

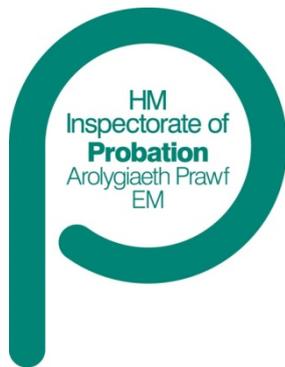
Report on an unannounced inspection of

HMP & YOI Bronzefield

by HM Chief Inspector of Prisons

9–20 November 2015

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:



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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 in our 'Guide for writing inspection reports' on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Introduction

HMP Bronzefield is a complex closed women's local prison run by Sodexo Justice Services. It holds up to 527 women, with all categories represented – those remanded by the courts, those serving short sentences and a number serving life. Ages range from 18 to over 70. It is also one of two prisons in the female estate that holds restricted status women, or women who are deemed to require special management due to the level of risk they present, or the notoriety of their offences. The catchment area of the prison is huge and the mix of women held continues to present an almost unique blend of complexity and vulnerability. Around a third of women reported having a disability and 90% said they arrived with problems, including 44% who felt depressed or suicidal. For over half it was their first time in prison and a similar number had children under the age of 18. Over 40% indicated they had a problem with drugs and 66% said they had emotional wellbeing or mental health problems. The proportion of women reporting these types of problems was significantly higher than at our last inspection.

It was encouraging to see, therefore, that despite this increased complexity of the challenge faced, the prison had continued the improvement we reported at the last inspection in April 2013. Arrangements to support women on arrival and during their early days at the prison were good, and for those with substance misuse problems, some of the best we have seen. Processes to keep women safe and to deal with the high levels of self-harm and vulnerability were well developed. There was little violence and few serious incidents, but despite this, many women still complained that they had felt unsafe at some time while at the prison and that they had been victimised by both other prisoners and staff. The reasons for this were not clear but, the complex mix of women held at Bronzefield, a recent tragic self-inflicted death, the first such death at the prison, allied to a zero tolerance approach being adopted to tackle poor behaviour when it occurred, were likely to be contributory factors to these perceptions.

At the last inspection we were critical of some aspects of the work with the small number of women who had a combination of very challenging and sometimes dangerous behaviour and vulnerabilities, including personality disorder and mental health conditions. Work in this area had improved significantly and while we were still concerned about two women who had been managed in the separation and care unit (SCU) for over two years, the care they were receiving and specialist input to manage their progression and reintegration was good, and would be developed further with soon to be piloted interventions addressing personality disorder. Safeguarding arrangements in general were well developed and fully embedded across the prison.

Security was proportionate, including for those women who were restricted status. Work in the SCU had developed since the last inspection and was now much more progressive. Use of force was not excessive, although some aspects of oversight needed attention. Substance misuse support was very good.

The general environment was very good and care was taken to keep the prison decent. Staff-prisoner relationships were very good and the custody support officer scheme worked well, including effectively supporting resettlement work. Again, despite some negativity in our surveys, work to support the diverse range of women held, including the quarter who were from black and minority ethnic communities, and the 24% who were foreign nationals, was good. The mother and baby unit provided excellent care and support to those using the facility, and maternity care was very good. Health services were good overall, including for the high number of women with mental health problems.

As at the last inspection the weakest outcomes were in the provision of purposeful activity. Time out of cell was reasonable although we found some women locked up during the day who could have been more purposefully occupied. The range of vocational training had improved and there were sufficient activity places for all those held. However, the quality of teaching and learning remained too

variable and outcomes in the key area of functional skills needed to be better. Managers had a plan to address these deficiencies but this had not yet come to fruition.

In contrast, resettlement work had improved significantly. Excellent support was now provided to women in maintaining contact with their family and friends, and also for those who had been abused, trafficked or who were sex workers. The prison had started to use release on temporary licence to support reintegration work, including for employment and family contact and relationship reasons. Offender management work had been re-organised since the last inspection and was now better than we usually see with evidence of regular and meaningful contact between women and specialist staff. Public protection arrangements were robust. The new community rehabilitation companies (CRCs) were still bedding in and there was confusion about how they worked alongside Sodexo resettlement staff. Nevertheless, support in the reducing reoffending pathways was generally strong although factors outside the control of the prison were resulting in too many women being released without settled accommodation.

HMP Bronzefield was a very good and improved prison. Outcomes for the highly complex population were at least reasonably good or better in all our healthy prison tests, with the quality of respect and work to resettle prisoners particularly strong. It is a credit to the very capable leadership within the prison, and the committed and motivated staff group that the challenges they face continue to be met in such a positive and caring way.

Martin Lomas
HM Deputy Chief Inspector of Prisons

January 2016

Fact page

Task of the establishment

Bronzefield is a designated resettlement prison, as are all women's prisons. It is also a high security prison for restricted status women (those considered to require specific management arrangements) as well as a local prison.

Prison status

Private, run by Sodexo

Region

Greater London

Number held

506

Certified normal accommodation

527

Operational capacity

527

Date of last full inspection

8–19 April 2013

Brief history

HMP & YOI Bronzefield opened in June 2004. Sodexo Justice Services was awarded a 25-year contract to run the prison, making it the first privately managed women's establishment in England and Wales. As a local prison, it accepted prisoners directly from the courts and had a high security function. In January 2010, an additional residential unit was opened bringing the total number of units to four; in the same year, a smaller unit that acted as an intermediary between the main residential areas and health care was decommissioned.

Short description of residential units

HMP Bronzefield had three main residential units, holding approximately 135 women each on four separate spurs; a fourth residential unit held 77 women. The prison had 24-hour onsite nursing cover and inpatient facilities for 18 women, a separation and care unit (the segregation unit) and a mother and baby unit. Residential units consisted of:

House block 1 – Convicted and remand prisoners; the separate substance misuse recovery unit

House block 2 – Remand prisoners and separate induction unit

House block 3 – Convicted and sentenced prisoners

House block 4 – Enhanced and first stage lifer and long-term prisoners.

Name of governor/director

Charlotte Pattison-Rideout

Escort contractor

GEOAmey

Health service provider

Sodexo Justice Services (primary physical, mental health and clinical substance misuse services)

Central and North West London NHS Foundation Trust (secondary mental health services)

Learning and skills providers

Sodexo

Independent Monitoring Board chair

Jan Sambrook

Community rehabilitation companies

MTC Novo

Seetec

About this inspection and report

- A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.
- A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- A3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:
- | | |
|----------------------------|---|
| Safety | women, particularly the most vulnerable, are held safely |
| Respect | women are treated with respect for their human dignity |
| Purposeful activity | women are able, and expected, to engage in activity that is likely to benefit them |
| Resettlement | women are prepared for their release into the community and effectively helped to reduce the likelihood of reoffending. |
- A4 The 2010 'Bangkok Rules'¹ sets out internationally agreed standards that should govern the treatment of women in prison. These standards are directly applicable to women's prisons in England and Wales. Since September 2014 we have Expectations which specifically address the outcomes we expect for women in prison.
- A5 Under each test, we make an assessment of outcomes for women and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.
- **outcomes for women are good.**
There is no evidence that outcomes for women are being adversely affected in any significant areas.
 - **outcomes for women are reasonably good.**
There is evidence of adverse outcomes for women in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

¹ United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders

- **outcomes for women are not sufficiently good.**
There is evidence that outcomes for women are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of women. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **outcomes for women are poor.**
There is evidence that the outcomes for women are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for women. Immediate remedial action is required.

A6 Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for women.

A7 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with women; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

A8 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.

A9 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

A10 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follows five sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of and conditions for women in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.

- A11 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A12 Findings from the survey of women and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.²

² The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

Summary

Safety

- S1 *The large catchment area and long waiting times in court meant women sometimes arrived late at the prison. Support in women's early days at the prison was good. The population was complex and posed inherent risks. Many women in our survey said they had felt unsafe at some time and been victimised. Despite this there were relatively few violent incidents. Level of self-harm were comparatively high and support for those who were at risk or who had complex needs had improved considerably. Security arrangements were very good. Disciplinary processes were generally proportionate and force was used only when necessary, although oversight needed improvement. Some women had been in the separation and care unit (SCU) (the segregation unit) for long periods but they received good care and case work to help with their progression was now also good as were substance misuse services. **Outcomes for women were reasonably good against this healthy prison test.***
- S2 *At the last inspection in April 2013 we found that outcomes for women in Bronzefield were reasonably good against this healthy prison test. We made 16 recommendations in the area of safety. At this follow-up inspection we found that 10 of the recommendations had been achieved, three had been partially achieved, two had not been achieved and one was no longer relevant.*
- S3 Long waits in court and the large catchment area meant many women arrived late at the prison. The reception area was clean and welcoming. In our survey, women were negative about their experience in reception but we saw courteous and respectful staff, supported by peer workers, provide a good level of care. First night checks in reception included an interview in private to identify any safety and vulnerability concerns. First night cells were clean and well prepared although overcrowding meant some women inappropriately spent their first few nights in the health care department. Staff carried out additional checks during their first night. The induction programme was well designed but some women told us they felt overloaded with information.
- S4 The prison accommodated a highly complex, challenging and varied population. Over half of those surveyed and more than at our last inspection said they had felt unsafe at some time during their stay and many said they had been victimised. However, most women said they felt safe at the time of the survey, levels of violence were not excessive and most incidents were minor. Staff knew the women well. Monthly data analysis on violence was adequate and supported by an exploration of trends over time. Investigations into bullying and violent incidents were appropriate. The zero-tolerance response to more serious violence was enforced well. The prison did not have any formal interventions to challenge antisocial behaviour, but this was offset by excellent relationships. The safer custody policy was too general and did not fully reflect local issues. In our survey, fewer women than the comparator said they had been treated fairly under the incentives and earned privileges scheme. We found some inconsistencies in the application of the basic regime and an overly restrictive facilities list detailing women's access to amenities.
- S5 A local investigation into a recent self-inflicted death had been completed and steps taken to implement lessons learned. Recommendations from previous Prisons and Probation Ombudsman reports were reviewed regularly to ensure ongoing compliance. Levels of self-harm were very high. Staff demonstrated an excellent awareness of individual women's care needs. Assessment, care in custody and teamwork case management documents for

- prisoners at risk of suicide or self-harm were mixed but case management continuity was good.
- S6 Safeguarding arrangements had significantly improved and were now embedded well; effective measures were in place to support women with complex needs and those who were the most at risk.
- S7 Security was well managed and the systems in place to identify and manage risks were good. Security meetings were well attended, and there were excellent links to relevant outside agencies. Procedural security was proportionate and dynamic security arrangements were very good. The prison managed women on restricted status (those considered to require specific management arrangements) particularly well and any curtailments in their regime were reasonable and justified. The availability of drugs was limited. A competent and proactive security team organised the prison's supply reduction strategy. A good action plan was in place and issues were addressed proactively.
- S8 The number of adjudications was not high but had increased since the last inspection. Hearings were usually conducted fairly but we saw cases where alternative approaches could have been adopted.
- S9 Use of force was not excessive and officers' written accounts usually assured us that it was justified. Officers handled the incidents we observed very well. However, paperwork was not scrutinised well enough and related data were not sufficiently well analysed. Special accommodation had not been used for some years.
- S10 Living conditions in the SCU were good. Communal areas were bright and cells clean and adequately furnished. Case management and reintegration planning had significantly improved and all women had individual care plans. Relationships between staff and women were excellent and the regime was relatively good. Plans to develop further the care and management of some women with complex needs in the unit were positive.
- S11 Clinical and psychosocial care was very good for those with substance misuse issues and the range of interventions was comprehensive, catering for a wide range of needs. However, in our survey women were less satisfied with the support offered. The peer support scheme was well organised. The substance misuse recovery unit provided a caring and well-managed environment that met women's first night, stabilisation and ongoing recovery needs.

Respect

- S12 *Living conditions were mainly very good. Staff-prisoner relationships were excellent and supported resettlement work well. Equality and diversity provision had developed, and some positive outcomes had been achieved for prisoners with protected characteristics. Faith provision was good. Complaints were well managed. Legal services were well developed. Health services were reasonable overall and a good range of mental health support was available. Food was unpopular but canteen arrangements were good. **Outcomes for women were good against this healthy prison test.***

S13 At the last inspection in April 2013 we found that outcomes for women in Bronzefield were reasonably good against this healthy prison test. We made 33 recommendations in the area of respect.³ At this follow-up inspection we found that 15 of the recommendations had been achieved, six had been partially achieved and 12 had not been achieved.

- S14 Living conditions and the overall design of the prison were very good. Outside areas were very pleasant. Most cells were in good condition but some double cells were too small and toilets were not screened effectively enough. Women appreciated the in-cell telephones. Electronic information kiosks (or pods) were useful and encouraged women to take responsibility for many aspects of their own lives.
- S15 Staff-prisoner relationships remained very good. Most women – although fewer than at the last inspection – said staff treated them respectfully, and that there was a member of staff they could turn to if they had a problem. What we saw reflected this and the staff culture had an emphasis on decency. Custody support officer work effectively supported sentence planning and resettlement work.
- S16 Good leadership ensured diversity and inclusion had a high profile. The diversity and inclusion action team was an effective forum, enabling women to hold staff accountable for carrying out required action. The discrimination incident reporting form process was well managed and independently quality assured. Despite some negative responses in our survey, consultation arrangements and support for all protected characteristics were well developed.
- S17 Women from black and minority ethnic backgrounds were generally positive about equality. The prison and an independent immigration advice service offered women who were foreign nationals good accessible support. Women with disabilities generally received good care. A new approach to social care had recently been introduced; it had the potential to help women with their personal care needs. While the number of adapted cells had increased, some women's needs were still not met in full. Support for younger and older women and those who were transgender was very good. Arrangements to manage gay women in relationships were reasonable. The mother and baby unit was excellent. Women wishing to practice a faith had access to a rich array of opportunities and take-up was high. Women of no faith had access to other activities designed to provide support.
- S18 Women could make a complaint via the easily accessible system. The complaints system was generally efficient. Around 20% of complaints were upheld and systems were in place so lessons could be learned. Women had access to a good legal rights service, which included visits from the Women's Advice Service. Bail advice was adequate.
- S19 Prisoners remained very negative about health services, particularly waiting times and prescribing practices. Despite this we thought health services were reasonably good overall. Access to a female GP had improved. Waiting times for most services were equivalent to those in the community and attendance had improved. However, there were shortcomings in physiotherapy, podiatry and lifelong conditions management, which were being addressed. The new sexual health in-reach service and antenatal services were impressive. The inpatient unit was reasonably good but its therapeutic role was compromised because some women were admitted for non-clinical reasons.

³ This included recommendations about the incentives and earned privileges scheme which, in our updated Expectations (Version 4, 2012), now appear under the healthy prison area of safety.

- S20 Pharmacy services had generally improved, but some aspects of medication security and administration and controlled drug management remained poor. The supervision of medication administration was good.
- S21 The dental suite had improved and access was reasonably good, but governance was inadequate. Despite limitations in primary mental health services, a good range of support was available for the very large number of women with mental health needs via the mental health in-reach team.
- S22 Although we found the range and standard of food to be satisfactory, in our survey, only 19% of respondents said that it was good. Meal times were reasonable and women could eat together. Women could get their first canteen promptly and make subsequent orders efficiently through the electronic pod system.

Purposeful activity

S23 *Time out of cell was reasonable overall. There were sufficient activity places and the allocations process was efficient. The range of vocational training had improved and women developed good personal and social skills. More needed to be done to address weaker aspects of the provision. The quality of teaching and learning was too variable and functional skills outcomes needed improvement. The library and gym provided some good opportunities. **Outcomes for women were reasonably good against this healthy prison test.***

S24 *At the last inspection in April 2013 we found that outcomes for women in Bronzefield were reasonably good against this healthy prison test. We made 10 recommendations in the area of purposeful activity. At this follow-up inspection we found that four of the recommendations had been achieved, five had been partially achieved and one had not been achieved.*

- S25 Time out of cell for the majority of prisoners was reasonable. Although we found that across the prison about 20% of the population were locked in their cells, it was disproportionately higher on some spurs.
- S26 Self-assessment of learning and skills was broadly accurate and informed the prison's key improvement priorities but managers had been slow to prioritise achievements in functional skills in English and mathematics. The prison's use of data and plans to improve the provision were weak. A larger number of release on temporary licence (ROTL) activities was available through effective partnership working.
- S27 There were sufficient activity places for the population. Women received good information during induction about activities and the allocations process was fair and equitable. Women could follow mixed activity programmes combining part-time education and work. Education prioritised English and mathematics but learners had limited opportunities to progress beyond level 1 in these or other subjects. The range of relevant vocational training was improving but women had limited opportunities to gain accreditation.
- S28 The quality of teaching, learning and assessment was too variable and feedback in education classes did not always help learners improve. English and mathematics were poorly promoted and developed in vocational training, prison work and other education courses. Coaching was good. The majority of education tutors gave learners good support to overcome barriers to learning and used peer mentors well. Work activities were well managed.

- S29 Attendance at activities was good, as was women's behaviour and attitudes towards others. The majority of women gained confidence and improved their self-esteem through the activities they attended.
- S30 Overall achievement rates in education and vocational training were too variable; while they were high on vocational courses and a few education courses, they required improvement in functional mathematics at entry level and level 1 and functional English at level 1. The standard of women's work in vocational training and work was good.
- S31 Although women had reasonably good access to the library, staff did not analyse attendance sufficiently to identify whether any specific groups were not using the facilities. Library stock was good and met the needs of most women, including foreign nationals.
- S32 The range of physical education (PE) facilities and recreational activities was good. The benefits of healthy living were well promoted and the links between PE and health care staff were good. Women could gain accredited qualifications and a high proportion achieved them. Staff needed to better analyse which groups were not accessing PE opportunities.

Resettlement

S33 *The prison's key focus was on resettlement work and a good range of support was provided. It was positive to see that some women now had access to well-managed ROTL. Offender management arrangements were good. Public protection was robust. Resettlement provision was in transition but good reintegration planning still took place. Support in the resettlement pathways was generally very good, but securing accommodation for prisoners on release was a challenge. Assistance to help prisoners maintain contact with their children and families was now very good. Women who were at risk or who had been victimised received some excellent support. **Outcomes for women were good against this healthy prison test.***

S34 *At the last inspection in April 2013 we found that outcomes for women in Bronzefield were reasonably good against this healthy prison test. We made 12 recommendations in the area of resettlement. At this follow-up inspection we found that 10 of the recommendations had been achieved and two had been partially achieved.*

- S35 The prison had a detailed policy for reducing reoffending; it contained strategic targets informed by a needs analysis and information about the population. Since the last inspection offender management had been reorganised so that its work was more integrated with resettlement work. ROTL was used to support family links and provide useful employment and training experience for women who had been fully risk assessed.
- S36 In the cases we examined meaningful targets for women had been identified and there was evidence that prisoners had regular, purposeful contact with caseworkers and custody support officers to help them achieve their objectives.
- S37 Public protection procedures were well developed. Monitoring of communications and visits was effective. There were strong links with other departments, especially security, and oversight of arrangements for the release of high risk women was good. We found the prison's involvement in multi-agency public protection arrangements effective in the cases we examined and caseworkers were confident providing assessments and contributing to multi-agency meetings.

- S38 Allocation decisions were based on a suitable range of information and the reasons for transfers to other establishments were appropriate. Provision for the significant number of women with life sentences was well developed.
- S39 Resettlement service provision was overly complicated and the role of the community rehabilitation companies was not clearly defined, which led to confusion. Nevertheless, caseworkers continued to formulate meaningful resettlement plans on women's arrival, which included relevant targets that were reviewed pre-release. There had been a significant increase in the number of short recalls, which meant these prisoners had limited opportunities to access effective resettlement support.
- S40 Family support workers provided a very good range of services, including contact visits, family visits and liaison with social services. Women received help to improve their childcare skills. There were sufficient social visits opportunities and booking arrangements had been improved since the last inspection. Staff treated visitors respectfully and the visits hall was comfortable and had play facilities and a good range of refreshments. Family visits arrangements were good.
- S41 Women who had suffered abuse, been involved in sex work or been trafficked were identified and dealt with sensitively soon after arrival. A good range of support was available, much of it provided by community-based organisations, and there were good links with services in areas to which women were released.
- S42 The number of women leaving with settled accommodation had dropped in recent months as a result of the lack of social housing and hostel accommodation. Despite this the prison continued to work proactively to secure accommodation for women being released.
- S43 Women received good support to prepare for their next steps in education, training and employment through effective links between offender management and education staff. A wide range of partner agencies and employers helped an increased proportion of women to access education or work experience through ROTL.
- S44 Arrangements to ensure continuity of health care prior to release or transfer were appropriate. 'Through-the-gate' support was particularly good for women with mental health problems. An end-of-life policy needed to be developed. Substance misuse work carried out by the recovery team was excellent. Release plans began early and links with many local agencies were very good. A good range of debt, benefits and finance support was offered, including assistance with opening bank accounts.
- S45 No offending behaviour programmes were available, but referrals and transfers to other establishments where these were offered were efficiently facilitated when needed. Funding for structured work around personality disorders had been agreed, but the provision could have been further enhanced by interventions such as the thinking skills programme and victim awareness.

Main concerns and recommendations

S46 Concern: The population was complex and more needed to be done to reassure women about safety. More women than the comparator and compared with the last inspection said they had felt unsafe at some time and too many said they were victimised by other prisoners and staff. Some processes to encourage good behaviour and to support more at risk women had not been developed. The prison lacked a local approach to the strategic management of safer custody to ensure that all required appropriate action was carried out.

Recommendation: All aspects of safer custody work should support efforts to reduce problematic behaviour and support women who are at risk, enhancing women's feelings of wellbeing and safety.

S47 Concern: The quality of teaching, learning and assessment was too variable and achievements in functional skills were not sufficiently good. The prison did not have enough opportunities for women to undertake accredited programmes in vocational areas or for their achievements in personal and social development to be recognised.

Recommendation: The prison should improve the effectiveness of education and work activities to ensure that more women achieve qualifications in English and mathematics; the occupational and work-related skills they develop through activities should be recognised and, wherever possible, accredited.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Long waits in court and the large catchment area meant too many women arrived late at the prison. Women were not consistently provided with written information either in court or on transfer out of Bronzefield.*

I.2 In our survey 41% of women said they spent over two hours in the van on their most recent journey to the prison. Too many women experienced long waits in court and the prison covered 80 courts spread over a large catchment area; they subsequently often arrived at the prison late in the evening. All essential first night processes were completed on arrival, but women who arrived late had little opportunity to settle in before being locked up for the night.

I.3 Vehicles were appropriate and clean; women received food and drinks. We found escorting staff courteous and friendly and transfers between vehicles and reception were fast and efficient. We were told that women were not moved to the prison in vehicles shared with men.

I.4 Only 6% of women in our survey said they had received written information about the prison prior to their arrival at Bronzefield.

I.5 Video link facilities were good and their use had increased over the previous two years but they still needed to be used more frequently. Only 21 courts had video link facilities. The service was also used to facilitate interpretation services and inter-prison visits.

