

Report on an announced inspection of

HMP The Verne

1–5 October 2012

by HM Chief Inspector of Prisons

Glossary of terms

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

Crown copyright 2013

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

Contents

Introduction	5
Fact page	7
Healthy prison summary	9
1 Safety	19
<hr/>	
2 Respect	29
<hr/>	
3 Purposeful activity	43
<hr/>	
4 Resettlement	49
<hr/>	
5 Recommendations, housekeeping points and good practice	57
<hr/>	
Appendices	
<hr/>	
I Inspection team	64
II Prison population profile	65
III Summary of prisoner questionnaires and interviews	68

Introduction

Based in a Victorian citadel, and situated above the harbour on the Isle of Portland, on the south coast near Weymouth, The Verne is a unique prison in many respects.

Perhaps as a result of its isolated location, The Verne has historically been characterised by a strong sense of community and very good staff-prisoner relationships. The 600 or so men it holds have had much more freedom within the confines of the prison than is usually the case in a category C training prison of this type.

These very positive features remain in place today. Few prisoners felt unsafe and there were low levels of violence and self-harm. The generally good relationships underpinned good dynamic security, typified by the proactive work we observed by night staff to resolve difficulties and tensions. The external environment was clean and attractive but the conditions of the cells and dormitories in which some of the men were held was poor – although this was mitigated to some extent by the freedom of movement they enjoyed. Health care was also generally good.

This ethos was in some cases preserved by overly rigid application of criteria for accepting prisoners into the prison, and weak justification for transferring prisoners out. All men being transferred out were held in the segregation unit while they awaited transfer. So a prisoner who, for no fault of his own, was a few months under the age limit of 25 when he was brought to the prison, would be held in segregation before he was moved on. In the six months before the inspection, 50 prisoners were transferred out for unspecified 'security reasons'. We found little evidence to support some of these decisions, which were taken almost exclusively by security managers. The number of complaints had fallen since the last inspection and prisoners told us they were concerned that if they complained too often they would be transferred out.

In our view, decisions to transfer prisoners out and hold them in segregation should be subject to individual risk assessments and greater management oversight.

It was important that the strong culture of the prison did not become exclusive. Prisoners from black and minority ethnic communities and Muslim prisoners were more negative about the prison than the rest of the population. Diversity work was generally weak and investigation of discrimination incidents was inadequate. The prison had held a large foreign national population. This had reduced considerably by the time of this inspection but, despite that history, there was little attempt to understand or meet their specific needs. At the time of the inspection, Muslim prisoners' views had been understandably affected by a number of recent incidents, and there were significant problems in providing regular access to a Muslim chaplain. Provision for older prisoners and prisoners with disabilities was better but still required development.

The prison made extensive use of peer support workers and had the largest and most effective Toe by Toe scheme of any prison. Toe by Toe schemes involve one prisoner mentor working on an individual basis with a prisoner student to help improve their reading skills to the obvious benefit of both student and mentor. The scheme at The Verne was impressive and it should be encouraged in all prisons.

The extensive use of peer mentors was also important because, at the very least, it gave prisoners something constructive to do. There was much too little purposeful activity available, and much of what was provided was low quality wing domestic work. The lack of activity was

largely outside the prison's control, and the constraints of the site created real difficulties. Nevertheless, the prison was making determined efforts to improve the situation. 'The Jail House Café', just outside the prison and overlooking the sea, was a social enterprise staffed by prisoners and open to the public and appeared to be very successful. The prison was looking to extend the social enterprise model to provide more employment opportunities for its prisoners, and this was to be encouraged. The quality and organisation of some of the more traditional activities it currently provided required improvement. The prison was building its links with local employers to shape the development of courses and improve the employment prospects of prisoners.

At the time of the inspection, a new reducing reoffending strategy had recently been introduced but it was too early to see its results. Resettlement activity had not had sufficient priority in the past and certainly required improvement. Offender supervisors had large caseloads and insufficient contact with the prisoners for whom they were responsible.

Practical resettlement services were mixed. On the one hand, help with health and drugs and alcohol abuse issues was good, particularly, in the latter case, for those returning to the local area. The 'Kainos' community provided a 'Challenge to Change' programme for medium-high risk prisoners that focused on thinking skills and personal development. The Kainos community was based in the wing made up of dormitory accommodation – and, as in some other aspects of the prison, made a virtue out of necessity by using the dormitory accommodation to reinforce the community ethos. On the other hand, too many prisoners left the prison without a settled address to go to or an employment, education or training place arranged.

Visit arrangements were particularly poor. The prison had not responded to the increased demand following the reduction in the foreign national population and consequent increase in the proportion of prisoners with friends and family in the UK. Many visitors had long, difficult journeys but arrived to find only the most basic facilities. There were few family days and no parenting programmes.

For many men, the very strong culture of The Verne provided an exceptional and effective experience. Those who fitted in benefited from good relationships, considerable freedom within the prison, and real opportunities to develop responsibility and change their behaviour. However, there was a risk that this culture slipped into becoming exclusive and inward-looking. It was right that the prison had strict acceptance criteria, but these needed to be applied transparently and sensibly. The prison's plans to overcome the difficulties of its location by developing better employment and resettlement opportunities also need to be progressed with vigour. The trick will be to address the prison's evident weaknesses without damaging some of its exceptional strengths.

Nick Hardwick
HM Chief Inspector of Prisons

December 2012

Fact page

Task of the establishment

HMP The Verne is a category C training prison.

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

Public

Region/Department

South-west

Number held

590

Certified normal accommodation

572

Operational capacity

607

Date of last full inspection

6–12 August 2007

Brief history

In 1847, a start was made on temporary prison buildings known as The Verne Citadel for prisoners building the harbour breakwater. The first 64 prisoners were landed on 24 November 1848 at Castletown from HMS Driver. The Verne Citadel was designed by Captain W Crossman of the Royal Engineers and enclosed an area of 56 acres. A full workforce of 180 prisoners laid three million convict-made bricks in two years.

HMP The Verne opened in 1949 on the site of a former military barracks dating from the end of the 19th century.

Short description of residential units

There are three accommodation blocks, which were built in 1970, and nine dormitories (Res 7). Each accommodation block is divided into two, giving a total of six separate wings (Res 1–6), each with 80 cells on the second and third floors. The ground floor is used for association and dining and contains office areas. The dormitories have been divided into eight cubicles, with an association area in each one, providing accommodation for 72 men.

Name of governor

James Lucas

Escort contractor

GeoAmey and Serco

Health service commissioner and providers

Dorset Healthcare University Foundation Trust (DHUFT)

Learning and skills providers

Main provider: Weston College

Library: Dorset County Library

Advice and guidance: National Careers Service

Independent Monitoring Board chair
Richard Campbell

Healthy prison summary

Introduction

HP1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

HP2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

HP3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The criteria are:

Safety prisoners, particularly the most vulnerable, are held safely

Respect prisoners are treated with respect for their human dignity

Purposeful activity prisoners are able, and expected, to engage in activity that is likely to benefit them

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

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

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

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

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

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

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

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

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

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

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

HP5 Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be checked for implementation at future inspections

- **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines

- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.

Safety

HP6 Reception procedures were generally sound and swift. Not all prisoners had a first night assessment. Good use was made of peer supporters during the early days. Induction was thorough but too long. Prisoners generally reported feeling safe. Levels of violence and self-harm were low and case management was reasonably good. Security was generally proportionate but too many prisoners were transferred out. There was little use of force. Prisoners were well cared for in segregation but the numbers segregated were too high. Positive drug testing rates were relatively high. Substance misuse services were very good but stretched. Outcomes for prisoners were reasonably good against this healthy prison test.

HP7 Most prisoners travelled long distances to the prison and generally reported a reasonable experience and that they were treated well by escort staff.

HP8 The reception area was small and cramped but reasonably clean. Staff were welcoming and respectful and good use was made of Insiders to support new prisoners as they arrived. Prisoners were not interviewed by a member of staff in private in reception. They were processed quickly and usually moved on to the first night and induction unit within an hour of their arrival.

HP9 The induction and first night unit was reasonably clean and cells were well prepared. New arrivals were interviewed by Insiders as they arrived on the unit and were given key information about the prison. Immediate safety needs were usually identified during a private interview with a first night officer but these were sometimes cancelled because of staff shortages. Not all prisoners were able to make a telephone call on their first night. Induction was comprehensive but too long and did not usually start on the next working day after arrival.

- HP10 In our survey, fewer prisoners than at similar prisons reported feeling unsafe.¹ Levels of violence were low, and much lower than at similar prisons. Attendance at safer custody meetings from some departments, including security, was too variable and there was insufficient analysis of data to inform further developments. Few prisoners had been subject to anti-bullying monitoring or victim monitoring. The recent introduction of an anti-social behavioural programme appeared to offer a far more dynamic approach to managing inappropriate behaviour but had yet to be used.
- HP11 Levels of self-harm and the number of prisoners subject to assessment, care in custody and teamwork (ACCT) self-harm monitoring procedures were low. Most ACCT cases were closed within a short space of time. Prisoners on ACCT procedures were managed reasonably well, with broadly appropriate levels of engagement and care. Assessments were generally good and review meetings usually offered continuity of care. A large number of Listeners was in place across all wings, with good access to prisoners. The crisis suite was appropriate but rarely used.
- HP12 The flow of information into the security department was good and intelligence was well managed. Dynamic security was supported by good staff–prisoner relationships. The balance between providing an open regime against potential risks to safety and disorder was generally well managed. However, large numbers of prisoners were transferred from the prison for failing to meet the over-restrictive acceptance criteria or for security issues, and it was not always clear that the security-related transfers were sufficiently reasoned or justified. Prisoners transferred after failing to meet the criteria waited in the segregation unit for transfer, and this location was unnecessary for many.
- HP13 Although fewer prisoners than at comparator prisons said that it was easy to obtain illegal drugs, the random mandatory drug testing positive rate was higher than in similar prisons and exceeded the local target. Not all prisoners suspected of taking drugs were tested.
- HP14 The number of formal adjudications was proportionate and records showed that proceedings were conducted fairly. Quality assurance and standardisation processes were effective. There were few incidents involving the use of force. When used, accounts from staff gave assurances that it was justified and proportionate. Monitoring arrangements were effective and de-escalation techniques were used to good effect.
- HP15 Prisoners spent relatively short periods in the segregation unit but the number segregated was high and we were not always assured that it was justified. Reintegration planning was poorly developed and nearly all segregated prisoners

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 Towl et al (eds), *Dictionary of Forensic Psychology*.)

were transferred to other prisons. Living conditions on the segregation unit were reasonable and relationships between staff and prisoners were good, with high levels of engagement and care shown by staff.

- HP16 A high-quality substance misuse service was provided within extremely limited resources. The demand for clinical treatment was very low but the demand for psychosocial work was substantial and the service was overstretched. Counselling, assessment, referral, advice and throughcare (CARAT) caseloads were large. Peer support work was excellent and received positive feedback from prisoners.

Respect

HP17 External areas were attractive and clean. Living accommodation was generally worn and shabby. Access to telephones, recreational facilities and showers was good, but shower areas were mainly old and in a poor state of repair. Staff-prisoner relationships were generally good but the unacceptable behaviour of a few staff had had a disproportionately negative impact on prisoner perceptions. Black and minority ethnic and Muslim prisoners reported more negatively than white and non-Muslim prisoners across most areas. Services and care for older prisoners and those with disabilities were generally good but other areas of diversity were poorly served. Faith provision was generally good but less so for Muslim prisoners. Prisoners lacked confidence in the complaints processes and outcomes were insufficiently analysed. Health services were generally good. Food was reasonable. Outcomes for prisoners were reasonably good against this healthy prison test.

HP18 External areas were attractive, well maintained and clean. Accommodation was generally worn and shabby. Some cells were maintained to a reasonable standard but others were dirty, with ill-fitting windows and damaged floors. Some prisoners were required to share cells designed for one and these were unacceptably cramped. Prisoners were generally content with the well-maintained dormitory accommodation on D wing. Access to telephones, recreational facilities and showers was good but the quality of shower facilities varied and many were old and in a poor condition.

HP19 Staff-prisoner relationships were generally respectful, although a small number of staff with more negative approaches appeared to be having a disproportionate impact on the perception of prisoners. In our survey, most prisoners said that staff treated them with respect. Given the relative freedom available to prisoners, staff used the quality of relationships and mature engagement with prisoners to resolve tensions appropriately and this was particularly true of night staff.

HP20 The diversity policy failed to identify actions and processes to promote and support diversity issues and lacked an up-to-date action plan. The bimonthly meetings were poorly attended. There were no consultation opportunities for prisoners with protected characteristics, and, except for older prisoners and those with disabilities, there was minimal activity or support for such groups. Ethnic monitoring data on black and minority ethnic prisoners was insufficiently analysed and no data were collected about other protected characteristics to measure equality of access or treatment. Diversity incident report forms were freely available across the site but too many that we looked at were incomplete, out of date, had investigations outstanding and lacked senior management scrutiny.

- HP21 Black and minority ethnic prisoners reported less favourably than white prisoners across most areas, particularly safety, complaints, staff relationships and victimisation from staff and prisoners. There was a Gypsy/Traveller prisoner representative but none for any other racial groups.
- HP22 Although the proportion of foreign nationals had fallen from a high of around 70%, support for the substantial number of foreign national prisoners that remained (around 40%) was poor, with no identified foreign nationals coordinator and no specific provision. There was little translated material available across the prison, little use of professional interpreting services and no independent immigration advice.
- HP23 Muslim prisoners reported far more negatively than non-Muslim prisoners across many areas, including safety and victimisation. A number of recent incidents had compounded their poor perceptions but there had been insufficient action to address their concerns.
- HP24 Provision for older prisoners was reasonable. The establishment of the older prisoner drop-in centre was welcome, and with further development could provide an exceptional resource. Prisoners with disabilities reported more negatively than their able-bodied counterparts across a range of issues. Disability screening on reception (which included the disclosure of sensitive information) was inappropriately completed by prisoners. Care planning processes were generally good, and integrated with the health care department, both for older prisoners and those with disabilities. The innovative red, amber, green (RAG) system for personal emergency evacuation plans was effective.
- HP25 Most prisoners, in line with comparator prisons, said that their religious beliefs were respected but Muslim prisoners were less positive and fewer than half said that they were able to speak to their faith leader when they needed to. The chaplaincy team was well integrated into the daily life of the prison, faith facilities were good and there was generally a good level of access to religious services.
- HP26 Prisoners told us repeatedly that if they complained they would be more likely to be transferred. There had recently been a large drop in the number of complaints submitted and neither this nor prisoners' perceptions had been analysed. Access to complaint forms was good but boxes were emptied by the night orderly officer, which compromised confidentiality.
- HP27 The one trained legal services officer had no time allocated to provide an adequate service.
- HP28 Relationships between the prison and the health commissioning and providing Trusts were generally good but the prison was not represented at the meetings of the health partnership board. Prisoners were generally well satisfied with access to and the delivery of health care. Waiting times were short and patients were able to see a GP within 48 hours. The range and quality of dental services were good, with reasonable waiting lists. An appropriate range of primary care services was provided. A full health care screen was carried out on all new prisoners but the health care facilities in reception were inadequate and not fit for purpose. Pharmacy services were well managed. Too many hospital appointments were cancelled because of a lack of prison escorts. Prisoners had access to high-quality primary and secondary mental health care and the caseloads were small. Transfers to secure mental health units

were rare, and happened swiftly when dealing with the local secure units but less so when out of the area.

- HP29 Prisoners were negative about the quality and quantity of food but we found the variety and quality to be adequate. Good consultative arrangements resulted in changes and improvements.

Purposeful activity

HP30 All prisoners had extensive time out of cell and considerable freedom of movement around the establishment. There were insufficient activity places, and approximately a quarter of all prisoners were on the wings during the working day with nothing meaningful to do. Waiting lists were poorly managed. There were too few vocational training opportunities. Teaching and coaching were generally good. The range of qualifications was reasonable and achievement good in vocational training but variable in education. Library services were satisfactory and PE provision was good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

HP31 Prisoners were not locked in their cells at any time and had considerable freedom of movement, time out of cell and time in the open air. Too many, around a quarter of all prisoners, were on wings during the day with nothing meaningful to do.

HP32 The management of learning and skills was disjointed and did not cover all relevant areas, and the provision was not informed by a needs analysis. Data analysis and the use of management information were poor. There were some promising initiatives, including the development of social enterprises such as the 'Jailhouse Café'.

HP33 There were insufficient activity places for the population and too many prisoners were unemployed, partly employed or engaged as wing workers, which did not fully occupy them during the core day. Activity allocation processes were adequate and informed by sentence plans but took too long. Waiting lists were excessively long and poorly managed. Prisoners were often laid off work as there was insufficient cover for staff vacancies and absences. Attendance and punctuality were generally good.

HP34 The variety of education and vocational training courses was only adequate and the number of vocational training opportunities was low. Teaching, training and learning were mostly good. Good use was made of peer tutors to support learners in education classes and prisoner engagement in Toe by Toe was high.

HP35 The range of qualifications was generally reasonable but there was limited opportunity above level 2. Achievement of vocational qualifications on courses was good but in education classes was more variable. Some opportunities to accredit work and employability skills were missed.

HP36 Library provision was reasonable, appropriately resourced and staffed, and provided pleasant facilities.

HP37 The PE provision was well managed, with good links to the health care department and CARAT team for prisoners who were older, unfit or required remedial PE. Access was good, with effective use made of well-trained orderlies.

Resettlement

- HP38 The recently developed reducing reoffending strategy was focused on the resettlement pathways but did not adequately address the specific needs of prisoners with protected characteristics. Implementation had only just begun. The quality of sentence plans was mostly good and suitably focused on risk but contact between offender supervisors and prisoners was not always frequent enough. Public protection arrangements were sound. Release on temporary licence arrangements were good and being developed further. Recategorisation decisions lacked sufficient prisoner involvement. Too few prisoners knew whom to go to for help with resettlement matters. Accommodation, education, training and employment and debt outcomes were not good enough. Visits arrangements were poor, in spite of the inaccessibility of the prison and the long distances travelled. The Kainos community was a positive intervention for many prisoners. Outcomes for prisoners were not sufficiently good against this healthy prison test.
- HP39 The recently developed reducing reoffending strategy addressed the resettlement pathways and had a clear action plan but did not address the needs of prisoners with protected characteristics. After a period of inactivity, implementation of the strategy had only just started.
- HP40 Most prisoners had a sentence plan and had been involved in its development. Most prison-owned assessments were completed on time but many of those prepared by community-based offender managers were late. The quality of assessments was mostly good and plans were appropriate, although resettlement targets were often not included. Offender supervisors were skilled, but contact with prisoners was reactive and not always sufficiently frequent to monitor and motivate progress. Communication between the offender management unit and other prison departments was not effective, which resulted in some important information on risk not being shared.
- HP41 Home detention curfew arrangements were sound and mostly timely, and most eligible applications were granted. Release on temporary licence (ROTL) was well used and being developed further. Categorisation reviews were too often late and prisoners were not sufficiently involved with the process. There were high numbers of category D prisoners but efforts were made to facilitate moves to open conditions.
- HP42 Public protection arrangements were sound and prisoners were informed about the restrictions on them and the reasons for them.
- HP43 There were no special management arrangements, separate facilities or consultation processes for indeterminate-sentenced prisoners. Parole assessments were up to date and escorted absences were provided.
- HP44 A resettlement needs assessment was completed on induction and led to referrals to services. However, few prisoners knew whom to go to for help with resettlement. A cursory discharge check carried out before release was completed too late to be effective.
- HP45 An accommodation officer liaised with housing providers and helped to resolve tenancy problems on behalf of prisoners. However, the effectiveness of the provision was not monitored and too many prisoners were released without an address to go to.

