercise three or more times a week?	66%	61%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	7%	10%
7.7	On average, do you go on association more than five times each week?	87%	75%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	13%	18%
8.1	Do you have a personal officer?	79%	81%
8.9	Have you had any problems sending or receiving mail?	38%	38%
8.10	Have you had any problems getting access to the telephones?	19%	21%