Recommendation

I.6 **Women should be transferred from court to the prison as soon as possible following their hearing so they have enough time to settle in at the prison.**

Early days in custody

Expected outcomes:

Women are treated with respect and feel safe on their arrival into prison and for the first few days in custody. Women's individual needs are identified and addressed, and they feel supported on their first night. During a woman's induction 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 clean and welcoming. In our survey women were negative about some aspects of the support provided on arrival but we saw courteous and respectful reception staff, supported by peer workers, deliver good care. First night checks undertaken in reception included an interview in private to identify concerns about women's safety or vulnerability. First night cells were clean and well prepared. Staff were knowledgeable and there were additional checks during the women's first night.*

- 1.8** The reception area was large, clean and welcoming; some holding areas were being redecorated. It was open throughout the day, including lunchtime. The reception was busy with an average of 42 new arrivals passing through each week.
- 1.9** In our survey, women were negative about some aspects of support on arrival but we saw a good level of care delivered by courteous and respectful reception staff, supported by peer workers. Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and a peer worker were available every evening and could be called during the day if required. They provided valuable support to newly arrived women.
- 1.10** Only 28% of women surveyed said they had spent less than two hours in reception when they arrived at the prison, lower than the comparator (58%). Women and staff suggested that the provision of health care services was often delayed, slowing down the process.
- 1.11** Despite the fact that fewer women than in comparator prisons reported being offered a shower on their first day, we saw staff provide women with good care. This included offering them a shower, hot drinks, hot food and canteen packs. We were confident that women leaving for court in the morning were routinely offered a shower, breakfast and clean clothes prior to departure. New receptions received clean kit, including essential toiletries, clean clothes and new underwear.
- 1.12** First night checks undertaken in reception included an interview in private to identify any safety or vulnerability concerns. We found evidence of the appropriate use of interpretation services in reception, and saw a range of written information in a number of languages.
- 1.13** Women requiring detoxification support were located in house block 1 for their first five days before beginning the standard induction programme; however, they received essential induction information on arrival. Other new receptions were routinely located in house block 2 where we observed clean, well-prepared cells, and knowledgeable staff, although overcrowding meant that women sometimes spent their first few nights in the health care unit, which was inappropriate (see section on health services, delivery of care (physical health), paragraph 2.75).
- 1.14** Women in our survey were more negative about their first night in prison than the comparator – only 64% compared with 72% said they felt safe. However, it was unclear why and women we spoke to about their experiences said they had been well supported during

their first night. Staff undertook six logged checks on all new receptions during the night in addition to the observations carried out by nurses providing 24-hour cover.

- I.15** The induction programme was well designed and women could speak to representatives from a wide range of services and peer workers. However, women in our focus groups and survey were more negative than the comparator about the induction process, saying that they did not get all the information they needed, and that it was delivered too quickly. Others said they felt overloaded by the amount of information they received in a short space of time. Induction was sometimes delayed and when this happened, women spent long periods locked in their cells with nothing to do. We welcomed the recently developed induction workbook for new arrivals.

Recommendation

- I.16** **The information provided at induction should ensure women have a good understanding of how the prison operates and the essentials of everyday life at the prison.**

Safe and supportive relationships

Expected outcomes:

Safe and supportive relationships are encouraged. Everyone feels and is safe from victimisation (which includes verbal and racial abuse, theft, violence and assault or threats). Women are protected from victimisation through active and fair systems known to staff, women and visitors, and which inform all aspects of the regime. Any sanctions on behaviour are applied fairly, transparently and consistently.

- I.17** *The population was highly complex and challenging. Too many women said they had felt unsafe at some point and reported that levels of victimisation were high. However, perceptions of safety at the time of the inspection were comparable with other prisons. The level of violence was not high and much of it was relatively minor. However, some work to address antisocial behaviour was underdeveloped. The regime for women on the basic level of the incentives and earned privileges (IEP) scheme was inconsistent and the facilities list was overly restrictive except for the few on the enhanced level.*

- I.18** HMP Bronzefield accommodated a highly complex, challenging and varied population. While some women were on remand or serving short prison sentences, the prison also had a large number of prisoners on indeterminate sentences, those with restricted status (women considered to require specific management arrangements) and other high-risk women serving long sentences. The women held had a very high level of vulnerability and a large proportion had mental health concerns; in our survey 90% said they had had problems when they first arrived.
- I.19** Over half (54%) of those surveyed and more than at our last inspection (44%) said they had felt unsafe at some time during their stay, higher than at comparator prisons (44%). More women said they had been victimised by other prisoners (44%) compared with other similar prisons (37%), and more also said they had been victimised by staff (38%) compared with elsewhere (28%) and at the last inspection (30%). The reasons for this varied but the challenging population, high levels of self-harm and distress as a result of the recent self-inflicted death were likely to have contributed to these poorer perceptions. In addition, the prison was rigorously applying its 'zero-tolerance' approach to poor behaviour (encouraging

staff to identify and challenge all forms of delinquent behaviour by prisoners), which might also have been a factor.

- I.20** In contrast most women said they felt safe at the time of the survey. Levels of violence were not excessive and most incidents were relatively minor. A safer custody survey was completed each year and used to inform an action plan, although the safer custody strategy document was too general and not specific to the issues prevalent at HMP Bronzefield.
- I.21** The small safer custody team was very visible around the prison and based in an office that women could access easily. Staff in the team knew individuals well. A safer custody committee met every month although attendance was variable. The meeting reviewed data about violence and discussed individual prisoners involved; some useful trend analysis was also carried out each year or as issues arose, which helped identify issues specific to the prison.
- I.22** Information reports (IRs) were generally submitted following violence or bullying and investigations into more serious incidents, which the safer custody team undertook, were detailed and timely. The zero-tolerance response to more serious violence was enforced well through formal disciplinary processes.
- I.23** A small number of staff had been trained in mediation and we saw some evidence of them being used to resolve minor conflicts. However, the prison lacked any formal interventions, such as the thinking skills programme or victim awareness to help challenge antisocial behaviour (see sections on offender management and planning, paragraph 4.11, and attitudes, thinking and behaviour) although this was offset by excellent working relationships between wing staff and women.
- I.24** The Steps Towards Encouraging Positive Solutions scheme to tackle antisocial behaviour and support victims was not well established. The records we looked at had very limited targets and the causes of women's poor behaviour were not well monitored. However, the scheme was about to be redesigned and would aim to provide more effective management. (See section on self-harm and suicide prevention, paragraph 1.32 and main recommendation S46.)
- I.25** Most women were on the standard level of the IEP scheme. Reviews to enable women to progress to the enhanced level were held after a woman had been on the standard regime for 12 weeks; those previously on the enhanced level retained the level on arrival.
- I.26** The use of the basic IEP level was appropriate in the cases we looked at. Reviews held every seven days meant women whose behaviour improved could return to the standard regime but they did not set the women any meaningful targets. The regime for those on the basic level of the scheme was not well publicised and was applied inconsistently: some women only had an hour out of their cell a day, while others had significantly longer; and on some wings meals were delivered to the cell door whereas on others women could come out to collect them.
- I.27** Some elements of the facilities list, outlining how IEP levels affect women's access to amenities, were overly restrictive – for example women on the standard level could not have some basic equipment, such as a kettle.

Recommendation

- I.28** **The IEP scheme should be applied consistently and the facilities list should allow prisoners on at least the standard level of the scheme access to more items, such as in-cell kettles.**

Self-harm and suicide prevention

Expected outcomes:

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

- I.29** *The Prisons and Probation Ombudsman (PPO) recommendations were kept under review to ensure ongoing compliance. A local investigation following a recent self-inflicted death had been undertaken. Levels of self-harm were very high and some women self-harmed repeatedly. Some aspects of the assessment, care in custody and teamwork (ACCT) case management process needed improving. However, staff knew individual women very well and provided those in crisis with a good level of care.*
- I.30** There had been one self-inflicted death in September 2015, the first since the prison opened. Two deaths from natural causes had occurred since the last inspection, one shortly after the prisoner's release. Some changes in the delivery of ACCT processes had been made as a result of internal and PPO reviews of these deaths.
- I.31** A useful and comprehensive continuous improvement plan had been developed to implement recommendations from previous PPO reports into deaths in custody. Oversight of the plan had improved and there were now regular reviews involving functional lead managers, which aimed to promote ongoing compliance.
- I.32** Levels of self-harm were very high. However, a small number of women who had repeatedly self-harmed contributed to this overall number, which reflected the significant needs of those held at HMP Bronzefield. Despite regular data analysis, there was no strategy specific to the prison for the development of a whole-prison approach to self-harm and suicide prevention (see section on safe and supportive relationships, paragraph I.24). Nevertheless, staff demonstrated an excellent awareness of individual women's care needs. Complex case meetings and reviews helped staff manage more challenging women (see section on safeguarding (protection of adults at risk) and women with complex needs, paragraph I.41).
- I.33** There were 31 ACCTs open at start of the inspection. Those on ACCTs with whom we spoke valued the additional care they received. The quality of recording in ACCT documents was mixed but case management continuity had improved. The list of triggers likely to lead to self-harm and care maps were weak, which meant the prison's evidence of progress was poor. However, daily entries were on the whole adequate. Care maps were not always updated.
- I.34** The justification for holding a woman on an open ACCT in the separation and care unit (SCU) (the segregation unit) was not always well recorded, but the prisoners whose cases we reviewed had been appropriately located. Alternative clothing and constant watch cells had not been used during the six months leading up to the inspection.
- I.35** We were informed that access to the prison's team of trained Listeners at night was sometimes delayed due to difficulties in moving the Listener from one wing to another. Each wing had a Listener suite, but those we looked at were very bare and lacked basic amenities, such as tea- and coffee-making facilities. Women had easy access to the Samaritans helpline through in-cell telephones.

Recommendations

- I.36** The quality of recording in ACCTs should ensure that triggers to self harm are identified, that care maps outline monitoring arrangements, and that interventions are effective.
- I.37** The timeliness of access to Listeners at night should be improved and each Listener suite should be adequately decorated, furnished and equipped.

Safeguarding (protection of adults at risk) and women with complex needs

Expected outcomes:

The prison promotes the welfare of all prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.⁴

I.38 *Safeguarding arrangements were good; there were clear procedures for identifying and managing those most at risk. Complex case review meetings were excellent for those who needed more intensive support and a multidisciplinary care planning approach.*

- I.39** Safeguarding arrangements had improved and were now good and prison staff attended the local safeguarding adults board. A memorandum of understanding with Surrey County Council and the NHS set out protocols for reporting suspected abuse and women's social care needs (see section on health care, governance arrangements, paragraph 2.60).
- I.40** Prisoners and staff received guidance on reporting wrongdoing and a referral mechanism was in place for women who had been trafficked. Staff training in safeguarding had been delivered and more was planned for 2016. Staff we spoke to were aware of their duty to protect adults at risk of abuse and neglect.
- I.41** Complex case meetings were held every week and ensured that referrals were made as required to the local safeguarding adults board. The meetings were multidisciplinary and helped to provide a more coordinated approach to dealing with the most vulnerable women. We saw some excellent examples of this; women were either managed through the normal prison regime or had access to provision in other prisons that was more suited to their individual needs. Staff had received some training in mental health awareness and motivational interviewing techniques. A key worker was allocated to each case to ensure the plan was delivered as intended.

⁴ We define an adult at risk as a 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:

Physical and procedural security measures are specific to the risks in a women's prison. Security and good order are underpinned by effective security intelligence and positive staff-prisoner relationships. Women are safe from exposure to substance misuse while in prison.

- I.42** *Security was well managed and systems in place to help deal with risks were good. Procedural security was proportionate and dynamic security arrangements were very good.*
- I.43** We found no obvious weaknesses in the prison's physical security. Procedural security was well managed. Cell-searching was carried out proportionately and regular checks and routine searches of perimeter fences and walls took place along with searches of communal areas and activities buildings.
- I.44** The modified free-flow system during the beginning and end of planned regime activities, which allowed prisoners to move around the prison under supervision, was particularly well managed and proportionate. Women could also attend appointments unescorted outside main movement times through an appointment slip system.
- I.45** Important elements of dynamic security were in place and the management and use of intelligence was very good. Relationships between staff and prisoners were good and the interactions we observed indicated that most staff knew about the personal circumstances of women in their care. Supervision in important areas around the prison such as residential wings, education and workshops was effective and the prison regime was purposeful and predictable.
- I.46** The security department received over 300 IRs each month. Relevant information and instructions were processed and communicated promptly across appropriate areas. Security-led meetings were well attended and links with other key prison departments, particularly the offender management unit and safer custody team, were very good. The monthly tactical tasking meeting was particularly effective and fed into nearly all decision-making processes in the prison.
- I.47** Risk management systems were well integrated and effective. We saw no evidence to show that the prison was risk averse when allocating activity spaces, although there were some rational restrictions in the areas that higher risk women could attend.
- I.48** The management of restricted status women through regularly reviewed individual care plans was particularly good and had improved greatly. The plans were subject to regular reviews carried out by senior managers (usually led by the head of security); they were timely and thorough. Subsequent restrictions to these women's regime were reasonable.
- I.49** The security department, led by the head of security, also managed complex systems to identify and deal with issues associated with organised gangs, terrorist activities and radicalisation. Links with local and policing teams were very good.
- I.50** Local corruption prevention measures were well organised and effective. There were good links with agencies in the community and good information-sharing to prevent and detect wrongdoing.

- 1.51** In our survey, more women than at the previous inspection (28% against 19%) said it was easy to get drugs at the prison. The average random positive mandatory drug testing (MDT) rate for the six months to September 2015 was relatively low at 5.2% against a target of 6%. In the same period, 49 suspicion tests were conducted with a positive rate of 44.8%.
- 1.52** Although all objective evidence pointed to low drug availability, the prison's supply reduction strategy was comprehensive. A good action plan was in place; it was updated, outlined timescales and responsibilities and was disseminated following each monthly tactical tasking meeting.

Disciplinary procedures

Expected outcomes:

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

- 1.53** *The number of adjudications was not comparatively high but had increased since the last inspection. Hearings were usually conducted fairly but we saw a few examples where alternatives to segregation could have been used. Use of force was not excessive and officers' written accounts usually assured us that it was justified. However, governance arrangements were underdeveloped and related data were not sufficiently analysed. Although use of segregation was not high, it had increased since the last inspection. Case management and reintegration planning had improved significantly and relationships between staff and women in their care were excellent.*

Disciplinary procedures

- 1.54** There had been 497 adjudications in the six months prior to the inspection, which was significantly higher than the 362 we found during the same period prior to the last inspection. We thought this was likely to be reflecting the increased complexity of the population and the zero tolerance approach being adopted.
- 1.55** The written records of hearings we examined and hearings we attended indicated that proceedings were conducted fairly and we saw how prisoners were given the opportunity to explain fully their version of events. It was also clear that adjudicators made sure the prisoner understood each stage of the process before moving on and all were offered the opportunity to seek legal advice.
- 1.56** Punishments were usually fair and consistent but some of the petty charges we observed could have been dealt with less formally and there were examples where segregation was used as a punishment when less severe sanctions should have been used.

Recommendation

- 1.57** **Punishments following adjudication should be proportionate.**

The use of force

- I.58** There had been 93 incidents involving the use of force in the six months prior to the inspection. Although not high, the number had increased since the last inspection when we found 81 incidents during a similar period.
- I.59** In most cases we examined, interventions were well organised and properly carried out and documentation was completed correctly. Proper authority was recorded and senior staff supervised most incidents. Officers handled the two incidents we observed effectively and the care the women received was very good. There was clear evidence that de-escalation techniques were preferred and had been used to particularly good effect.
- I.60** However, we were not confident that managerial scrutiny of use of force documentation was sufficient and we found a few examples where officers' accounts were inconsistent and contradictory. Governance arrangements at monthly security meetings were underdeveloped and data were not sufficiently analysed to identify patterns or trends. Special cells had not been used since the last inspection.

Recommendation

- I.61 Adequate managerial oversight of use of force should be put in place and data analysed to identify themes and trends.**

Segregation

- I.62** Living conditions in the SCU were relatively good. Communal areas were clean and brightly decorated. Features such as posters on walls helped create a less formal environment. Cells were clean, free of graffiti and adequately furnished. The two caged exercise yards were austere but the prison planned to refurbish them.
- I.63** About 106 women had been held in the unit in the six months prior to the inspection. Although comparatively low, it was more than at the last inspection when 68 women had been segregated during a similar period. Lengths of stay were comparatively short at an average of about two days but there were some notable exceptions.
- I.64** The daily regime for women in the unit was relatively good and reintegration planning had been developed significantly since the last inspection. All segregated women had individual care plans and most could access the major elements of a normal regime, even when in cellular confinement. They attended work and education activities if they posed no risk to others and were allowed short periods of association, usually at weekends. The prison was about to further develop the care of women with complex needs through integrated plans and better multidisciplinary work as part of an evaluated pilot scheme. The scheme aimed to work intensively with four of the prison's most complex women with personality disorders, including two who had been segregated for a considerable period of time.
- I.65** Relationships between staff and prisoners were excellent. We saw all officers interacting positively with women; they clearly had an appropriate interest in their well-being. They did not overreact when faced with demanding behaviour and we saw many examples where they dealt patiently and calmly with very difficult situations.

Substance misuse

Expected outcomes:

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

- I.66** *Women were less satisfied in our survey than the comparator when asked about the support they received. Clinical and psychosocial care was very good and the range of interventions was comprehensive, catering for a wide range of needs. The substance misuse recovery unit provided women with a caring and well-managed environment on their first night, helping them with stabilisation and ongoing recovery. Women's failure to attend clinical or care plan reviews was a cause for concern.*
- I.67** Clinical and psychosocial substance misuse services were delivered by Sodexo. In our survey, fewer than the comparator said they had received support for drug or alcohol problems. Of those who had received support, fewer than the comparator (71% against 83%) said it had been helpful.
- I.68** Nevertheless, the range of psychosocial interventions was comprehensive, catering for a wide range of needs. One-to-one work was complemented by group work. In addition to a drugs awareness course, which included a focus on new psychoactive substances (NPS) (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life threatening effects), there was a good range of mutual aid groups. They included Alcoholics Anonymous, Narcotics Anonymous and Self-Management and Recovery Training. Three peer supporters delivered regular support groups, co-facilitated awareness sessions and provided one-to-one support, which other women said was invaluable.
- I.69** Following prompt screening and treatment on arrival, women with clinical substance use needs were transferred to the first night spur in the substance misuse recovery unit in house block 1 for their first night. The unit had 24-hour nursing cover and officers completed an extra six logged observations on women's first night.
- I.70** Methadone administration was conducted satisfactorily in the unit and good supervision was balanced with adequate privacy at the medication hatch.
- I.71** Women were required to attend regular reviews to ensure their treatment remained appropriate, but too many women were not attending these meetings. In October 2015, 20 women did not attend their appointments. The service informed them that non-attendance had implications for their continued treatment; if they subsequently failed to attend, they had to undergo rapid detoxification for safety reasons. While this ultimate sanction was in line with national guidance, it was not enforced regularly, and several women had started attending their reviews after the need for these sessions was explained to them.
- I.72** Some women told us that the reason they did not attend reviews was because of their short sentences. One woman said: 'I was living in a crack house, got breached on my licence; I'm here for two weeks then I'll go back to the crack house. What's the use of seeing the doctor or a drugs worker?'

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** *The prison grounds were well maintained and living conditions and the overall design of the prison were very good. On the whole, cells were in good condition but some double cells in house blocks 1 to 3 were too small and toilets were not properly screened. Electronic information kiosks were useful and encouraged women to take responsibility for many aspects of their own lives. All cells had telephones, which women appreciated.*
- 2.2** The prison grounds were well kept and helped create a pleasant external environment. The prison had three identical residential units – house blocks 1 to 3 – each holding up to 135 women in cells on four separate spurs. There was also a smaller unit (house block 4) that held up to 77 women.
- 2.3** Overall the environment in all residential units was very good. Communal areas were very clean and the atmosphere was informal. Most cells were in good condition. Conditions in house block 4 were particularly good. Generally, cells were clean, free of graffiti and well furnished. Toilets in cells were still not properly screened, but they all had a lid. Most cells were single occupancy but some cells in house blocks 1 to 3 used for two people were very small and were clearly designed for one. Conditions in these cells were cramped and furnishings, such as cupboards and cabinets, were inadequate.
- 2.4** Showers and baths were clean and well presented; individual cubicles ensured women had sufficient privacy. In our survey, 92% of respondents said they could shower every day.
- 2.5** All cells had telephones, which women appreciated. Officers routinely knocked on cell doors and obtained a response before opening the cell observation panel. All cells were fitted with cell call bells and internal intercoms and we observed that officers responded promptly.
- 2.6** Up-to-date notices were displayed in all units. Association equipment was in good condition. The landings were wide and bright, enabling staff to supervise women easily.
- 2.7** Women had good access to cleaning material. The provision of clean prison clothing was adequate and women had clothing exchanges every week. They could wear their own clothes and fresh bedding and towels were issued on a weekly basis. Women could buy toiletries from the canteen, and basic toiletry items were available free of charge on wings. There were laundries on each spur, and most women in our survey said they could get clean suitable clothing for the week.
- 2.8** Each spur contained an electronic information pod where women could see their personal timetables and financial statements, make appointments, applications and complaints, as well as order their meals and canteen. They encouraged women to take responsibility for many aspects of their own lives.

- 2.9** We observed that general applications were dealt with promptly and were logged and tracked but in our survey fewer women than at comparator prisons (73% against 85%) said it was easy to make an application. Although responses we looked at were polite and addressed the matter raised, regular management checks were not carried out. There were monthly consultation meetings between staff and women and issues raised were progressed promptly.

Recommendation

- 2.10** Cells designed for one should not be used to accommodate two women.

Staff-prisoner relationships

Expected outcomes:

Women 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.

- 2.11** *Staff-prisoner relationships were very good. The staff group was professional and treated women respectfully. The custody support officer scheme worked well and provided good ongoing support, including in resettlement areas.*

- 2.12** Staff-prisoner relationships were very good. Most women (although fewer than at the last inspection) said that staff treated them with respect and what we saw reflected this. Most also said there was a member of staff they could turn to if they had a problem and they had regular contact with custody support officers (personal officers). Our observations confirmed this and the staff culture emphasised decency and professionalism.
- 2.13** Custody support officers saw women formally on a monthly basis and carried out detailed interviews, many of which we found recorded on electronic case file notes. This work helped promote the benefits of adhering to prison rules and complemented sentence planning and resettlement work.

Equality and diversity

Expected outcomes:

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

2.14 *Equality outcomes for women had improved and were impressive; leadership was strong. Discrimination incident reporting forms (DIRFs) were well investigated. Most women felt well supported. The mother and baby unit (MBU) was exceptional.*

Strategic management

- 2.15** Equalities outcomes for women were impressive. The newly agreed equalities policy was based on a needs analysis covering all protected characteristics. The equality action plan was scrutinised and updated monthly. Leadership of equality and diversity from the senior management team was strong.
- 2.16** The knowledgeable and experienced full-time equalities officer was responsible for work across all protected characteristics. Women knew her well and many visited her in her department throughout the day. The equalities officer was supported by an able foreign national coordinator and two peer diversity representatives. There were regular consultation forums for all those with protected characteristics.
- 2.17** Awareness training had been delivered to equalities orderlies (prisoners who provided support to women with protected characteristics). In the week prior to our visit several equalities orderlies had been transferred or released; the prison planned to recruit more. The remaining workers were confident carrying out their role and visible across the prison. They ensured that the equalities manager was aware of women with protected characteristics.
- 2.18** Sixty-two percent of staff in prisoner contact roles were women, which was an improvement on the last inspection. All new staff had had training to work with women prisoners that included diversity. More advanced training was organised on a themed basis and targeted at key groups. For example, the prison was organising training for reception and induction staff in trans-equality awareness from December 2015. Comprehensive equalities information was available and displayed prominently in key parts of the prison.
- 2.19** The prison director chaired the diversity and inclusion action team (DIAT), which met every month. The Independent Monitoring Board, external independent advisers, custody staff and peer diversity representatives supported the meeting well. Equality monitoring data were discussed and out of range areas investigated. We observed peer diversity representatives and equalities orderlies holding officers accountable for delivering actions.

