

Report on an unannounced inspection of

# **HMP Haverigg**

by HM Chief Inspector of Prisons

**6–17 January 2014**

## **Glossary of terms**

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This publication is available for download at: <http://www.justice.gov.uk/about/hmi-prison>

Printed and published by:  
Her Majesty's Inspectorate of Prisons  
Victory House  
6th floor  
30–34 Kingsway  
London  
WC2B 6EX  
England

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# Introduction

HMP Haverigg is a category C male training prison holding about 650 adult men. It is situated in West Cumbria and is perhaps the Prison Service's most isolated prison. The prison had weathered the upheavals and uncertainties of budget cuts, prison closures and new policies better than most. It had maintained its performance, there was a real sense of some momentum, and realistic plans were in place to tackle some long term weaknesses. Nevertheless, while there was a real prospect of improvement, it still had more to deliver and at the time of this inspection, outcomes for prisoners were still not good enough in some crucial areas.

Prisoners arrived at the prison after a long and uncomfortable journey and few had any idea they were coming to Haverigg. Although reception arrangements were generally efficient, first night accommodation was poor. The main induction was delivered entirely by prison orderlies and we were not satisfied that all new arrivals received it. Once settled in most prisoners felt safe – significantly more told us they felt safe at the time of this inspection than at the last inspection and more than in comparable prisons. However, for a small minority of prisoners this was not the case. There was gang and debt-related bullying. Staff supervision was made difficult by the layout of the prison, with many prisoners accommodated in 'billets' or huts, each holding around 15 to 20 men and grouped into larger units, poor external lighting, and limited CCTV coverage. We did not think the prison was on top of the problem. Not all incidents of violence were effectively identified or investigated and support for victims was poor. We found men too frightened to come out of their cells or seeking refuge by getting themselves placed in segregation. The prison's policies for dealing with this were good – but they were not consistently implemented. Support for men at risk of suicide or self-harm, on the other hand, was consistently good.

Some disciplinary processes were excessive. The number of adjudications was high and some were poorly dealt with. We were particularly concerned about the use of force. Usage was high and, again, some of the incidents we examined were poorly dealt with. Governance was poor and we referred the recorded footage of one incident we examined to the governor for further investigation. All planned use of force should be filmed and reviewed and staff should know that is happening. Segregation usage was higher than at the last inspection and some men spent too long there. The environment and regime were poor but staff had a good knowledge of the men in their care and treated them well.

The quality of accommodation ranged from good to poor but this and many other weaknesses in the prison were mitigated by generally very good staff-prisoner relationships. However, these generally respectful relationships were undermined by very poor work on equality and diversity. The prison had little idea of the identity and needs of prisoners with protected characteristics. For example, in our survey prisoners from black and minority ethnic backgrounds reported much more negatively than the population as a whole. The prison was unable to explain to us why this might be so. Health care had improved since the last inspection but it was unacceptable that prisoners who were unwell had to queue outside in foul weather for medical appointments.

Most prisoners enjoyed good time out of cell but there were too few activity places available and allocation processes were inefficient. Those who were unemployed had a very restricted regime. For those in activity, the leadership, quality and achievements provided were good. There was a wide range of work, training and education opportunities on offer which were thoughtfully linked to employment prospects in the areas to which most prisoners would return. The 'smokery' that produced and sold smoked food was run with infectious enthusiasm and provided a very realistic working environment. The library was very good and provided a range of ancillary services that encouraged prisoners to read. PE provision was also very good.

New offender management arrangements were being put in place and at the time of the inspection some staff were very new to their posts and there were a number of vacancies. The problems were compounded because almost one-third of the population had an out of date or no OASys assessment. Not surprisingly, many prisoners told us they had little contact with their offender supervisor and that they were receiving little help to achieve their sentence plan targets. However, practical resettlement services were much better. Almost no prisoners were released without accommodation to go to; and there was good support to help prisoners obtain a job or training. Help with money management, healthcare and substance abuse needs was also satisfactory. Visit arrangements were adequate and there was a good range of family support services.