- HP46 Arrangements for resettlement into education, training and work were underdeveloped and only 24% of those discharged in 2012 to date had progressed to full-time education, training or employment. The virtual campus worked well. Links with employers were newly developed and the prison was working with a range of organisations to increase provision.
- HP47 Health care discharge planning was good, with links established with the community when required. For prisoners with substance use issues, appropriate links had been established with drug intervention programme teams, and a local service user group provided practical support to drug/alcohol users on release.
- HP48 Benefits advice and a money management course were provided and prisoners could open bank accounts but there was no specialist help for prisoners with debt problems.
- HP49 Fewer than one in 10 prisoners in our survey said that it was easy for their family and friends to get to the establishment. In spite of the increase in the number of British nationals being held at the prison, there had been insufficient focus on the availability of visits, and demand outstripped supply. There had been no survey of prisoners to gain an understanding of their experiences of visits, or their needs, and data from questionnaires completed by visitors had yet to be analysed. The visits hall was reasonable, although there were delays in getting all visitors and prisoners in place to receive the full visits allocation. Family days were well managed, although there were not enough to meet need and no parenting or family courses were provided.
- HP50 The current range of offending behaviour programmes did not meet the needs of the changed population and provision was under review. The 'Challenge to Change' (Kainos) programme was a valuable alternative for those who were unsuitable for other programmes, with learning reinforced through communal living.

Main concerns and recommendations

- HP51 Concern: Too many prisoners were transferred out of the prison either because, for no fault of their own, they did not meet the strict acceptance criteria or for unspecified security reasons. Prisoners being transferred out for these reasons were always held in segregation until the transfer occurred. The acceptance criteria were too rigid and we were not assured that the selection of prisoners for transfer was always justified.

Recommendation: The prisons acceptance criteria should be reviewed and only include factors that indicate a risk to the regime. Decisions to transfer and segregate a prisoner should be based on separate reasoned risk-assessments and subject to routine analysis and management oversight.

- HP52 Concern: There was inadequate managerial focus on diversity across the prison, in spite of large numbers of prisoners from black and minority ethnic backgrounds and from protected characteristics groups. There were no consultation opportunities, no support groups and little measurement of equality of access or treatment.

Recommendation: The needs of all prisoners with protected characteristics should be identified, assessed and met and any negative perceptions of particular groups understood.

HP53 Concern: Prisoners had little faith in the complaints system and believed that if they made a complaint they were likely to be transferred. There had been a recent large drop in complaints. There had been insufficient analysis of this reduction or the outcome on the complainant.

Recommendation: The reduction in the number of complaints and the impact of making a complaint should be analysed and shared with prisoners.

HP54 Concern: There were insufficient activity places available, so too many prisoners were unoccupied and too many were under-employed in wing-based work. There was too little variety of educational and vocational activity and there were too few vocational training opportunities.

Recommendation: The number of purposeful activity places should be increased to enable full employment. The variety of provision should be improved and the quantity of vocational training increased.

HP55 Concern: Too many prisoners were released without any accommodation or employment and training to go to and without debt issues being addressed.

Recommendation: Services and support for prisoners across the accommodation; education, training and employment; and finance, benefit and debt pathways should be developed and their effectiveness monitored.

HP56 Concern: Most prisoners said that it was difficult for their family and friends to visit. There were too few visits sessions available and no parenting or family courses. Many family and friends travelled long distances, yet faced delays on arrival.

Recommendation: Prisoners and their visitors should be consulted in order to identify and implement improvements to visits access and facilities. Parenting and family courses should be provided.

Section 1: Safety

Courts, escorts and transfers

Expected outcomes:

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

- 1.1 Prisoners reported a reasonable experience of transfers to the prison, but too few said that they had been offered comfort breaks. Most prisoners said that they had been treated well by escorting officers. Relationships between escort and reception staff were reasonable and information about prisoners was shared appropriately. Prisoner escort records were properly completed and legible. Prison staff said that late arrivals were common but this had minimal impact on outcomes for prisoners.
- 1.2 Journey times to the establishment for most prisoners were relatively long, usually over two hours. Few prisoners in our survey said that they had been offered comfort breaks but most (75%) said that they had been treated well by escorting officers. We observed escorting staff to be polite and respectful, and those we spoke to were appropriately focused on prisoner safety.
- 1.3 Relationships between escort and reception staff were reasonable but reception staff complained that vans often arrived late. We observed vans usually arriving no later than 4pm, enabling prisoners to be processed effectively and receive a full first night and induction service.
- 1.4 Information about prisoners was shared systematically and reception staff made appropriate use of it to inform initial risk assessments. Prisoner escort records were properly completed and legible.
- 1.5 Most of the vans we inspected were in a reasonable condition but some were poor. A few were dirty and had broken steps, and none had handrails.

Recommendation

- 1.6 All escort vans should be clean and properly maintained.

Early days in custody

Expected outcomes:

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

- 1.7 The reception area was small and cramped but reasonably clean. There were inadequate facilities to conduct interviews in private. Prisoners were processed quickly and usually moved

on to the induction unit within an hour of their arrival. All new prisoners were located on the induction and first night unit. This unit was reasonably clean and cells were well prepared. Immediate safety needs were identified during a private interview with an officer but these were sometimes cancelled because of staff shortages. Not all prisoners were able to make a telephone call on their first night. Induction was comprehensive but too long and did not always start on the next working day after arrival.

- 1.8 Communal areas in reception were reasonably clean but small and cramped, and sparsely decorated. There were no facilities to interview prisoners in private. The two holding rooms in the main building were small and cramped. They were modestly furnished but displayed up-to-date information on noticeboards, although little in languages other than English, and contained reading material and televisions.
- 1.9 On arrival, prisoners were asked if they understood the circumstances of their transfer and if they had any immediate needs. Strip-searching was appropriately subject to a risk assessment and did not take place routinely. Procedures to process prisoners were efficient and reception staff were respectful and aware of the potential risks to new prisoners. Prisoners spent only a short time (rarely more than an hour) in reception before being taken to the first night and induction wing, which mitigated many of issues caused by the cramped conditions and lack of facilities in reception.
- 1.10 Good use was made of peer support. Prisoner Insiders attended reception and saw all new arrivals in groups and individually to explain how to use prison systems to meet their initial needs, and how to access help. They also took prisoners to the first night and induction centre (C2).
- 1.11 The environment on C2 was good. Communal areas were clean and welcoming. Cells were well prepared and staff were friendly. On arrival on the unit, all prisoners could shower but were not offered a free telephone call; most had to wait for their PIN telephone credits to be activated on the following morning.
- 1.12 Designated first night officers usually interviewed all new arrivals in private and carried out an initial safety needs assessment. However, there was evidence that these interviews sometimes did not take place because of staff shortages. In these cases, prisoners were interviewed on the following morning.
- 1.13 As part of the first night processes, prisoners received written information that set out what they could expect from their induction programme and from their first few days in prison. They were also seen in private by a prison Insider, who helped to complete needs assessments and offered further support and guidance for prisoners on their first night. Handover procedures ensured that staff coming on duty, particularly night staff, were aware of the locations of new prisoners and any special needs that they may have had.
- 1.14 All prisoners received an induction programme. It lasted two weeks, which was too long, and began on Mondays, so many prisoners could not begin their formal induction for up to a week after they had arrived. Its content was reasonable, and induction staff and Insiders were well motivated, but prisoners complained that the sessions repeated processes that they had already been through at other prisons. Prisoners who were not confident in speaking English did not receive a full induction but were fast-tracked to education classes, so that they could develop their language skills sufficiently to undertake the health and safety training and therefore be allocated work.

Recommendations

- 1.15 All prisoners should be interviewed in private by a member of staff to ensure that all of their immediate needs are met.
- 1.16 All prisoners should receive a free telephone call on their first night.
- 1.17 Induction should begin on the day after arrival.

Housekeeping point

- 1.18 Initial health screens should be conducted in an appropriately private setting.
- 1.19 The induction programme should be reviewed, to ensure that its content is relevant.

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). Prisoners at risk/subject to victimisation are protected through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime.

- 1.20 Levels of violence and bullying were low and prisoners generally felt safe. Data, including those relating to equality and diversity, were not sufficiently analysed at the safer custody meeting. The introduction of an anti-social behavioural model appeared appropriate.
- 1.21 Levels of violence were low, with only five assaults and 10 fights between March and August 2012, which was lower than at similar establishments. In our survey, fewer prisoners than at comparator establishments said that they had ever, or currently, felt unsafe at the prison, and this was confirmed by prisoners we spoke to.
- 1.22 The overarching safer custody strategy incorporated both violence reduction and suicide and self-harm and was up to date and comprehensive. The safer custody team had been reorganised and restructured earlier in 2012 and now offered greater continuity of provision.
- 1.23 The monthly safer custody meeting alternated between focusing on violence reduction and on suicide and self-harm. Attendance was variable from some departments, including security. Some information was made available to the meeting, primarily relating to equality and diversity issues, but there was relatively little analysis of data, including incidents of violence and related factors in order to inform future developments.
- 1.24 At the time of the inspection, no prisoners were subject to anti-bullying or antisocial behaviour management. In the previous nine months, only 16 prisoners had been subject to the prison's three-tier anti-bullying model, and a further four victim logs had been opened. In each case the model had offered no more than a short period of monitoring. In recognition of this, a new model had recently been developed that focused on antisocial behaviour and included a programme of interventions which would be delivered by wing safer custody officers. It was too early to evaluate the effectiveness of the new model as it had yet to be used with a prisoner.

Recommendation

- 1.25 All incidents of violent and antisocial behaviour should be evaluated, along with other, related data, better to understand patterns and trends across the establishment.

Housekeeping point

- 1.26 All relevant departments should attend safer custody meetings.

Self-harm and suicide prevention

Expected outcomes:

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

1.27 Incidents of self-harm were rare and the number of assessment, care in custody and teamwork (ACCT) self-harm monitoring documents opened was low. The quality of ACCT documents was generally of a reasonable standard, although too few staff had received up-to-date ACCT training. Analysis of data at safer custody meetings was limited and there was no forum to discuss vulnerable prisoners. Arrangements for Listeners and their support were good.

1.28 There were few incidents of self-harm, with only one in the previous six months. Assessment, care in custody and teamwork (ACCT) self-harm monitoring documents had been opened on only 31 occasions so far in 2012 and there were none open at the time of the inspection. In most cases, such documents had been opened only for precautionary reasons and most had been closed within two to three weeks. The longest period that a document had been kept open in 2012 was two months.

1.29 ACCT documents were generally of a reasonable standard and mostly showed good overall management and care from staff. Assessments were of a high standard and most care maps were reviewed and updated at review meetings. These meetings often included the same staff for a given prisoner, offering appropriate levels of continuity. The mental health team was suitably involved in the process and we also saw examples of offender supervisors undertaking an active involvement with prisoners. Quality assurance of documentation was reasonably effective. There was good sharing of information with other prisons and outside agencies when prisoners who had been on ACCT documents were transferred.

1.30 Since the previous inspection there had been one death in custody from natural causes and no self-inflicted deaths. The most recent self-inflicted death had been in April 2010. Recommendations from the Prisons and Probation Ombudsman's report had been completed and last updated in April 2012 but there had been no reviews to ensure continued adherence. One such action had been the creation of a multidisciplinary information-sharing forum regarding possible bullying and related issues. However, at the time of the inspection the meeting no longer took place and, while it was planned to incorporate it into the safer custody meeting, this had yet to happen. There was no alternative forum to discuss vulnerable prisoners. There was insufficient analysis of directly or indirectly associated suicide and self-harm data at the safer custody meeting.

- 1.31 There were 18 trained Listeners across the establishment and they had good access to prisoners. Regular meetings were held with the Samaritans, and Listeners we spoke to described good levels of support. A crisis suite was available and was appropriately furnished and maintained, but demand for its use was low.
- 1.32 Only 68% of staff had been trained in ACCT procedures, or had received refresher training within the previous three years.
- 1.33 The location of a constant supervision cell in the segregation unit was inappropriate for prisoners in crisis, although this cell had not been used for some years (see also section on segregation).

Recommendations

- 1.34 All incidents of suicide and self-harm should be evaluated, along with other, related data, better to understand patterns and trends across the establishment.
- 1.35 A multidisciplinary forum for the discussion of vulnerable prisoners or those at risk of bullying should be re-formed.
- 1.36 The constant supervision cell in the segregation unit should be taken out of use.

Housekeeping point

- 1.37 Death in custody action plans should be reviewed regularly and recommendations should be reinforced.

Safeguarding (protection of adults at risk)

Expected outcomes:

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

1.38 There was no strategy for the safeguarding of adult prisoners at risk.

1.39 The prison had no strategy for the safeguarding of prisoners at risk, and there was currently no work to ensure that those at risk were properly identified and supported.

Recommendation

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

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

Security

Expected outcomes:

Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence as well as positive staff-prisoner relationships.

Prisoners are safe from exposure to substance misuse while in prison.

- 1.41 The flow of information into the security department was good and the large number of security information reports was processed efficiently and promptly by trained analysts. Dynamic security principles were supported by good staff–prisoner relationships. The criteria for accepting prisoners at the establishment were over-restrictive and those being transferred to other prisons after failing to meet them waited in segregation for transfer. We were not always assured that decisions to transfer prisoners because of unspecified ‘discipline reasons’ were transparent enough or necessarily justified. Prisoners reported low levels of drug availability but positive drug test rates were relatively high.
- 1.42 Supervision arrangements on residential units were appropriately relaxed and informal, which supported important elements of dynamic security (see also section on staff–prisoner relationships).
- 1.43 The security committee was appropriately constructed and the monthly meetings were well attended by managers and staff representatives from relevant areas within the establishment. The flow of information into the security department was good, particularly from residential officers, and over 300 security information reports (SIRs) were submitted each month. Intelligence was effectively communicated to other areas of the prison, particularly to the safer custody and drug strategy committees. Links with other departments were also well developed.
- 1.44 We were not always assured that decisions to transfer a large number of prisoners because of unspecified security reasons were sufficiently reasoned or justified. In the six months before the inspection, over 50 had been transferred out because of what were described as ‘discipline reasons’. We were told that this was mostly due to failure to conform to the prison’s regime or because individual prisoners were deemed to require a higher standard of security than could be provided at The Verne. We found little evidence to support some of these decisions, which were made nearly exclusively by security managers (see main recommendation HP51).
- 1.45 The criteria for accepting prisoners at the establishment were over-restrictive. For example, prisoners under the age of 25 and those with less than three months left to serve were automatically excluded. Nevertheless, a number of ‘excluded’ prisoners arrived at the prison on transfer and were automatically and usually unnecessarily placed in segregation pending onward transfer (see also section on segregation and main recommendation HP51).
- 1.46 Measures to reduce the supply of drugs into the establishment were discussed at security and drug strategy meetings and at a separate supply reduction meeting. All relevant departments attended and there was good information sharing. In spite of this, the establishment’s year-to-date random mandatory drug testing positive rate was relatively high, at 6.6% against a local target of 4%. However, prisoners did not report a high level of drug availability or use. In our survey, 21% of respondents, against the 30% comparator, said that it was easy to get illicit drugs in the prison and only 1%, against the 7% comparator, that they had developed a drug problem at the prison.

- 1.47 During the previous six months, 51 suspicion tests had been requested but only 32 had been completed, with a positive rate of 43%. As a result of staff being diverted to other duties, there had been gaps of up to nine days when no testing had taken place. The prison occasionally conducted risk testing and four prisoners were on a frequent testing programme. Compliance testing was used for prisoners on release on temporary licence. Almost all positive results were for cannabis.
- 1.48 Fewer prisoners than at comparator prisons said that it was easy to get alcohol. However, hooch (illicit alcohol) finds had resulted in the introduction of alcohol testing, and in the previous three months two out of 40 tests had been positive.

Recommendation

- 1.49 The establishment should ensure that the mandatory drug testing programme is sufficiently resourced to complete all testing within required timescales and without gaps in provision.

Incentives and earned privileges

Expected outcomes:

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

- 1.50 The incentives and earned privileges scheme was generally operated consistently across the prison. There was a reasonable difference between the levels, and the regime for one prisoner on basic was suitable. The scheme was administered reasonably but prisoners' perceptions about its fairness were generally poor.
- 1.51 The up-to-date incentives and earned privileges policy document effectively described the scheme both to staff and prisoners. Copies of the document were available to prisoners during their induction programme and on all residential wings.
- 1.52 At the time of the inspection only one prisoner was on the basic regime. Prisoners on basic received a case review every seven days. They could attend purposeful activity and visits, and could use the telephone during the evening.
- 1.53 The scheme offered reasonable differentiations in access to private cash, computer games and visits. Prisoners on all levels were able to wear their own clothing.
- 1.54 The scheme was implemented consistently across the residential units, and prisoners were given warning notices when appropriate. However, prisoners' perceptions about the scheme were poor. For example, in our survey only 49% said that they had been treated fairly by the scheme and 42% that it encouraged them to behave better; these figures were worse than the comparators of 55% and 47%, respectively.

Housekeeping point

- 1.55 Prisoners' poor perception of the incentives and earned privileges scheme should be explored.

Discipline

Expected outcomes:

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

1.56 The number of formal adjudications was proportionate and proceedings were conducted fairly. Standardisation meetings were effective. There was little use of force, and we were assured that it was used as a last resort. Governance was effective and good use was made of information about the nature and location of violent incidents to help to identify trends and patterns. Living conditions on the segregation unit were reasonable but some cells were grubby and the environment was generally dark and cramped. Relationships between staff and prisoners were good and levels of engagement high. The average length of time that prisoners spent on the unit was relatively short but numbers were high and we were not assured that segregation was always justified. Reintegration planning was poorly developed. Nearly all segregated prisoners were transferred to other prisons.

Disciplinary procedures

- 1.57 The number of formal adjudications was proportionate, at about 50 per month. The adjudication records that we examined showed that hearings were generally conducted fairly and that full investigations of charges usually took place. Segregation was rarely given as a punishment.
- 1.58 Monthly statistics about the number and nature of adjudications were presented to the senior management team. The results of proven offences were noted, categorised and communicated to managers, to identify trends. Information was analysed and there was evidence that this was used to improve the system.
- 1.59 Adjudication standardisation meetings took place quarterly and were well attended by adjudicating governors.