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

- 2.20** Diversity events, such as Black History Month, were held throughout the year and involved community groups. For example, two theatre groups ran faith and equalities-based events during our inspection.
- 2.21** Twenty-nine DIRFs had been submitted in the six months preceding the inspection; issues were minor and well investigated. The prison director scrutinised all DIRFs and a representative of the local authority (LA) independently quality assured them. The LA representative said she was satisfied with the system and outcomes. Women who complained were asked to provide feedback after using the system, which was good.
- 2.22** Those aged over 50 and disabled women were more likely to report they had been victimised than their counterparts. We could find no evidence to confirm these views, although the prison had not sufficiently scrutinised these perceptions. In addition, the prison did not do enough to monitor young women's involvement in use of force, segregation or the basic level of the incentives and earned privileges scheme.

Recommendation

- 2.23** **The prison should investigate the reasons for some prisoners' negative perceptions and ensure outcomes for young women are monitored.**

Good practice

- 2.24** *The strong leadership, independent scrutiny and genuine involvement of peer diversity representatives and equalities orderlies created and sustained women's confidence in the prison's commitment to equality and diversity.*
- 2.25** *Women who had complained using the DIRF process were asked for feedback about how their complaint had been dealt with. Managers were using this feedback to ensure the process was working effectively.*

Protected characteristics

- 2.26** Around 24% of prisoners were from black and minority ethnic backgrounds. They were positive about equality and raised similar concerns to white prisoners. Women from black and minority ethnic backgrounds participated in forums and received good, individual support. The equalities officer saw Gypsy, Roma and Traveller women individually; they had access to the *Travellers in Prison* news sheet and the prison had useful links to the Travellers Equality Project. In our survey 9% of prisoners identified as being from these groups compared with 0.38% identified by the prison.
- 2.27** Foreign nationals comprised 19.6% of the population. When we visited 11 women were subject to detention under immigration rules. The foreign national support worker assisted these women efficiently. Women had access on a weekly basis to visiting immigration officers and to groups offering legal advice and support. Prison staff were aware of the situation of foreign national women. Interpretation arrangements were very good and frequently used. Foreign national women received only one free seven-minute phone call each month. For some this made it more difficult to maintain contact with family abroad as the cost of making calls was prohibitive.

- 2.28** The prison identified 26.4% of the population as having a disability compared with 34% in our survey. Some women with disabilities we spoke with were more negative than those who had not been identified as having a disability about areas of respect but we saw good care and most were positive about the personal support provided. Disability assistants or 'buddies' helped women with everyday activities and personal emergency and evacuation plans (PEEPs) and care plans were in place. Not all buddies had been trained in assisting wheelchair users. There were good arrangements to support British sign language users.
- 2.29** Individual adaptations were provided and there were two fully adapted cells in each house block except in the inpatients unit, where there was one; however, inpatients located there had several cells that were partially adapted. Some women requiring adapted cells had to wait for one, as demand was outstripping provision.
- 2.30** About 29% of women were aged 24 or younger and around 11% were 50 or older. The extensive array of social opportunities throughout the age range was impressive – over 20 activities were available for women of all ages. Age-specific activities included: participation in the Duke of Edinburgh's Award; young offender family days; football and basketball for younger women; and poetry reading and leisure group activities for older women. In October 2015, a theatre company presented a play exploring child sexual exploitation, grooming and trafficking that addressed the needs of several young women in an imaginative way.
- 2.31** In our survey, 23% of women identified as gay or bisexual. Survey responses from this group were more negative than others in some areas of respect but we found no evidence to support these perceptions. There were clear guidelines on decency and managing relationships and we considered the establishment's approach to be appropriate. We found this group received good, individual support. Transgender women felt supported and a designated prison officer provided sensitive support to women with gender and transgender issues. Community support for lesbian, bisexual or transgender prisoners who had experienced abuse was promoted.
- 2.32** Information about the mother and baby unit (MBU) was provided on arrival. Pregnant women we spoke with were satisfied with their support and antenatal care was equivalent to what was available in the community (see section on health services, delivery of care (physical health), paragraph 2.74).
- 2.33** The MBU provided suitable accommodation and better facilities, offering mothers and babies a safe and nurturing environment. Six mothers and babies were resident during the inspection. The regime had improved and women could now cook for their children and mothers could keep albums of photos of their babies provided by the prison.
- 2.34** The admissions board was appropriately constituted; it made decisions about admissions to the MBU efficiently but sensitively. Fortnightly boards reviewed the care plans and progress of all mothers and babies.
- 2.35** Families could visit mothers and babies in the MBU, which the mothers appreciated. Arrangements for children to leave their mothers at the required age were sensitive and mothers were consulted in advance. The Bronzefield nursery was excellent. Nursery staff acted as key workers and took children to activities in the community, enabling women to go to work.
- 2.36** Relationships in the unit were relaxed and caring; mothers we spoke with felt well supported and appreciated the service. The regime had been relaxed so that women were not subject to unnecessary security restrictions. Staff members were trained in paediatric first aid and infant resuscitation. Male staff were still occasionally deployed in the MBU overnight.

Recommendations

- 2.37** Foreign national women should receive regular free telephone calls that are long enough for them to be able to maintain good contact with their children and their carers.
- 2.38** Disability assistants should receive appropriate training for their role.

Faith and religious activity

Expected outcomes:

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

2.39 *Faith provision and chaplaincy facilities were very good and there was a variety of activities for those of faith and no faith.*

- 2.40** Faith provision was very good, as were the facilities and activities. The department ran simultaneous activities throughout the day and into the evenings in well-equipped rooms. Some activities were for non-English speakers.
- 2.41** The chaplaincy was well led and coordinated and comprised of full-time and part-time representatives of all major faiths as well as chaplaincy assistants. Community-based volunteers and groups provided input and the chaplaincy's work was well integrated into the work of other prison departments.
- 2.42** Mothers and babies could join other women at communal services, and faith festivals were integrated within the diversity diary.
- 2.43** Pastoral care was freely available and we observed several young women experiencing emotional distress receiving sensitive support. A qualified counsellor offered support to those with deep emotional problems in addition to bereavement and loss.
- 2.44** Women could be directed to support from local faith providers in the community and receive mentoring prior to and following release.

Complaints

Expected outcomes:

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

2.45 *The complaints process was efficient and used to inform service improvements.*

- 2.46** Complaint forms were freely available and efficiently processed. There were about 163 complaints per month with approximately 23% upheld. Most complaints were about medical

or relatively minor matters. Responses were typed, polite and addressed the issue raised; all complaints received a response on time in the six months up to the inspection. A senior manager appropriately dealt with complaints about staff. Quality assurance processes were in place and complaints were discussed at senior management team meetings. Women raised concerns at various meetings with senior managers, including at prisoner consultation and equality meetings and local resolution was encouraged.

Legal rights

Expected outcomes:

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

2.47 *Women had access to a good legal rights service, which included visits from the Women's Advice Service. Bail advice was adequate.*

2.48 In our survey, fewer than the comparator and when compared with the last inspection found it easy to get bail information. Nevertheless, we found that caseworkers provided women with adequate bail advice and 22 women had been released on bail in the three months prior to the inspection. A solicitor from the Women's Advice Service provided legal advice twice a month. The library was well stocked with legal text books.

Health services

Expected outcomes:

Women 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 women could expect to receive elsewhere in the community.

2.49 *Prisoners remained very negative about health services, although overall we found them reasonably good. Gaps in service provision were being addressed and waiting times for all services were reasonable. Access to a female GP was appropriate and antenatal services were impressive. The inpatient unit provided residents with good support, but its therapeutic role was compromised by the large number of women who were admitted due to a lack of space in the house blocks. Pharmacy provision had improved but some aspects of medication management remained poor. Access to dental services was satisfactory, but governance arrangements were inadequate. Primary mental health services were too limited; however this was offset by excellent secondary mental health services.*

2.50 *The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁶ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.*

⁶ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

Governance arrangements

- 2.51** *The CQC found there were no breaches of the relevant regulations.*
- 2.52** Sodexo Justice Services (SJS) provided primary physical and mental health services; while Central and North West London NHS Foundation Trust (CNWL) ran the secondary mental health provision. The providers, prison and commissioners worked together effectively supported by an appropriate range of meetings. A new health needs assessment was being commissioned. Lessons learned from incidents, complaints and feedback from the women informed service delivery.
- 2.53** A non-clinical manager supported by two clinical lead nurses provided leadership and a new clinical manager had been recruited. The team had severe problems recruiting and retaining registered nurses and, despite an improving picture, 25% of nurses' posts were unfilled during the inspection. Regular agency staff made up the shortages. Most service delivery was not adversely affected. Nurses were on site 24 hours. An agency provided consistent GPs every day.
- 2.54** Health staff were easily identifiable and the health interactions we observed were good. Consultations were normally held in private. Clinical records were variable, including some poor GP records that did not demonstrate any assessment, rationale for prescribing or ongoing plan. Records did not always record the need for or use of professional interpreting services.
- 2.55** Health staff had good access to training, performance appraisals and relevant clinical protocols; however, access to clinical supervision was too limited. Joint working across teams and with other prison departments was good.
- 2.56** The clinical environment in the main health department and house block 4 were good. Clinical rooms in the other house blocks were cramped; some sinks did not meet infection control standards and the main dispensary in house block 1 required refurbishment. Nurses cleaned the clinical rooms; the rooms were superficially clean but this was a poor use of nursing time and NHS standards of cleanliness were not met.
- 2.57** Standardised emergency bags including oxygen and automated defibrillators were located in clinical rooms across the prison. However, we found some expired items despite regular checks. All custody staff were trained in first aid. Ambulances were called in an emergency; they responded promptly.
- 2.58** There was a dedicated lead staff member for older prisoners. A CNWL older persons' consultant screened all women over 55 for dementia through a one-year pilot scheme and supported women with dementia under the care programme approach (CPA) (mental health services for individuals diagnosed with a mental illness). Women had satisfactory access to most screening programmes, but routine mammogram screening was only held annually and had not occurred since July 2014, which was inadequate.
- 2.59** Women had good access to health promotion information, immunisations, sexual health services and treatment for blood borne viruses, but relevant barrier protection was not provided. The gym provided prompt access to smoking cessation support as part of a healthy living programme and proactively prepared prisoners for the smoking ban.

- 2.60** In the seven months to October 2015, Surrey County Council had received 36 referrals for assessment under the Care Act 2014⁷ for those with physical, mental health and learning disability needs. Self-referrals were appropriately encouraged and assessments were prompt. Social care staff were visible in the prison and well integrated with key departments. SJS health staff supported women with personal care needs while the social care team recruited staff. Access to mobility and health aids was good.
- 2.61** In our survey fewer prisoners than the comparator said that access to and the quality of health services were good. While women we spoke to were overwhelmingly negative, particularly about waiting times for services and prescribing practices, we felt the services provided were reasonable overall. Well-supervised prisoner well-being representatives provided health care information to other prisoners.
- 2.62** Prisoners complained about health services using the prison complaints system, which was insufficiently confidential. Most complaints were about medication and the responses we sampled were satisfactory.

Recommendations

- 2.63 All clinical areas should meet relevant cleaning and infection control standards.**
- 2.64 Older women should have timely access to mammogram screening programmes.**
- 2.65 Women should have easy confidential access to barrier protection.**

Housekeeping points

- 2.66** Record keeping should consistently meet nursing and medical professional standards and include an assessment, working diagnosis and plan where appropriate and clinical records should be audited regularly.
- 2.67** All health staff should have regular recorded access to clinical supervision.
- 2.68** All emergency equipment should be checked regularly and should not exceed their expiry date.
- 2.69** Women should be able to complain about health services through a well-publicised confidential system that is separate from the prison system.

Delivery of care (physical health)

- 2.70** Nurses promptly assessed new arrivals in reception and made appropriate referrals. All women with immediate health needs saw a GP in reception. Community records were requested promptly, however, we were concerned that health staff only pursued requested records that had not arrived after three days, which caused prescribing delays. Women received a further health assessment within three to five days.

⁷ The Care Act 2014 outlines new obligations on local authorities and looks at the way in which local authorities should carry out carers' assessments and needs assessments; how they determine who is eligible for support; and how they charge for both residential care and community care.

- 2.71** Women made requests for health appointments via the pod and applications were processed promptly. Women could not request GP appointments and had to attend nurse triage first. Until the first day of the inspection, women could not provide supplementary information and appointments were allocated according to the time of their receipt rather than clinical priority. These two factors contributed to women's negative perceptions of access to nurses and GPs. Urgent GP and nurse appointments were available every day. Access to a female GP was now satisfactory.
- 2.72** Waiting times for all clinics were reasonable. An agency provided podiatry services until the newly commissioned service started. Some women attended the hospital for physiotherapy and a new in-house physiotherapy service was being commissioned. Non-attendance rates were monitored and had declined to around 10%.
- 2.73** Staffing changes meant that not all nurses were trained in nurse triage or lifelong conditions management and there were no nurse-led epilepsy review clinics; however, these issues were being addressed. Regular clinics were held for those with diabetes, hypertension and respiratory conditions and records we sampled included satisfactory care plans.
- 2.74** A weekly consultant-led service provided women with prompt access to sexual health and contraceptive services. Women had access to independent advice on terminating their pregnancy. The impressive in-reach antenatal services were well integrated with other prison departments, including health services, and included regular specialist midwife and consultant clinics, as well as scans. Partners of pregnant women could attend scan appointments in the prison subject to security clearance, which was excellent.
- 2.75** The nurse-led inpatient unit provided a reasonable environment for up to 19 women. Communal areas were pleasant, clean and well used, however the outside exercise area was stark. The three-bedded ward had insufficient privacy screening. All inpatient beds formed part of the prison's certified normal accommodation and were routinely used when house blocks were full, which compromised its therapeutic role, although those with clinical needs were prioritised. Officers, nursing and mental health staff supported women well. A weekly meeting, regularly attended by representatives from key prison departments as well as social care and mental health workers, reviewed residents' needs and women they were concerned about in the main prison. Residents had good access to appropriate activities in and out of the unit. When they were discharged, a formal handover to relevant health and operational staff promoted continuity of care.
- 2.76** External hospital appointments were generally well managed and waiting times were satisfactory.

Recommendations

- 2.77 Nurse triage and GP appointments should be allocated on clinical need.**
- 2.78 Only women with clinical needs should be accommodated in the inpatient unit.**

Housekeeping point

- 2.79** Women's privacy in the inpatient ward area should be protected by adequate screening that meets current infection control guidance.

Good practice

- 2.80** *Antenatal services were well integrated with other prison departments and offered an impressive range of timely services to support women during pregnancy.*

Pharmacy

- 2.81** Medicines were supplied promptly by Boots UK. A full-time onsite pharmacist and dispenser offered better provision. Women had good access to weekly well-advertised pharmacist clinics. The prison had an appropriate selection of current standard operating procedures. A well-attended monthly medicine management committee addressed all key areas.
- 2.82** The pharmacy room, which had been refurbished, was based in the health care department and was used to store stock; medicines were distributed from the pharmacy room to the house blocks. Medication was stored appropriately in all areas and trolleys were secured. Refrigerator temperatures were adequately monitored, but room temperatures were not. The date of stock medication was checked, but stock usage was not audited to ensure it tallied with prescriptions.
- 2.83** Medicines were prescribed on paper forms and recorded on SystmOne (the electronic clinical information system) so that prescribing could be monitored. An SJS formulary (medications used to inform prescribing) was used. The range of medicines nurses could administer without a prescription had improved and was good; however these medicines were not sufficiently monitored.
- 2.84** A current in-possession policy and risk assessment was used. Supervised medicines were given to women four times a day, but they still received night sedation at 5pm, which was too early. Most supervised medication was still administered from stock instead of from named patient medication, which made it difficult to monitor women's individual medication use.
- 2.85** Staff did not consistently record or follow up women who failed to attend medication administration sessions. Most medication administration we observed was appropriate, although we observed one occasion where medication, including methadone for seven women, had been placed in pots prior to their arrival, which was poor practice.
- 2.86** An office was used to administer general medicines in house block 1 from a trolley. A perspex pane had been inserted in the door for drug administration, but the design prevented nurses and women from communicating easily and the lack of hand-washing facilities and adequate surfaces made the environment unsuitable.
- 2.87** Custody staff supervised medication administration effectively and ensured patient confidentiality was protected. The design of the medication administration areas in house blocks 2 and 3 gave prisoners easy access to medication placed near the hatch, presenting a risk of diversion.
- 2.88** We found discrepancies in the controlled drug records and some controlled drugs were not audited frequently enough. Methadone and buprenorphine were stored in house block 1; all other controlled drugs were stored in the main pharmacy. There was still no clear audit trail for methadone and buprenorphine that was transferred to house block 1. Single doses of other controlled drugs continued to be taken from the pharmacy to the house blocks for each administration, which was unsafe.

- 2.89** Prescribing of medication that was liable to abuse followed national guidance. Women reported and we observed delays in the continuation of community prescribing; others reported that community prescribing had been stopped or reduced on their arrival. The files we examined demonstrated an appropriate rationale for prescribing changes, but the process lacked input and support from a range of professionals.

Recommendations

- 2.90** **Night sedation and other medication that should be taken at night should be given at the correct time to ensure it is clinically effective.**
- 2.91** **The medicines and therapeutics committee should ensure named patient medication is used consistently.** (Repeated recommendation 2.100)
- 2.92** **The security and administration of medication should consistently meet professional standards and non-attendance should be recorded and followed up.**
- 2.93** **Controlled drug management should be robust; it should include regular accurate recorded audits, use of order books when stocks of controlled drugs are moved within the establishment and the secure storage of stocks of controlled drugs in the area where they are being administered.**
- 2.94** **Changes to community prescribing regimes should occur as part of a multidisciplinary process and involve prompt access to additional support once the woman is settled in the prison.**

Housekeeping points

- 2.95** The use of general stock and medication issued by nurses without a prescription should be monitored and audited so that stock supplied can be reconciled against prescriptions issued.
- 2.96** The temperature of all rooms where medication is stored should be monitored and appropriate steps taken to ensure medicines are stored correctly.
- 2.97** Community prescribing regimes should be confirmed and rewritten promptly to ensure continuity of care.

Dentistry

- 2.98** Four dental sessions per week offered women an appropriate range of treatment and waiting times were reasonable, although in our survey fewer women than the comparator said it was easy to see the dentist (10% against 17%). The dental suite had been significantly improved to meet national guidance. However, governance arrangements to ensure consistently safe and effective care remained inadequate; there were no protocols to support consistently effective decontamination and treatment procedures, and some equipment, including kit used in an emergency, was not fit for use. An action plan to improve radiation safety had not been completed.

Recommendation

- 2.99 Dental governance arrangements should be improved to ensure that care and treatment is consistently safe and effective and Radiation Protection Adviser recommendations should be implemented without delay.**

Delivery of care (mental health)

- 2.100** In our survey more prisoners than the comparator and compared with the last inspection reported having emotional well-being or mental health problems (66% against 59% and 53% respectively) and fewer than the comparator said they had received help with those problems (42% against 61%).
- 2.101** Women could refer themselves to primary or mental health in-reach team (MHIT) services. A weekly multidisciplinary meeting considered all referrals and ensured women received appropriate assessments. The primary mental health team received around 60 referrals a month and offered prompt nurse assessments and referrals to the MHIT and GP, but did not deliver group therapies or provide ongoing individual care. This limited service contributed to the negative perceptions women had about the mental health support they received. Counselling services were available through the chaplaincy. Psychological therapies for women with mild to moderate depression and anxiety were being introduced.
- 2.102** The MHIT had an impressive skills mix and provided a good range of individual and group interventions in response to patients' needs, including a group for vulnerable women co-facilitated by an ex-prisoner. The team primarily supported women with a severe and enduring mental illness, although it also assisted some with mild and moderate needs and those who had been charged with a serious offence to offset the limitations of the primary mental health service. The team received around 60 referrals a month and was supporting 135 women during the inspection, including 43 that were subject to the CPA. Prisoner mental health representatives promoted the service among women. A planned joint service with the prison for high risk women with personality disorders was a promising initiative (see section on disciplinary procedures, segregation, paragraph 1.64).
- 2.103** Most of the 17 women transferred to external mental health units in the six months to September 2015 had received prompt assessments and were transferred within four weeks but some experienced excessive delays of up to 12 weeks.
- 2.104** The MHIT provided comprehensive mental health awareness training to all new custody staff, additional bespoke training to relevant staff groups and regular supervision meetings for segregation staff to help them support the women in their care.

Recommendations

- 2.105 Women with mild to moderate mental health problems should have access to a full range of support, including individual help, groups and clinical psychology sessions, within a clear primary mental health pathway.**
- 2.106 Patients requiring a transfer under the Mental Health Act should be transferred within the current transfer time guidelines.**

Catering

Expected outcomes:

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

2.107 *Although we found the range and standard of food to be satisfactory, in our survey, only 19% of respondents said it was good.*

2.108 Lunch and dinner were selected from a four-week rolling menu that offered a reasonable variety of healthy food. Menu options included at least five portions of fruit and vegetables a day and hot meals at lunchtime and in the evening. Breakfast was served in the morning and always included cereal, fruit, hot toast and fresh milk. Women received a cooked breakfast at weekends. The food we tasted was satisfactory, meals were well presented and portion sizes were adequate. In our survey, however, only 19% of respondents said it was good or very good.

2.109 The main kitchen was clean and well maintained. A kitchen journal recorded the dates, times and food temperatures from delivery to being placed on food trolleys. Serveries in house blocks were very clean and well supervised during meal times. Women could eat their meals together out of their cells.

2.110 Consultation arrangements were good. There were food comments sheets on each wing and women were surveyed twice a year. The catering manager attended consultation meetings with prisoners and there was evidence that their views were taken seriously and their suggestions acted on.

Purchases

Expected outcomes:

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

2.111 *The shop was well managed and offered a reasonable range of goods but the selection of catalogues was limited and most women did not have access to them.*

2.112 Women could get their first canteen order promptly and subsequent canteen orders were placed through the efficient electronic pod system. The prison shop provided a reasonable range of items suitable for the population held which could be ordered and received on a weekly basis. Only a small range of catalogues was available and then only to women who were on the enhanced level of the incentives and earned privileges scheme. Some women told us that they had little or no opportunity to buy clothes.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All women are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁸

3.1 *Time out of cell for the majority of prisoners was reasonable. Although we found that across the prison about 20% of the population were locked in their cells, it was disproportionately higher on some spurs.*

3.2 The prison's published activity schedule for prisoners (the core day) indicated that fully employed women could achieve just over nine hours out of their cells Monday to Thursday and about seven on Friday and at weekends. Women who worked part time received six hours and unemployed prisoners just under five. This included short periods of association in the early evening and domestic periods every day that were rarely cancelled.