The use of force

- 1.60 There were few incidents involving the use of force, with only four in the six months before the inspection. Of these, two had not involved full control and restraint techniques.
- 1.61 There were rigorous use-of-force monitoring arrangements, with strong links to violence reduction, the security committee and the senior management team. Senior staff checked all associated use-of-force documentation. Information about the nature of the incident, its location, and the ethnicity and age of the prisoner was collated each month and presented to the senior management team for analysis, to identify and deal with any emerging patterns and trends. All incidents were supervised by senior staff, and were well organised and properly carried out. Documentation was generally completed correctly, with appropriate authority recorded.
- 1.62 There was no evidence that force was used unnecessarily or as a first resort when dealing with difficult and violent behaviour. An examination of documentation showed that force was used appropriately and proportionately, including effective de-escalation techniques.

Segregation

- 1.63 The segregation unit was small, containing eight cells, including a constant supervision cell that was seldom used (see also section on self-harm and suicide prevention). There was no special accommodation.
- 1.64 The standard of accommodation was mixed. The communal landing was clean and floors were carpeted but generally the environment was dark and cramped, with little natural light. Cells were mainly clean and adequately furnished but a few were grubby and there was graffiti etched on some plastic windows.
- 1.65 The unit was mainly used for prisoners segregated for good order or discipline, which included those waiting for transfer because of failing to satisfy the prison's admission criteria (also see section on security). The average duration of segregation was short, at about five days, but a few prisoners had been segregated for much longer periods. The frequency of use was high and we were not assured that segregation was always justified; we saw examples where prisoners, particularly those waiting for transfer, could have been managed safely on the wings. During the inspection, there were five prisoners in segregation, all for good order or discipline and all waiting for transfers to other establishments.
- 1.66 The daily regime included showers, exercise, access to telephones and some in-cell education if requested. Most prisoners were allowed a television and could attend exercise with other prisoners.
- 1.67 Prisoners arriving on the unit were searched thoroughly and respectfully and staff interviewed them in private to identify any immediate needs. They were rarely strip-searched, and only following a risk assessment, authorised by a senior officer.
- 1.68 Relationships between staff and prisoners on the unit were very good. Officers dealt with prisoners respectfully, showing high levels of care.
- 1.69 Planning systems to enable prisoners segregated under good order or discipline to return to normal prison location were poor. Segregation reviews were completed on time, but there was little information to show that changes in prisoners' behaviour and circumstances were monitored or acted on. Individual care plans had not been prepared for longer-stay prisoners, behaviour targets were not set and staff were not engaged in planning processes. In the six months before the inspection, nearly all prisoners segregated under good order and discipline had been transferred out of the prison.

Recommendation

- 1.70 Planning for segregated prisoners to be reintegrated into normal location should be developed.

Substance misuse

Expected outcomes:

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

- 1.71 Demand for clinical treatment was low but the need for psychosocial support had risen and, in response, a small team of highly committed staff and peer supporters had developed a wide range of services which focused on recovery. There were concerns about the sustainability of current initiatives in light of such limited resources.
- 1.72 In our survey, only 7% of prisoners, against the 23% comparator, said that they had had a drug problem on arrival, and demand for clinical treatment was very low. At the time of the inspection, two prisoners were receiving opiate substitutes. Prisoners were expected to reduce rather than maintain their dosage in the long term, but prescribing was flexible and took account of individual need. Controlled drugs were administered by primary care staff. Integrated drug treatment system nurses spent little time at the prison and, although they undertook clinical reviews and worked with dual diagnosis clients, they were unable to co-facilitate groups.
- 1.73 The establishment's drug and alcohol policy was detailed and up to date and contained annual targets; a separate alcohol strategy had also been developed. A multi-agency drug strategy committee met quarterly and there was good service coordination, but there were no prisoner focus or consultation groups and future service development was hampered by a delay in recommissioning.
- 1.74 The counselling, assessment, referral, advice and throughcare (CARAT) team of part-time staff was overstretched. They carried an active caseload of 86 clients and included those with alcohol problems. In response to rising demand, a range of group work had been introduced, which included a 10-week, 12-step awareness course, a relapse prevention module running over eight sessions, self-management and recovery training (SMART), relaxation sessions and substance-specific modules. Self-help groups such as Narcotics Anonymous, Alcoholics Anonymous and Cocaine Anonymous met regularly and a peer supporter was actively involved. Group work facilities were good and a wide range of support was available. Service users spoke highly of the help they received, although the level of provision relied heavily on a peer supporter and committed part-time staff. Because of limited resources, at the time of the inspection eight prisoners were waiting for one-to-one work and 40 for groups, a popular weekly drop-in slot had been suspended and training for additional peer supporters had been delayed.

Recommendations

- 1.75 Substance misuse services should develop a mechanism for service user feedback to inform future service provision.
- 1.76 Substance misuse services should be sufficiently resourced to meet demand and to develop interventions and initiatives such as peer support further.

Section 2: Respect

Residential units

Expected outcomes:

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

- 2.1 External areas of the prison were maintained to a high standard but the quality of prisoner accommodation was variable. Although some cells were clean and well decorated, others were dirty, with ill-fitting windows and indications of damp. Prisoners on D wing were relatively positive about their dormitory accommodation. Many of the toilet and shower facilities on the main wings were damaged or in a poor state, although they were considerably better on D wing. There was satisfactory access to prison-issue clothing and bedding. The application process was reasonable but was not quality assured.
- 2.2 External areas across the prison were clean, tidy and well maintained. However, the quality of accommodation was variable in both its cleanliness and quality, and much was shabby. Many of the cells we saw were in a poor state of repair. Some had broken furniture, ill-fitting windows and damaged floors, and we also saw examples of damp and mould on walls and ceilings. All cells had lockable cupboards and prisoners had their own keys to their cells, with freedom to come and go as they pleased, although there were some restrictions at various times during the day (see section on time out of cell). Because of the ease of movement for prisoners, cells did not have emergency cell call bells.
- 2.3 Most prisoners were allocated to single cells but each wing making up the main accommodation (A1 and 2, B 1 and 2, and C1 and 2) also each contained six single cells that had been doubled up and were extremely small and cramped. The relative openness of the prison and limited restrictions on movement (see section on time out of cell) mitigated some of the problems associated with cell sharing.
- 2.4 None of the prison's accommodation had integral sanitation. Instead, prisoners had free access to recess areas at the end of each wing spur which incorporated toilets and showers. However, many of the recess areas, and especially the showers, were maintained to a poor standard. Many were grimy or were in a poor state of repair.
- 2.5 Further accommodation was available on D wing which was older than that on the main wings and was, in effect, built into the rock that made up the prison's original citadel. Prisoners there were allocated to one of nine eight-person dormitories, each of which incorporated a communal area as well as individual compartments divided merely by curtains. The dormitories were exclusively used by prisoners participating in the 'Kainos Community' which managed a 'Challenge to Change' accredited programme. In spite of the inevitable problems with dormitory accommodation, prisoners we spoke to consistently expressed their satisfaction with it. The two recess areas on D wing were the cleanest and best maintained across the establishment.
- 2.6 Although the ratio of telephones to prisoners was slightly below our expectations, access to them was relatively good. They were not switched off during the day and all offered good

levels of privacy. The management of prisoner mail was reasonable and recreational facilities were generally good. Access to outside exercise was also good.

- 2.7 All prisoners were able to wear their own clothes. There was reasonable access to prison-issue clothing and also to clean sheets, and each wing had its own laundry facility.
- 2.8 The application system was managed consistently across all units. A range of forms was easily accessible and, once submitted, they were logged in wing offices. Although prisoners in our survey indicated that applications were responded to reasonably quickly, fewer than at comparator prisons said that they were responded to fairly. There was no quality assurance scheme for applications or an agreed timescale for responses.

Recommendations

- 2.9 All cells should be properly equipped and maintained to a reasonable standard.
- 2.10 Single cells designed for one prisoner should not be shared.
- 2.11 Recess areas should be maintained to a reasonable standard.
- 2.12 A quality assurance scheme should be introduced for applications, to ensure consistency and fairness, and timescales for responses should be agreed.

Staff–prisoner relationships

Expected outcomes:

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

- 2.13 Staff–prisoner relationships were generally good, although prisoner perceptions were disproportionately affected by a small number of more negative staff. The quality of relationships and maturity of engagement with prisoners helped staff to resolve tensions appropriately. The use of preferred names had yet to permeate the work of all staff and the personal officer scheme was underdeveloped.
- 2.14 We observed generally respectful staff–prisoner relationships, although a small number of staff with more negative approaches appeared to be having a disproportionate impact on the perception of prisoners. In our survey, most prisoners said that staff treated them with respect, and this was in line with the comparator. The quality of relationships and maturity of engagement with prisoners helped staff to manage tensions on the wings when they occurred and this was particularly true of the night staff.
- 2.15 The personal officer scheme was underdeveloped. Although all prisoners were allocated a personal officer, many did not know who they were, and in our survey fewer respondents than at comparator prisons said that they had a personal officer. Although we saw evidence of some good personal officer work, many prisoners told us that contact was infrequent, a view reinforced from an analysis of case notes. Some management checks were undertaken but they were not sufficiently focused on the quality of engagement. Few of the personal officers

we spoke to indicated that they regularly discussed sentence planning and resettlement with prisoners. The use of first or preferred names had yet to be fully embraced by all staff.

- 2.16 All wings had prisoner representatives who attended the bimonthly amenities meeting. The prison was in the process of moving to a consultative committee, and applications from prisoners for election were being undertaken during the inspection.

Housekeeping points

- 2.17 Staff entries in prisoners' case notes should address their individual circumstances and progress against sentence planning targets.
- 2.18 Management checks should focus on the quality of engagement with prisoners by personal officers.

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic³ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

- 2.19 The strategic management of diversity was weak, with little direction afforded by the policy and poorly attended meetings. The prison lacked a dedicated diversity manager and there was no structured approach to supporting prisoners with protected characteristics. Our survey results were mainly poor and featured victimisation in nearly every aspect. Support for the large number of foreign nationals was poor but for older prisoners and those with disabilities was reasonable. There were no forums or other ways to communicate directly with minority groups.

Strategic management

- 2.20 The equality policy consisted almost entirely of definitions and failed to set out how the prison would support prisoners from minority groups. The bimonthly meetings were perfunctory, poorly attended by senior managers, included no external agencies and had insufficient focus on addressing the needs of prisoners from minority groups. There was no current action plan to support the policy. There was no dedicated diversity manager, only a nominated manager with a 'watching brief' over the area, and this resulted in a lack of focus on diversity, except in the areas of older prisoners and those with disabilities (see main recommendation HP52).
- 2.21 Ethnic monitoring was carried out monthly but meeting minutes failed to show any in-depth analysis and did not record any action being considered or taken to address inequalities. No data were collected about other protected characteristics to measure equality of access or

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

treatment (see main recommendation HP52). There was no central database of prisoners identified as having racially motivated convictions or of those deemed to be racist.

- 2.22 A Gypsy/Traveller prisoner had been appointed to act on behalf of the nine members of this group but no other representatives had been appointed from the other, larger groups. General wing representatives attended the diversity committee to pass on any concerns from prisoners, but there were no focus groups for any of the protected characteristics (see main recommendation HP52).
- 2.23 Discrimination incident report forms (DIRFs) were freely available across both sites and were collected by the older prisoners/disabilities clerk. Prisoners told us that they had little faith in the system and that using it resulted in a transfer out of the prison. The prison had conducted an investigation into this view and had published its findings to prisoners in an effort to refute this claim. Many of the responses to DIRFs that we looked at were incomplete, with investigations outstanding and a general lack of managerial scrutiny. There was no external validation of the reports.
- 2.24 Identification of prisoners from minority groups was initially made using the prison's computer system and also through a disability questionnaire completed during the induction process. The questionnaire was administered by other prisoners, which, considering the sensitive nature of some of the questions, was inappropriate.

Recommendations

- 2.25 **The effectiveness of the diversity policy should be reviewed and supported by an up-to-date action plan.**
- 2.26 **The disability questionnaire should be administered by staff in private.**
- 2.27 **Discrimination incidents should be fully investigated and prisoners responded to in full. Responses should be scrutinised and be subject to external scrutiny.**

Protected characteristics

- 2.28 Around 50% of prisoners were from black and minority ethnic backgrounds. In our survey and in our groups, these prisoners reported less favourably than white prisoners across many issues, particularly safety, complaints, staff relationships and victimisation by staff and other prisoners. In spite of the high number of black and minority ethnic prisoners at the establishment there had been no consultation with them during 2012 (see main recommendation HP52).
- 2.29 The number of foreign nationals had decreased since the previous inspection, but at 230 still equated to nearly 40% of the population. Provision for them consisted almost solely of a free five-minute telephone call, which was only allowed if the prisoner did not receive any visits, and a few newspapers in the library. The role of foreign nationals liaison officer had ceased and there were no meetings, and there was no evidence of any understanding of their issues.
- 2.30 UK Border Agency (UKBA) staff managed immigration processes well and there were no excessive delays in onward transfers, with only two prisoners subject to IS91 conditions (authority to detain post-sentence notification). Applications to see UKBA were dealt with expediently, although there was no independent immigration advice and minimal legal advice available (see section on legal services).

- 2.31 There was little translated material available across the prison and only minimal use of professional translation/interpreting services, despite the prison's own data showing that around 10% of prisoners required assistance in understanding English. An informal list of multilingual prisoners was maintained by the diversity orderly but there was no corresponding list of staff.
- 2.32 In our survey and during the inspection, Muslim prisoners reported far more negatively than their non-Muslim counterparts across many areas, including safety and victimisation. A number of recent incidents had compounded their poor perceptions but there had been insufficient action to address their concerns. Minutes of the diversity committee meetings showed chaplaincy attendance at only one of the five meetings to date in 2012.
- 2.33 There were just over 100 prisoners over the age of 50 (the oldest being 74) at the time of the inspection. Provision for this group was reasonable, with good time out of cell, support from Recoop (a charity for older prisoners) and a dedicated drop-in centre where they could go for some peace and quiet and to meet other older prisoners. There had been two courses run in the centre, based around improving and maintaining mental agility, and proposed plans to extend its use had the potential to provide an excellent regime for older prisoners. Gym and health services staff ran a well-man clinic, and dedicated gym sessions for older prisoners were provided twice a week. Prisoners beyond retirement age did not have to pay for their televisions but, due to the low retirement pay (£3.50), most chose to work in order to supplement their income.
- 2.34 In our survey, around 16% of respondents considered themselves to have a disability, which matched the data provided by the establishment. These prisoners reported negatively about their experience on arrival, the quality of the food, health care issues and being victimised because of their disability. There was no adapted accommodation but arrangements were made, where necessary, to accommodate such prisoners on D wing, which comprised solely ground floor accommodation, or C2, which had a stair lift installed.
- 2.35 Personal emergency evacuation plans were well managed and the prison had developed an innovative red, amber, green (RAG) identification system, dependent on the level of assistance required (including age-related reduced mobility). This was widely understood by prisoners and staff alike, and we observed newly arrived prisoners being provisionally assessed by wing staff, with a follow-up the next day by the older prisoners/disabilities clerk.
- 2.36 Care planning arrangements, both for older prisoners and those with disabilities, were effective and were completed in conjunction with the prisoner and health services staff. The consent and review systems in operation ensured that arrangements met the developing needs of prisoners.
- 2.37 There were no support processes for gay or bisexual prisoners.

Recommendations

- 2.38 Independent immigration advice should be available.
- 2.39 Key information should be available in a suitable range of foreign languages and the prison should review its use of translation/interpreting services, both formal and informal.

Housekeeping point

- 2.40 Staff who are willing and able to assist with interpreting should be identified and publicised.

Good practice

- 2.41 *The prison had developed an innovative red, amber, green identification system for personal emergency evacuation procedures, dependent on the level of assistance required.*

Faith and religious activity

Expected outcomes:

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

- 2.42 The chaplaincy team was well integrated into the daily life of the prison. Faith provision and facilities were generally good but Muslim prisoners had more negative views.
- 2.43 Facilities for worship had improved and we were assured that there was adequate space to meet the religious needs of the population. The chaplaincy team was reasonably well integrated into the daily life of the prison and ministered to all faiths represented there. Access to the chapel was good, including some lunchtime worship, and did not require the submission of an application to attend.
- 2.44 Our survey results for faith provision were mainly good and in line with comparator prisons. However, Muslim prisoners were less positive than their non-Muslim counterparts and fewer than half said that they could have access to a leader of their faith. There was a full-time Muslim chaplain in post, although, for a number of reasons, he was only in the prison around two and a half days each week.
- 2.45 The chaplaincy team had successfully hosted a wide range of religious and cultural events throughout the year.

Recommendation

- 2.46 Muslim prisoners' access to a minister of their faith should be improved.

Complaints

Expected outcomes:

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

2.47 Survey results in the area of complaints were mainly similar to those at comparator prisons but were much worse than at the time of the previous inspection. Data collection was good but there was insufficient analysis.

2.48 Approximately 1,868 complaints had been submitted in the previous year, at an average of around 155 per month. In the six months before the inspection, this figure had reduced to around 100 per month, which was relatively low. There had been no analysis of this large reduction, and prisoners told us that if they complained too often they would be transferred out of the prison (see main recommendation HP53). The most common reasons for complaints in recent months had been offender management issues.

2.49 Access to complaint forms was good but complaint boxes were emptied by the night orderly officer, which compromised confidentiality and could have undermined prisoners' confidence in the system. In our survey, prisoners' responses about the fairness of complaints were similar to those at comparator prisons but more negative than at the time of the previous inspection.

2.50 The responses to complaints that we looked at were reasonable and had generally been completed within the agreed timescales. However, there were no quality checks of responses by a senior manager.

Recommendation

2.51 **Complaints data should be analysed to identify trends and areas of concern, and monthly quality checks of complaints should be carried out by a senior manager.**

Legal rights

Expected outcomes:

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

2.52 Legal rights provision was poor, with only ad-hoc arrangements. There was no independent immigration advice available for the large foreign national population.

2.53 There was only one trained legal services officer, and in 2012 to date she had only been allocated to this task on one occasion. However, she continued to help prisoners in her own time, although, because of time restrictions, this often extended only to finding them a solicitor. There was no independent immigration advice available (see section on protected characteristics).

2.54 The offender management unit saw all recalled prisoners on arrival and, where appropriate, issued recall packs within 28 days of recall.

2.55 Survey results concerning access to legal visits were worse than the comparator. Prisoners told us that this was due to the reluctance of legal advisers to travel to Portland, rather than their access to appointments. Legal visits took place once a week in the main visits room and, while this was an open environment, the generally low numbers meant that visits were sufficiently private.

Recommendation

- 2.56 There should be sufficient legal services provision to meet prisoners' needs.

Health services

Expected outcomes:

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

- 2.57 The small team of health care staff provided a good service. Access to all clinics was good and there were minimal waiting times. The range and quality of dental services were good. Clinical governance arrangements were satisfactory but there was no health needs assessment and the prison was not represented at the partnership board meetings. Primary care services were well organised, with an appropriate range of clinics. Pharmacy services were well managed. Prisoners had access to high-quality primary and secondary mental health care and the caseloads were small.