3.3 During roll checks in the middle of the day we found about 20% of the population locked up. However, the number of women locked up on the induction spurs in house blocks 1 and 2 was disproportionately high at 67% and 80% respectively.

Recommendation

3.4 All women should be able to access a full prison regime every day.

Learning and skills and work activities

Expected outcomes:

All women can engage in activities that are purposeful, benefit them and increase their employability. Women 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 overall effectiveness of learning and skills and work required improvement. There were sufficient activity places for the population and the allocations process was efficient. The range of vocational training provision had improved and women developed a variety of personal and social skills; however, the prison did not do enough to recognise or accredit them. More needed to be done to address weaker aspects of the provision. The quality of teaching, learning and assessment was too variable and not enough women achieved functional skills qualifications in English and mathematics. The library and gym provided some good opportunities.*

⁸ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

3.6 Ofsted⁹ made the following assessments about the learning and skills and work provision:

Overall effectiveness of learning and skills and work:	Requires improvement
<i>Achievements of women engaged in learning and skills and work:</i>	Requires improvement
<i>Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment</i> :	Requires improvement
<i>Personal development and behaviour</i>	Good
<i>Leadership and management of learning and skills and work:</i>	Requires improvement

Management of learning and skills and work

- 3.7** Managers' self-assessment of learning, skills and work provision was reasonably accurate. It informed the learning and skills strategy, which prioritised the key areas for improvement in vocational training and prison work. The prison had been slow to ensure women's skills in English and mathematics were prioritised and there were insufficient opportunities for prisoners to progress beyond level 1 either in education or by using these skills in other activities.
- 3.8** Managers' access to information about women's progress and achievements had improved since the previous inspection but it still required further improvement. Processes for collating progress and achievement data each month were cumbersome and managers spent too long producing reports from multiple sources. Managers could not analyse the progress or achievements of different groups of women sufficiently. The prison recognised shortcomings in management information systems and planned to improve them.
- 3.9** Partnership working across prison departments was good. Learning and skills managers worked well with the integrated offender management unit to develop plans for vocational training, which provided women with skills they could use on release. Good links with local employers, community groups and charities provided a small number of eligible women with a greater number of release on temporary licence (ROTL) activities.
- 3.10** Managers used performance management procedures well to help staff identified as underperforming to improve and to challenge non-compliance. Although all tutors and instructors had achieved basic teaching qualifications, only a few were qualified to a higher level. As a result, many tutors and instructors did not have the skills or confidence to plan activities that challenged women sufficiently, particularly with regards to women's skills in English and mathematics.
- 3.11** The process for observing teaching and learning ensured that tutors and instructors were observed frequently. However, although there were a few good examples, the quality of observations was too variable. Observers focused too much on what tutors were doing rather than evaluating the impact tutors had on learning and the progress women made. As a

⁹ 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>.

result, development plans following observations did not drive improvements quickly enough.

Recommendation

- 3.12 The prison should continue to develop information systems so that managers have access to detailed, reliable data about women's progress and achievements to enable them to make improvements where they are needed.**

Provision of activities

- 3.13** The prison provided sufficient activity places enabling the vast majority of the population to be fully occupied and all to take part in part-time activities. There were around 510 places each morning and 470 each afternoon. Processes for allocating women to learning, skills and work were fair and prompt. During induction, women received good information about the activities available.
- 3.14** Women could follow mixed programmes combining part-time education and work. Improving their skills in English and mathematics was a priority, but the approach had only recently been introduced. Staff had not explained this to the women and a minority were disgruntled at having to attend classes in these subjects.
- 3.15** In addition to English and mathematics, education offered courses in English for speakers of other languages (ESOL), information and communications technology (ICT) and personal and social development. Women had good opportunities to follow distance learning courses; two were taking degrees through the Open University.
- 3.16** The prison had increased the number of vocational training places since the previous inspection following a good analysis of local employment and skills needs. Vocational training included: hairdressing and beauty therapy; textiles; and a range of activities in a social enterprise workshop. Plans were progressing to provide vocational training in hospitality and catering. Work activities were available in cleaning, kitchen and laundry positions, gardening and painting. Cleaners and kitchen workers could take accredited qualifications, but others in vocational training or work had limited opportunities to do so, particularly in occupations not traditionally followed by women.
- 3.17** Although the prison planned to provide level 2 qualifications in vocational training for women on longer sentences, the vast majority of qualifications that women could achieve through education, vocational training and work were at level 1 or below. This was not challenging enough for a few women.

Recommendation

- 3.18 Plans to expand the range of vocational training should be implemented and further opportunities for women to gain qualifications through vocational training and prison work should be considered, particularly in occupations not traditionally followed by women.**

Quality of provision

- 3.19** The quality of teaching, learning and assessment required improvement, reflecting significant differences in women's attainment. Although many lessons were well planned and engaging, there was too much variability across learning activities. Most tutors used a wide range of teaching methods to create enjoyable sessions. They used good questioning techniques to check women's understanding. However, too few tutors used this opportunity to ask follow-up questions to extend women's subject knowledge. All classrooms had interactive learning technology, which enhanced the range of teaching methods and resources available to tutors, but few made full use of it.
- 3.20** Tutors and instructors did not promote or develop women's English and mathematics skills in education classes sufficiently outside lessons in these subjects or in vocational training and work. They did not always correct spelling or punctuation errors in women's written work.
- 3.21** Tutors and instructors provided women with good personal support and encouragement. A designated tutor and peer mentor provided women at risk with good in-cell support to continue their education. Women following distance learning programmes also received good support. In most sessions, tutors used the large number of women designated as classroom helpers well; they provided individual support to those with wide-ranging ability levels so they could progress at a pace that suited them.
- 3.22** Tutors and instructors gave women helpful verbal feedback, which written feedback rarely reflected. Too often, it failed to outline how they could develop further. Tutors and instructors did not always set sufficiently detailed targets in women's individual learning plans. As a result, they were not always sufficiently clear about their strengths, the progress they had made, or what they needed to do to improve.
- 3.23** Vocational training took place in good quality facilities. The hairdressing and beauty salon and textiles and social enterprise workshops closely mirrored commercial premises. Work activities were managed well. Women employed as gardeners, cleaners and in the painting party worked on a range of tasks around the prison. These activities allowed most women to develop good vocational skills.
- 3.24** Tutors in education and vocational training planned a good range of activities that prepared women for life outside the prison and celebrated diversity.

Recommendation

- 3.25** **Tutors and instructors should provide women with more detailed written feedback so they know how they can develop; individual learning plans should have clearer targets so women understand their strengths, what they must do to improve and what progress they are making.**

Personal development and behaviour

- 3.26** Many women had significant personal difficulties. Staff set clear expectations and provided good support. As a result, nearly all women improved their attitudes and worked well with their peers. Workers developed good teamwork skills and respectful working relationships with their fellow workers and instructors. The majority of women had raised their self-esteem significantly.

- 3.27** Women who aspired to become self-employed received good support through information events led by external businesses. However, those taking education or vocational training courses in industries such as beauty therapy or ICT received little information or advice to help them improve their understanding of employers' expectations.
- 3.28** Attendance and punctuality were good. Women improved their personal and social skills by participating in a good range of innovative activities, such as the mind, body, spirit and soul event and when producing the monthly newsletter, *Banter Magazine*. Women said they were more able to express their feelings, knew how to keep their children safe and were better able to show affection after attending parenting classes. The Body Zone programme in the gym promoted appropriate attitudes to body image and there were work opportunities at a charity that supported and advised women on preparing for interviews.

Education and vocational achievements

- 3.29** Achievement rates across education varied too much. The proportion of women who achieved qualifications at level 1 in functional skills in English and mathematics was small. Only just over half of the women who took functional mathematics at entry level in 2015 succeeded, which required urgent improvement. (See main recommendation, paragraph S47.) A large proportion of women achieved qualifications in a few subjects, such as personal and social development, ICT and ESOL. In vocational training, many women achieved level 1 vocational qualifications in textiles, business enterprise, hairdressing and beauty therapy.
- 3.30** The standard of women's work in vocational training and prison work were good and women developed good basic occupational skills through their work in the gardens and the painting party.
- 3.31** Women who acted as peer mentors developed good mentoring and support skills through their activities in all areas of the prison. Other women valued their support. All women who took the peer mentoring course in the year leading up to the inspection achieved a level 1 qualification; the vast majority also achieved at level 2.

Library

- 3.32** Library facilities, managed by a suitably qualified librarian supported by two orderlies, were good. Managers used data well to monitor library use by house block but did not collect data on different groups of women's use to identify under-represented groups. In our survey, fewer women (39%) said they used the library at least once a week compared with the previous inspection (57%). Prison records showed a decline in library use after access times had been changed to evenings and weekends to reduce the disruption daytime visits caused to education. Women in the health care, mother and baby and separation and care unit (the segregation unit) could visit on Friday afternoon. Special weekly visiting arrangements were made for retired women and those with additional support needs.
- 3.33** The library had a suitable range of fiction and non-fiction titles, DVDs and CDs. A wide selection of books was available for foreign nationals and there were books for young offenders. Prison Service orders and legal texts were available. Book losses were high.
- 3.34** Women made good use of six computers for letter writing, distance learning research and job searches using the virtual campus (internet access for prisoners to community education, training and employment opportunities).

- 3.35** Library staff supported the Turning Pages mentoring scheme well to help prisoners learn to read. Three full-time mentors supported around 55 readers. They also encouraged participation in Storybook Mums (in which prisoners record stories for their children) and the Six Book Challenge reading scheme and organised reading activities on family days.

Recommendation

- 3.36** **Library staff should collect data on women's use of the service to identify under-represented groups and ensure the provision is meeting all women's needs.**

Physical education and healthy living

Expected outcomes:

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

3.37 *Physical education (PE) was managed well and there was a good range of facilities and recreational activities. Opportunities for women to gain accredited vocational awards in PE up to level 1 were good. Plans to introduce level 2 qualifications were in place. The prison had good links with local women's football teams. The benefits of healthy living were promoted well and links between PE and health care staff were good.*

- 3.38** Women benefited from clean, high quality PE facilities, which included a large multi-purpose gym, an outdoor artificial surface pitch and a fitness room with an appropriate variety of well-maintained cardiovascular equipment and small range of weights. There were appropriate changing facilities and the showers in the gym had adequate privacy screens.
- 3.39** An appropriately qualified team manager and four staff were supported well by two PE orderlies and a cleaning orderly. Women received a thorough induction to PE and healthy living prior to gaining access to the facilities.
- 3.40** An extensive weekly programme of physical training sessions and activities operated during the day. Activities included step-aerobics, yoga and circuit training as well as football in which local women's football clubs were involved. Women could access the gym for recreational activities on Fridays, every evening and during the weekend.
- 3.41** PE staff designed appropriate programmes for women who had disabilities. Good links with health care staff ensured that women's medical conditions and rehabilitation needs were met. Healthy living was promoted well and women could take the entry-level award in the principles of health and fitness. A large proportion of women who followed these programmes achieved the qualification. Women could not take qualifications in fitness and leisure at level 2, although preparations to introduce them were being made.
- 3.42** Managers recorded attendance at PE and knew the number of women who had accessed PE each week. They did not monitor participation levels in detail to identify individuals or groups who were not attending or establish the reasons why.

Recommendation

- 3.43** The prison should monitor participation levels in detail to identify which groups or individuals are not attending PE to ensure the provision is meeting the needs of all women.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

- 4.1** *The prison had a comprehensive reducing reoffending strategy based on a needs analysis and offending information. On the whole offender management and resettlement had been successfully integrated. The introduction of community rehabilitation companies (CRCs) had not yet added value to the resettlement provision. Release on temporary licence (ROTL) was used effectively and appropriately.*
- 4.2** Since the last inspection a new reducing reoffending strategy had been produced, based on a recent needs analysis. The strategy included a good range of information about women's needs from the needs analysis survey as well as about their offending behaviour, based on segmentation data. Strategic aims were identified under the resettlement pathways although the detail of how these would be achieved had not been spelled out in an action plan. Action planning was taken forward in the reducing reoffending meeting, which was held monthly.
- 4.3** Since our last inspection the prison had created an integrated offender management unit (IOMU), which was organised into clusters of caseworkers and administrators working with women from specific court areas. Caseworkers managed the sentence planning and resettlement needs of women so that the two processes were integrated.
- 4.4** The reducing reoffending meeting was well attended by resettlement, education, substance misuse and community chaplaincy staff. It also included managers from the CRCs working in the establishment, which helped clarify their working relationship with the prison. At the time of the inspection this working relationship was not functioning effectively and there was uncertainty about the role and value of CRC activity in the establishment, given the effectiveness of the IOMU caseworkers (see section on reintegration planning, paragraph 4.30).
- 4.5** ROTL was a central part of the reducing reoffending strategy and focused on maintaining family relationships and developing employment opportunities. Women allocated to closed conditions were eligible to apply but risk assessments were scrupulously applied, reducing the number considered suitable. In the six months prior to the inspection 37 women had been granted ROTL and a number of positive initiatives had led to employment for some.

Offender management and planning

Expected outcomes:

All women have a sentence based on an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody.

Women, together with all relevant staff, are involved in drawing up and reviewing plans.

4.6 *Offender management was good and assessments, target setting and contact took place promptly. Home detention curfew (HDC) procedures were sound except where there were delays, which could have been avoided. Public protection processes were good and well integrated in the prison. Allocation assessments were based on a good range of information but did not involve the women sufficiently. Women serving indeterminate sentences were well managed and they had access to a range of appropriate opportunities.*

- 4.7** In our survey fewer sentenced women than in comparator establishments said they had a sentence plan; of those with a sentence plan, fewer than in similar prisons said they had been involved in its development. Although the IOMU had completed offender assessment system (OASYS) documents and sentence plans on time for all eligible women, staff were following an instruction to complete abbreviated risk reviews for those who were lower risk, which meant they did not have a formal sentence plan. We found that in these cases objectives and targets had been agreed with the women but not set out as a formal plan, which might have accounted for the survey's negative finding.
- 4.8** Offender management work was mostly good. Assessments of prisoners' likelihood of reoffending and risk of harm were mostly sufficiently good and risk management plans were adequate. In the cases we examined we found that communication between caseworkers and prisoners was excellent. Prisoners could make applications and send messages directly to their caseworkers from the electronic pod in their house block and typically reported receiving very prompt replies.
- 4.9** Caseworkers recorded a high level of contact with prisoners on P-Nomis (the Prison Service IT system). In addition, custody support officers (personal officers) recorded monthly contact with the women on P-Nomis and shared these records with caseworkers. In our survey fewer women than at comparator prisons said nobody was helping them achieve their sentence plan targets and 29% identified their custody support officer as helping them, more than the comparator of 18% (see section on staff-prisoner relationships, paragraph 2.13).
- 4.10** Contact with prisoners was purposeful, focused on individual needs, supportive and relevant to sentence plans in the clear majority of cases. All prisoners interviewed knew who their caseworker was, all said they were accessible and responsive and most were in regular contact with them; eight of the 10 interviewed spoke highly of the help and support they received.
- 4.11** In our survey only 49% against a comparator of 71% said they could achieve any of their sentence plan targets in the prison, reflecting the lack of accredited programmes, victim awareness work or thinking skills programmes. However, sentence plans did acknowledge the need to transfer women to other prisons in order for them to make progress and in our survey more than the comparator said there were plans for them to achieve sentence plan targets in other prisons. We also found some examples of offender supervisors carrying out programmes of work with women in conjunction with other organisations. In one case the offender supervisor and a recovery team worker jointly delivered Hertfordshire NHS Trust's 10-week cognitive behavioural therapy skills training course to a prisoner, providing one-to-one sessions. We were also reassured that the Chance 2 Change programme (which tackles

the emotional issues that underpin offending behaviour) was being reintroduced and would provide women with a further sentence plan option if they needed help to change their behaviour.

- 4.12** HDC processes were well designed and the sample of successful and unsuccessful applications we examined showed that decisions were reasonable. In the six months prior to the inspection 111 applications had been considered and a large proportion, 83% (92 applications), were successful, demonstrating that the prison had not been risk averse.
- 4.13** Not all applications were dealt with by women's eligibility date and prisoners complained of delays. This was usually for reasons outside the prison's control but we were concerned to find a case where the HDC application had been approved on the woman's eligibility date but the licence was not signed by the controller until nine days later, delaying her release for no compelling reason.

Recommendation

- 4.14 Women suitable for HDC should be released on their eligibility date.**

Public protection

- 4.15** Public protection procedures were well embedded in the work of the prison and information-sharing was well developed, which helped staff monitor women's communications effectively and regulate visits. The monthly public protection meeting had recently been merged with security tactical tasking meetings. Procedures by which cases were selected for discussion had also been streamlined to avoid repetition. Offender supervisors and managers felt the new arrangements had improved the quality of the meetings and ensured a better representation of departments. The minutes of the meetings we saw confirmed broad prison department representation, along with a good level of attendance from offender supervisors and managers from the IOMU.
- 4.16** Satisfactory public protection arrangements were in place in all cases in our sample where they were needed. Risk management plans were mostly timely and adequate. Risk assessments for women who had applied for ROTL drew on an appropriate range of sources, including assessments of women's behaviour in the community and offending history as well as their behaviour in the prison. Successful ROTL applications clearly outlined the purpose of the licence and full details of the whereabouts of the woman during the period of release.
- 4.17** A sample of multi-agency public protection arrangement (MAPP) information-sharing reports were examined and found to be good. Minutes from the monthly reducing reoffending meetings recorded that offender supervisors' attendance at MAPP meetings to which they were invited was 100%; the team was confident about providing assessments and contributing to MAPP. They clearly felt well prepared and well supported in this work.
- 4.18** Preparations for the release of women posing a potential risk were well managed; the public protection meeting kept them under close scrutiny in good time for their discharge.

Allocation

- 4.19** Allocation reviews were timely and considered an appropriate range of information, including security, prison behaviour, offending history, caseworker assessments and progress

towards sentence plan targets. However, women were not formally involved in making representations or advised how to achieve progression if they were assessed for closed conditions, although this was offset by discussions with caseworkers in some cases.

- 4.20** Women assessed as suitable for open conditions were moved promptly. Thirty-one women in the prison were assessed as suitable for open conditions at the time of the inspection; those who were not moved were being considered for HDC, were residing in the mother and baby unit or were on a medical hold or undertaking ROTL placements.
- 4.21** When the prison was required to transfer women because of overcrowding, they were appropriately prioritised according to their closeness to home, length of sentence and sentence plan targets. Working relationships with establishments, especially HMP Send, were good and provided women with interventions that helped meet their sentence planning targets.

Recommendation

- 4.22 Women's views should be included in the allocation assessment process; prisoners should be given a clear indication of what they need to do to progress if they are assessed for closed conditions.**

Indeterminate sentence women

- 4.23** Forty women were serving indeterminate sentences, 33 of them life sentences, and support for them was good. Each woman had a caseworker and a custody support officer trained in working with indeterminate sentence prisoners. Women we spoke to told us that caseworkers developed clear sentence plans with them, which included relevant targets, and their custody support officers provided valuable support and advice through regular contact.
- 4.24** The prisoner 'lifer' representative met with the 'lifer' manager every week and forums were held every two to three months, ensuring communication with indeterminate sentence women was effective. Minutes from the forums and the views of women attending showed they were valuable.
- 4.25** Women who were remanded for offences which could have attracted an indeterminate sentence had access to the lifer representative who shared her experiences and knowledge with them.
- 4.26** Women serving indeterminate sentences had a good range of appropriate opportunities, including cookery and craft sessions and group meetings. Family days, which were provided every three months, could be held in the family room. Family photographs were taken periodically and family members were invited to attend sentence planning meetings.

Reintegration planning

Expected outcomes:

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

4.27 *Women's resettlement needs were assessed on arrival and targets identified. The achievement of resettlement targets had been seriously affected by legislative changes which had led to an increase in the number of women in the prison for short periods. The work of the CRCs was not well enough developed or integrated into the IOMU. Procedures for discharging women were mostly adequate but licences were sometimes prepared too late, which meant the requirements could not be discussed the day before release. There was a good range of family support work. Visits facilities were good and the range of family visits met the needs of women with families. Mail was sometimes delivered late. Women who had been subject to domestic abuse were identified and received support through prison and community resources. Women who had been sex workers were given sensitive support and advice. Arrangements to protect women who had been victims of trafficking were good. Finding accommodation for those being released had become more difficult. Support with employment, training, education and finance was good. Substance misuse and health 'through-the-gate' support was good, but an end-of-life policy needed to be developed. Only a very limited range of offending behaviour programmes took place.*

4.28 The integration of assessment and casework in the IOMU since the last inspection had improved the effectiveness of reintegration work. Women were assigned to a caseworker on arrival and their resettlement needs were promptly identified and a plan drawn up to meet them.

4.29 However, the delivery of outcomes had been hindered by the effects of recent legislation, requiring women on short sentences to comply with post-custody supervision licences. Turnover was higher than usual because women who had served short sentences and who had failed to comply with licence conditions were being recalled. In the six months prior to the inspection 380 women had been released subject to licence conditions and 119 had been recalled, compared with 89 released and 59 recalled over the corresponding period in the previous year. Staff told us that recalls were often for short periods, they disrupted resettlement arrangements that might have been made and gave staff and women little time to construct new resettlement plans. Managers were reviewing the situation and planned to consult with women who had been recalled to prison.

4.30 New national resettlement arrangements, known as 'through-the-gate' services, provided by CRCs had been introduced. Arrangements were complex: one CRC had overall responsibility and three were working with women from specific areas of the country. Working arrangements with existing caseworkers had not been well defined and we found that CRC staff were completing the resettlement needs assessment as they were contracted to do, but they did not deliver resettlement support. Caseworkers continued to assess and meet women's resettlement needs. CRC staff were located in a separate room from the caseworkers; they did not work with caseworkers to enhance their resettlement work. Although the prison was working with CRC managers, at the time of the inspection the situation was confused and women were uncertain how their resettlement needs would be met. This was reflected in our survey where women were more negative than the comparator when they were asked if they knew where to go for help with resettlement matters on release.

- 4.31** Discharge arrangements were mostly good and women had access to a good range of prison issue garments. Arrangements for providing property, valuables and travel warrants were appropriate. Women being released left through the visits area as members of the public, which was respectful.
- 4.32** We found that post-custody licences were sometimes not ready in time for caseworkers to explain the requirements in full to women the day before their release and they were usually covered in reception on the day of departure. Women who were so far into the release process might not have always understood the detail or importance of licence conditions, which might have contributed to levels of non-compliance leading to recalls.

Recommendations

- 4.33** **The prison should develop a strategy to meet the needs of women in the prison for short periods.**
- 4.34** **Working arrangements between the prison and CRCs should be clearly defined and ensure women's resettlement needs are met effectively, making the best use of resources available.**

Housekeeping point

- 4.35** Post-custody licences should be explained to women the day before their release.