Governance arrangements

- 2.58 Health services were commissioned by Dorset Primary Care Trust and provided by Dorset Healthcare University Foundation Trust. Relationships between the prison and the commissioning and providing Trusts were good but the governor did not attend the quarterly meetings of the Dorset Partnership Board, although he represented Prison and Probation Services at the region's council of NHS Foundation Trust governors. The lead nurse regularly attended the prison senior management team meetings. Prisoners were generally satisfied with the level and quality of health services provided. The refurbished health centre could be accessed easily and provided sufficient rooms for consultation and treatment. A large amount of written health care information, including health promotion leaflets, was available in the waiting room.
- 2.59 There had been no assessment of the health care needs of prisoners for over three years, which meant that there was no action plan or workforce plan by which to monitor and develop services as required by the prison population. The providing Trust clinical service manager visited the prison regularly and the lead nurse was supported by a deputy primary care senior nurse, with visiting mental health in-reach and integrated drug treatment system services. The team was fully staffed but had little scope for managing any absences or loans of staff to other prisons, which occurred regularly. The provider Trust arranged a bimonthly meeting of GPs and lead nurses and this included a section on clinical governance. The meetings were regularly attended by the GP and lead nurse for the prison and information was subsequently provided for the partnership board.
- 2.60 Health services were available daily but with a more limited service at weekends. Prisoners had access to a wide range of care and treatment, in addition to a number of visiting specialists who provided regular clinics, including orthopaedic, sexual health, podiatry and optician services. Nursing staff were well qualified and delivered specialist clinics in health promotion and for patients with lifelong conditions.

- 2.61 One GP from a local practice provided a daily clinic during the week and two ad-hoc sessions each week as required. Pharmacy services were provided by Dorset Healthcare University Foundation Trust on a supply-only contract, with the prison pharmacy managed by nursing staff. Medication was supplied in a timely manner. A pharmacist from the Trust visited the prison each week. Somerset Partnership Foundation Trust provided a wide range of dental services.
- 2.62 Emergency resuscitation equipment was available in the health centre and the segregation unit. This was appropriate for meeting prisoners' needs, and included automated external defibrillators and portable oxygen. Checking procedures were carried out but were inconsistent and we found some incomplete and missing records.
- 2.63 Patient records were maintained well using SystmOne (the electronic clinical record). Mental health patients had their records initiated on the RiO system (the electronic mental health-based record) and duplicated on SystmOne. The remaining paper records were stored in filing cabinets in a separate room but during the inspection the door to this room was not locked for much of the time.
- 2.64 Prisoners did not have access to a dedicated health care forum but there were health care representatives on the wings. We did not see evidence of a health promotion strategy but health promotion information was provided to prisoners via clinics and written information; this was mainly available on noticeboards in the health care centre but was more limited on wing noticeboards. Prisoners were able to complain about their health care using the prison complaint system, the independent complaints advocacy service and the patient advice and liaison service. The number of complaints submitted was low, at fewer than five per month, and those that we saw had been managed sensitively.

Recommendations

- 2.65 The prison should be adequately represented at the Dorset Partnership Board meetings.
- 2.66 A health care needs assessment should be commissioned in order to assess accurately the needs of the prison population.

Housekeeping points

- 2.67 Clinical supervision records should be maintained.
- 2.68 Accurate records should be maintained for checks of resuscitation equipment, including frequency.
- 2.69 Clinical records should be stored securely in accordance with Caldicott guidelines on the use and confidentiality of personal health information.
- 2.70 Prisoners should have access to a dedicated health care forum.

Delivery of care (physical health)

- 2.71 All new prisoners received an initial health care screen in reception and were seen on the following day for a full secondary screening. They were provided with a leaflet outlining the

health care services available. The small health care room in reception was not fit for purpose, being too small, having insufficient equipment available and affording little privacy.

- 2.72 Access to a GP was good, with patients being seen within 48 hours. Health care applications were triaged by nursing staff, and prisoners were allocated to appropriate clinics. Segregated prisoners were seen daily by a nurse or the GP. Prisoners were able to self-certify for sickness and this was well managed by wing staff. The nurse triage clinics did not use algorithms to ensure consistency of treatment. The free flow of prisoners facilitated good attendance rates at clinics and a wide range of services was available. A chronic disease register was maintained by one of the administrative staff, and prisoners with lifelong conditions had access to specialist clinics when required. Administrative staff made arrangements for outside hospital appointments and this was well managed, although there were too many cancellations because of the lack of escorting staff.

Recommendations

- 2.73 Initial health care screening should be performed in facilities that provide adequate privacy and safety, with resources available to complete the process.
- 2.74 Prisoners should be able to attend outside hospital appointments whenever it is deemed necessary.

Housekeeping point

- 2.75 Triage algorithms should be used to ensure consistency of treatment.

Pharmacy

- 2.76 All medicines were administered from the health care centre. Patients had no direct contact with the pharmacist but could make an appointment via a request slip, although this rarely happened. Medicines management and clinical governance procedures were mostly good, although the refrigerator temperature records showed maximum temperatures above the recommended limit, as the thermometer was not working properly. Standard operating procedures were in the process of being ratified by the Drugs and Therapeutics Committee. The expiry dates of medications were checked but records were not kept, and we found date-expired medication in the emergency cupboard. There was an in-possession policy, but at the time of the inspection this was under review. In-possession risk assessments were not recorded on SystemOne, although an alert was added to a patient's record if they were considered to be unsuitable for in-possession medication. A new prison-specific formulary was in the process of being approved by the Drugs and Therapeutics Committee.
- 2.77 Most prisoners had their medication supplied as weekly or monthly in-possession, and were encouraged to take responsibility for re-ordering their medicines a week before they ran out. Prison officers were not routinely present when medicines were administered but the waiting area and hatch were monitored by closed-circuit television. Medication could not be administered after 4.30pm, which meant that some medicines could not be administered appropriately and were given daily in-possession. Patients received written information about their medications and nurses used the internet to translate information for patients who could not understand written English.

- 2.78 There was a wide range of patient group directions (PGDs), including for vaccinations. Medicines supplied from PGDs were always recorded on SystmOne and these records could be accessed remotely by both the dispensing pharmacy and the Trust pharmacist. The Drugs and Therapeutics Committee met monthly and was well attended by relevant stakeholders; it ratified policies and received aggregated prescribing data.

Recommendations

- 2.79 Arrangements should be made to provide pharmacy-led clinics, including medicines use reviews.
- 2.80 The in-possession policy should be reviewed and the risk assessments for each drug and patient documented, with reasons for the determination recorded.

Housekeeping points

- 2.81 All refrigerators used to store pharmaceutical stock must be capable of storing products between 2°C and 8°C, and maximum/minimum temperatures should be checked daily.
- 2.82 Clear, retrievable records should be kept of the medication expiry date checks that take place.
- 2.83 All medications that cannot be held in possession should be administered at times to ensure clinical efficacy, not to meet the prison regime.

Dentistry

- 2.84 The dental surgery was equipped to a high standard, with good infection control practices. There were two dental clinics and two dental therapy clinics a week, and a consultant oral surgeon provided a clinic every three months. Access to the dentist was generally good, with an initial assessment within six weeks of application and most prisoners receiving treatment within 12 weeks. Non-attendance rates were low.
- 2.85 Dental equipment was appropriately maintained and certified, although the dental nurse chair was damaged. Decontamination practices were consistent with current guidance. Dental waste was subject to professional disposal.

Recommendation

- 2.86 The dental nurse chair should be replaced as it does not meet infection control standards.

Good practice

- 2.87 *The dental provision included two sessions a week from a dental therapist and a consultant oral surgeon clinic every three months.*

Delivery of care (mental health)

- 2.88 There was a small mental health in-reach service. One senior mental health nurse visited the prison one day a week and additionally if required. There was an open referral system. At the time of the inspection, the caseload was small and we were told that it rarely reached more than 20 patients. Multidisciplinary case management took place, with involvement from the offender management unit, health care department and wing staff. The Listeners described their links with mental health staff as very positive. The in-reach service had links with the local community mental health services. A psychiatrist visited the prison fortnightly and saw a small number of patients. Prisoners also had access to two professional counsellors.
- 2.89 Transfers to secure mental health units were rare, and happened swiftly when dealing with the local secure units but less so when out of the area. There were no patients waiting for transfer at the time of the inspection. A programme of mental health awareness training included outside speakers and the in-reach nurse. Segregation staff had been prioritised to receive the training but elsewhere in the prison the uptake had been low.

Catering

Expected outcomes:

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

- 2.90 Prisoners were negative about the food provided but we found the variety and quantity to be adequate. The preparation, storage and serving of food were well regulated. Consultation arrangements were good and resulted in improvements.
- 2.91 Prisoners in our groups complained about both the quality and quantity of the food provided, and in our survey only 19% of respondents, against the 29% comparator, said that the food was good or very good. We found that the menu was varied and nutritious, with adequate variety and choices for those following specific diets for medical or cultural reasons. One hot meal was provided every day and breakfast was served on the morning it was eaten. Prisoners ate hot meals together in the spacious dining areas on each wing.
- 2.92 The storage, preparation and serving of food were well regulated. Kitchen staff made daily inspections of serving areas and meal queues were well supervised by residential staff.
- 2.93 Opportunities for prisoners to cater for themselves were limited to toasters, which were cleared away early in the evening. Prisoners on the enhanced level of the incentives and earned privileges scheme had kettles in their cells and others were provided with insulated flasks in which to store hot water for drinks.
- 2.94 Food consultation arrangements were good. A prisoner group met four times a year and minutes of the meetings showed that some requests had led to changes in the menu, such as the introduction of soup at lunchtime. Food comments books were available at serveries and reasonable written responses from kitchen staff had been recorded.

Purchases

Expected outcomes:

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

- 2.95 The range of goods available was reasonable and changed in response to consultation. However, prisoners were negative about purchases, particularly those from diverse backgrounds, with whom there was no specific consultation. Catalogue orders were delayed in reception.
- 2.96 The range of goods available was reasonable but in our survey fewer respondents than at comparator prisons said that the prison shop sold a wide enough range of goods to meet their needs. Prisoners complained of high prices in relation to low wages, and spending limits which had not been revised in line with price increases. Responses from black and minority ethnic prisoners, Muslim prisoners and those with disabilities were more negative than those of their respective counterparts.
- 2.97 Prisoners were not offered grocery packs on arrival, although these were available on request, and they could not make purchases for up to 10 days.
- 2.98 Consultation with prisoners took place through the bimonthly amenities meeting but there was no investigation of the specific needs of diverse groups. There had also been a survey of prisoners which had resulted in revision of the prison shop list.
- 2.99 Prisoners could order from a wide range of catalogues, and the list was kept under review by the amenities meeting. There were delays in distributing the goods to the wings.

Recommendation

- 2.100 **There should be specific consultation with black and minority ethnic and Muslim prisoners and those with disabilities about the range of goods available to purchase.**

Housekeeping points

- 2.101 Spending limits should be increased in line with prices.
- 2.102 Prisoners should be routinely offered grocery packs on arrival.
- 2.103 Mail order purchases should be distributed within three days of being received at the prison.

Section 3: Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock, and the prison offers a timetable of regular and varied activities.⁴

- 3.1 Prisoners were not locked in their cells, although their movements were restricted at various times. Those who were unemployed or on the basic level of the incentives and earned privileges scheme had free access around their wings. Too many prisoners were on the wings during the core day without any meaningful activity.
- 3.2 Prisoners were not locked in their cells and had considerable freedom of movement. They were all expected to be at their cells for roll counts at various points in the day and to stay on their own spur during the night state, although they were still able to go to other cells on the spur and access ablution areas during this time.
- 3.3 There were too many prisoners on the wings at any given time without being involved in any meaningful activity; during our roll checks this figure was around 25% of the total prison population. A small number of prisoners were unemployed or waiting for allocation to work at any given time, but workshops sometimes did not require prisoners and many others only worked part time.
- 3.4 Association and outdoor exercise, including 'trim-track' facilities, were scheduled daily and rarely cancelled. In our survey, 84% of respondents said that they had association five or more times a week and 67% that they were able to go outside to exercise three or more times a week.

Learning and skills and work activities

Expected outcomes:

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

- 3.5 The management of learning and skills, education and work was disjointed and there was insufficient coordination of all relevant areas. There were insufficient activity places and approximately a quarter of all prisoners worked on the wings, most of whom were under-employed and not effectively managed. Waiting lists were poorly managed. There were too few vocational training opportunities. Teaching and coaching were generally good. The range

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

of qualifications was reasonable and achievement good in vocational training but variable in education. Library services were satisfactory.

3.6 Ofsted⁵ made the following assessments about the learning and skills and work provision:

Achievements of prisoners engaged in learning and skills and work:	good
Quality of learning and skills and work provision:	requires improvement
Leadership and management of learning and skills and work:	requires improvement

Management of learning and skills and work

3.7 The management of learning and skills, education and work was disjointed and not informed by a needs analysis, and there was insufficient coordination of all relevant areas. Learning and skills was seen by the governor and senior staff as being central to the purpose of the prison and they had a clear strategic vision with some promising recent initiatives, including the development of social enterprises such as the 'Jailhouse Café' – a venture based outside of the prison which provided hot and cold food during the day and was open to the general public. Internal working relationships between the new Offender Learning and Skills Service (OLASS) contractor, the National Careers Service and the prison had yet to be fully established and developed. However, staff had managed the recent change of contractor well, with minimal disruption to activities. The prison had begun to develop links with a range of employers, which were starting to be used effectively to inform the planning of courses, and to develop opportunities for prisoners to improve their employability. There were high levels of mutual respect between tutors, instructors and learners in learning and skills and work.

3.8 Quality assurance arrangements were appropriate, although self-assessment was weak and the subsequent report was over-generous. Action plans were poorly informed and insufficiently monitored at the regular quality improvement group meetings. Observations of the quality of teaching and learning took place within the OLASS provision but had not been extended to other areas of learning and skills. There was insufficient sharing of best practices in teaching and learning. Most staff were well qualified and resources were generally adequate. Data and management information were collected in multiple formats, which made it difficult to analyse. Poor use was made of data and management information to inform planning and improvements to the provision. Prisoners were often laid off work as there was insufficient cover for staff vacancies and absences.

3.9 The promotion of safeguarding of learners, and equality and diversity were reasonable. Learning and skills staff were able to recognise and deal adequately with safeguarding and equality issues when they arose, and had received appropriate training.

Recommendations

3.10 The management of learning and skills should be reviewed and improved to provide effective coordination of all relevant areas.

⁵ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.11 Aspects of quality assurance including self-assessment, action planning and observations of teaching and learning should be improved.
- 3.12 Data collection and analysis should be improved to provide clear management information.
- 3.13 Appropriate cover arrangements should be introduced for staff vacancies and absences to provide continuity of provision.

Provision of activities

- 3.14 The amount of purposeful activity available was insufficient for the population, with spaces for only approximately 85% of the prison population. Of these activities, only around 89 were full-time vocational training places with qualifications and only approximately 110 were full-time-equivalent education places. Around a quarter of all prisoners were working on the wings during the day as cleaners and orderlies and most were under-employed and not effectively managed (see main recommendation HP54). Provision for Toe by Toe (a mentoring system supporting prisoners' reading development) was excellent and prisoner engagement was high.
- 3.15 Some work and production workshops offered basic-level employability qualifications, although take-up was exceptionally low and there were missed opportunities to accredit work and employability skills in some areas. Vocational training with qualifications was available in bricklaying, fork-lift truck driving and information computer technology, but had recently ceased in electrical engineering because of a staff vacancy. A course in plastering was planned to start imminently.
- 3.16 Allocation to activities for new arrivals was fair and equitable but took too long. Waiting lists were excessively long and poorly managed. Prisoners received appropriate information and guidance from the National Careers Service during their induction. Initial assessment was satisfactory, with appropriate links to sentence planning. Wages were fair and did not act as a disincentive to prisoners accessing education.

Recommendation

- 3.17 The time taken to allocate new prisoners to activity places should be reduced and waiting lists better managed.

Quality of provision

- 3.18 The quality of teaching, training and learning in education classes and the vocational workshops was mostly good, with some inspirational teaching in some mathematics classes. Learning was well planned, with appropriate challenge and clear targets set for learners. Most learners produced work of a high standard and received good support from trained prisoner peer tutors. Those on distant learning or Open University courses were also well supported, and particularly good use was made of the virtual campus for this. However, no vocational qualifications were available in the kitchen and few prisoners undertook qualifications in recycling and waste management, gardening or industrial cleaning. There were too few opportunities for prisoners to gain qualifications above level 2.
- 3.19 Vocational training resources and facilities were adequate, and in some areas, such as bricklaying and woodwork, high standards of skills were demonstrated, although work in the

wood mill was not accredited. Recent partnership working between the prison and local businesses had begun to benefit prisoners who were released on temporary licence to work in the Jailhouse Café.

Recommendation

- 3.20 More qualifications should be made available above level 2 for those who require it.

Education and vocational achievements

- 3.21 In the areas where there were vocational opportunities, achievements of qualifications were high, and on some courses almost all prisoners who completed their courses were successful. However, pass rates were more variable for learners on education courses. While achievements in most education courses were generally satisfactory, they were low for those on English entry level 2 and level 1, and for those on Mathematics levels 1 and 2, at around 60%. Most learners developed good skills and produced good standards of finished work. Punctuality and attendance were generally good for most classes. Learners used safe working practices in their work areas and on vocational courses.

Recommendation

- 3.22 The prison should improve achievement rates for learners, particularly on courses in English entry level 2 and level 1, and for those on Mathematics levels 1 and 2.

Library

- 3.23 The library was well managed and, although small and cramped, provided an adequate service. A reasonable range of materials was available, including fiction and non-fiction books, newspapers, easy-readers and legal materials. Prisoners were able to buy their own magazines. The range of materials catered for all levels of reading ability, and books were available in a satisfactory range of languages. A small range of books was available to prisoners in segregation. The librarian was proactive in obtaining overseas newspapers from various embassies for foreign national prisoners.
- 3.24 Access to the library was satisfactory during the day and in the evenings, and around 85% of the population was registered to use it. However, there was no monitoring of which prisoners used the facility regularly. Library orderlies made a large contribution to the running of the library, although this work was not accredited.

Housekeeping points

- 3.25 The prison should ensure that appropriate data on the library are recorded and used to check how many prisoners regularly access it.
- 3.26 Prisoner library orderlies should have the opportunity to complete an appropriate vocational qualification.

Physical education and healthy living

Expected outcomes:

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

3.27 PE and recreation provision was well planned and managed. Staff were enthusiastic and well qualified. PE was available to prisoners in the daytime, the evening and at weekends, and access was fair for all. The facilities were reasonable and the equipment was well maintained. A range of accredited vocational training was available but, although achievements appeared high, there were no data to substantiate this, and insufficient data to evidence the proportion of prisoners who accessed PE regularly, although the facilities appeared to be well used.

3.28 PE was well managed and promoted. The small sports hall, weight training and cardiovascular training areas, well-equipped classroom, and outside football pitch and circuit area provided reasonable facilities for recreational and remedial PE, and vocational training. Accommodation and equipment were well maintained and changing rooms and showers were adequate. The well-equipped dedicated PE classroom was not used to its full potential. Staff were highly qualified and able to deliver a range of vocational qualifications. A wide variety of courses was available and learners were able to progress from level 1 introduction to sport to level 3 in personal training. Regular courses were also offered in first aid at work. Achievement on courses appeared to be high, although no data were available to substantiate this.