Children, families and contact with the outside world

- 4.36** In our survey only 39% of women said staff had helped them maintain contact with family and friends compared with 49% last time and 52% in comparable establishments. We found that the dedicated family support staff provided a good range of specialist services.
- 4.37** Women who were primary carers were identified during induction and family support staff prepared support plans for women referred by caseworkers. They maintained contact with caseworkers so that work was integrated into resettlement planning. Family support staff assisted women whose families were involved with social services during their contact with the women as well as during separation and final contact visits.
- 4.38** Programmes to help women develop child care skills included the How to Nurture Children course and provided birthing companions to advise women through pregnancy. In addition family support workers offered individual support and advice. Women with children living outside the UK received help to maintain family contact through the charity Children and Families Abroad.
- 4.39** Women could book visits on arrival, any number of children could attend and additional visits for primary carers were available on application. Women whose families did not visit them were identified and offered additional telephone credit; the chaplaincy managed a team of volunteer prison visitors.
- 4.40** It was easy and effective to book visits through the pod system and there were sufficient visits places. A modern purpose-built visitors' centre was located outside the prison, although it was undergoing refurbishment at the time of the inspection and was not fully operational. However, it was clear it would provide good play and refreshment facilities. The

prison planned to provide visiting parents and carers with information from the Surrey Family Information Service.

- 4.41** The visits hall was spacious and comfortable. There were play facilities for children and a good range of refreshments. Staff in the visitors' reception area were respectful; in the visits hall oversight was adequate but not intrusive and an appropriate amount of physical contact was permitted. Women did not have to wear distinguishing garments.
- 4.42** A good range of family visits were provided, including monthly family days and 'mums and kids' visits, linked to a social visit with the children's carer. There were 'stay and play' visits in the mother and baby unit when women and children in the prison could spend time together with their partners and family. A family room in the visits area was used for extended family visits.
- 4.43** Access to telephones was good. Women could send as many letters as they wished. In our survey 49% said they had problems sending or receiving mail, more than in other prisons. Although we found women's mail was mostly managed appropriately, staff and women told us there were times when wing staff collected it too late for it to be distributed on the day it arrived and it was handed out the next morning.

Recommendation

- 4.44** **Mail should be delivered to women on the day it arrives at the prison.**

Victimisation, abuse and vulnerability

- 4.45** The prison's survey found that more than half of women (58%) had experienced domestic abuse and that 34% were experiencing it at the time they came into custody. The prison adopted a supportive and sensitive approach to abuse. This included a well thought out process for asking women during induction about their experiences, allocating solely female staff as caseworkers and providing access to a good range of resources in the prison and in the community. A caseworker planned services to meet the needs of victimised and vulnerable women and an impressive range was provided.
- 4.46** Women could attend a domestic abuse programme in the prison run by abuse response service Aurora and a programme for women aged under 25 dealing with sexual exploitation and violence in relationships and gangs. Staff from the Sexual Assault Referral Centre attended every month to provide individual counselling support. Practical legal advice was available through caseworkers who had received training from the National Centre for Domestic Violence, which also worked directly with women referred to them.
- 4.47** Women being released who were at risk of continued abuse received good help with preparations and advice. Links were established with independent domestic violence advisers in areas to which women were being released.
- 4.48** Good links had also been set up with multi-agency risk assessment conference (MARAC) processes, involving the police, social services and women's organisations in the community and safety plans were agreed.
- 4.49** Women who had been sex workers were identified and offered help, for example, through the Street Safe forum for women who had been involved in prostitution, and sexual health advice. On release they were given a safe sex pack and offered advice about community support organisations in their area. Practical advice about keeping safe was provided,

including access to the Ugly Mugs website, which identifies men considered dangerous to street workers in the areas to which they were being released. Women who wanted to end their involvement in prostitution had release plans drawn up through links with substance misuse services, accommodation providers and employers.

- 4.50** The prison-based branch of the Women's Institute met monthly and was designed to give women who had been victimised a sense of status in mainstream society as well as boost their confidence.
- 4.51** Caseworkers and the foreign national support team worked together to identify and help women who had been trafficked. The prison had a detailed prison policy on human trafficking and specialist organisation Stop the Traffik had trained staff in identifying, supporting and referring such women. Support included referral to the national referral mechanism (which identifies, protects and supports victims of human trafficking), the Salvation Army and the Poppy Project.

Accommodation

- 4.52** Outcomes in the accommodation pathway were deteriorating. In our survey, more than the comparator (30% against 25%) said they had housing problems; at the previous inspection only 21% had housing problems. Only 37% of women, compared with 60% in the comparator, said they knew of anyone who could help them with accommodation on release.
- 4.53** The number of women leaving with settled accommodation had dropped from 95.5% in 2014 to 83.7% in 2015 and 103 women had left with no fixed address in the six months prior to the inspection. The prison had issued tents to two women who were released without anywhere to go to and the chaplaincy often gave out sleeping bags. The prison said the lack of social housing stock in the southeast and local authority house departments' frequent downgrading of ex-offenders to 'low priority' were contributory factors. The community chaplain, however, was preparing a network of contacts in faith communities so that women could be placed in accommodation with them and receive support on release.

Education, training and employment

- 4.54** Arrangements for resettlement into education, training and work were good. Learning and skills managers worked closely with the IOMU to plan the delivery of employability and work skills courses for women approaching release.
- 4.55** Women had good access to the virtual campus (internet access for prisoners to community education, training and employment opportunities), which was available in the library and education classrooms. The prison employed a member of staff to manage it and help women to use it.
- 4.56** Managers had improved their analysis of the employment and skills needs of the local areas where women were released. The prison had used the information well to improve the range and appropriateness of vocational training provision.
- 4.57** Caseworkers worked closely with the education department and staff who dealt with activity allocations to ensure women who would benefit could access education, training or work that supported their long-term goals.

- 4.58** Links with employers, community groups and charities had improved and had led to an increase in the number of ROTL opportunities for a small number of eligible women.

Health care

- 4.59** Nurses ensured that all women who were being transferred or released had adequate supplies of medication and a letter for their GP; however women were not offered support to register with a GP. We saw examples of excellent community liaison and discharge planning for prisoners with severe mental health problems, including through-the-gate support from a worker from charity Women in Prison. A mental health in-reach team coordinator role specifically to deal with transfers, discharges and releases across Surrey was being established to support women with mental health needs during and after release.
- 4.60** There was no agreed palliative or end-of-life pathway or established links with local services; however none of the woman had required these services since our last inspection.

Drugs and alcohol

- 4.61** Drug and alcohol work was excellent. Release plans started early and links with many local agencies were very good. The recovery manager met regularly with community agency managers to share information and improve referral pathways. The recovery team had better links with the community service providers that had been unwilling to work with women prior to release.

Finance, benefits and debt

- 4.62** Caseworkers provided women with advice and information about finance, benefits and debt as did representatives from the Department for Work and Pensions who visited the prison three days a week. In the six months to October 2015, 10 women had received help to open a bank account. A further debt counselling service was on the point of starting.

Attitudes, thinking and behaviour

- 4.63** No accredited programmes were available, but women's needs were assessed, referrals and transfers to other establishments were efficiently facilitated by IOMU caseworkers as necessary. Funding had been agreed to provide some structured personality disorder work, but the provision could have been enhanced by interventions such as the thinking skills programme and victim awareness (see section on offender management and planning, paragraph 4.11).

Section 5. Summary of recommendations and housekeeping points

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

Main recommendations

To the governor

- 5.1** All aspects of safer custody work should support efforts to reduce problematic behaviour and support women who are at risk, enhancing women's feelings of well-being and safety. (S46)
- 5.2** The prison should improve the effectiveness of education and work activities to ensure that more women achieve qualifications in English and mathematics; the occupational and work-related skills they develop through activities should be recognised and, wherever possible, accredited. (S47)

Recommendations

Courts, escort and transfers

- 5.3** Women should be transferred from court to the prison as soon as possible following their hearing so they have enough time to settle in at the prison. (1.6)

Early days in custody

- 5.4** The information provided at induction should ensure women have a good understanding of how the prison operates and the essentials of everyday life at the prison. (1.16)

Safe and supportive relationships

- 5.5** The IEP scheme should be applied consistently and the facilities list should allow prisoners on at least the standard level of the scheme access to more items, such as in-cell kettles. (1.28)

Self-harm and suicide prevention

- 5.6** The quality of recording in ACCTs should ensure that triggers to self harm are identified, that care maps outline monitoring arrangements, and that interventions are effective. (1.36)
- 5.7** The timeliness of access to Listeners at night should be improved and each Listener suite should be adequately decorated, furnished and equipped. (1.37)

Disciplinary procedures

- 5.8** Punishments following adjudication should be proportionate. (1.57)

- 5.9** Adequate managerial oversight of use of force should be put in place and data analysed to identify themes and trends. (1.61)

Residential units

- 5.10** Cells designed for one should not be used to accommodate two women. (2.10)

Equality and diversity

- 5.11** The prison should investigate the reasons for some prisoners' negative perceptions and ensure outcomes for young women are monitored. (2.23)
- 5.12** Foreign national women should receive regular free telephone calls that are long enough for them to be able to maintain good contact with their children and their carers. (2.37)
- 5.13** Disability assistants should receive appropriate training for their role. (2.38)

Health services

- 5.14** All clinical areas should meet relevant cleaning and infection control standards. (2.63)
- 5.15** Older women should have timely access to mammogram screening programmes. (2.64)
- 5.16** Women should have easy confidential access to barrier protection. (2.65)
- 5.17** Nurse triage and GP appointments should be allocated on clinical need. (2.77)
- 5.18** Only women with clinical needs should be accommodated in the inpatient unit. (2.78)
- 5.19** Night sedation and other medication that should be taken at night should be given at the correct time to ensure it is clinically effective. (2.90)
- 5.20** The medicines and therapeutics committee should ensure named patient medication is used consistently. (2.91, repeated recommendation 2.100)
- 5.21** The security and administration of medication should consistently meet professional standards and non-attendance should be recorded and followed up. (2.92)
- 5.22** Controlled drug management should be robust; it should include regular accurate recorded audits, use of order books when stocks of controlled drugs are moved within the establishment and the secure storage of stocks of controlled drugs in the area where they are being administered. (2.93)
- 5.23** Changes to community prescribing regimes should occur as part of a multidisciplinary process and involve prompt access to additional support once the woman is settled in the prison. (2.94)
- 5.24** Dental governance arrangements should be improved to ensure that care and treatment is consistently safe and effective and Radiation Protection Adviser recommendations should be implemented without delay. (2.99)
- 5.25** Women with mild to moderate mental health problems should have access to a full range of support, including individual help, groups and clinical psychology sessions, within a clear primary mental health pathway. (2.105)

- 5.26** Patients requiring a transfer under the Mental Health Act should be transferred within the current transfer time guidelines. (2.106)

Time out of cell

- 5.27** All women should be able to access a full prison regime every day. (3.4)

Learning and skills and work activities

- 5.28** The prison should continue to develop information systems so that managers have access to detailed, reliable data about women's progress and achievements to enable them to make improvements where they are needed. (3.12)
- 5.29** Plans to expand the range of vocational training should be implemented and further opportunities for women to gain qualifications through vocational training and prison work should be considered, particularly in occupations not traditionally followed by women. (3.18)
- 5.30** Tutors and instructors should provide women with more detailed written feedback so they know how they can develop; individual learning plans should have clearer targets so women understand their strengths, what they must do to improve and what progress they are making. (3.25)
- 5.31** Library staff should collect data on women's use of the service to identify under-represented groups and ensure the provision is meeting all women's needs. (3.36)

Physical education and healthy living

- 5.32** The prison should monitor participation levels in detail to identify which groups or individuals are not attending PE to ensure the provision is meeting the needs of all women. (3.43)

Offender management and planning

- 5.33** Women suitable for HDC should be released on their eligibility date. (4.14)
- 5.34** Women's views should be included in the allocation assessment process; prisoners should be given a clear indication of what they need to do to progress if they are assessed for closed conditions. (4.22)

Reintegration planning

- 5.35** The prison should develop a strategy to meet the needs of women in the prison for short periods. (4.33)
- 5.36** Working arrangements between the prison and CRCs should be clearly defined and ensure women's resettlement needs are met effectively, making the best use of resources available. (4.34)
- 5.37** Mail should be delivered to women on the day it arrives at the prison. (4.44)

Housekeeping points

Health services

- 5.38** Record keeping should consistently meet nursing and medical professional standards and include an assessment, working diagnosis and plan where appropriate and clinical records should be audited regularly. (2.66)
- 5.39** All health staff should have regular recorded access to clinical supervision. (2.67)
- 5.40** All emergency equipment should be checked regularly and should not exceed their expiry date. (2.68)
- 5.41** Women should be able to complain about health services through a well-publicised confidential system that is separate from the prison system. (2.69)
- 5.42** Women's privacy in the inpatient ward area should be protected by adequate screening that meets current infection control guidance. (2.79)
- 5.43** The use of general stock and medication issued by nurses without a prescription should be monitored and audited so that stock supplied can be reconciled against prescriptions issued. (2.95)
- 5.44** The temperature of all rooms where medication is stored should be monitored and appropriate steps taken to ensure medicines are stored correctly. (2.96)
- 5.45** Community prescribing regimes should be confirmed and rewritten promptly to ensure continuity of care. (2.97)

Reintegration planning

- 5.46** Post-custody licences should be explained to women the day before their release. (4.35)

Examples of good practice

- 5.47** The strong leadership, independent scrutiny and genuine involvement of peer diversity representatives and equalities orderlies created and sustained women's confidence in the prison's commitment to equality and diversity. (2.24)
- 5.48** Women who had complained using the DIRF process were asked for feedback about how their complaint had been dealt with. Managers were using this feedback to ensure the process was working effectively. (2.25)
- 5.49** Antenatal services were well integrated with other prison departments and offered an impressive range of timely services to support women during pregnancy. (2.80)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief inspector
Sean Sullivan	Team leader
Sandra Fieldhouse	Inspector
Gordon Riach	Inspector
Andy Rooke	Inspector
Paul Tarbuck	Inspector
Liz Walsh	Inspector
Michelle Bellham	Researcher
Joe Simmonds	Researcher
Heidi Webb	Researcher
Paul Roberts	Substance misuse Inspector
Majella Pearce	Health services Inspector
Noor Mohammed	Pharmacist
Jan Fooks-Bale	Care Quality Commission inspector
Malcolm Irons	Care Quality Commission inspector
Malcolm Frazer	Ofsted inspector
Denise Olander	Ofsted inspector
Mark Shackleton	Ofsted inspector
Paddy Doyle	Offender management inspector
Keith Humphries	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, some women arrived late after long delays and waits in court cells. Reception, first night and induction procedures were good. Most prisoners felt safe but some reported being victimised. The number of violent incidents was low and the prison had good arrangements for managing problem behaviour. Levels of self-harm had decreased and some good care was being provided, but some self-harm monitoring processes needed to be improved. Adult safeguarding arrangements were in place. Security was proportionate but few suspicion tests took place. The incentives and earned privileges (IEP) scheme and adjudication arrangements needed to improve. Use of force was low and well managed. We were shocked to see a small number of women held in segregation for very long periods of time. Substance misuse services were improving and support for women with alcohol problems was very good. Outcomes for women were reasonably good against this healthy prison test.

Main recommendations

A national strategy for managing women with complex needs who cannot be supported in the prison's normal location should be developed. This should include providing a humane and properly resourced environment and regime for those women, as well as for restricted status women who fall into this category. (S42)

Achieved

Recommendations

More effective use should be made of court video links. (1.4)

Achieved

Prisoners should return from court within a reasonable time after their hearing has ended, and should arrive at the prison early enough to allow their immediate needs to be dealt with and a period of settling in on the first night unit. (1.5)

Not achieved

Women prisoners should not be escorted to prison on vans shared with male prisoners. (1.6)

Achieved

Night staff should know the location of all new arrivals and should speak to them to offer reassurance. (1.17)

Achieved

The findings from the perceptions of safety survey and our own related to victimisation should be analysed and action taken to address concerns identified. (1.27)

Partially achieved

The new STEPS approach to reducing violence and antisocial behaviour should be underpinned by staff training with a particular emphasis on the role of the support worker. (I.28)

No longer relevant

ACCT procedures should be improved. They should focus on individual needs and holistic care and should ensure that staff from relevant disciplines contribute to effective care plans. (I.36)

Partially achieved

The establishment should ensure that target searches and tests are undertaken within the required timeframe. (I.49)

Achieved

Women on the basic regime should be upgraded sooner than 28 days if their behaviour improves. (I.54)

Achieved

Warnings should show a pattern of behaviour, and one warning should not automatically prevent a woman from being upgraded. (I.55)

Achieved

The segregation exercise yards should be less austere. (I.66)

Not achieved

Monitoring of segregation, adjudication and use of force should consider all the protected characteristics. (I.67)

Achieved

Clinical, substance misuse and mental health services should provide fully integrated care to women with drug/alcohol problems, and a dual diagnosis service should be developed. (I.73)

Achieved

The prison should develop a supportive environment and a structured programme for women working towards recovery and actively consult service users in the process. (I.74)

Achieved

The drug strategy policy should include alcohol services and contain up-to-date action plans. (I.75)

Partially achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, living conditions were good and House Block (HB4) was excellent as was the mother and baby unit. Staff-prisoner relationships were generally good. Work on equality and diversity was reasonable although more support was needed. Faith provision was well developed. Complaints were well managed and the legal services provided were good. There were improvements in health care; however, prisoners were very negative about it and significant weaknesses remained in medication management. Prisoners did not like the food, but shop arrangements were good. Outcomes for women were reasonably good against this healthy prison test.

Recommendations

Toilets in cells should have lids and be adequately screened from view. (2.8)

Partially achieved

Kettles should be provided in cells. (2.9, repeated recommendation 8.6)

Not achieved

The MBU should not be staffed by a male officer at night. (2.21)

Not achieved

The regime in the MBU should be flexible enough to meet mothers' needs, for example, mothers should be able to cook for themselves and their babies. (2.22)

Achieved

Efforts should be made to increase the proportion of women custody officers to 60%, the standard staffing rate target for women's prisons. (2.30)

Achieved

A casework approach should be adopted to ensure that personal/spur officers understand the need to progress any issues identified, and make regular entries in case notes that also focus on resettlement issues. (2.31)

Achieved

The equality policy should be based on a needs analysis of all protected characteristics. (2.38)

Achieved

The diversity and inclusion team should satisfy itself of equality of outcomes by expanding the monitoring of diversity to cover all protected characteristics. (2.39)

Achieved

Technology such as Skype should be introduced to help foreign national prisoners keep in touch with family abroad and residential officers should consistently use telephone interpreting services to communicate with foreign national women. (2.51)

Partially achieved

The needs of women with disabilities should be met through appropriate identification procedures and regularly reviewed care plans and all staff should be aware of any prisoner requiring assistance in an emergency. (2.52)

Achieved

There should be sufficient adapted cells to meet prisoners' needs. (2.53)

Partially achieved

Senior managers should investigate and address with prisoners and staff the perceptions of some groups of women about victimisation, and the poorer outcomes identified in the survey. (2.54)

Not achieved

The specific needs of young adults should be identified and action taken to meet them. (2.55)

Partially achieved

Staff should receive the training and support to report health care incidents using a confidential health care system and lessons from these should be shared with staff and prompt service review. (2.75)

Achieved

Prisoners should have easy access to a female GP for any health issue. (2.76)

Achieved

All health care rooms should meet current infection control standards. (2.77)

Not achieved

The clinical governance group should ensure the emergency equipment and emergency protocols meet the needs of the prison population. (2.78)

Not achieved

All nurses providing nurse triage should have completed triage training, patient-group direction training and use the agreed protocols. (2.87)

Not achieved

Patients with lifelong conditions should receive regular reviews that generate an evidence-based care plan from staff that are appropriately trained and supervised. (2.88)

Partially achieved

The partnership board should investigate the high failure-to-attend rate and ensure it is reduced to less than 10%. (2.89)

Achieved

The pharmacy should ensure that prisoners receive prescribed medication and leaflets promptly; it should have robust clinical governance arrangements underpinned by current ratified policies and procedures. (2.97)

Not achieved

There should be regular pharmacy-led clinics and medicines use reviews. (2.98)

Achieved

All medication should be stored securely in locked drugs cabinets and trolleys should be fixed to the wall. (2.99)

Achieved

The medicines and therapeutics committee should ensure named patient medication is used consistently. (2.100)

Not achieved (recommendation repeated, 2.91)

All medication that cannot be held in possession should be administered at times that ensure clinical efficacy. (2.101)

Partially achieved

Medication administration records should be complete and issues relating to non-attendance should be consistently addressed. (2.102)

Not achieved

The patient group directions and simple remedies policies should be reviewed. (2.103)

Achieved

The prescribing of drugs liable to abuse should be reviewed and action taken to address any problem areas. (2.104)

Achieved

The partnership board should ensure there is a full range of local dental policies and procedures that are regularly reviewed. (2.110)

Not achieved

The dental surgery should comply with dental regulations HTM 01-05. (2.111)

Achieved

Primary mental services should include access to counselling and appropriate ongoing support with regular reviews and evidence-based care from staff that are appropriately trained and supervised. (2.114)

Not achieved

The primary and secondary mental health teams should be integrated. (2.115)

Not achieved

Supervision of serveries should be improved. (2.122)

Achieved

Purposeful activity

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

At the last inspection, in 2013, time out of cell was reasonable. Data was not used effectively to improve learning and skills and work provision. There were sufficient activity places for the population but the range was too narrow, levels were too low and there was insufficient accreditation. Initial assessments did not inform individual learning plans. The quality of teaching and facilities were mostly good. There were some good outcomes and punctuality was reasonable. The library and gym provided reasonably good opportunities. Outcomes for women were reasonably good against this healthy prison test.

Main recommendations

The prison should collate and analyse data about progress and achievements and robustly observe teaching and learning in order to drive improvements and identify good practice in learning and skills. (S43)

Partially achieved

Recommendations

The prison should improve the range of education courses to provide better progression opportunities for longer-term prisoners or those who need it. (3.17)

Partially achieved

Movements in education classes should be better managed to ensure less disruption. (3.22)

Achieved

Those on education courses should be able to make better, more constructive use of the library. (3.23)

Partially achieved

The initial assessment and planning of individual learning should be improved so that a clear and accurate record of progress and skills development can be made. (3.24)

Partially achieved

A wider information advice and guidance service should be introduced to support women seeking employment or further education opportunities on release. (3.25)

Achieved

Tutors and managers should collate, regularly analyse and use achievement data for education and accredited vocational courses so that they can identify trends and inform improvements. (3.31)

Partially achieved

Skills and experience gained through work should be identified, recorded and where possible, accredited. (3.32)

Not achieved

The range of learning material for those on vocational courses and for employability should be improved and the prison should consider regularly updating its book stock. (3.35)

Achieved

Appropriate accredited training programmes should be developed to prepare women appropriately for employment on release. (3.42)

Achieved

Resettlement

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

At the last inspection, in 2013, the strategic management of resettlement was underdeveloped and the needs of the population were not fully understood. A whole prison approach was not embedded but this was being addressed. A more coordinated approach was needed between offender supervisors and resettlement workers. Offender management arrangements were mixed but public protection was reasonably well managed. A reasonable range of support was offered to indeterminate sentence prisoners. Resettlement officers provided all prisoners with good support; including an assessment on arrival. Prisoners were reviewed pre-release and provided with assistance. Most of the pathway provision was good, although the visitors' centre was not being used to maximum capacity. Outcomes for women were reasonably good against this healthy prison test.

Main recommendations

Work in offender management and resettlement should be more effectively integrated to promote holistic case management; all staff should be familiar with how the resettlement strategy is operated and prisoners should understand how they will be supported and by whom. (S44)

Partially achieved

Recommendations

The resettlement strategy should be based on the assessed needs of prisoners at Bronzefield, provide a clear strategic vision and contain action plans for each pathway. (4.6)

Achieved

To ensure continuity in case management, the completion of risk assessments deemed to be the responsibility of the prison should be completed by prison-based offender supervisors. (4.14)

Achieved

There should be routine management oversight of assessment and sentence planning in all high risk cases or those involving child protection issues. (4.15)

Achieved

The public protection policy and the remit and chairmanship of the public protection meeting should be reviewed to reflect existing offender management arrangements. (4.21)

Achieved

There should be a rigorous photographic process for identifying children visiting women who pose child protection concerns. (4.22)

Achieved

All convicted prisoners should have their needs assessed against the attitudes, thinking and behaviour pathway. (4.32)

Achieved

The prison should develop an appropriate range of practical and vocational programmes at the right level to help prisoners gain work on their release. (4.36)

Partially achieved

Links should be developed with employers based on a skills gap needs analysis in the geographical areas where prisoners are being released. (4.37)

Achieved

Children and families pathway work should be fully integrated into the resettlement work of the prison and given a higher profile. (4.52)

Achieved

The provision of information in the visitors' centre should be improved and there should be details about the consultation and complaints processes. (4.53)

Achieved

Small children should not be searched unless there is compelling evidence to suggest it is necessary. (4.54)

Achieved

Appendix III: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	10	334	68.0%
Recall	0	50	9.9%
Convicted unsentenced	0	7	1.4%
Remand	9	94	20.4%
Civil prisoners	0	1	0.2%
Detainees	0	0	0.0%
Other	1	0	0.2%
Total	20	486	100%

Sentence	18–20 yr olds	21 and over	%
Unsentenced	11	109	23.7%
Less than 6 months	2	77	15.6%
6 months to less than 12 months	1	38	7.7%
12 months to less than 2 years	2	59	12.1%
2 years to less than 4 years	3	73	15.0%
4 years to less than 10 years	1	72	14.4%
10 years and over (not life)	0	18	3.6%
ISPP (indeterminate sentence for public protection)	0	7	1.4%
Life	0	33	7.9%
Total	20	486	100%

Age	Number of prisoners	%
Please state minimum age here: 18	-	-
Under 21 years	20	4.0%
21 years to 29 years	155	30.6%
30 years to 39 years	167	33.0%
40 years to 49 years	108	21.3%
50 years to 59 years	44	8.7%
60 years to 69 years	9	1.8%
70 plus years	3	0.6%
Please state maximum age here: 78	-	-
Total	506	100.0%

Nationality	18–20 yr olds	21 and over	%
British	14	390	79.8%
Foreign nationals	6	93	19.6%
Not stated	0	3	0.6%
Total	20	486	100.0%

Security category	18–20 yr olds	21 and over	%
Fem Closed	8	301	61.1%
Fem Open	0	27	5.3%

Fem Restricted	0	7	1.4%
Unclass	0	1	0.2%
Unclassified	1	33	6.7%
Unsentenced	11	117	25.3%
Total	20	486	100.0%

Ethnicity	18–20 yr olds	21 and over	%
White			
British	7	321	64.8%
Irish	0	4	0.8%
Gypsy/Irish Traveller	0	1	0.2%
Other white	7	44	10.1%
	14	370	75.9%
Mixed			
White and black Caribbean	1	19	4.0%
White and black African	0	5	1.0%
White and Asian	0	1	0.2%
Other mixed	0	6	1.2%
	1	31	6.3%
Asian or Asian British			
Indian	0	6	1.2%
Pakistani	0	6	1.2%
Bangladeshi	0	5	1.0%
Chinese	0	1	0.2%
Other Asian	0	9	1.8%
	0	27	5.3%
Black or black British			
Caribbean	0	25	4.9%
African	2	18	4.0%
Other black	3	12	3.0%
	5	55	11.9%
Other ethnic group			
Arab	0	0	0.0%
Other ethnic group	0	2	0.4%
	0	2	0.4%
Not stated	0	1	0.2%
Total	20	486	100.0%

Religion	18–20 yr olds	21 and over	%
Baptist	0	1	0.2%
Church of England	0	73	14.4%
Roman Catholic	1	71	14.2%
Other Christian denominations	2	76	15.4%
Muslim	3	30	6.5%
Sikh	0	7	1.4%
Hindu	0	3	0.6%
Buddhist	0	3	0.6%
Jewish	0	0	0.0%
Other	0	2	0.4%
No religion	14	218	45.8%
Not stated	0	2	0.4%
Total	20	486	100.0%

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	0	0	0.0%
Total	0	0	0.0%

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	2	0.4%	110	21.7%
1 month to 3 months	2	0.4%	89	17.6%
3 months to 6 months	4	0.8%	62	12.3%
6 months to 1 year	1	0.2%	47	9.3%
1 year to 2 years	0	0.0%	38	7.5%
2 years to 4 years	0	0.0%	19	3.8%
4 years or more	0	0.0%	11	2.2%
Other	0	0.0%	1	0.2%
Total	9	1.8%	377	74.5%

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0.0%
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/ restrictions).	0	0	0.0%
Total	0	0	0.0%

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	4	0.8%	44	8.7%
1 month to 3 months	4	0.8%	43	8.5%
3 months to 6 months	2	0.4%	17	3.4%
6 months to 1 year	1	0.1%	4	0.8%
1 year to 2 years	0	0.0%	1	0.2%
2 years to 4 years	0	0.0%	0	0.0%
4 years or more	0	0.0%	0	0.0%
Total	11	2.2%	109	21.5%

Main offence	18–20 yr olds	21 and over	%
Violence against the person	4	131	28.5%
Sexual offences	1	9	2.1%
Burglary	1	26	5.7%
Robbery	2	23	5.3%
Theft and handling	2	66	14.4%
Fraud and forgery	1	38	8.2%
Drugs offences	5	55	12.7%
Other offences	3	91	19.9%
Civil offences	0	1	0.2%
Offence not recorded / holding warrant	0	14	3.0%
Total	19	454	100.0%

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment¹⁰. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 9 November 2015 the prisoner population at HMP & YOI Bronzefield was 510. Using the method described above, questionnaires were distributed to a sample of 202 women.

We received a total of 180 completed questionnaires, a response rate of 80%. This included one questionnaire completed via interview. Five respondents refused to complete a questionnaire, 10 questionnaires were not returned and seven were returned blank.

¹⁰ 95% confidence interval with a sampling error of 3%. The formula assumes an 80% response rate (70% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

Wing/unit	Number of completed survey returns
House block 1	50
House block 2	47
House block 3	50
House block 4	27
Mother and baby unit	1
Healthcare	1
Care and separation	4

Presentation of survey results and analyses

Over the following pages we present the survey results for HMP & YOI Bronzefield.

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences¹¹ are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in women's background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP & YOI Bronzefield in 2015 compared with responses from women surveyed in all other women's local prisons. This comparator is based on all responses from prisoner surveys carried out in seven women's local prisons since April 2013.
- The current survey responses from HMP & YOI Bronzefield in 2015 compared with the responses of women surveyed at HMP & YOI Bronzefield in 2013.
- A comparison within the 2015 survey between the responses of white women and those from a black and minority ethnic group.
- A comparison within the 2015 survey between women who are British and those who are foreign nationals.
- A comparison within the 2015 survey between the responses of women who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2015 survey between women who are aged 50 and over and those under 50.
- A comparison within the 2015 survey between responses of women who consider themselves to be homosexual, bisexual or other and those who consider themselves to be heterosexual.
- A best and worst wing analysis within the 2015 survey.

¹¹ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

Survey summary

Section I: About you

Q1.1	What wing or houseblock are you currently living on? See shortened methodology	
Q1.2	How old are you?	
	Under 21	7 (4%)
	21 - 29.....	60 (33%)
	30 - 39.....	60 (33%)
	40 - 49.....	34 (19%)
	50 - 59.....	15 (8%)
	60 - 69.....	2 (1%)
	70 and over.....	2 (1%)
Q1.3	Are you sentenced?	
	Yes	121 (68%)
	Yes - on recall.....	17 (10%)
	No - awaiting trial.....	23 (13%)
	No - awaiting sentence	16 (9%)
	No - awaiting deportation.....	1 (1%)
Q1.4	How long is your sentence?	
	Not sentenced	40 (23%)
	Less than 6 months.....	24 (14%)
	6 months to less than 1 year	17 (10%)
	1 year to less than 2 years.....	20 (12%)
	2 years to less than 4 years	25 (15%)
	4 years to less than 10 years.....	20 (12%)
	10 years or more.....	14 (8%)
	IPP (indeterminate sentence for public protection).....	1 (1%)
	Life.....	11 (6%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes	23 (13%)
	No.....	156 (87%)
Q1.6	Do you understand spoken English?	
	Yes	171 (97%)
	No.....	6 (3%)
Q1.7	Do you understand written English?	
	Yes	171 (96%)
	No.....	8 (4%)

Q1.8 What is your ethnic origin?

White - British (English/ Welsh/ Scottish/ Northern Irish)	110 (62%)	Asian or Asian British - Chinese	1 (1%)
White - Irish	8 (4%)	Asian or Asian British - other	3 (2%)
White - other	14 (8%)	Mixed race - white and black Caribbean	9 (5%)
Black or black British - Caribbean	10 (6%)	Mixed race - white and black African	0 (0%)
Black or black British - African	5 (3%)	Mixed race - white and Asian	2 (1%)
Black or black British - other	2 (1%)	Mixed race - other	3 (2%)
Asian or Asian British - Indian	2 (1%)	Arab	3 (2%)
Asian or Asian British - Pakistani	0 (0%)	Other ethnic group	4 (2%)
Asian or Asian British - Bangladeshi	2 (1%)		

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

Yes	15 (9%)
No	159 (91%)

Q1.10 What is your religion?

None	37 (21%)	Hindu	1 (1%)
Church of England	62 (35%)	Jewish	1 (1%)
Catholic	27 (15%)	Muslim	14 (8%)
Protestant	5 (3%)	Sikh	2 (1%)
Other Christian denomination	17 (9%)	Other	10 (6%)
Buddhist	3 (2%)		

Q1.11 How would you describe your sexual orientation?

Heterosexual/ Straight	134 (77%)
Homosexual/Gay	14 (8%)
Bisexual	26 (15%)

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	60 (34%)
No	118 (66%)

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

Yes	2 (1%)
No	177 (99%)

Q1.14 Is this your first time in prison?

Yes	97 (54%)
No	81 (46%)

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

Yes	100 (56%)
No	79 (44%)

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	89 (50%)
2 hours or longer	73 (41%)
Don't remember	16 (9%)

Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	89 (51%)
	Yes	44 (25%)
	No.....	37 (21%)
	Don't remember	6 (3%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	89 (50%)
	Yes	11 (6%)
	No.....	75 (42%)
	Don't remember	3 (2%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	94 (53%)
	No.....	69 (39%)
	Don't remember	15 (8%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	127 (71%)
	No.....	42 (23%)
	Don't remember	10 (6%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well.....	57 (32%)
	Well.....	76 (43%)
	Neither	34 (19%)
	Badly.....	3 (2%)
	Very badly	3 (2%)
	Don't remember	5 (3%)
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	115 (64%)
	Yes, I received written information	11 (6%)
	No, I was not told anything	48 (27%)
	Don't remember	8 (4%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	132 (75%)
	No.....	42 (24%)
	Don't remember	2 (1%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	Less than 2 hours	50 (28%)
	2 hours or longer	106 (60%)
	Don't remember	21 (12%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	157 (89%)
	No	9 (5%)
	Don't remember	10 (6%)

Q3.3 Overall, how were you treated in reception?

Very well.....	51 (29%)
Well.....	80 (45%)
Neither.....	24 (14%)
Badly.....	11 (6%)
Very badly.....	6 (3%)
Don't remember.....	5 (3%)

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.....	23 (13%)	Physical health.....	43 (25%)
Housing problems.....	51 (30%)	Mental health.....	69 (40%)
Contacting employers.....	11 (6%)	Needing protection from other prisoners.....	9 (5%)
Contacting family.....	58 (34%)	Getting phone numbers.....	59 (35%)
Childcare.....	13 (8%)	Other.....	11 (6%)
Money worries.....	58 (34%)	Did not have any problems	18 (11%)
Feeling depressed or suicidal.....	75 (44%)		

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

Yes.....	59 (34%)
No.....	95 (55%)
Did not have any problems	18 (10%)

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

Tobacco.....	136 (76%)
A shower.....	56 (31%)
A free telephone call.....	136 (76%)
Something to eat.....	138 (78%)
PIN phone credit.....	60 (34%)
Toiletries/ basic items.....	133 (75%)
Did not receive anything	2 (1%)

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

Chaplain.....	58 (34%)
Someone from health services.....	106 (61%)
A Listener/Samaritans.....	97 (56%)
Prison shop/ canteen.....	52 (30%)
Did not have access to any of these	27 (16%)

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.....	71 (42%)
What support was available for people feeling depressed or suicidal.....	75 (44%)
How to make routine requests (applications).....	57 (33%)
Your entitlement to visits.....	45 (26%)
Health services.....	72 (42%)
Chaplaincy.....	62 (36%)
Not offered any information	47 (27%)

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

Yes.....	112 (64%)
No.....	50 (29%)
Don't remember.....	12 (7%)

Q3.10	How soon after you arrived here did you go on an induction course?	
	Have not been on an induction course	20 (11%)
	Within the first week	84 (48%)
	More than a week	63 (36%)
	Don't remember	7 (4%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	Have not been on an induction course	20 (12%)
	Yes	73 (43%)
	No	63 (37%)
	Don't remember	15 (9%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment	33 (19%)
	Within the first week	52 (30%)
	More than a week	63 (37%)
	Don't remember	24 (14%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to...						
		Very easy	Easy	Neither	Difficult	Very difficult	N/A
	Communicate with your solicitor or legal representative?	16 (9%)	45 (26%)	23 (13%)	32 (18%)	41 (24%)	16 (9%)
	Attend legal visits?	21 (13%)	62 (39%)	20 (13%)	21 (13%)	14 (9%)	22 (14%)
	Get bail information?	8 (5%)	12 (8%)	27 (17%)	27 (17%)	30 (19%)	55 (35%)
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						24 (14%)
	Yes						60 (35%)
	No						88 (51%)
Q4.3	Can you get legal books in the library?						
	Yes						63 (37%)
	No						23 (13%)
	Don't know						86 (50%)
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?	117 (67%)	54 (31%)	3 (2%)			
	Are you normally able to have a shower every day?	161 (92%)	13 (7%)	1 (1%)			
	Do you normally receive clean sheets every week?	161 (91%)	9 (5%)	6 (3%)			
	Do you normally get cell cleaning materials every week?	138 (79%)	27 (16%)	9 (5%)			
	Is your cell call bell normally answered within five minutes?	89 (53%)	66 (39%)	13 (8%)			
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	110 (65%)	55 (33%)	3 (2%)			
	If you need to, can you normally get your stored property?	55 (32%)	76 (44%)	41 (24%)			

Q4.5	What is the food like here?	
	Very good	7 (4%)
	Good	26 (15%)
	Neither	43 (24%)
	Bad	47 (27%)
	Very bad	54 (31%)
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	6 (3%)
	Yes	78 (45%)
	No	89 (51%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	110 (62%)
	No	24 (14%)
	Don't know	43 (24%)
Q4.8	Are your religious beliefs respected?	
	Yes	105 (60%)
	No	12 (7%)
	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	108 (61%)
	No	10 (6%)
	Don't know/ N/A	58 (33%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	I don't want to attend	25 (14%)
	Very easy	45 (26%)
	Easy	62 (35%)
	Neither	10 (6%)
	Difficult	6 (3%)
	Very difficult	6 (3%)
	Don't know	21 (12%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?		
	Yes	127 (73%)	
	No	27 (16%)	
	Don't know	20 (11%)	
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
	Are applications dealt with fairly?	19 (12%)	81 (52%)
	Are applications dealt with quickly (within seven days)?	19 (12%)	67 (44%)
			No
			56 (36%)
			67 (44%)
Q5.3	Is it easy to make a complaint?		
	Yes	107 (64%)	
	No	24 (14%)	
	Don't know	36 (22%)	

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 <i>complaints</i> dealt with fairly?	67 (42%)	36 (22%)	58 (36%)
Are <i>complaints</i> dealt with quickly (within seven days)?	67 (41%)	42 (26%)	55 (34%)

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

Yes	29 (18%)
No.....	131 (82%)

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

Don't know who they are	57 (35%)
Very easy	21 (13%)
Easy	33 (20%)
Neither	27 (16%)
Difficult.....	20 (12%)
Very difficult.....	7 (4%)

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	15 (9%)
Yes	73 (43%)
No	55 (33%)
Don't know	26 (15%)

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	15 (9%)
Yes	79 (47%)
No.....	52 (31%)
Don't know	23 (14%)

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

Yes	10 (6%)
No.....	164 (94%)

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	127 (76%)
Very well.....	8 (5%)
Well.....	13 (8%)
Neither	9 (5%)
Badly.....	8 (5%)
Very badly	3 (2%)

Section 7: Relationships with staff**Q7.1 Do most staff treat you with respect?**

Yes	131 (77%)
No.....	40 (23%)

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

Yes	136 (79%)
No.....	37 (21%)

Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	67 (39%)
	No.....	106 (61%)
Q7.4	How often do staff normally speak to you during association?	
	Do not go on association	23 (13%)
	Never.....	35 (20%)
	Rarely	38 (22%)
	Some of the time	45 (26%)
	Most of the time	21 (12%)
	All of the time.....	10 (6%)
Q7.5	When did you first meet your personal (named) officer?	
	I have not met him/her	81 (47%)
	In the first week.....	20 (12%)
	More than a week.....	52 (30%)
	Don't remember	19 (11%)
Q7.6	How helpful is your personal (named) officer?	
	Do not have a personal officer/ I have not met him/ her	81 (49%)
	Very helpful.....	26 (16%)
	Helpful	21 (13%)
	Neither	17 (10%)
	Not very helpful	14 (8%)
	Not at all helpful.....	8 (5%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	Yes	95 (54%)
	No.....	80 (46%)
Q8.2	Do you feel unsafe now?	
	Yes	28 (17%)
	No.....	139 (83%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	Never felt unsafe	80 (48%)
	Everywhere	19 (11%)
	Segregation unit	7 (4%)
	Association areas	25 (15%)
	Reception area	9 (5%)
	At the gym	18 (11%)
	In an exercise yard	24 (14%)
	At work.....	16 (10%)
	During movement	31 (19%)
	At education	18 (11%)
	At meal times.....	25 (15%)
	At health services.....	15 (9%)
	Visits area	9 (5%)
	In wing showers	20 (12%)
	In gym showers	6 (4%)
	In corridors/stairwells.....	17 (10%)
	On your landing/wing	36 (22%)
	In your cell	16 (10%)
	At religious services.....	5 (3%)
Q8.4	Have you been victimised by other prisoners here?	
	Yes	77 (44%)
	No.....	97 (56%)

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>	39 (22%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	12 (7%)
<i>Sexual abuse</i>	3 (2%)
<i>Feeling threatened or intimidated</i>	57 (33%)
<i>Having your canteen/property taken</i>	18 (10%)
<i>Medication</i>	18 (10%)
<i>Debt</i>	3 (2%)
<i>Drugs</i>	10 (6%)
<i>Your race or ethnic origin</i>	7 (4%)
<i>Your religion/religious beliefs</i>	3 (2%)
<i>Your nationality</i>	6 (3%)
<i>You are from a different part of the country than others</i>	5 (3%)
<i>You are from a traveller community</i>	4 (2%)
<i>Your sexual orientation</i>	4 (2%)
<i>Your age</i>	9 (5%)
<i>You have a disability</i>	9 (5%)
<i>You were new here</i>	20 (11%)
<i>Your offence/ crime</i>	9 (5%)
<i>Gang related issues</i>	8 (5%)

Q8.6 Have you been victimised by staff here?

Yes	65 (38%)
No	108 (62%)

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

<i>Insulting remarks (about you or your family or friends)</i>	27 (16%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	4 (2%)
<i>Sexual abuse</i>	1 (1%)
<i>Feeling threatened or intimidated</i>	28 (16%)
<i>Medication</i>	12 (7%)
<i>Debt</i>	1 (1%)
<i>Drugs</i>	6 (3%)
<i>Your race or ethnic origin</i>	10 (6%)
<i>Your religion/religious beliefs</i>	5 (3%)
<i>Your nationality</i>	2 (1%)
<i>You are from a different part of the country than others</i>	2 (1%)
<i>You are from a traveller community</i>	4 (2%)
<i>Your sexual orientation</i>	6 (3%)
<i>Your age</i>	4 (2%)
<i>You have a disability</i>	7 (4%)
<i>You were new here</i>	7 (4%)
<i>Your offence/ crime</i>	6 (3%)
<i>Gang related issues</i>	4 (2%)

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

Not been victimised	75 (50%)
Yes	36 (24%)
No	40 (26%)

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%)	5 (3%)	27 (16%)	22 (13%)	66 (38%)	43 (25%)
The nurse	8 (5%)	16 (10%)	58 (35%)	24 (14%)	41 (25%)	20 (12%)
The dentist	26 (16%)	3 (2%)	13 (8%)	15 (9%)	49 (30%)	56 (35%)

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	10 (6%)	9 (5%)	31 (18%)	21 (12%)	40 (24%)	59 (35%)
The nurse	6 (4%)	25 (15%)	42 (25%)	25 (15%)	29 (18%)	38 (23%)
The dentist	45 (27%)	18 (11%)	30 (18%)	19 (12%)	22 (13%)	31 (19%)

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

Not been	5 (3%)
<i>Very good</i>	5 (3%)
<i>Good</i>	32 (19%)
<i>Neither</i>	27 (16%)
<i>Bad</i>	37 (22%)
<i>Very bad</i>	66 (38%)

Q9.4 Are you currently taking medication?