3.29 Prisoners received a thorough introduction to PE during their first week at the prison. Healthy living and the importance of exercise were well promoted, and a weekly session to help prisoners to stop smoking was well attended. Appropriately trained prisoner orderlies provided good health and well-being support for other prisoners. A range of recreational PE was available in the daytime, the evening and at weekends, including team sports and sessions for older prisoners and those who were employed. Although attendance at recreational PE sessions was fairly allocated, and the facilities appeared to be well used, there were insufficient data to evidence the proportion of prisoners who regularly attended.

3.30 PE staff gave good remedial support for prisoners who were older, unfit or had been referred by the health care department or counselling, assessment, referral, advice and throughcare (CARAT) team. Appropriate PE kit and trainers were available for those who needed it.

Housekeeping point

3.31 Data should be kept on prisoners' achievements on PE courses and the proportion of prisoners regularly attending recreational PE sessions.

Section 4: Resettlement

Strategic management of resettlement

Expected outcomes:

Planning for a prisoner's release or transfer starts on their arrival to the prison. Resettlement underpins the work of the whole prison, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need. Good planning ensures a seamless transition into the community.

- 4.1 There was a new reducing reoffending strategy which addressed resettlement pathways but did not adequately describe strategic links with aspects of offender management. There had been a hiatus in the management and implementation of reducing reoffending but the new arrangements were appropriate. Release on temporary licence was built into the strategy and was being developed.
- 4.2 The reducing reoffending strategy, dated August 2012, addressed how each resettlement pathway would be developed through clear action plans but did not adequately address the role of offender management or the specific needs of prisoners with protected characteristics. There were no strategic links between offender management, public protection and resettlement. The strategy was informed by the results of a prisoner survey of 2011 which had identified the characteristics of the changing prison population, but information from assessments of offending were only used to inform the planning of offending behaviour programme provision.
- 4.3 Release on temporary licence (ROTL) was being developed to support resettlement. In addition to opportunities in projects managed by the prison, there were placements in local employment, and ROTL was also beginning to be used to promote family contact.
- 4.4 There was little evidence of progress in implementing the strategy at the time of the inspection. A reducing reoffending strategy meeting had taken place in September 2012 to discuss the new strategy, after a nine-month hiatus. Appropriate representatives from prison departments had been invited, but only six of the 15 invitees had attended.

Recommendation

- 4.5 The reducing reoffending strategy should include strategic links with offender management, public protection and resettlement. Implementation should be delivered in line with the action plan and closely monitored.

Offender management and planning

Expected outcomes:

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

- 4.6 Offender supervisors had large caseloads, and often had insufficient contact with prisoners. Most assessments and sentence plans were up to date but plans often did not include resettlement targets. Interventions were not always delivered as planned. Quality assurance, staff training and supervision, and practice guidelines were not well developed. Home detention curfew arrangements operated well. Public protection arrangements were sound. Too many recategorisation reviews were late and there was insufficient prisoner engagement in the process. Although the management of indeterminate-sentenced prisoners was efficient, there was no special regime which met their particular needs.
- 4.7 In our survey, 82% of prisoners, considerably better than the 73% comparator, said that they had a sentence plan and 67%, against the 56% comparator, that they had been involved in its development. Prison-based offender supervisors were responsible for carrying out offender assessment system (OASys) assessments for 113 prisoners, and reviews were overdue for only nine of these. Of the OASys assessments that were the responsibility of community-based offender managers/probation officers, 82 were overdue, and staff in the offender management unit (OMU) were diligent in chasing up reviews with probation officers and their managers.
- 4.8 Prisoners complained that it was often difficult to contact their offender supervisor, and the cases we examined showed that most prisoners were not contacted by offender supervisors within a month of arrival. Offender supervisors had large caseloads and those who were prison officers also had to undertake residential duties, which resulted in contact with prisoners being reactive to a report, a review becoming due or a prisoner application. There was no systematic contact with prisoners to monitor their achievement of targets and to motivate them. As responses to applications were prioritised, there was sometimes a delay in contact taking place.
- 4.9 The quality of assessments by offender supervisors and offender managers was reasonable, although attendance at planning meetings by other departments was minimal and important information was often not shared with the OMU.
- 4.10 Although offender supervisors tried to ensure that sentence plan objectives were implemented, and there was a focus on helping prisoners to progress through their sentences in order to obtain category D status or to succeed at a parole hearing, the interventions on the sentence plan had been delivered in only half of the cases we inspected. Sentence planning targets did not include resettlement objectives often enough. There were no pre-release resettlement meetings and there was no resettlement plan but prisoners were advised to apply for assistance from the limited services in the prison. OMU staff were skilled but received insufficient training and supervision, and there were no practice guidelines.
- 4.11 Procedures for assessing home detention curfew (HDC) applications were sound and timely. In the six months before the inspection, all but two of 22 applications had been approved and most of the prisoners involved had been released within a week of their eligibility date.

Recommendations

- 4.12 There should be regular and systematic contact between offender supervisors and the prisoners in their care.
- 4.13 The prison should ensure that important information from around the prison is routinely shared with the offender management unit.

- 4.14 All prisoners' resettlement needs should be assessed and a plan to meet their needs formulated in good time for effective action to be taken.
- 4.15 Offender supervisors should be provided with adequate training, professional supervision and practice guidelines.

Housekeeping point

- 4.16 Sentence planning targets should include resettlement objectives.

Public protection

- 4.17 Procedures to identify prisoners presenting a risk to the public and to plan and review restrictions on them were good. All new prisoners were screened on arrival and assessed for the need to refer them to the monthly inter-departmental risk management meeting. This meeting was well attended by representatives from relevant departments, including security, health care and the police liaison officer. Information was shared systematically with offender supervisors and offender managers by email. The application of restrictions was explained to prisoners and they were reviewed regularly. When there were restrictions on child contact, prisoners could apply for named children to visit and checks were made with social services.
- 4.18 Before the release of high-risk prisoners, reviews were carried out, police and probation staff were informed and contact was made with victim liaison services.

Categorisation

- 4.19 Categorisation review processes were sound but approximately a third of reviews were generally delayed. Prisoners could make written representations for their review but this was without personal interaction, and there was no oral board for them to attend. They were informed of the outcome in writing but not given guidance on how they could improve their chance of a positive outcome.
- 4.20 At the time of the inspection there were 47 category D prisoners held at the establishment. Over the previous few months there had been difficulties in finding places at open establishments, especially for those serving determinate sentences, and transport restrictions caused by the Olympics in the summer. However, prisoners had not had to wait longer than three months to transfer to open conditions and there was good communication with open establishments to facilitate transfers.
- 4.21 In our scrutiny of OMU files, we found insufficient emphasis on the transfer of prisoners to achieve sentence planning targets, and most applications had been from prisoners for reasons of family contact.

Recommendations

- 4.22 Prisoners should be consulted in person when their categorisation is reviewed and should be advised on how to reduce their risk.
- 4.23 Prisoners requiring interventions available at other prisons should be transferred promptly.

Indeterminate sentence prisoners

- 4.24 At the time of the inspection, there were 55 indeterminate-sentenced prisoners (ISPs). Responsibility for these prisoners was shared between offender supervisors, all of whom had been appropriately trained.
- 4.25 There were no specific services for these prisoners, such as consultation, opportunities to develop domestic skills or ISP days. We were told that attempts to set up these facilities had met with a poor response. However, accompanied temporary release was provided for suitable prisoners to help them demonstrate suitability for open conditions. Reports for parole reviews were all prepared on time.

Recommendation

- 4.26 The specific needs of prisoners serving indeterminate sentences should be identified and addressed.

Reintegration planning

Expected outcomes:

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

- 4.27 Only a small proportion of prisoners knew where to get help with resettlement problems. Although some information was gathered about resettlement needs, a reintegration plan was not formulated and checks before release were inadequate. A large proportion of prisoners were released without a settled address. Employer engagement was in the relatively early stages of development. Prisoners gained good employability skills but these were not always recognised or accredited. Health care discharge planning was good. There were good joint working arrangements for prisoners being released with substance use problems. Money management advice and bank accounts were available but there was no debt advice service. The demand for visits had increased but the number of sessions had remained unchanged. Family days were well managed but there were not sufficient for the population and there had been little prisoner consultation. The range of offending behaviour interventions available was not appropriate for the population and was under review. The 'Challenge to Change' programme was a good resource.
- 4.28 In our survey, the proportions of prisoners saying that they had had problems with accommodation, finance, employment or contacting family on arrival was generally in line with comparators. However, only 19% knew whom to go to for help on release with accommodation (against the 42% comparator), 19% for help with benefits (against the 44% comparator), 15% for finances (against the 32% comparator) and 27% for drugs and alcohol (against the 49% comparator).
- 4.29 Prisoners were asked about their resettlement needs during induction and some of these were also covered in the information and guidance assessment by the education department. Referrals for services arose from these assessments but there was no distinct reintegration plan with specific targets (see section on offender management and planning). Before release,

there was a cursory check of discharge details but this was not done early enough to deal with outstanding or developing issues.

Accommodation

- 4.30 A large percentage of prisoners (15%) were released without a settled address. Those requiring help with accommodation were referred to an administrative officer based in the OMU, who dealt with issues including maintaining or closing tenancies, outstanding housing benefit, rent arrears and referrals for accommodation on release. There was no monitoring or analysis of her work to demonstrate her effectiveness or identify improvements (see main recommendation HP55).

Education, training and employment

- 4.31 Employer engagement was in the relatively early stages of development, and the governor and senior managers had recently given a high priority to building on the recent innovation of the Jailhouse Café (see section on learning and skills and work activities). All prisoners received appropriate careers advice and guidance from well-qualified staff from the National Careers Service. The virtual campus was well used and prisoners were able to prepare CVs and disclosure letters, as well as study learning modules such as money management, budgeting and interview skills. Prisoners gained good employability skills but these were not always recognised or accredited. Only 24% of prisoners released in 2012 to date had entered into employment, education or training (see main recommendation HP55).

Recommendation

- 4.32 The prison should continue to develop links with employers, training providers and colleges, and improve release on temporary licence opportunities.

Health care

- 4.33 Health care discharge planning was good, with links established with the community when required. Pre-release planning was carried out in the week before discharge and all prisoners were provided with a summary of their care and medicines to take out when required. The care programme approach was used for patients with enduring mental health problems. Palliative care and end-of-life policies had been developed and used on the rare occasions when prisoners were terminally ill.

Drugs and alcohol

- 4.34 Good joint working arrangements had been established between counselling, assessment, referral, advice and throughcare (CARAT), clinical integrated drug treatment system and mental health teams. Care plans were detailed and shared with the OMU. Prisoners requiring structured programmes could be referred to other prisons and specific support was available to prepare prisoners for the 12-step programme. CARAT clients were given harm reduction information and advice before release but this did not extend to all prisoners. For those returning to the local area, a service user-led community-based organisation ('Forum') was available to provide practical support on release, and this included meeting prisoners in the community and accompanying them to appointments. Appropriate links with a range of drug

intervention programme teams had been established and we were told that access to alcohol services post-release had improved.

Recommendation

- 4.35 All prisoners should be provided with harm reduction advice and information before release.

Finance, benefit and debt

- 4.36 There were no specific services for prisoners with debt problems, other than the help provided with rent arrears, and other financial advice was limited (see main recommendation HP55). A 'Money Matters' course, dealing with budgeting and financial management, was provided by Kainos and was available to all prisoners. It was also provided occasionally by the education department.
- 4.37 The housing officer in the OMU helped prisoners to open bank accounts before release.

Children, families and contact with the outside world

- 4.38 The reduction in the foreign national population (see section on protected characteristics) and consequent increase in the number of British nationals had led to an increased demand for visits. The prison had not responded and the number of sessions had remained unchanged, taking place only at weekends. In our survey, only 29% of prisoners said that staff had supported them in maintaining contact with their family and friends, and only 8% that it was easy or very easy for their family and friends to get to the prison, which was three times lower than at similar establishments (see main recommendation HP56).
- 4.39 Although the prison did not have definitive figures about the home location of prisoners, staff we spoke to estimated that about 50–60% were from the London area. It appeared that many prisoners did not receive visits because of the distance that their families had to travel but no survey about this issue had been undertaken with prisoners and, although questionnaires had been completed by visitors in recent months, data had yet to be analysed. According to the prison's data, approximately 25% of all visiting orders that were sent out by prisoners were never used and, at the time of the inspection, the next available visits space was two and a half weeks away.
- 4.40 There was no specific visitors centre and a small, basically furnished area at the front of the prison was used for processing visitors before going through to the visits hall and was available for visitors to wait in. The visits hall was large, offering up to 38 visits at a time, along with a few sofas where prisoners on the enhanced level of the incentives and earned privileges (IEP) scheme were able to conduct their visit in a more relaxed fashion. A small refreshment bar was available and a children's play area, which provided a number of toys. Although a reasonable environment, we were told by prisoners and staff that there could be delays in processing all visitors in time for them to receive the full visits entitlement.
- 4.41 Family days were well organised and the waiting list was well managed, but only four sessions, each for a maximum of 17 prisoners, were run annually and only for prisoners on the enhanced level of the IEP scheme. Two further family days a year were organised for those on the Kainos programme.

- 4.42 There were no parenting programmes, although the prison had begun to forge some good external links to develop such provision (see main recommendation HP56).

Recommendations

- 4.43 All prisoners and visitors should be able to receive the full visits entitlement.
- 4.44 There should be sufficient family days to meet the needs of the population and they should be available for all prisoners with children.

Attitudes, thinking and behaviour

- 4.45 At the time of the inspection, the interventions team was running two accredited offending behaviour programmes: the thinking skills programme (TSP) and controlling anger and learning to manage it (CALM). The waiting list for TSP was just 17 and the prison had struggled to fill places because so many prisoners in the changed population had already completed the course earlier in their sentence or were not at the appropriate risk level. However, the CALM programme was oversubscribed, with 26 on the waiting list, and plans to run a second course later in the year had had to be cancelled because of a shortage of trained staff. Staff understood that the range of programmes offered had become less appropriate for the prison's population and they were waiting for a decision on what would be offered in the coming year.
- 4.46 The Kainos community, located on D wing, provided a third accredited programme, 'Challenge to Change'. This was aimed at medium-high risk prisoners who had thinking skills and personal development needs related to their offending. It was an intensive programme, reinforced by community living, and involved community volunteers.
- 4.47 Work with individual prisoners was undertaken by psychologists, and two counsellors provided personal support for prisoners with emotional needs.

Recommendation

- 4.48 The range of offending behaviour interventions available in the prison should meet the needs of the population.

Section 5: Recommendations, housekeeping points and good practice

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

Main recommendations

To the governor

-
- 5.1 The prisons acceptance criteria should be reviewed and only include factors that indicate a risk to the regime. Decisions to transfer and segregate a prisoner should be based on separate reasoned risk-assessments and subject to routine analysis and management oversight. (HP51)
 - 5.2 The needs of all prisoners with protected characteristics should be identified, assessed and met and any negative perceptions of particular groups understood. (HP52)
 - 5.3 The reduction in the number of complaints and the impact of making a complaint should be analysed and shared with prisoners. (HP53)
 - 5.4 The number of purposeful activity places should be increased to enable full employment. The variety of provision should be improved and the quantity of vocational training increased. (HP54)
 - 5.5 Services and support for prisoners across the accommodation; education, training and employment; and finance, benefit and debt pathways should be developed and their effectiveness monitored. (HP55)
 - 5.6 Prisoners and their visitors should be consulted in order to identify and implement improvements to visits access and facilities. Parenting and family courses should be provided. (HP56)

Recommendation

To NHS Dorset

-
- 5.7 Substance misuse services should be sufficiently resourced to meet demand and to develop interventions and initiatives such as peer support further. (1.76)

Recommendation

To Prisoner Escort and Custody Services (PECS)

Courts, escorts and transfers

-
- 5.8 All escort vans should be clean and properly maintained. (1.6)

Early days in custody

- 5.9 All prisoners should be interviewed in private by a member of staff to ensure that all of their immediate needs are met. (1.15)
- 5.10 All prisoners should receive a free telephone call on their first night. (1.16)
- 5.11 Induction should begin on the day after arrival. (1.17)

Bullying and violence reduction

- 5.12 All incidents of violent and antisocial behaviour should be evaluated, along with other, related data, better to understand patterns and trends across the establishment. (1.25)

Self-harm and suicide prevention

- 5.13 All incidents of suicide and self-harm should be evaluated, along with other, related data, better to understand patterns and trends across the establishment. (1.34)
- 5.14 A multidisciplinary forum for the discussion of vulnerable prisoners or those at risk of bullying should be re-formed. (1.35)
- 5.15 The constant supervision cell in the segregation unit should be taken out of use. (1.36)

Safeguarding (protection of adults at risk)

- 5.16 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.40)

Security

- 5.17 The establishment should ensure that the mandatory drug testing programme is sufficiently resourced to complete all testing within required timescales and without gaps in provision. (1.49)

Discipline

- 5.18 Planning for segregated prisoners to be reintegrated into normal location should be developed. (1.70)

Substance misuse

- 5.19 Substance misuse services should develop a mechanism for service user feedback to inform future service provision. (1.75)

Residential units

- 5.20 All cells should be properly equipped and maintained to a reasonable standard. (2.9)
- 5.21 Single cells designed for one prisoner should not be shared. (2.10)
- 5.22 Recess areas should be maintained to a reasonable standard. (2.11)
- 5.23 A quality assurance scheme should be introduced for applications, to ensure consistency and fairness, and timescales for responses should be agreed. (2.12)

Equality and diversity

- 5.24 The effectiveness of the diversity policy should be reviewed and supported by an up-to-date action plan. (2.25)
- 5.25 The disability questionnaire should be administered by staff in private. (2.26)
- 5.26 Discrimination incidents should be fully investigated and prisoners responded to in full. Responses should be scrutinised and be subject to external scrutiny. (2.27)
- 5.27 Independent immigration advice should be available. (2.38)
- 5.28 Key information should be available in a suitable range of foreign languages and the prison should review its use of translation/interpreting services, both formal and informal. (2.39)

Faith and religious activity

- 5.29 Muslim prisoners' access to a minister of their faith should be improved. (2.46)

Complaints

- 5.30 Complaints data should be analysed to identify trends and areas of concern, and monthly quality checks of complaints should be carried out by a senior manager. (2.51)

Legal rights

- 5.31 There should be sufficient legal services provision to meet prisoners' needs. (2.56)

Health services

- 5.32 The prison should be adequately represented at the Dorset Partnership Board meetings. (2.65)
- 5.33 A health care needs assessment should be commissioned in order to assess accurately the needs of the prison population. (2.66)
- 5.34 Initial health care screening should be performed in facilities that provide adequate privacy and safety, with resources available to complete the process. (2.73)

- 5.35 Prisoners should be able to attend outside hospital appointments whenever it is deemed necessary. (2.74)
- 5.36 Arrangements should be made to provide pharmacy-led clinics, including medicines use reviews. (2.79)
- 5.37 The in-possession policy should be reviewed and the risk assessments for each drug and patient documented, with reasons for the determination recorded. (2.80)
- 5.38 The dental nurse chair should be replaced as it does not meet infection control standards. (2.86)