Yes	124 (72%)
No.....	48 (28%)

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

Not taking medication	48 (28%)
Yes, all my meds	6 (3%)
Yes, some of my meds	21 (12%)
No.....	97 (56%)

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

Yes	114 (66%)
No.....	60 (34%)

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	60 (36%)
Yes	44 (27%)
No.....	62 (37%)

Section 10: Drugs and alcohol**Q10.1 Did you have a problem with drugs when you came into this prison?**

Yes	71 (42%)
No.....	99 (58%)

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

Yes	36 (22%)
No.....	131 (78%)

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

<i>Very easy</i>	27 (16%)
<i>Easy</i>	19 (12%)
<i>Neither</i>	16 (10%)
<i>Difficult</i>	6 (4%)
<i>Very difficult</i>	7 (4%)
<i>Don't know</i>	90 (55%)

Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	3 (2%)
	Easy.....	2 (1%)
	Neither.....	10 (6%)
	Difficult.....	15 (9%)
	Very difficult.....	21 (13%)
	Don't know.....	112 (69%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes.....	11 (7%)
	No.....	157 (93%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes.....	13 (8%)
	No.....	154 (92%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	91 (54%)
	Yes.....	49 (29%)
	No.....	27 (16%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?	
	<i>Did not / do not have an alcohol problem</i>	131 (79%)
	Yes.....	19 (12%)
	No.....	15 (9%)
Q10.9	Was the support or help you received, while in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	106 (69%)
	Yes.....	34 (22%)
	No.....	14 (9%)

Section II: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		Don't know	Very Easy	Easy	Neither	Difficult	Very difficult
	Prison job	13 (8%)	26 (15%)	54 (32%)	27 (16%)	33 (20%)	15 (9%)
	Vocational or skills training	35 (22%)	16 (10%)	39 (25%)	29 (18%)	28 (18%)	12 (8%)
	Education (including basic skills)	15 (9%)	27 (17%)	61 (39%)	24 (15%)	20 (13%)	11 (7%)
	Offending behaviour programmes	50 (32%)	10 (6%)	23 (15%)	26 (17%)	26 (17%)	20 (13%)
Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)						
	<i>Not involved in any of these</i>						39 (24%)
	Prison job.....						104 (63%)
	Vocational or skills training.....						20 (12%)
	Education (including basic skills).....						41 (25%)
	Offending behaviour programmes.....						6 (4%)

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	40 (27%)	51 (34%)	41 (27%)	18 (12%)
	Vocational or skills training	51 (40%)	36 (28%)	27 (21%)	15 (12%)
	Education (including basic skills)	45 (34%)	37 (28%)	36 (27%)	16 (12%)
	Offending behaviour programmes	60 (46%)	20 (15%)	29 (22%)	21 (16%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				20 (12%)
	<i>Never</i>				39 (23%)
	<i>Less than once a week</i>				44 (26%)
	<i>About once a week</i>				58 (34%)
	<i>More than once a week</i>				8 (5%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				41 (25%)
	<i>Yes</i>				34 (20%)
	<i>No</i>				91 (55%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				40 (24%)
	<i>0</i>				47 (29%)
	<i>1 to 2</i>				33 (20%)
	<i>3 to 5</i>				32 (20%)
	<i>More than 5</i>				12 (7%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				31 (19%)
	<i>0</i>				32 (19%)
	<i>1 to 2</i>				57 (34%)
	<i>3 to 5</i>				27 (16%)
	<i>More than 5</i>				19 (11%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				27 (16%)
	<i>0</i>				16 (10%)
	<i>1 to 2</i>				20 (12%)
	<i>3 to 5</i>				32 (19%)
	<i>More than 5</i>				72 (43%)

Q11.9 How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)

Less than 2 hours	15 (9%)
2 to less than 4 hours	30 (18%)
4 to less than 6 hours	35 (21%)
6 to less than 8 hours	37 (22%)
8 to less than 10 hours.....	23 (14%)
10 hours or more	16 (10%)
Don't know	11 (7%)

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?**

Yes	63 (39%)
No.....	98 (61%)

Q12.2 Have you had any problems with sending or receiving mail (letters or parcels)?

Yes	80 (49%)
No.....	82 (51%)

Q12.3 Have you had any problems getting access to the telephones?

Yes	32 (20%)
No.....	131 (80%)

Q12.4 How easy or difficult is it for your family and friends to get here?

I don't get visits	33 (20%)
Very easy.....	13 (8%)
Easy	34 (21%)
Neither	18 (11%)
Difficult.....	34 (21%)
Very difficult.....	24 (15%)
Don't know	8 (5%)

Section 13: Preparation for release**Q13.1 Do you have a named offender manager (home probation officer) in the probation service?**

Not sentenced	40 (24%)
Yes	82 (50%)
No.....	43 (26%)

Q13.2 What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)

Not sentenced/ NA	83 (50%)
No contact.....	41 (25%)
Letter	23 (14%)
Phone	7 (4%)
Visit.....	22 (13%)

Q13.3 Do you have a named offender supervisor in this prison?

Yes	63 (41%)
No.....	92 (59%)

Q13.4 Do you have a sentence plan?

Not sentenced	40 (24%)
Yes	55 (33%)
No.....	73 (43%)

Q13.5	How involved were you in the development of your sentence plan?			
	<i>Do not have a sentence plan/ not sentenced</i>	113	(67%)	
	<i>Very involved</i>	15	(9%)	
	<i>Involved</i>	12	(7%)	
	<i>Neither</i>	9	(5%)	
	<i>Not very involved</i>	12	(7%)	
	<i>Not at all involved</i>	7	(4%)	
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)			
	<i>Do not have a sentence plan/ not sentenced</i>	113	(68%)	
	<i>Nobody</i>	13	(8%)	
	<i>Offender supervisor</i>	18	(11%)	
	<i>Offender manager</i>	8	(5%)	
	<i>Named/ personal officer</i>	15	(9%)	
	<i>Staff from other departments</i>	18	(11%)	
Q13.7	Can you achieve any of your sentence plan targets in this prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	113	(67%)	
	<i>Yes</i>	27	(16%)	
	<i>No</i>	13	(8%)	
	<i>Don't know</i>	15	(9%)	
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	113	(67%)	
	<i>Yes</i>	14	(8%)	
	<i>No</i>	29	(17%)	
	<i>Don't know</i>	12	(7%)	
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?			
	<i>Do not have a sentence plan/ not sentenced</i>	113	(68%)	
	<i>Yes</i>	16	(10%)	
	<i>No</i>	21	(13%)	
	<i>Don't know</i>	17	(10%)	
Q13.10	Do you have a needs based custody plan?			
	<i>Yes</i>	9	(6%)	
	<i>No</i>	72	(45%)	
	<i>Don't know</i>	79	(49%)	
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?			
	<i>Yes</i>	35	(23%)	
	<i>No</i>	120	(77%)	
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.)			
		Do not need help	Yes	No
	Employment	31 (20%)	38 (24%)	88 (56%)
	Accommodation	25 (16%)	48 (31%)	81 (53%)
	Benefits	23 (15%)	60 (38%)	73 (47%)
	Finances	25 (17%)	33 (22%)	90 (61%)
	Education	35 (23%)	30 (20%)	84 (56%)
	Drugs and alcohol	36 (26%)	53 (38%)	51 (36%)

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

Not sentenced	40 (26%)
Yes	56 (36%)
No.....	59 (38%)

Main comparator and comparator to last time



Prisoner survey responses HMP & YOI Bronzefield 2015

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

Key to tables		HMP & YOI Bronzefield 2015	Local women's prisons comparator	HMP & YOI Bronzefield 2015	HMP & YOI Bronzefield 2013
	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		180	1,091	180	153
SECTION 1: General information					
1.2	Are you under 21 years of age?	4%	6%	4%	6%
1.3	Are you sentenced?	78%	80%	78%	75%
1.3	Are you on recall?	10%	6%	10%	4%
1.4	Is your sentence less than 12 months?	24%	25%	24%	23%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	3%	1%	2%
1.5	Are you a foreign national?	13%	10%	13%	23%
1.6	Do you understand spoken English?	97%	98%	97%	96%
1.7	Do you understand written English?	96%	98%	96%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	26%	17%	26%	32%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	9%	5%	9%	9%
1.1	Are you Muslim?	8%	7%	8%	7%
1.11	Are you homosexual/gay or bisexual?	23%	27%	23%	21%
1.12	Do you consider yourself to have a disability?	34%	33%	34%	31%
1.13	Are you a veteran (ex-armed services)?	1%	1%	1%	1%
1.14	Is this your first time in prison?	55%	52%	55%	54%
1.15	Do you have any children under the age of 18?	56%	56%	56%	47%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	41%	39%	41%	37%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	51%	47%	51%	40%
2.3	Were you offered a toilet break?	12%	14%	12%	8%
2.4	Was the van clean?	53%	60%	53%	67%
2.5	Did you feel safe?	71%	76%	71%	83%
2.6	Were you treated well/very well by the escort staff?	75%	79%	75%	80%
2.7	Before you arrived here were you told that you were coming here?	64%	74%	64%	69%
2.7	Before you arrived here did you receive any written information about coming here?	6%	4%	6%	3%
2.8	When you first arrived here did your property arrive at the same time as you?	75%	81%	75%	79%
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	28%	58%	28%	42%
3.2	When you were searched in reception, was this carried out in a respectful way?	89%	89%	89%	87%
3.3	Were you treated well/very well in reception?	74%	78%	74%	77%

Main comparator and comparator to last time

Key to tables

		HMP & YOI Bronzefield 2015	Local women's prisons comparator	HMP & YOI Bronzefield 2015	HMP & YOI Bronzefield 2013
	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				
	When you first arrived:				
3.4	Did you have any problems?	90%	77%	90%	70%
3.4	Did you have any problems with loss of property?	13%	11%	13%	17%
3.4	Did you have any housing problems?	30%	25%	30%	21%
3.4	Did you have any problems contacting employers?	6%	2%	6%	1%
3.4	Did you have any problems contacting family?	34%	28%	34%	28%
3.4	Did you have any problems ensuring dependants were being looked after?	8%	5%	8%	3%
3.4	Did you have any money worries?	34%	24%	34%	21%
3.4	Did you have any problems with feeling depressed or suicidal?	44%	37%	44%	32%
3.4	Did you have any physical health problems?	25%	24%	25%	26%
3.4	Did you have any mental health problems?	40%	36%	40%	21%
3.4	Did you have any problems with needing protection from other prisoners?	5%	5%	5%	6%
3.4	Did you have problems accessing phone numbers?	35%	25%	35%	28%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	38%	51%	38%	53%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	76%	81%	76%	73%
3.6	A shower?	31%	46%	31%	37%
3.6	A free telephone call?	76%	73%	76%	84%
3.6	Something to eat?	78%	82%	78%	86%
3.6	PIN phone credit?	34%	62%	34%	39%
3.6	Toiletries/ basic items?	75%	73%	75%	78%
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?	34%	52%	34%	51%
3.7	Someone from health services?	61%	72%	61%	72%
3.7	A Listener/Samaritans?	56%	40%	56%	46%
3.7	Prison shop/ canteen?	30%	28%	30%	39%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	42%	54%	42%	42%
3.8	Support was available for people feeling depressed or suicidal?	44%	50%	44%	45%
3.8	How to make routine requests?	33%	42%	33%	35%
3.8	Your entitlement to visits?	26%	42%	26%	32%
3.8	Health services?	42%	51%	42%	47%
3.8	The chaplaincy?	36%	48%	36%	40%
3.9	Did you feel safe on your first night here?	64%	72%	64%	77%
3.10	Have you been on an induction course?	88%	88%	88%	91%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	48%	58%	48%	62%
3.12	Did you receive an education (skills for life) assessment?	81%	82%	81%	84%

Main comparator and comparator to last time

Key to tables

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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 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?	35%	39%	35%	49%
4.1	Attend legal visits?	52%	57%	52%	59%
4.1	Get bail information?	13%	18%	13%	24%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	35%	41%	35%	29%
4.3	Can you get legal books in the library?	37%	41%	37%	50%
For the wing/unit you are currently on:					
4.4	Are you normally offered enough clean, suitable clothes for the week?	67%	70%	67%	88%
4.4	Are you normally able to have a shower every day?	92%	90%	92%	86%
4.4	Do you normally receive clean sheets every week?	92%	89%	92%	96%
4.4	Do you normally get cell cleaning materials every week?	79%	84%	79%	82%
4.4	Is your cell call bell normally answered within five minutes?	53%	41%	53%	64%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	66%	66%	66%	75%
4.4	Can you normally get your stored property, if you need to?	32%	26%	32%	43%
4.5	Is the food in this prison good/very good?	19%	28%	19%	25%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	45%	49%	45%	43%
4.7	Are you able to speak to a Listener at any time, if you want to?	62%	65%	62%	62%
4.8	Are your religious beliefs are respected?	60%	59%	60%	58%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	61%	67%	61%	58%
4.10	Is it easy/very easy to attend religious services?	61%	52%	61%	56%
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	73%	85%	73%	83%
For those who have made an application:					
5.2	Do you feel applications are dealt with fairly?	59%	65%	59%	68%
5.2	Do you feel applications are dealt with quickly (within seven days)?	50%	45%	50%	46%
5.3	Is it easy to make a complaint?	64%	61%	64%	63%
For those who have made a complaint:					
5.4	Do you feel complaints are dealt with fairly?	38%	41%	38%	45%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	43%	36%	43%	36%
5.5	Have you ever been prevented from making a complaint when you wanted to?	18%	19%	18%	11%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	33%	35%	33%	45%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	43%	51%	43%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	51%	47%	51%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	6%	6%	6%	2%
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?	51%	48%	51%	58%

Main comparator and comparator to last time

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SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	77%	80%	77%	86%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	79%	80%	79%	81%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	39%	39%	39%	46%
7.4	Do staff normally speak to you most of the time/all of the time during association?	18%	27%	18%	20%
7.5	Do you have a personal officer?	53%	58%	53%	41%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	55%	67%	55%	85%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	54%	44%	54%	44%
8.2	Do you feel unsafe now?	17%	15%	17%	17%
8.4	Have you been victimised by other prisoners here?	44%	37%	44%	42%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	22%	20%	22%	18%
8.5	Hit, kicked or assaulted you?	7%	10%	7%	4%
8.5	Sexually abused you?	2%	2%	2%	2%
8.5	Threatened or intimidated you?	33%	25%	33%	24%
8.5	Taken your canteen/property?	10%	8%	10%	7%
8.5	Victimised you because of medication?	10%	6%	10%	6%
8.5	Victimised you because of debt?	2%	2%	2%	1%
8.5	Victimised you because of drugs?	6%	4%	6%	3%
8.5	Victimised you because of your race or ethnic origin?	4%	4%	4%	5%
8.5	Victimised you because of your religion/religious beliefs?	2%	3%	2%	1%
8.5	Victimised you because of your nationality?	4%	3%	4%	6%
8.5	Victimised you because you were from a different part of the country?	3%	4%	3%	5%
8.5	Victimised you because you are from a Traveller community?	2%	1%	2%	0%
8.5	Victimised you because of your sexual orientation?	2%	2%	2%	2%
8.5	Victimised you because of your age?	5%	4%	5%	4%
8.5	Victimised you because you have a disability?	5%	4%	5%	5%
8.5	Victimised you because you were new here?	12%	10%	12%	10%
8.5	Victimised you because of your offence/crime?	5%	8%	5%	9%
8.5	Victimised you because of gang related issues?	5%	3%	5%	3%
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	38%	28%	38%	30%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	16%	12%	16%	10%
8.7	Hit, kicked or assaulted you?	2%	3%	2%	1%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	16%	12%	16%	13%
8.7	Victimised you because of medication?	7%	5%	7%	8%

Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
8.7	Victimised you because of debt?	1%	1%	1%	0%
8.7	Victimised you because of drugs?	4%	3%	4%	3%
8.7	Victimised you because of your race or ethnic origin?	6%	2%	6%	1%
8.7	Victimised you because of your religion/religious beliefs?	3%	2%	3%	3%
8.7	Victimised you because of your nationality?	1%	2%	1%	2%
8.7	Victimised you because you were from a different part of the country?	1%	2%	1%	3%
8.7	Victimised you because you are from a Traveller community?	2%	1%	2%	1%
8.7	Victimised you because of your sexual orientation?	4%	3%	4%	2%
8.7	Victimised you because of your age?	2%	2%	2%	1%
8.7	Victimised you because you have a disability?	4%	3%	4%	6%
8.7	Victimised you because you were new here?	4%	4%	4%	6%
8.7	Victimised you because of your offence/crime?	4%	4%	4%	3%
8.7	Victimised you because of gang related issues?	2%	2%	2%	1%
For those who have been victimised by staff or other prisoners:					
8.8	Did you report any victimisation that you have experienced?	47%	50%	47%	54%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	19%	30%	19%	18%
9.1	Is it easy/very easy to see the nurse?	44%	53%	44%	39%
9.1	Is it easy/very easy to see the dentist?	10%	17%	10%	11%
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:					
9.2	The doctor?	25%	50%	25%	30%
9.2	The nurse?	42%	59%	42%	48%
9.2	The dentist?	40%	43%	40%	47%
9.3	The overall quality of health services?	22%	43%	22%	22%
9.4	Are you currently taking medication?	72%	75%	72%	75%
For those currently taking medication:					
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	22%	44%	22%	58%
9.6	Do you have any emotional well being or mental health problems?	66%	59%	66%	53%
For those who have problems:					
9.7	Are you being helped or supported by anyone in this prison?	42%	61%	42%	45%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	42%	43%	42%	31%
10.2	Did you have a problem with alcohol when you came into this prison?	22%	31%	22%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	28%	32%	28%	19%
10.4	Is it easy/very easy to get alcohol in this prison?	3%	3%	3%	2%
10.5	Have you developed a problem with drugs since you have been in this prison?	7%	6%	7%	2%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	8%	9%	8%	3%
For those with drug or alcohol problems:					
10.7	Have you received any support or help with your drug problem while in this prison?	65%	84%	65%	88%
10.8	Have you received any support or help with your alcohol problem while in this prison?	56%	82%	56%	77%
For those who have received help or support with their drug or alcohol problem:					
10.9	Was the support helpful?	71%	83%	71%	75%

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SECTION 11: Activities				
Is it very easy/ easy to get into the following activities:				
11.1 A prison job?	48%	48%	48%	68%
11.1 Vocational or skills training?	35%	42%	35%	55%
11.1 Education (including basic skills)?	56%	55%	56%	78%
11.1 Offending behaviour programmes?	21%	29%	21%	36%
Are you currently involved in any of the following activities:				
11.2 A prison job?	63%	60%	63%	67%
11.2 Vocational or skills training?	12%	14%	12%	17%
11.2 Education (including basic skills)?	25%	35%	25%	36%
11.2 Offending behaviour programmes?	4%	17%	4%	15%
11.3 Have you had a job while in this prison?	73%	80%	73%	91%
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	46%	56%	46%	52%
11.3 Have you been involved in vocational or skills training while in this prison?	61%	66%	61%	85%
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?	46%	60%	46%	51%
11.3 Have you been involved in education while in this prison?	67%	77%	67%	92%
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	42%	68%	42%	51%
11.3 Have you been involved in offending behaviour programmes while in this prison?	54%	64%	54%	78%
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?	29%	60%	29%	53%
11.4 Do you go to the library at least once a week?	39%	44%	39%	57%
11.5 Does the library have a wide enough range of materials to meet your needs?	20%	54%	20%	45%
11.6 Do you go to the gym three or more times a week?	27%	21%	27%	22%
11.7 Do you go outside for exercise three or more times a week?	28%	38%	28%	21%
11.8 Do you go on association more than five times each week?	43%	50%	43%	39%
11.9 Do you spend ten or more hours out of your cell on a weekday?	10%	18%	10%	10%
SECTION 12: Friends and family				
12.1 Have staff supported you and helped you to maintain contact with family/friends while in this prison?	39%	52%	39%	49%
12.2 Have you had any problems with sending or receiving mail?	49%	41%	49%	38%
12.3 Have you had any problems getting access to the telephones?	20%	23%	20%	20%
12.4 Is it easy/ very easy for your friends and family to get here?	29%	33%	29%	35%
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?	66%	68%	66%	57%
For those who are sentenced what type of contact have you had with your offender manager:				
13.2 No contact?	49%	41%	49%	21%
13.2 Contact by letter?	27%	28%	27%	32%

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13.2	Contact by phone?	8%	12%	8%	9%
13.2	Contact by visit?	26%	39%	26%	58%
13.3	Do you have a named offender supervisor in this prison?	41%	51%	41%	44%
	For those who are sentenced:				
13.4	Do you have a sentence plan?	43%	53%	43%	47%
	For those with a sentence plan:				
13.5	Were you involved/very involved in the development of your plan?	49%	62%	49%	58%
	Who is working with you to achieve your sentence plan targets:				
13.6	Nobody?	25%	35%	25%	29%
13.6	Offender supervisor?	35%	38%	35%	45%
13.6	Offender manager?	16%	28%	16%	29%
13.6	Named/ personal officer?	29%	18%	29%	11%
13.6	Staff from other departments?	35%	29%	35%	27%
	For those with a sentence plan:				
13.7	Can you achieve any of your sentence plan targets in this prison?	49%	71%	49%	65%
13.8	Are there plans for you to achieve any of your targets in another prison?	26%	18%	26%	23%
13.9	Are there plans for you to achieve any of your targets in the community?	29%	32%	29%	28%
13.10	Do you have a needs based custody plan?	6%	7%	6%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	23%	22%	23%	22%
	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?	30%	54%	30%	32%
13.12	Accommodation?	37%	60%	37%	53%
13.12	Benefits?	45%	61%	45%	55%
13.12	Finances?	27%	43%	27%	29%
13.12	Education?	26%	53%	26%	30%
13.12	Drugs and alcohol?	51%	70%	51%	63%
	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?	49%	58%	49%	57%

Diversity analysis



Key question responses (ethnicity and foreign national) HMP & YOI Bronzefield 2015

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

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		46	132	23	156
1.3	Are you sentenced?	65%	82%	73%	78%
1.5	Are you a foreign national?	26%	8%		
1.6	Do you understand spoken English?	94%	98%	82%	99%
1.7	Do you understand written English?	94%	96%	83%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			55%	22%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	11%	0%	10%
1.1	Are you Muslim?	24%	2%	0%	9%
1.12	Do you consider yourself to have a disability?	13%	41%	18%	36%
1.13	Are you a veteran (ex-armed services)?	2%	1%	0%	1%
1.14	Is this your first time in prison?	72%	48%	95%	48%
2.6	Were you treated well/very well by the escort staff?	79%	73%	74%	75%
2.7	Before you arrived here were you told that you were coming here?	52%	68%	52%	66%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	90%	83%	90%
3.3	Were you treated well/very well in reception?	71%	75%	65%	75%
3.4	Did you have any problems when you first arrived?	84%	91%	86%	90%
3.7	Did you have access to someone from health care when you first arrived here?	54%	65%	53%	62%
3.9	Did you feel safe on your first night here?	56%	67%	50%	67%
3.10	Have you been on an induction course?	89%	88%	100%	87%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	39%	35%	35%	35%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	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%	69%	83%	65%
4.4	Are you normally able to have a shower every day?	89%	93%	95%	91%
4.4	Is your cell call bell normally answered within five minutes?	47%	55%	65%	51%
4.5	Is the food in this prison good/very good?	13%	20%	26%	18%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	16%	54%	26%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	57%	64%	62%	62%
4.8	Do you feel your religious beliefs are respected?	61%	60%	65%	59%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	59%	62%	65%	61%
5.1	Is it easy to make an application?	61%	77%	62%	75%
5.3	Is it easy to make a complaint?	61%	64%	50%	66%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	23%	50%	42%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	49%	33%	48%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	5%	6%	5%	6%
7.1	Do most staff, in this prison, treat you with respect?	66%	80%	87%	75%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	62%	84%	87%	77%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	14%	19%	29%	16%
7.4	Do you have a personal officer?	52%	54%	62%	51%
8.1	Have you ever felt unsafe here?	52%	56%	57%	54%
8.2	Do you feel unsafe now?	19%	16%	19%	17%
8.3	Have you been victimised by other prisoners?	35%	49%	39%	45%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	26%	36%	26%	33%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	11%	2%	12%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	2%	2%	9%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	3%	12%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	5%	6%	0%	5%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	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?	40%	37%	17%	40%
8.7	Have you ever felt threatened or intimidated by staff here?	27%	13%	5%	18%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	13%	3%	5%	6%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	2%	3%	0%	3%
8.7	Have you been victimised because of your nationality? (By staff)	5%	0%	0%	1%
8.7	Have you been victimised because you have a disability? (By staff)	0%	6%	5%	4%
9.1	Is it easy/very easy to see the doctor?	24%	16%	23%	18%
9.1	Is it easy/ very easy to see the nurse?	47%	44%	55%	42%
9.4	Are you currently taking medication?	57%	78%	55%	74%
9.6	Do you feel you have any emotional well being/mental health issues?	50%	71%	32%	70%
10.3	Is it easy/very easy to get illegal drugs in this prison?	21%	30%	5%	31%
11.2	Are you currently working in the prison?	58%	65%	67%	63%
11.2	Are you currently undertaking vocational or skills training?	13%	12%	10%	13%
11.2	Are you currently in education (including basic skills)?	29%	24%	29%	24%
11.2	Are you currently taking part in an offending behaviour programme?	5%	3%	0%	4%
11.4	Do you go to the library at least once a week?	35%	41%	55%	37%
11.6	Do you go to the gym three or more times a week?	25%	27%	48%	24%
11.7	Do you go outside for exercise three or more times a week?	27%	29%	29%	28%
11.8	On average, do you go on association more than five times each week?	31%	48%	33%	45%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	9%	10%	10%	10%
12.2	Have you had any problems sending or receiving mail?	44%	51%	37%	51%
12.3	Have you had any problems getting access to the telephones?	27%	17%	37%	17%