Purchases

- 5.39 There should be specific consultation with black and minority ethnic and Muslim prisoners and those with disabilities about the range of goods available to purchase. (2.100)

Learning and skills and work activities

- 5.40 The management of learning and skills should be reviewed and improved to provide effective coordination of all relevant areas. (3.10)
- 5.41 Aspects of quality assurance including self-assessment, action planning and observations of teaching and learning should be improved. (3.11)
- 5.42 Data collection and analysis should be improved to provide clear management information. (3.12)
- 5.43 Appropriate cover arrangements should be introduced for staff vacancies and absences to provide continuity of provision. (3.13)
- 5.44 The time taken to allocate new prisoners to activity places should be reduced and waiting lists better managed. (3.17)
- 5.45 More qualifications should be made available above level 2 for those who require it. (3.20)
- 5.46 The prison should improve achievement rates for learners, particularly on courses in English entry level 2 and level 1, and for those on Mathematics levels 1 and 2. (3.22)

Strategic management of resettlement

- 5.47 The reducing reoffending strategy should include strategic links with offender management, public protection and resettlement. Implementation should be delivered in line with the action plan and closely monitored. (4.5)

Offender management and planning

- 5.48 There should be regular and systematic contact between offender supervisors and the prisoners in their care. (4.12)

- 5.49 The prison should ensure that important information from around the prison is routinely shared with the offender management unit. (4.13)
- 5.50 All prisoners' resettlement needs should be assessed and a plan to meet their needs formulated in good time for effective action to be taken. (4.14)
- 5.51 Offender supervisors should be provided with adequate training, professional supervision and practice guidelines. (4.15)
- 5.52 Prisoners should be consulted in person when their categorisation is reviewed and should be advised on how to reduce their risk. (4.22)
- 5.53 Prisoners requiring interventions available at other prisons should be transferred promptly. (4.23)
- 5.54 The specific needs of prisoners serving indeterminate sentences should be identified and addressed. (4.26)

Reintegration planning

- 5.55 The prison should continue to develop links with employers, training providers and colleges, and improve release on temporary licence opportunities. (4.32)
- 5.56 All prisoners should be provided with harm reduction advice and information before release. (4.35)
- 5.57 All prisoners and visitors should be able to receive the full visits entitlement. (4.43)
- 5.58 There should be sufficient family days to meet the needs of the population and they should be available for all prisoners with children. (4.44)
- 5.59 The range of offending behaviour interventions available in the prison should meet the needs of the population. (4.48)

Housekeeping points

Early days in custody

- 5.60 Initial health screens should be conducted in an appropriately private setting. (1.18)
- 5.61 The induction programme should be reviewed, to ensure that its content is relevant. (1.19)

Bullying and violence reduction

- 5.62 All relevant departments should attend safer custody meetings. (1.26)

Self-harm and suicide prevention

- 5.63 Death in custody action plans should be reviewed regularly and recommendations should be reinforced. (1.37)

Incentives and earned privileges

- 5.64 Prisoners' poor perception of the incentives and earned privileges scheme should be explored. (1.55)

Staff–prisoner relationships

- 5.65 Staff entries in prisoners' case notes should address their individual circumstances and progress against sentence planning targets. (2.17)
- 5.66 Management checks should focus on the quality of engagement with prisoners by personal officers. (2.18)

Equality and diversity

- 5.67 Staff who are willing and able to assist with interpreting should be identified and publicised. (2.40)

Health services

- 5.68 Clinical supervision records should be maintained. (2.67)
- 5.69 Accurate records should be maintained for checks of resuscitation equipment, including frequency. (2.68)
- 5.70 Clinical records should be stored securely in accordance with Caldicott guidelines on the use and confidentiality of personal health information. (2.69)
- 5.71 Prisoners should have access to a dedicated health care forum. (2.70)
- 5.72 Triage algorithms should be used to ensure consistency of treatment. (2.75)
- 5.73 All refrigerators used to store pharmaceutical stock must be capable of storing products between 2°C and 8°C, and maximum/minimum temperatures should be checked daily. (2.81)
- 5.74 Clear, retrievable records should be kept of the medication expiry date checks that take place. (2.82)
- 5.75 All medications that cannot be held in possession should be administered at times to ensure clinical efficacy, not to meet the prison regime. (2.83)

Purchases

- 5.76 Spending limits should be increased in line with prices. (2.101)
- 5.77 Prisoners should be routinely offered grocery packs on arrival. (2.102)
- 5.78 Mail order purchases should be distributed within three days of being received at the prison. (2.103)

Learning and skills and work activities

- 5.79 The prison should ensure that appropriate data on the library are recorded and used to check how many prisoners regularly access it. (3.25)
- 5.80 Prisoner library orderlies should have the opportunity to complete an appropriate vocational qualification. (3.26)

Physical education and healthy living

- 5.81 Data should be kept on prisoners' achievements on PE courses and the proportion of prisoners regularly attending recreational PE sessions. (3.31)

Offender management and planning

- 5.82 Sentence planning targets should include resettlement objectives. (4.16)

Examples of good practice

Equality and diversity

- 5.83 The prison had developed an innovative red, amber, green identification system for personal emergency evacuation procedures, dependent on the level of assistance required. (2.41)

Health services

- 5.84 The dental provision included two sessions a week from a dental therapist and a consultant oral surgeon clinic every three months. (2.87)

Appendix I: Inspection team

Nick Hardwick	Chief Inspector
Alison Perry	Team leader
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Gordon Riach	Inspector
Keith McInnis	Inspector
Alice Reid	Researcher
Amy Radford	Researcher
Caroline Elwood	Researcher
Laura Nettleingham	Senior researcher

Specialist inspectors

Sigrid Engelen	Drugs inspector
Michael Bowen	Health services inspector
Majella Pearce	Health services inspector
Helen Boniface	Pharmacist
Neil Edwards	Lead Ofsted inspector
Martyn Rhowbotham	Ofsted inspector
Richard Beaumont	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		575	97.5
Recall		13	2.2
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees		2	0.3
Total	0	590	100

Sentence	18-20-year-olds	21 and over	%
Unsentenced			
Less than 6 months			
6 months to less than 12 months			
12 months to less than 2 years		11	1.9
2 years to less than 4 years		98	16.6
4 years to less than 10 years		379	64.2
10 years and over (not life)		47	47.0
ISPP		14	2.2
Life		41	8.1
Total	0	590	100

Age	Number of prisoners	%
Please state minimum age 24		
Under 21 years		
21 years to 29 years	110	18.6
30 years to 39 years	220	37.3
40 years to 49 years	159	26.9
50 years to 59 years	73	12.4
60 years to 69 years	27	4.6
70 plus years	1	0.2
Please state maximum age 74		
Total	590	100

Nationality	18-20-year-olds	21 and over	%
British		355	60.2
Foreign nationals		230	39.0
Not stated		5	0.8
Total	0	590	100

Security category	18-20-year-olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Category A			
Category B			
Category C		540	91.5
Category D		50	8.5

Other			
Total	0	590	100

Ethnicity	18–20-year-olds	21 and over	%
<i>White</i>			
British		196	33.2
Irish			
Gypsy/Irish Traveller		9	1.5
Other white		89	15.1
<i>Mixed</i>			
White and black Caribbean		12	2.0
White and black African		5	0.8
White and Asian		2	0.3
Other mixed		15	2.5
<i>Asian or Asian British</i>			
Indian		11	1.9
Pakistani		10	1.7
Bangladeshi		7	1.2
Chinese		3	0.5
Other Asian		27	4.6
<i>Black or Black British</i>			
Caribbean		65	11.0
African		79	13.4
Other black		34	5.8
<i>Other ethnic group</i>			
Arab		1	0.2
Other ethnic group		10	1.7
Not stated		15	2.5
Total		590	100

Religion	18–20-year-olds	21 and over	%
Baptist			
Church of England		124	21.0
Roman Catholic		112	19.0
Other Christian denominations		105	17.8
Muslim		95	16.1
Sikh		6	1.0
Hindu		7	1.2
Buddhist		18	3.1
Jewish		6	1.0
Other		9	1.5
No religion		106	18
Not stated		2	0.3
Total		590	100

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month			85	14.4
1 month to 3 months			83	14.1
3 months to 6 months			132	22.4
6 months to 1 year			142	24.1
1 year to 2 years			115	19.5

2 years to 4 years			30	5.1
4 years or more			3	0.4
Total			590	100

Sentenced prisoners only

	18-20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry		2	
Total		2	

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 28 August 2012, the prisoner population at HMP The Verne was 587. The sample size was 238. Overall, this represented 41% 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. Four respondents refused to complete a questionnaire.

Interviews were carried out with any respondents with literacy difficulties. No respondents were interviewed.

Methodology

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

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

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

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

Response rates

In total, 178 respondents completed and returned their questionnaires. This represented 30% of the main prison population. The response rate was 75%. In addition to the four respondents who refused to complete a questionnaire, 30 questionnaires were not returned and 26 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 2012 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 37 category C training prisons since April 2007.
- The current survey responses in 2012 against the responses of prisoners surveyed at HMP The Verne in 2007.
- A comparison within the 2012 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2012 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2012 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2012 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 2012 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.

Survey summary

Section 1: About you

Q1.2	How old are you?		
	<i>Under 21</i>	1	(1%)
	<i>21 - 29</i>	23	(13%)
	<i>30 - 39</i>	66	(37%)
	<i>40 - 49</i>	53	(30%)
	<i>50 - 59</i>	27	(15%)
	<i>60 - 69</i>	7	(4%)
	<i>70 and over</i>	1	(1%)
Q1.3	Are you sentenced?		
	<i>Yes</i>	171	(96%)
	<i>Yes - on recall</i>	7	(4%)
	<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>	2	(1%)
	<i>1 year to less than 2 years</i>	11	(6%)
	<i>2 years to less than 4 years</i>	30	(17%)
	<i>4 years to less than 10 years</i>	93	(53%)
	<i>10 years or more</i>	21	(12%)
	<i>IPP (indeterminate sentence for public protection)</i>	6	(3%)
	<i>Life</i>	11	(6%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?		
	<i>Yes</i>	64	(36%)
	<i>No</i>	112	(64%)
Q1.6	Do you understand spoken English?		
	<i>Yes</i>	173	(98%)
	<i>No</i>	4	(2%)
Q1.7	Do you understand written English?		
	<i>Yes</i>	166	(94%)
	<i>No</i>	10	(6%)
Q1.8	What is your ethnic origin?		
	<i>White - British (English/Welsh/Scottish/Northern Irish)</i>	61	(35%)
	<i>White - Irish</i>	6	(3%)
	<i>White - other</i>	33	(19%)
	<i>Asian or Asian British - Chinese</i>	4	(2%)
	<i>Asian or Asian British - other</i>	6	(3%)
	<i>Mixed race - white and black Caribbean</i>	6	(3%)

<i>Black or black British - Caribbean</i>	14 (8%)	<i>Mixed race - white and black African</i>	4 (2%)
<i>Black or black British - African</i>	20 (11%)	<i>Mixed race - white and Asian</i>	2 (1%)
<i>Black or black British - other</i>	4 (2%)	<i>Mixed race - other</i> ...	5 (3%)
<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Arab</i>	1 (1%)
<i>Asian or Asian British - Pakistani</i>	2 (1%)	<i>Other ethnic group</i> ..	2 (1%)
<i>Asian or Asian British - Bangladeshi</i> .	3 (2%)		

- Q1.9 Do you consider yourself to be Gypsy/Romany/Traveller?**
 Yes..... 14 (8%)
 No 157 (92%)
- Q1.10 What is your religion?**
 None..... 36 (20%) *Hindu*..... 1 (1%)
 Church of England 41 (23%) *Jewish*..... 3 (2%)
 Catholic..... 46 (26%) *Muslim*..... 26 (15%)
 Protestant..... 1 (1%) *Sikh* 0 (0%)
 Other Christian denomination..... 17 (10%) *Other* 0 (0%)
 Buddhist..... 5 (3%)
- Q1.11 How would you describe your sexual orientation?**
Heterosexual/straight..... 171 (99%)
Homosexual/gay..... 0 (0%)
Bisexual 1 (1%)
- Q1.12 Do you consider yourself to have a disability (i.e. do you need help with any long term physical, mental or learning needs)?**
 Yes..... 28 (16%)
 No 147 (84%)
- Q1.13 Are you a veteran (ex-armed services)?**
 Yes..... 7 (4%)
 No 169 (96%)
- Q1.14 Is this your first time in prison?**
 Yes..... 107 (60%)
 No 70 (40%)
- Q1.15 Do you have children under the age of 18?**
 Yes..... 105 (59%)
 No 73 (41%)

Section 2: Courts, transfers and escorts

- Q2.1 On your most recent journey here, how long did you spend in the van?**
Less than 2 hours..... 11 (6%)
2 hours or longer 159 (90%)

Don't remember 7 (4%)

Q2.2 On your most recent journey here, were you offered anything to eat or drink?

My journey was less than two hours 11 (6%)
Yes..... 139 (79%)
No 21 (12%)
Don't remember 5 (3%)

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

My journey was less than two hours 11 (6%)
Yes..... 17 (10%)
No 147 (83%)
Don't remember 3 (2%)

Q2.4 On your most recent journey here, was the van clean?

Yes..... 126 (71%)
No 37 (21%)
Don't remember 14 (8%)

Q2.5 On your most recent journey here, did you feel safe?

Yes..... 135 (77%)
No 37 (21%)
Don't remember 4 (2%)

Q2.6 On your most recent journey here, how were you treated by the escort staff?

Very well 38 (21%)
Well..... 96 (54%)
Neither..... 30 (17%)
Badly 7 (4%)
Very badly 3 (2%)
Don't remember 4 (2%)

Q2.7 Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)

Yes, someone told me..... 85 (48%)
Yes, I received written information 81 (46%)
No, I was not told anything 18 (10%)
Don't remember 2 (1%)

Q2.8 When you first arrived here did your property arrive at the same time as you?

Yes..... 152 (86%)
No 23 (13%)
Don't remember 2 (1%)

Section 3: Reception, first night and induction

Q3.1 How long were you in reception?

Less than 2 hours..... 134 (75%)
2 hours or longer 29 (16%)
Don't remember 15 (8%)

Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes.....	155 (87%)
	No	15 (8%)
	Don't remember.....	8 (4%)
Q3.3	Overall, how were you treated in reception?	
	Very well	46 (26%)
	Well.....	98 (55%)
	Neither.....	22 (12%)
	Badly	10 (6%)
	Very badly.....	0 (0%)
	Don't remember	2 (1%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)	
	Loss of property.....	30 (17%)
	Housing problems	16 (9%)
	Contacting employers.....	3 (2%)
	Contacting family.....	39 (23%)
	Childcare.....	7 (4%)
	Money worries.....	24 (14%)
	Feeling depressed or suicidal.....	14 (8%)
	Physical health	17 (10%)
	Mental health	10 (6%)
	Needing protection from other prisoners	0 (0%)
	Getting phone numbers.....	35 (20%)
	Other	11 (6%)
	Did not have any problems	64 (37%)
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?	
	Yes.....	43 (26%)
	No	59 (36%)
	Did not have any problems.....	64 (39%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)	
	Tobacco	72 (41%)
	A shower.....	89 (51%)
	A free telephone call.....	27 (15%)
	Something to eat	109 (62%)
	PIN phone credit.....	45 (26%)
	Toiletries/basic items	105 (60%)
	Did not receive anything.....	33 (19%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)	
	Chaplain	93 (56%)
	Someone from health services.....	125 (75%)
	A Listener/Samaritans	69 (42%)
	Prison shop/canteen.....	57 (34%)
	Did not have access to any of these.....	24 (14%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)	
	What was going to happen to you	98 (58%)

<i>What support was available for people feeling depressed or suicidal.....</i>	78 (46%)
<i>How to make routine requests (applications).....</i>	94 (56%)
<i>Your entitlement to visits</i>	78 (46%)
<i>Health services</i>	109 (64%)
<i>Chaplaincy.....</i>	98 (58%)
Not offered any information	35 (21%)

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

Yes.....	150 (85%)
No	18 (10%)
Don't remember	9 (5%)

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

Have not been on an induction course	11 (6%)
<i>Within the first week.....</i>	<i>119 (67%)</i>
<i>More than a week.....</i>	<i>42 (24%)</i>
<i>Don't remember</i>	<i>6 (3%)</i>

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

Have not been on an induction course	11 (6%)
Yes.....	109 (63%)
No	40 (23%)
Don't remember	14 (8%)

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

Did not receive an assessment.....	8 (5%)
<i>Within the first week.....</i>	<i>52 (30%)</i>
<i>More than a week.....</i>	<i>93 (53%)</i>
<i>Don't remember</i>	<i>22 (13%)</i>

Section 4: Legal rights and respectful custody

Q4.1 How easy is it to:

	Very easy	Easy	Neither	Difficult	Very difficult	N/A
<i>Communicate with your solicitor / legal representative?</i>	21 (13%)	65 (40%)	18 (11%)	9 (5%)	18 (11%)	33 (20%)
<i>Attend legal visits?</i>	13 (9%)	44 (30%)	14 (10%)	7 (5%)	18 (12%)	51 (35%)
<i>Get bail information?</i>	3 (2%)	12 (9%)	16 (12%)	4 (3%)	14 (10%)	87 (64%)

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.....	40 (23%)
Yes.....	50 (29%)
No	83 (48%)

Q4.3 Can you get legal books in the library?

Yes.....	93 (53%)
----------	----------

No 11 (6%)
 Don't know..... 71 (41%)

Q4.4 Please answer the following questions about the wing/unit you are currently living on:

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	126 (74%)	41 (24%)	4 (2%)
Are you normally able to have a shower every day?	175 (99%)	2 (1%)	0 (0%)
Do you normally receive clean sheets every week?	161 (91%)	13 (7%)	2 (1%)
Do you normally get cell cleaning materials every week?	160 (91%)	14 (8%)	1 (1%)
Is your cell call bell normally answered within five minutes?	23 (24%)	22 (23%)	52 (54%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	122 (71%)	49 (28%)	2 (1%)
If you need to, can you normally get your stored property?	38 (22%)	83 (49%)	48 (28%)

Q4.5 What is the food like here?

Very good 7 (4%)
 Good..... 27 (15%)
 Neither..... 36 (20%)
 Bad 57 (32%)
 Very bad..... 50 (28%)

Q4.6 Does the shop/canteen sell a wide enough range of goods to meet your needs?

Have not bought anything yet/ don't know 2 (1%)
 Yes..... 70 (40%)
 No 104 (59%)

Q4.7 Can you speak to a Listener at any time if you want to?

Yes..... 94 (53%)
 No 8 (5%)
 Don't know..... 74 (42%)

Q4.8 Are your religious beliefs respected?

Yes..... 99 (57%)
 No 18 (10%)
 Don't know/N/A 58 (33%)

Q4.9 Are you able to speak to a Chaplain of your faith in private if you want to?

Yes..... 109 (62%)
 No 13 (7%)
 Don't know/N/A 53 (30%)

Q4.10 How easy or difficult is it for you to attend religious services?

I don't want to attend..... 36 (21%)
 Very easy..... 58 (33%)
 Easy..... 43 (25%)

Neither.....	10 (6%)
Difficult	4 (2%)
Very difficult.....	2 (1%)
Don't know.....	22 (13%)

Section 5: Applications and complaints

Q5.1 Is it easy to make an application?

Yes.....	152 (87%)
No	13 (7%)
Don't know.....	9 (5%)

Q5.2 Please answer the following questions about applications: (If you have not made an application please tick the 'not made one' option.)

	Not made one	Yes	No
Are applications dealt with fairly?	17 (10%)	82 (49%)	68 (41%)
Are applications dealt with quickly (within seven days)?	17 (11%)	81 (52%)	58 (37%)

Q5.3 Is it easy to make a complaint?

Yes.....	109 (62%)
No	29 (17%)
Don't know.....	37 (21%)

Q5.4 Please answer the following questions about complaints: (If you have not made a complaint please tick the 'not made one' option.)

	Not made one	Yes	No
Are complaints dealt with fairly?	65 (38%)	31 (18%)	74 (44%)
Are complaints dealt with quickly (within seven days)?	65 (38%)	56 (33%)	48 (28%)

Q5.5 Have you ever been prevented from making a complaint when you wanted to?

Yes.....	26 (16%)
No	139 (84%)

Q5.6 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

Don't know who they are	50 (30%)
Very easy.....	13 (8%)
Easy.....	45 (27%)
Neither.....	36 (22%)
Difficult	12 (7%)
Very difficult.....	8 (5%)

Section 6: Incentive and earned privileges scheme

Q6.1 Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)

Don't know what the IEP scheme is	10 (6%)
Yes	84 (49%)

No 56 (33%)
 Don't know..... 22 (13%)

Q6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)

Don't know what the IEP scheme is 10 (6%)
 Yes..... 70 (42%)
 No 66 (40%)
 Don't know..... 19 (12%)

Q6.3 In the last six months have any members of staff physically restrained you (C&R)?

Yes..... 3 (2%)
 No 169 (98%)

Q6.4 If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?

I have not been to segregation in the last 6 months 152 (92%)
 Very well 3 (2%)
 Well..... 3 (2%)
 Neither..... 6 (4%)
 Badly 0 (0%)
 Very badly..... 2 (1%)

Section 7: Relationships with staff

Q7.1 Do most staff treat you with respect?

Yes..... 135 (78%)
 No 38 (22%)

Q7.2 Is there a member of staff you can turn to for help if you have a problem?

Yes..... 127 (74%)
 No 45 (26%)

Q7.3 Has a member of staff checked on you personally in the last week to see how you are getting on?

Yes..... 48 (28%)
 No 123 (72%)

Q7.4 How often do staff normally speak to you during association?

Do not go on association..... 12 (7%)
 Never..... 37 (21%)
 Rarely..... 49 (28%)
 Some of the time 47 (27%)
 Most of the time 20 (11%)
 All of the time 10 (6%)

Q7.5 When did you first meet your personal (named) officer?

I have not met him/her 57 (32%)
 In the first week..... 43 (24%)
 More than a week..... 45 (26%)

Don't remember 31 (18%)

Q7.6 How helpful is your personal (named) officer?
Do not have a personal officer/I have not met him/her 57 (33%)
 Very helpful 34 (20%)
 Helpful 36 (21%)
 Neither 26 (15%)
 Not very helpful 8 (5%)
 Not at all helpful 11 (6%)

Section 8: Safety

Q8.1 Have you ever felt unsafe here?
 Yes 48 (27%)
 No 130 (73%)

Q8.2 Do you feel unsafe now?
 Yes 17 (10%)
 No 157 (90%)

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

Never felt unsafe .. 130 (76%)	<i>At mealtimes</i> 12 (7%)
<i>Everywhere</i> 8 (5%)	<i>At health services</i> 7 (4%)
<i>Segregation unit</i> 2 (1%)	<i>Visits area</i> 4 (2%)
<i>Association areas</i> ... 6 (4%)	<i>In wing showers</i> 8 (5%)
<i>Reception area</i> 1 (1%)	<i>In gym showers</i> 2 (1%)
<i>At the gym</i> 2 (1%)	<i>In corridors/stairwells</i> . 8 (5%)
<i>In an exercise yard</i> . 7 (4%)	<i>On your landing/wing</i> . 12 (7%)
<i>At work</i> 7 (4%)	<i>In your cell</i> 10 (6%)
<i>During movement</i> ... 4 (2%)	<i>At religious services</i> ... 6 (4%)
<i>At education</i> 0 (0%)	

Q8.4 Have you been victimised by other prisoners here?
 Yes 32 (18%)
 No 145 (82%)

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

<i>Insulting remarks (about you or your family or friends)</i> 11 (6%)
<i>Physical abuse (being hit, kicked or assaulted)</i> 2 (1%)
<i>Sexual abuse</i> 1 (1%)
<i>Feeling threatened or intimidated</i> 11 (6%)
<i>Having your canteen/property taken</i> 2 (1%)
<i>Medication</i> 3 (2%)
<i>Debt</i> 2 (1%)
<i>Drugs</i> 2 (1%)
<i>Your race or ethnic origin</i> 10 (6%)
<i>Your religion/religious beliefs</i> 7 (4%)
<i>Your nationality</i> 6 (3%)

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

Q8.6 Have you been victimised by staff here?

Yes	45 (26%)
No	129 (74%)

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

Insulting remarks (about you or your family or friends)	9 (5%)
Physical abuse (being hit, kicked or assaulted).....	1 (1%)
Sexual abuse	0 (0%)
Feeling threatened or intimidated	19 (11%)
Medication	4 (2%)
Debt.....	0 (0%)
Drugs.....	2 (1%)
Your race or ethnic origin.....	15 (9%)
Your religion/religious beliefs.....	6 (3%)
Your nationality.....	6 (3%)
You are from a different part of the country than others	2 (1%)
You are from a traveller community	1 (1%)
Your sexual orientation.....	0 (0%)
Your age	2 (1%)
You have a disability.....	4 (2%)
You were new here.....	4 (2%)
Your offence/crime.....	6 (3%)
Gang related issues.....	1 (1%)

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

Not been victimised	117 (69%)
Yes.....	23 (14%)
No	29 (17%)

Section 9: Health services

Q9.1 How easy or difficult is it to see the following people?

	Don't know	Very easy	Easy	Neither	Difficult	Very difficult
The doctor	9 (5%)	30 (17%)	77 (44%)	21 (12%)	20 (11%)	17 (10%)
The nurse	9 (5%)	31 (18%)	81 (48%)	23 (14%)	13 (8%)	12 (7%)
The dentist	16 (9%)	7 (4%)	13 (8%)	11 (6%)	44 (26%)	79 (46%)

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

	Not been	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
The doctor	12 (7%)	29 (17%)	59 (34%)	41 (24%)	11 (6%)	20 (12%)
The nurse	11 (6%)	32 (19%)	69 (40%)	26 (15%)	13 (8%)	20 (12%)
The dentist	33 (20%)	21 (13%)	36 (22%)	23 (14%)	12 (7%)	41 (25%)

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

Not been	4 (2%)
<i>Very good</i>	18 (10%)
<i>Good</i>	64 (37%)
<i>Neither</i>	38 (22%)
<i>Bad</i>	33 (19%)
<i>Very bad</i>	16 (9%)

Q9.4 Are you currently taking medication?

Yes	77 (44%)
No	100 (56%)

Q9.5 If you are taking medication, are you allowed to keep some/all of it in your own cell?

Not taking medication	100 (57%)
Yes, all my meds	59 (34%)
Yes, some of my meds	14 (8%)
No	2 (1%)

Q9.6 Do you have any emotional or mental health problems?

Yes	33 (19%)
No	143 (81%)

Q9.7 Are you being helped/supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?

Do not have any emotional or mental health problems	143 (84%)
Yes	10 (6%)
No	18 (11%)

Section 10: Drugs and alcohol

Q10.1 Did you have a problem with drugs when you came into this prison?

Yes	13 (7%)
No	164 (93%)

Q10.2 Did you have a problem with alcohol when you came into this prison?

Yes	12 (7%)
No	164 (93%)

Q10.3 Is it easy or difficult to get illegal drugs in this prison?

Very easy	15 (9%)
-----------	---------

Easy.....	22 (13%)
Neither.....	9 (5%)
Difficult	1 (1%)
Very difficult.....	1 (1%)
Don't know.....	126 (72%)

Q10.4 Is it easy or difficult to get alcohol in this prison?

Very easy.....	10 (6%)
Easy.....	12 (7%)
Neither.....	10 (6%)
Difficult	6 (3%)
Very difficult.....	3 (2%)
Don't know.....	132 (76%)

Q10.5 Have you developed a problem with illegal drugs since you have been in this prison?

Yes.....	2 (1%)
No	174 (99%)

Q10.6 Have you developed a problem with diverted medication since you have been in this prison?

Yes.....	6 (3%)
No	169 (97%)

Q10.7 Have you received any support or help (e.g. substance misuse teams) for your drug problem, while in this prison?

<i>Did not/do not have a drug problem</i>	159 (90%)
Yes.....	9 (5%)
No	8 (5%)

Q10.8 Have you received any support or help (e.g. substance misuse teams) for your alcohol problem, while in this prison?

<i>Did not/do not have an alcohol problem</i>	164 (93%)
Yes.....	8 (5%)
No	4 (2%)

Q10.9 Was the support or help you received, whilst in this prison, helpful?

<i>Did not have a problem/did not receive help</i>	162 (94%)
Yes.....	10 (6%)
No	1 (1%)

Section 11: Activities

Q11.1 How easy or difficult is it to get into the following activities, in this prison?

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
Prison job	8 (5%)	22 (13%)	49 (29%)	36 (21%)	37 (22%)	16 (10%)
Vocational or skills training	18 (11%)	14 (9%)	33 (20%)	22 (14%)	47 (29%)	28 (17%)
Education (including basic skills)	15 (9%)	16 (10%)	53 (33%)	25 (15%)	35 (22%)	18 (11%)

Offending behaviour programmes	60 (38%)	11 (7%)	29 (18%)	13 (8%)	22 (14%)	22 (14%)
--------------------------------	-------------	---------	-------------	------------	-------------	-------------

Q11.2 Are you currently involved in the following? (Please tick all that apply to you.)

Not involved in any of these	22 (13%)
Prison job.....	120 (70%)
Vocational or skills training.....	29 (17%)
Education (including basic skills).....	53 (31%)
Offending behaviour programmes.....	24 (14%)

Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?

	Not been involved	Yes	No	Don't know
Prison job	11 (7%)	49 (33%)	72 (49%)	16 (11%)
Vocational or skills training	25 (21%)	47 (39%)	34 (29%)	13 (11%)
Education (including basic skills)	20 (14%)	64 (46%)	42 (30%)	12 (9%)
Offending behaviour programmes	37 (31%)	38 (32%)	30 (25%)	15 (13%)

Q11.4 How often do you usually go to the library?

Don't want to go	6 (4%)
Never.....	8 (5%)
Less than once a week.....	38 (22%)
About once a week.....	54 (32%)
More than once a week.....	64 (38%)

Q11.5 Does the library have a wide enough range of materials to meet your needs?

Don't use it	13 (8%)
Yes.....	95 (56%)
No.....	62 (36%)

Q11.6 How many times do you usually go to the gym each week?

Don't want to go	28 (16%)
0.....	26 (15%)
1 to 2.....	92 (53%)
3 to 5.....	22 (13%)
More than 5.....	5 (3%)

Q11.7 How many times do you usually go outside for exercise each week?

Don't want to go	6 (3%)
0.....	11 (6%)
1 to 2.....	41 (24%)
3 to 5.....	40 (23%)
More than 5.....	75 (43%)

Q11.8 How many times do you usually have association each week?

Don't want to go	7 (4%)
0.....	4 (2%)
1 to 2.....	8 (5%)
3 to 5.....	9 (5%)
More than 5.....	144 (84%)

Q11.9	How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)	
	<i>Less than 2 hours</i>	4 (2%)
	<i>2 to less than 4 hours</i>	16 (9%)
	<i>4 to less than 6 hours</i>	24 (14%)
	<i>6 to less than 8 hours</i>	21 (12%)
	<i>8 to less than 10 hours</i>	28 (16%)
	<i>10 hours or more</i>	63 (37%)
	<i>Don't know</i>	14 (8%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	49 (29%)
	<i>No</i>	120 (71%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	74 (43%)
	<i>No</i>	97 (57%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	26 (15%)
	<i>No</i>	147 (85%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	35 (20%)
	<i>Very easy</i>	4 (2%)
	<i>Easy</i>	11 (6%)
	<i>Neither</i>	7 (4%)
	<i>Difficult</i>	20 (12%)
	<i>Very difficult</i>	89 (51%)
	<i>Don't know</i>	7 (4%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	128 (76%)
	<i>No</i>	41 (24%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)	
	<i>Not sentenced/N/A</i>	41 (24%)
	<i>No contact</i>	48 (28%)
	<i>Letter</i>	49 (29%)
	<i>Phone</i>	31 (18%)
	<i>Visit</i>	30 (18%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	138 (84%)

	No	27 (16%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	0 (0%)
	Yes.....	141 (82%)
	No	30 (18%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/not sentenced	30 (18%)
	<i>Very involved</i>	47 (28%)
	<i>Involved</i>	46 (27%)
	<i>Neither</i>	16 (10%)
	<i>Not very involved</i>	12 (7%)
	<i>Not at all involved</i>	17 (10%)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)	
	Do not have a sentence plan/not sentenced	30 (18%)
	<i>Nobody</i>	57 (35%)
	<i>Offender supervisor</i>	56 (34%)
	<i>Offender manager</i>	27 (16%)
	<i>Named/ personal officer</i>	18 (11%)
	<i>Staff from other departments</i>	13 (8%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/not sentenced	30 (18%)
	Yes.....	99 (58%)
	No	25 (15%)
	<i>Don't know</i>	16 (9%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	Do not have a sentence plan/ not sentenced	30 (18%)
	Yes.....	39 (23%)
	No	76 (45%)
	<i>Don't know</i>	25 (15%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	Do not have a sentence plan/not sentenced	30 (18%)
	Yes.....	30 (18%)
	No	66 (40%)
	<i>Don't know</i>	41 (25%)
Q13.10	Do you have a needs based custody plan?	
	Yes	10 (6%)
	No	86 (52%)
	<i>Don't know</i>	69 (42%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes.....	26 (16%)
	No	137 (84%)

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

	<i>Do not need help</i>	Yes	No
Employment	40 (25%)	25 (16%)	93 (59%)
Accommodation	43 (28%)	21 (14%)	90 (58%)
Benefits	39 (25%)	22 (14%)	93 (60%)
Finances	42 (28%)	17 (11%)	93 (61%)
Education	48 (31%)	24 (16%)	81 (53%)
Drugs and alcohol	62 (42%)	23 (16%)	63 (43%)

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

<i>Not sentenced</i>	0 (0%)
Yes.....	79 (50%)
No	78 (50%)

Main comparator and comparator to last time



Prisoner survey responses HMP The Verne 2012

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 Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		178	5754	178	119
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	2%	1%	1%
1.3	Are you sentenced?	100%	100%	100%	99%
1.3	Are you on recall?	4%	10%	4%	5%
1.4	Is your sentence less than 12 months?	1%	5%	1%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	4%	10%	4%	2%
1.5	Are you a foreign national?	36%	9%	36%	60%
1.6	Do you understand spoken English?	98%	99%	98%	
1.7	Do you understand written English?	94%	99%	94%	
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	43%	24%	43%	55%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	8%	4%	8%	
1.1	Are you Muslim?	15%	11%	15%	8%
1.11	Are you homosexual/gay or bisexual?	1%	3%	1%	5%
1.12	Do you consider yourself to have a disability?	16%	17%	16%	6%
1.13	Are you a veteran (ex-armed services)?	4%	6%	4%	
1.14	Is this your first time in prison?	60%	34%	60%	65%
1.15	Do you have any children under the age of 18?	59%	51%	59%	64%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	90%	44%	90%	81%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	84%	69%	84%	
2.3	Were you offered a toilet break?	10%	9%	10%	
2.4	Was the van clean?	71%	67%	71%	
2.5	Did you feel safe?	77%	82%	77%	
2.6	Were you treated well/very well by the escort staff?	75%	68%	75%	76%
2.7	Before you arrived here were you told that you were coming here?	48%	61%	48%	
2.7	Before you arrived here did you receive any written information about coming here?	46%	17%	46%	
2.8	When you first arrived here did your property arrive at the same time as you?	86%	89%	86%	86%

Main comparator and comparator to last time

Key to tables

		HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	75%	51%	75%	
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	82%	87%	81%
3.3	Were you treated well/very well in reception?	81%	71%	81%	81%
	When you first arrived:				
3.4	Did you have any problems?	63%	61%	63%	51%
3.4	Did you have any problems with loss of property?	17%	17%	17%	12%
3.4	Did you have any housing problems?	9%	15%	9%	15%
3.4	Did you have any problems contacting employers?	2%	3%	2%	2%
3.4	Did you have any problems contacting family?	23%	21%	23%	27%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	3%	4%	11%
3.4	Did you have any money worries?	14%	14%	14%	18%
3.4	Did you have any problems with feeling depressed or suicidal?	8%	13%	8%	6%
3.4	Did you have any physical health problems?	10%	11%	10%	
3.4	Did you have any mental health problems?	6%	11%	6%	
3.4	Did you have any problems with needing protection from other prisoners?	0%	5%	0%	1%
3.4	Did you have problems accessing phone numbers?	20%	20%	20%	
	For those with problems:				
3.5	Did you receive any help/support from staff in dealing with these problems?	42%	39%	42%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	41%	81%	41%	77%
3.6	A shower?	51%	32%	51%	63%
3.6	A free telephone call?	15%	44%	15%	43%
3.6	Something to eat?	62%	69%	62%	84%
3.6	PIN phone credit?	26%	54%	26%	
3.6	Toiletries/basic items?	60%	43%	60%	

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better		HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
SECTION 3: Reception, first night and induction continued					
When you first arrived here did you have access to the following people:					
3.7	The chaplain or a religious leader?	56%	52%	56%	
3.7	Someone from health services?	75%	71%	75%	
3.7	A Listener/Samaritans?	42%	35%	42%	
3.7	Prison shop/ canteen?	34%	16%	34%	35%
When you first arrived here were you offered information about any of the following:					
3.8	What was going to happen to you?	58%	53%	58%	60%
3.8	Support was available for people feeling depressed or suicidal?	46%	46%	46%	45%
3.8	How to make routine requests?	56%	44%	56%	57%
3.8	Your entitlement to visits?	46%	45%	46%	57%
3.8	Health services?	65%	57%	65%	
3.8	The chaplaincy?	58%	50%	58%	
3.9	Did you feel safe on your first night here?	85%	83%	85%	91%
3.10	Have you been on an induction course?	94%	93%	94%	94%
For those who have been on an induction course:					
3.11	Did the course cover everything you needed to know about the prison?	67%	65%	67%	84%
3.12	Did you receive an education (skills for life) assessment?	96%	84%	96%	
SECTION 4: Legal rights and respectful custody					
In terms of your legal rights, is it easy/very easy to:					
4.1	Communicate with your solicitor or legal representative?	53%	48%	53%	61%
4.1	Attend legal visits?	39%	53%	39%	61%
4.1	Get bail information?	11%	15%	11%	23%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	29%	42%	29%	30%
4.3	Can you get legal books in the library?	53%	46%	53%	
For the wing/unit you are currently on:					
4.4	Are you normally offered enough clean, suitable clothes for the week?	74%	63%	74%	83%
4.4	Are you normally able to have a shower every day?	99%	91%	99%	100%
4.4	Do you normally receive clean sheets every week?	91%	81%	91%	92%
4.4	Do you normally get cell cleaning materials every week?	91%	73%	91%	91%
4.4	Is your cell call bell normally answered within five minutes?	24%	41%	24%	60%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71%	71%	71%	75%
4.4	Can you normally get your stored property, if you need to?	22%	29%	22%	39%
4.5	Is the food in this prison good/very good?	19%	29%	19%	32%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	46%	40%	48%
4.7	Are you able to speak to a Listener at any time if you want to?	53%	58%	53%	80%
4.8	Are your religious beliefs are respected?	57%	53%	57%	73%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	62%	58%	62%	73%
4.10	Is it easy/very easy to attend religious services?	58%	53%	58%	