Diversity Analysis



Key question responses (disability and age over 50) HMP & YOI Bronzefield 2015

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		60	118			19	161		
1.3	Are you sentenced?	85%	73%			94%	76%		
1.5	Are you a foreign national?	7%	15%			22%	12%		
1.6	Do you understand spoken English?	98%	96%			78%	99%		
1.7	Do you understand written English?	97%	95%			85%	97%		
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	10%	34%			26%	26%		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	15%	5%			0%	10%		
1.1	Are you Muslim?	5%	9%			0%	9%		
1.12	Do you consider yourself to have a disability?					47%	32%		
1.13	Are you a veteran (ex-armed services)?	0%	2%			0%	1%		
1.14	Is this your first time in prison?	52%	55%			63%	54%		
2.6	Were you treated well/very well by the escort staff?	70%	77%			53%	77%		
2.7	Before you arrived here were you told that you were coming here?	65%	64%			63%	64%		
3.2	When you were searched in reception, was this carried out in a respectful way?	89%	89%			85%	90%		
3.3	Were you treated well/very well in reception?	69%	76%			55%	76%		
3.4	Did you have any problems when you first arrived?	90%	89%			88%	90%		
3.7	Did you have access to someone from health care when you first arrived here?	73%	56%			69%	60%		
3.9	Did you feel safe on your first night here?	57%	68%			61%	65%		
3.10	Have you been on an induction course?	90%	88%			83%	89%		
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	27%	39%			39%	35%		

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?	60%	70%	78%	66%
4.4	Are you normally able to have a shower every day?	88%	94%	85%	93%
4.4	Is your cell call bell normally answered within five minutes?	48%	55%	48%	54%
4.5	Is the food in this prison good/very good?	12%	22%	15%	19%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	50%	44%	43%	45%
4.7	Are you able to speak to a Listener at any time, if you want to?	64%	61%	57%	63%
4.8	Do you feel your religious beliefs are respected?	55%	62%	74%	58%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	67%	58%	74%	60%
5.1	Is it easy to make an application?	75%	72%	88%	71%
5.3	Is it easy to make a complaint?	65%	64%	71%	63%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	46%	41%	39%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	45%	42%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	5%	0%	6%
7.1	Do most staff, in this prison, treat you with respect?	74%	78%	84%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in prison?	86%	74%	78%	79%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	14%	19%	22%	18%
7.4	Do you have a personal officer?	56%	51%	61%	52%
8.1	Have you ever felt unsafe here?	60%	51%	74%	52%
8.2	Do you feel unsafe now?	18%	16%	21%	16%
8.3	Have you been victimised by other prisoners?	57%	39%	63%	42%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	43%	28%	47%	31%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	6%	6%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	3%	6%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	5%	0%	4%
8.5	Have you been victimised because of your age? (By prisoners)	9%	3%	11%	5%
8.5	Have you been victimised because you have a disability? (By prisoners)	15%	0%	21%	3%

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				
8.6	Have you been victimised by a member of staff?	53%	31%	53%	36%
8.7	Have you ever felt threatened or intimidated by staff here?	26%	12%	26%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	7%	5%	0%	6%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	2%	6%	3%
8.7	Have you been victimised because of your nationality? (By staff)	0%	2%	0%	1%
8.7	Have you been victimised because of your age? (By staff)	4%	2%	6%	2%
8.7	Have you been victimised because you have a disability? (By staff)	12%	0%	11%	3%
9.1	Is it easy/very easy to see the doctor?	16%	20%	33%	17%
9.1	Is it easy/ very easy to see the nurse?	36%	47%	73%	41%
9.4	Are you currently taking medication?	87%	65%	84%	71%
9.6	Do you feel you have any emotional well being/mental health issues?	91%	53%	53%	67%
10.3	Is it easy/very easy to get illegal drugs in this prison?	37%	24%	16%	29%
11.2	Are you currently working in the prison?	52%	68%	76%	62%
11.2	Are you currently undertaking vocational or skills training?	8%	15%	7%	13%
11.2	Are you currently in education (including basic skills)?	31%	23%	24%	25%
11.2	Are you currently taking part in an offending behaviour programme?	0%	6%	7%	3%
11.4	Do you go to the library at least once a week?	28%	44%	42%	39%
11.6	Do you go to the gym three or more times a week?	13%	33%	18%	28%
11.7	Do you go outside for exercise three or more times a week?	21%	31%	24%	28%
11.8	On average, do you go on association more than five times each week?	47%	41%	31%	44%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	5%	12%	0%	11%
12.2	Have you had any problems sending or receiving mail?	50%	49%	24%	52%
12.3	Have you had any problems getting access to the telephones?	21%	19%	13%	21%

Diversity analysis



Key question responses (sexual orientation) HMP & YOI Bronzefield 2015

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	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	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		40	134
1.3	Are you sentenced?	87%	74%
1.5	Are you a foreign national?	5%	16%
1.6	Do you understand spoken English?	100%	97%
1.7	Do you understand written English?	97%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	12%	30%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	12%	8%
1.1	Are you Muslim?	3%	9%
1.12	Do you consider yourself to have a disability?	50%	28%
1.13	Are you a veteran (ex-armed services)?	0%	2%
1.14	Is this your first time in prison?	30%	62%
2.6	Were you treated well/very well by the escort staff?	67%	77%
2.7	Before you arrived here were you told that you were coming here?	63%	67%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	89%
3.3	Were you treated well/very well in reception?	73%	74%
3.4	Did you have any problems when you first arrived?	97%	87%
3.7	Did you have access to someone from health care when you first arrived here?	55%	62%
3.9	Did you feel safe on your first night here?	67%	65%
3.10	Have you been on an induction course?	85%	91%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	26%	38%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	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?	69%	67%
4.4	Are you normally able to have a shower every day?	87%	93%
4.4	Is your cell call bell normally answered within five minutes?	47%	56%
4.5	Is the food in this prison good/very good?	13%	21%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	62%	40%
4.7	Are you able to speak to a Listener at any time, if you want to?	77%	59%
4.8	Do you feel your religious beliefs are respected?	61%	60%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	71%	58%
5.1	Is it easy to make an application?	84%	70%
5.3	Is it easy to make a complaint?	68%	63%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	47%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	4%
7.1	Do most staff, in this prison, treat you with respect?	58%	81%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	79%	78%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	16%	19%
7.4	Do you have a personal officer?	54%	52%
8.1	Have you ever felt unsafe here?	60%	52%
8.2	Do you feel unsafe now?	14%	17%
8.3	Have you been victimised by other prisoners?	54%	40%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	30%	33%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	5%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	2%
8.5	Have you been victimised because of your sexual orientation? (By prisoners)	6%	2%
8.5	Have you been victimised because of your age? (By prisoners)	3%	5%
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	5%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	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?	61%	30%
8.7	Have you ever felt threatened or intimidated by staff here?	33%	11%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	8%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	2%
8.7	Have you been victimised because of your sexual orientation? (By staff)	14%	1%
8.7	Have you been victimised because of your age? (By staff)	3%	2%
8.7	Have you been victimised because you have a disability? (By staff)	8%	3%
9.1	Is it easy/very easy to see the doctor?	13%	20%
9.1	Is it easy/ very easy to see the nurse?	44%	44%
9.4	Are you currently taking medication?	81%	69%
9.6	Do you feel you have any emotional well being/mental health issues?	87%	60%
10.3	Is it easy/very easy to get illegal drugs in this prison?	39%	26%
11.2	Are you currently working in the prison?	68%	63%
11.2	Are you currently undertaking vocational or skills training?	8%	13%
11.2	Are you currently in education (including basic skills)?	21%	26%
11.2	Are you currently taking part in an offending behaviour programme?	0%	5%
11.4	Do you go to the library at least once a week?	30%	41%
11.6	do you go to the gym three or more times a week?	28%	26%
11.7	Do you go outside for exercise three or more times a week?	33%	27%
11.8	On average, do you go on association more than five times each week?	50%	41%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	11%	10%
12.2	Have you had any problems sending or receiving mail?	46%	50%
12.3	Have you had any problems getting access to the telephones?	8%	22%

Wing comparison



Prisoner survey responses (wing breakdown) HMP & YOI Bronzefield 2015

Prisoner survey responses (missing data have been excluded for each question).

Key to tables

Percentages highlighted in green show the best score across wings		House Block 1	House Block 2	House Block 3	House Block 4	Total
Percentages highlighted in blue show the worst score across wings						
Number of completed questionnaires returned		50	47	50	27	174
SECTION 1: General information						
1.2	Are you under 21 years of age?	0%	6%	8%	0%	4%
1.3	Are you sentenced?	76%	56%	86%	100%	77%
1.3	Are you on recall?	12%	5%	12%	11%	10%
1.4	Is your sentence less than 12 months?	43%	29%	14%	0%	24%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	0%	2%	0%	1%
1.5	Are you a foreign national?	2%	13%	14%	30%	13%
1.6	Do you understand spoken English?	100%	94%	96%	96%	97%
1.7	Do you understand written English?	98%	92%	98%	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.)	6%	43%	25%	26%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	12%	11%	4%	9%	9%
1.1	Are you Muslim?	2%	15%	8%	8%	8%
1.11	Are you homosexual/gay or bisexual?	33%	9%	19%	37%	23%
1.12	Do you consider yourself to have a disability?	42%	29%	32%	34%	34%
1.13	Are you a veteran (ex-armed services)?	2%	2%	0%	0%	1%
1.14	Is this your first time in prison?	29%	64%	62%	73%	55%
1.15	Do you have any children under the age of 18?	60%	65%	52%	41%	56%
SECTION 2: Transfers and escorts						
On your most recent journey here:						
2.1	Did you spend more than 2 hours in the van?	47%	32%	46%	41%	42%
2.5	Did you feel safe?	73%	70%	70%	67%	71%
2.6	Were you treated well/very well by the escort staff?	75%	72%	76%	74%	74%
2.7	Before you arrived here were you told that you were coming here?	71%	57%	70%	48%	64%
2.8	When you first arrived here did your property arrive at the same time as you?	92%	82%	63%	59%	76%
SECTION 3: Reception, first night and induction						
3.1	Were you in reception for less than 2 hours?	21%	41%	28%	27%	29%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	94%	92%	85%	90%
3.3	Were you treated well/very well in reception?	70%	77%	70%	85%	74%

Wing comparison

Key to tables

	House Block 1	House Block 2	House Block 3	House Block 4	Total
Percentages highlighted in green show the best score across wings					
Percentages highlighted in blue show the worst score across wings					
When you first arrived:					
3.4 Did you have any problems?	100%	87%	86%	86%	90%
3.4 Did you have any problems with loss of property?	17%	9%	9%	18%	13%
3.4 Did you have any housing problems?	53%	29%	19%	15%	31%
3.4 Did you have any problems contacting employers?	4%	13%	7%	0%	7%
3.4 Did you have any problems contacting family?	33%	42%	30%	37%	35%
3.4 Did you have any problems ensuring dependants were being looked after?	10%	6%	7%	8%	8%
3.4 Did you have any money worries?	45%	42%	16%	37%	35%
3.4 Did you have any problems with feeling depressed or suicidal?	43%	37%	47%	52%	44%
3.4 Did you have any physical health problems?	49%	13%	21%	15%	26%
3.4 Did you have any mental health problems?	66%	26%	33%	30%	40%
3.4 Did you have any problems with needing protection from other prisoners?	0%	6%	5%	11%	5%
3.4 Did you have problems accessing phone numbers?	33%	42%	37%	26%	35%
When you first arrived here, were you offered any of the following:					
3.6 Tobacco?	90%	74%	70%	74%	77%
3.6 A shower?	39%	26%	30%	33%	32%
3.6 A free telephone call?	80%	79%	76%	63%	76%
3.6 Something to eat?	88%	70%	84%	63%	78%
3.6 PIN phone credit?	35%	26%	40%	37%	34%
3.6 Toiletries/ basic items?	82%	70%	76%	74%	76%
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?	31%	29%	41%	36%	34%
3.7 Someone from health services?	65%	62%	53%	64%	61%
3.7 A Listener/Samaritans?	48%	62%	63%	44%	56%
3.7 Prison shop/ canteen?	35%	24%	27%	44%	31%
When you first arrived here were you offered information about any of the following:					
3.8 What was going to happen to you?	33%	46%	43%	46%	41%
3.8 Support available for people feeling depressed or suicidal?	33%	43%	55%	43%	44%
3.8 How to make routine requests?	31%	25%	33%	50%	33%
3.8 Your entitlement to visits?	19%	25%	29%	38%	26%
3.8 Health services?	42%	43%	41%	43%	42%
3.8 The chaplaincy?	27%	34%	45%	38%	36%
3.9 Did you feel safe on your first night here?	75%	52%	67%	60%	64%
3.10 Have you been on an induction course?	92%	87%	94%	77%	89%
3.12 Did you receive an education (skills for life) assessment?	74%	81%	88%	85%	82%

Wing comparison

Key to tables

	Percentages highlighted in green show the best score across wings	House Block 1	House Block 2	House Block 3	House Block 4	Total
	Percentages highlighted in blue show the worst score across wings					
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?	27%	25%	41%	52%	34%
4.1	Attend legal visits?	48%	29%	62%	69%	51%
4.1	Get bail information?	15%	10%	5%	26%	12%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	37%	20%	38%	43%	34%
4.3	Can you get legal books in the library?	35%	27%	39%	52%	37%
	For the wing/unit you are currently on:					
4.4	Are you normally offered enough clean, suitable clothes for the week?	54%	58%	73%	100%	67%
4.4	Are you normally able to have a shower every day?	94%	82%	94%	100%	92%
4.4	Do you normally receive clean sheets every week?	100%	78%	94%	92%	91%
4.4	Do you normally get cell cleaning materials every week?	86%	64%	80%	96%	80%
4.4	Is your cell call bell normally answered within five minutes?	50%	60%	35%	84%	53%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	57%	57%	67%	92%	65%
4.4	Can you normally get your stored property, if you need to?	32%	27%	15%	71%	31%
4.5	Is the food in this prison good/very good?	24%	13%	10%	28%	18%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	52%	43%	40%	52%	46%
4.7	Are you able to speak to a Listener at any time, if you want to?	60%	55%	60%	84%	62%
4.8	Are your religious beliefs are respected?	56%	52%	62%	76%	60%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	64%	45%	59%	92%	62%
4.10	Is it easy/very easy to attend religious services?	59%	59%	66%	59%	61%
SECTION 5: Applications and complaints						
5.1	Is it easy to make an application?	71%	58%	80%	88%	73%
5.3	Is it easy to make a complaint?	60%	48%	72%	79%	63%
5.5	Have you ever been prevented from making a complaint when you wanted to?	24%	15%	15%	13%	17%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	26%	21%	42%	48%	33%
SECTION 6: Incentives and earned privileges scheme						
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	41%	38%	40%	71%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	42%	48%	66%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	8%	9%	2%	4%	6%
SECTION 7: Relationships with staff						
7.1	Do most staff, in this prison, treat you with respect?	79%	79%	69%	88%	77%
7.2	Is there a member of staff, in this prison, who you can turn to for help if you have a problem?	83%	70%	73%	97%	78%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	23%	37%	40%	63%	38%
7.4	Do staff normally speak to you most of the time/all of the time during association?	10%	16%	17%	37%	17%
7.5	Do you have a personal officer?	27%	38%	73%	91%	53%

Wing comparison

Key to tables

	Percentages highlighted in green show the best score across wings	House Block 1	House Block 2	House Block 3	House Block 4	Total
	Percentages highlighted in blue show the worst score across wings					
SECTION 8: Safety						
8.1	Have you ever felt unsafe here?	52%	57%	48%	60%	53%
8.2	Do you feel unsafe now?	17%	24%	11%	9%	16%
8.4	Have you been victimised by other prisoners here?	48%	44%	39%	48%	44%
	Since you have been here, have other prisoners:					
8.5	Made insulting remarks about you, your family or friends?	21%	15%	27%	28%	22%
8.5	Hit, kicked or assaulted you?	2%	6%	10%	9%	7%
8.5	Sexually abused you?	2%	0%	0%	4%	1%
8.5	Threatened or intimidated you?	33%	37%	30%	28%	33%
8.5	Taken your canteen/property?	13%	9%	8%	11%	10%
8.5	Victimised you because of medication?	19%	6%	8%	9%	11%
8.5	Victimised you because of debt?	2%	2%	0%	0%	1%
8.5	Victimised you because of drugs?	6%	6%	6%	0%	5%
8.5	Victimised you because of your race or ethnic origin?	0%	6%	4%	4%	4%
8.5	Victimised you because of your religion/religious beliefs?	0%	2%	2%	4%	2%
8.5	Victimised you because of your nationality?	0%	9%	0%	9%	4%
8.5	Victimised you because you were from a different part of the country?	0%	5%	2%	9%	3%
8.5	Victimised you because you are from a Traveller community?	4%	5%	0%	0%	3%
8.5	Victimised you because of your sexual orientation?	0%	2%	0%	11%	2%
8.5	Victimised you because of your age?	4%	2%	10%	4%	6%
8.5	Victimised you because you have a disability?	2%	6%	10%	0%	5%
8.5	Victimised you because you were new here?	21%	15%	4%	4%	12%
8.5	Victimised you because of your offence/crime?	2%	5%	2%	16%	5%
8.5	Victimised you because of gang related issues?	2%	9%	4%	0%	4%
SECTION 8: Safety continued						
8.6	Have you been victimised by staff here?	42%	35%	33%	40%	37%
	Since you have been here, have staff:					
8.7	Made insulting remarks about you, your family or friends?	15%	9%	18%	24%	16%
8.7	Hit, kicked or assaulted you?	0%	5%	4%	0%	3%
8.7	Sexually abused you?	0%	0%	2%	0%	1%
8.7	Threatened or intimidated you?	8%	22%	10%	24%	15%
8.7	Victimised you because of medication?	10%	6%	6%	4%	7%
8.7	Victimised you because of debt?	0%	2%	0%	0%	1%
8.7	Victimised you because of drugs?	6%	2%	4%	0%	4%

Wing comparison

Key to tables

Percentages highlighted in green show the best score across wings		House Block 1	House Block 2	House Block 3	House Block 4	Total
Percentages highlighted in blue show the worst score across wings						
8.7	Victimised you because of your race or ethnic origin?	4%	5%	6%	4%	5%
8.7	Victimised you because of your religion/religious beliefs?	4%	5%	0%	4%	3%
8.7	Victimised you because of your nationality?	0%	5%	0%	0%	1%
8.7	Victimised you because you were from a different part of the country?	0%	2%	0%	4%	1%
8.7	Victimised you because you are from a Traveller community?	4%	5%	0%	0%	3%
8.7	Victimised you because of your sexual orientation?	4%	2%	2%	9%	4%
8.7	Victimised you because of your age?	0%	2%	6%	0%	2%
8.7	Victimised you because you have a disability?	6%	2%	6%	0%	4%
8.7	Victimised you because you were new here?	8%	2%	2%	4%	4%
8.7	Victimised you because of your offence/crime?	0%	2%	6%	9%	4%
8.7	Victimised you because of gang related issues?	0%	2%	4%	4%	3%
SECTION 9: Health services						
9.1	Is it easy/very easy to see the doctor?	8%	18%	20%	35%	18%
9.1	Is it easy/very easy to see the nurse?	29%	43%	44%	76%	44%
9.1	Is it easy/very easy to see the dentist?	7%	7%	10%	19%	9%
9.4	Are you currently taking medication?	98%	51%	66%	74%	72%
9.6	Do you have any emotional well being or mental health problems?	90%	63%	53%	46%	66%
SECTION 10: Drugs and alcohol						
10.1	Did you have a problem with drugs when you came into this prison?	92%	22%	30%	12%	43%
10.2	Did you have a problem with alcohol when you came into this prison?	25%	22%	25%	13%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	33%	21%	27%	32%	28%
10.4	Is it easy/very easy to get alcohol in this prison?	0%	5%	4%	0%	3%
10.5	Have you developed a problem with drugs since you have been in this prison?	5%	5%	6%	12%	6%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	11%	5%	8%	5%	8%
SECTION 11: Activities						
Is it very easy/ easy to get into the following activities:						
11.1	A prison job?	37%	40%	48%	88%	48%
11.1	Vocational or skills training?	31%	31%	30%	60%	35%
11.1	Education (including basic skills)?	57%	43%	54%	86%	56%
11.1	Offending behaviour programmes?	12%	19%	22%	43%	21%
Are you currently involved in any of the following activities:						
11.2	A prison job?	61%	49%	70%	88%	64%
11.2	Vocational or skills training?	14%	9%	13%	12%	12%
11.2	Education (including basic skills)?	25%	35%	19%	12%	24%
11.2	Offending behaviour programmes?	5%	2%	6%	0%	4%
11.4	Do you go to the library at least once a week?	35%	39%	31%	65%	39%

Wing comparison

Key to tables

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Percentages highlighted in blue show the worst score across wings						
11.5	Does the library have a wide enough range of materials to meet your needs?	18%	23%	17%	31%	21%
11.6	Do you go to the gym three or more times a week?	11%	46%	29%	26%	28%
11.7	Do you go outside for exercise three or more times a week?	27%	22%	32%	26%	27%
11.8	Do you go on association more than five times each week?	52%	35%	38%	52%	44%
11.9	Do you spend ten or more hours out of your cell on a weekday?	9%	11%	8%	12%	10%
SECTION 12: Friends and family						
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	30%	44%	32%	62%	39%
12.2	Have you had any problems with sending or receiving mail?	56%	40%	57%	38%	49%
12.3	Have you had any problems getting access to the telephones?	16%	33%	19%	0%	20%
12.4	Is it easy/ very easy for your friends and family to get here?	18%	39%	35%	14%	28%
SECTION 13: Preparation for release						
13.3	Do you have a named offender supervisor in this prison?	31%	26%	51%	60%	40%
13.10	Do you have a needs based custody plan?	7%	5%	5%	5%	5%
13.11	Do you feel that any member of staff has helped you to prepare for release?	14%	27%	14%	39%	21%