Main comparator and comparator to last time

Key to tables

		HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	87%	86%	87%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	55%	63%	55%	79%
5.2	Do you feel applications are dealt with quickly (within seven days)?	58%	51%	58%	76%
5.3	Is it easy to make a complaint?	62%	63%	62%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	30%	34%	30%	57%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	54%	39%	54%	65%
5.5	Have you ever been prevented from making a complaint when you wanted to?	16%	17%	16%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	35%	31%	35%	45%
SECTION 6: Incentive and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	49%	55%	49%	61%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	47%	42%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	5%	2%	4%
6.4	In the last six months, if you have spent a night in the segregation/care and separation unit, were you treated very well/well by staff?	44%	44%	44%	
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	78%	77%	78%	82%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	74%	76%	74%	78%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	28%	31%	28%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	17%	20%	17%	25%
7.5	Do you have a personal officer?	68%	75%	68%	90%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	61%	64%	61%	67%

Main comparator and comparator to last time

Key to tables

		HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	27%	31%	27%	13%
8.2	Do you feel unsafe now?	10%	13%	10%	8%
8.4	Have you been victimised by other prisoners here?	18%	20%	18%	13%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	6%	9%	6%	5%
8.5	Hit, kicked or assaulted you?	1%	5%	1%	4%
8.5	Sexually abused you?	1%	1%	1%	1%
8.5	Threatened or intimidated you?	6%	13%	6%	
8.5	Taken your canteen/property?	1%	4%	1%	2%
8.5	Victimised you because of medication?	2%	3%	2%	
8.5	Victimised you because of debt?	1%	3%	1%	
8.5	Victimised you because of drugs?	1%	2%	1%	2%
8.5	Victimised you because of your race or ethnic origin?	6%	3%	6%	5%
8.5	Victimised you because of your religion/religious beliefs?	4%	2%	4%	3%
8.5	Victimised you because of your nationality?	3%	2%	3%	
8.5	Victimised you because you were from a different part of the country?	1%	4%	1%	6%
8.5	Victimised you because you are from a traveller community?	2%	1%	2%	
8.5	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.5	Victimised you because of your age?	1%	2%	1%	
8.5	Victimised you because you have a disability?	3%	2%	3%	3%
8.5	Victimised you because you were new here?	2%	4%	2%	4%
8.5	Victimised you because of your offence/crime?	2%	4%	2%	
8.5	Victimised you because of gang related issues?	1%	3%	1%	

Main comparator and comparator to last time

Key to tables

		HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	26%	25%	26%	21%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	5%	10%	5%	7%
8.7	Hit, kicked or assaulted you?	1%	2%	1%	1%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	11%	12%	11%	
8.7	Victimised you because of medication?	2%	3%	2%	
8.7	Victimised you because of debt?	0%	2%	0%	
8.7	Victimised you because of drugs?	1%	3%	1%	1%
8.7	Victimised you because of your race or ethnic origin?	9%	5%	9%	3%
8.7	Victimised you because of your religion/religious beliefs?	4%	3%	4%	1%
8.7	Victimised you because of your nationality?	4%	2%	4%	
8.7	Victimised you because you were from a different part of the country?	1%	4%	1%	3%
8.7	Victimised you because you are from a traveller community?	1%	1%	1%	
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	2%
8.7	Victimised you because of your age?	1%	2%	1%	
8.7	Victimised you because you have a disability?	2%	2%	2%	3%
8.7	Victimised you because you were new here?	2%	5%	2%	2%
8.7	Victimised you because of your offence/crime?	4%	4%	4%	
8.7	Victimised you because of gang related issues?	1%	2%	1%	
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	44%	38%	44%	41%

Main comparator and comparator to last time

Key to tables

		HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	62%	35%	62%	
9.1	Is it easy/very easy to see the nurse?	66%	58%	66%	
9.1	Is it easy/very easy to see the dentist?	12%	14%	12%	
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	55%	49%	55%	61%
9.2	The nurse?	63%	62%	63%	78%
9.2	The dentist?	43%	42%	43%	56%
9.3	The overall quality of health services?	49%	45%	49%	56%
9.4	Are you currently taking medication?	44%	46%	44%	40%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	97%	86%	97%	
9.6	Do you have any emotional well being or mental health problems?	19%	25%	19%	
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	36%	50%	36%	
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	7%	23%	7%	5%
10.2	Did you have a problem with alcohol when you came into this prison?	7%	18%	7%	3%
10.3	Is it easy/very easy to get illegal drugs in this prison?	21%	30%	21%	7%
10.4	Is it easy/very easy to get alcohol in this prison?	13%	18%	13%	
10.5	Have you developed a problem with drugs since you have been in this prison?	1%	7%	1%	
10.6	Have you developed a problem with diverted medication since you have been in this prison?	4%	7%	4%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	54%	64%	54%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	67%	63%	67%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	92%	80%	92%	

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better	HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
Any percentage highlighted in blue is significantly worse				
Any percentage highlighted in orange shows a significant difference in prisoners' background details				
Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities				
Is it very easy/ easy to get into the following activities:				
11.1 A prison job?	42%	45%	42%	
11.1 Vocational or skills training?	29%	38%	29%	
11.1 Education (including basic skills)?	43%	51%	43%	
11.1 Offending behaviour programmes?	26%	19%	26%	
Are you currently involved in any of the following activities:				
11.2 A prison job?	70%	61%	70%	
11.2 Vocational or skills training?	17%	18%	17%	
11.2 Education (including basic skills)?	31%	28%	31%	
11.2 Offending Behaviour Programmes?	14%	15%	14%	
11.3 Have you had a job while in this prison?	93%	85%	93%	
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	36%	45%	36%	
11.3 Have you been involved in vocational or skills training while in this prison?	79%	76%	79%	
For those who have had vocational or skills training while in this prison:				
11.3 Do you feel the vocational or skills training will help you on release?	50%	63%	50%	
11.3 Have you been involved in education while in this prison?	86%	81%	86%	
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	54%	64%	54%	
11.3 Have you been involved in offending behaviour programmes while in this prison?	69%	75%	69%	
For those who have been involved in offending behaviour programmes while in this prison:				
11.3 Do you feel the offending behaviour programme(s) will help you on release?	46%	56%	46%	
11.4 Do you go to the library at least once a week?	69%	48%	69%	78%
11.5 Does the library have a wide enough range of materials to meet your needs?	56%	52%	56%	
11.6 Do you go to the gym three or more times a week?	16%	37%	16%	19%
11.7 Do you go outside for exercise three or more times a week?	67%	47%	67%	83%
11.8 Do you go on association more than five times each week?	84%	78%	84%	87%
11.9 Do you spend ten or more hours out of your cell on a weekday?	37%	14%	37%	40%
SECTION 12: Friends and family				
12.1 Have staff supported you and helped you to maintain contact with family/friends while in this prison?	29%	36%	29%	
12.2 Have you had any problems with sending or receiving mail?	43%	45%	43%	20%
12.3 Have you had any problems getting access to the telephones?	15%	26%	15%	14%
12.4 Is it easy/ very easy for your friends and family to get here?	8%	25%	8%	

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP The Verne 2012	Category C training prisons comparator	HMP The Verne 2012	HMP The Verne 2007
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	76%	83%	76%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	37%	33%	37%	
13.2	Contact by letter?	37%	38%	37%	
13.2	Contact by phone?	24%	25%	24%	
13.2	Contact by visit?	23%	25%	23%	
13.3	Do you have a named offender supervisor in this prison?	84%	66%	84%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	82%	73%	82%	82%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	67%	56%	67%	69%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	42%	45%	42%	
13.6	Offender supervisor?	41%	35%	41%	
13.6	Offender manager?	19%	28%	19%	
13.6	Named/ personal officer?	13%	15%	13%	
13.6	Staff from other departments?	10%	19%	10%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	71%	69%	71%	76%
13.8	Are there plans for you to achieve any of your targets in another prison?	28%	21%	28%	
13.9	Are there plans for you to achieve any of your targets in the community?	22%	28%	22%	
13.10	Do you have a needs based custody plan?	6%	7%	6%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	16%	18%	16%	
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	21%	37%	21%	
13.12	Accommodation?	19%	42%	19%	
13.12	Benefits?	19%	44%	19%	
13.12	Finances?	15%	32%	15%	
13.12	Education?	23%	41%	23%	
13.12	Drugs and alcohol?	27%	49%	27%	
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	50%	56%	50%	72%

Diversity Analysis



Key question responses (ethnicity, nationality and religion) HMP The Verne 2012

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

Key to tables

Any percentage highlighted in green is significantly better		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							
Number of completed questionnaires returned		75	100	64	112	26	150
1.3	Are you sentenced?	100%	100%	100%	100%	100%	100%
1.5	Are you a foreign national?	46%	28%			35%	37%
1.6	Do you understand spoken English?	97%	99%	94%	100%	97%	98%
1.7	Do you understand written English?	93%	96%	86%	99%	92%	95%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?			55%	36%	88%	34%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	9%	8%	13%	5%	0%	10%
1.1	Are you Muslim?	30%	3%	14%	15%		
1.12	Do you consider yourself to have a disability?	19%	14%	10%	20%	27%	14%
1.13	Are you a veteran (ex-armed services)?	1%	6%	6%	3%	0%	5%
1.14	Is this your first time in prison?	69%	53%	83%	47%	76%	58%
2.6	Were you treated well/very well by the escort staff?	72%	78%	70%	78%	69%	76%
2.7	Before you arrived here were you told that you were coming here?	40%	53%	44%	51%	38%	50%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	91%	88%	87%	97%	85%
3.3	Were you treated well/very well in reception?	73%	87%	80%	81%	73%	83%
3.4	Did you have any problems when you first arrived?	70%	58%	54%	67%	80%	59%
3.7	Did you have access to someone from healthcare when you first arrived here?	75%	76%	75%	75%	77%	75%
3.9	Did you feel safe on your first night here?	76%	91%	83%	86%	73%	87%
3.10	Have you been on an induction course?	92%	95%	89%	97%	97%	93%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	47%	56%	44%	57%	48%	53%

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						
4.4	Are you normally offered enough clean, suitable clothes for the week?	63%	81%	72%	74%	54%	78%
4.4	Are you normally able to have a shower every day?	99%	99%	100%	98%	97%	99%
4.4	Is your cell call bell normally answered within five minutes?	27%	21%	31%	18%	5%	29%
4.5	Is the food in this prison good/very good?	19%	20%	25%	15%	20%	20%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	33%	45%	45%	36%	28%	42%
4.7	Are you able to speak to a Listener at any time if you want to?	45%	60%	50%	55%	38%	55%
4.8	Do you feel your religious beliefs are respected?	57%	56%	63%	52%	44%	59%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	72%	61%	62%	48%	64%
5.1	Is it easy to make an application?	83%	91%	85%	89%	65%	91%
5.3	Is it easy to make a complaint?	53%	69%	52%	68%	58%	63%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	59%	43%	52%	35%	51%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	35%	48%	44%	41%	32%	45%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	1%	2%	4%	1%	4%	2%
7.1	Do most staff, in this prison, treat you with respect?	71%	85%	74%	80%	56%	82%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	68%	79%	79%	71%	54%	77%
7.3	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	14%	20%	25%	12%	4%	20%
7.4	Do you have a personal officer?	62%	72%	64%	69%	58%	70%
8.1	Have you ever felt unsafe here?	36%	21%	28%	27%	35%	25%
8.2	Do you feel unsafe now?	15%	6%	13%	8%	23%	8%
8.3	Have you been victimised by other prisoners?	26%	13%	28%	13%	31%	15%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	11%	3%	11%	4%	15%	8%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	11%	2%	6%	5%	12%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	7%	2%	1%	5%	15%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	2%	5%	3%	4%	3%
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	3%	0%	5%	8%	2%

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												
8.6	Have you been victimised by a member of staff?	36%	19%	23%	28%	44%	22%						
8.7	Have you ever felt threatened or intimidated by staff here?	15%	8%	7%	14%	16%	9%						
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	17%	3%	10%	8%	21%	5%						
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	7%	1%	0%	5%	24%	0%						
8.7	Have you been victimised because of your nationality? (By staff)	7%	1%	4%	4%	8%	3%						
8.7	Have you been victimised because you have a disability? (By staff)	3%	2%	0%	4%	8%	1%						
9.1	Is it easy/very easy to see the doctor?	56%	66%	62%	61%	47%	64%						
9.1	Is it easy/ very easy to see the nurse?	64%	68%	60%	69%	65%	67%						
9.4	Are you currently taking medication?	47%	41%	36%	48%	50%	42%						
9.6	Do you feel you have any emotional wellbeing/mental health issues?	23%	16%	13%	23%	23%	17%						
10.3	Is it easy/very easy to get illegal drugs in this prison?	20%	23%	13%	27%	28%	20%						
11.2	Are you currently working in the prison?	67%	72%	65%	73%	46%	74%						
11.2	Are you currently undertaking vocational or skills training?	14%	19%	19%	16%	13%	18%						
11.2	Are you currently in education (including basic skills)?	39%	25%	49%	21%	42%	30%						
11.2	Are you currently taking part in an offending behaviour programme?	11%	16%	8%	18%	9%	15%						
11.4	Do you go to the library at least once a week?	68%	71%	67%	70%	54%	72%						
11.6	do you go to the gym three or more times a week?	13%	18%	11%	16%	4%	18%						
11.7	Do you go outside for exercise three or more times a week?	61%	71%	61%	69%	67%	67%						
11.8	On average, do you go on association more than five times each week?	80%	87%	75%	88%	91%	82%						
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	34%	40%	28%	43%	42%	36%						
12.2	Have you had any problems sending or receiving mail?	43%	43%	30%	51%	58%	40%						
12.3	Have you had any problems getting access to the telephones?	19%	13%	13%	16%	21%	13%						

Diversity Analysis



Key question responses (disability, age over 50) HMP The Verne 2012

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

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		28	147	35	143
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	22%	40%	27%	40%
1.6	Do you understand spoken English?	97%	98%	100%	97%
1.7	Do you understand written English?	89%	95%	94%	94%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	50%	41%	37%	44%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	11%	8%	9%	8%
1.1	Are you Muslim?	26%	13%	9%	16%
1.12	Do you consider yourself to have a disability?	-	-	35%	12%
1.13	Are you a veteran (ex-armed services)?	8%	4%	6%	4%
1.14	Is this your first time in prison?	46%	64%	60%	60%
2.6	Were you treated well/very well by the escort staff?	68%	78%	83%	74%
2.7	Before you arrived here were you told that you were coming here?	50%	48%	63%	44%
3.2	When you were searched in reception, was this carried out in a respectful way?	89%	88%	89%	87%
3.3	Were you treated well/very well in reception?	82%	82%	91%	78%
3.4	Did you have any problems when you first arrived?	75%	60%	66%	62%
3.7	Did you have access to someone from healthcare when you first arrived here?	81%	74%	88%	72%
3.9	Did you feel safe on your first night here?	86%	85%	89%	84%
3.10	Have you been on an induction course?	93%	94%	97%	93%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	47%	54%	54%	52%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	71%	74%	88%	70%
4.4	Are you normally able to have a shower every day?	100%	99%	100%	99%
4.4	Is your cell call bell normally answered within five minutes?	28%	23%	30%	22%
4.5	Is the food in this prison good/very good?	8%	21%	23%	18%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	23%	43%	38%	40%
4.7	Are you able to speak to a Listener at any time if you want to?	54%	54%	54%	53%
4.8	Do you feel your religious beliefs are respected?	47%	59%	56%	57%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	62%	62%	57%	64%
5.1	Is it easy to make an application?	89%	88%	94%	86%
5.3	Is it easy to make a complaint?	57%	65%	53%	65%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	48%	50%	72%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	44%	43%	56%	39%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	2%	0%	2%
7.1	Do most staff, in this prison, treat you with respect?	85%	77%	85%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	62%	77%	82%	72%
7.3	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	14%	17%	31%	14%
7.4	Do you have a personal officer?	61%	68%	77%	66%
8.1	Have you ever felt unsafe here?	36%	25%	23%	28%
8.2	Do you feel unsafe now?	8%	10%	12%	9%
8.3	Have you been victimised by other prisoners?	22%	17%	3%	22%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	3%	7%	3%	7%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	11%	4%	0%	7%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	4%	0%	5%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.5	Have you been victimised because of your nationality? (By prisoners)	8%	2%	0%	4%
8.5	Have you been victimised because of your age? (By prisoners)	3%	0%	0%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	11%	1%	3%	3%
8.6	Have you been victimised by a member of staff?	39%	23%	17%	28%
8.7	Have you ever felt threatened or intimidated by staff here?	18%	10%	9%	12%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	9%	3%	10%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	8%	3%	3%	4%
8.7	Have you been victimised because of your nationality? (By staff)	3%	3%	0%	4%
8.7	Have you been victimised because of your age? (By staff)	3%	0%	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	14%	0%	3%	2%
9.1	Is it easy/very easy to see the doctor?	52%	64%	66%	60%
9.1	Is it easy/ very easy to see the nurse?	65%	67%	72%	65%
9.4	Are you currently taking medication?	79%	37%	74%	36%
9.6	Do you feel you have any emotional wellbeing/mental health issues?	43%	14%	11%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	26%	20%	12%	24%
11.2	Are you currently working in the prison?	58%	72%	78%	69%
11.2	Are you currently undertaking vocational or skills training?	4%	19%	3%	20%
11.2	Are you currently in education (including basic skills)?	25%	33%	39%	29%
11.2	Are you currently taking part in an offending behaviour programme?	4%	15%	7%	16%
11.4	Do you go to the library at least once a week?	56%	73%	82%	66%
11.6	Do you go to the gym three or more times a week?	15%	15%	24%	14%
11.7	Do you go outside for exercise three or more times a week?	60%	68%	68%	67%
11.8	On average, do you go on association more than five times each week?	81%	85%	73%	86%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	40%	37%	26%	40%
12.2	Have you had any problems sending or receiving mail?	52%	42%	35%	45%
12.3	Have you had any problems getting access to the telephones?	15%	16%	15%	15%