Prisoners who kept their heads down, made the most of the opportunities on offer and whose needs were typical of the prison's population as a whole would probably do reasonably well at Haverigg. However, those who needed more support or whose needs differed from the majority might have a less positive experience – sometimes to an unacceptable degree. Progress is being made and a positive, experienced staff group have created the foundations for further progress, but some processes need to be significantly improved and managers need to give close attention to ensuring that poor practice is challenged and improved.

**Nick Hardwick**  
HM Chief Inspector of Prisons

May 2014

# Fact page

## Task of the establishment

Category C male training prison.

## Prison status

Publicly owned

## Region

North West

## Number held

643

## Certified normal accommodation

622

## Operational capacity

644

## Date of last full inspection

March 2011

## Brief history

HMP Haverigg was opened in 1967 on the site of a former RAF camp and is the only prison in Cumbria. Originally, 350 prisoners were accommodated in the RAF billets, but the addition of new accommodation and the rebuilding of two units following incidents of concerted indiscipline in 1988 and 1999 increased accommodation to 558 places. Additional places were created through further new units and doubling of cells.

## Short description of residential units

Residential unit	Number held	
1 (Skiddaw)	134	Purpose-built house block split into two wings, with 103 single, 11 double and three triple cells with integral sanitation.
2 (Fairfield)	196	Nine billets with single and double rooms with integral sanitation.
3 (Blencathra)	126	Seven billets, mainly with single rooms.
4 (Helvellyn)	80	Two 40-room units; all rooms have en-suite showers and in-cell television.
5 (Langdale)	72	Cellular units with eight double cells.
6 (Great Gable)	36	Programmes wing with 28 single rooms and four doubles in two billets.
	<b>622</b>	

Scafell wing is the segregation unit, with accommodation for up to 12 prisoners.

**Name of governor**

Tony Corcoran

**Escort contractor**

GeoAmey

**Health service provider**

Cumbria Partnership Foundation Trust

**Learning and skills providers**

The Manchester College

The Conservation volunteers

**Independent Monitoring Board chair**

Mike Ross

# 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:

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

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

- **outcomes for prisoners are good.**  
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- **outcomes for prisoners are reasonably good.**  
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **outcomes for prisoners are not sufficiently good.**  
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **outcomes for prisoners are poor.**  
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, 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, unless these have already been reviewed by a short follow-up inspection.

## This report

- A8 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. 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.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>1</sup>

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<sup>1</sup> 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** *Many prisoners complained about the journey to the prison with some not notified of their destination. Early days arrangements were generally satisfactory but induction was fragmented and lacked good governance. Although in our survey few prisoners reported feeling unsafe, there were too many violent incidents and we found some evidence of under-reporting. Not enough was done to identify, protect and support victims of bullying. Incidents of self-harm were low and arrangements to support prisoners in crisis were good. Safeguarding arrangements were underdeveloped. Security was mostly proportionate. Oversight of the use of force was poor. Too many prisoners remained in the segregation unit where the environment and regime were poor. The drugs reduction strategy showed signs of success but prisoners said it was easy to access unauthorised substances. Clinical treatment provision for substance misusers had improved. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

**S2** *At the last inspection in March 2011, we found that outcomes for prisoners in Haverigg were not sufficiently good against this healthy prison test. We made 52 recommendations in the area of safety. At this follow-up inspection we found that 11 of the recommendations had been achieved, nine had been partially achieved, and 32 had not been achieved*

**S3** Prisoners repeatedly told us that they had felt unsafe in their journeys to the prison, as well as nauseous in the vehicles due to the twists and turns in the road to the prison, and some had not been told where they were going. Vans were clean and escorting staff were respectful, but there were sometimes long waits for new arrivals to enter the prison and reception, particularly at lunchtime.

**S4** New arrivals generally spent less than two hours in reception and relationships with staff were relaxed. However, it was inappropriate that all new arrivals were routinely strip searched, mostly in the absence of supporting intelligence, and we observed strip searching taking place by just one member of staff, which was not acceptable.

**S5** First night risk interviews were properly focused and handover arrangements to night staff were good, but first night accommodation was poor. New arrivals were not given a free telephone call and we were not assured that all could have showers. Prisoners appreciated the use of peer supporters in reception and on the first night accommodation.

**S6** The generic induction was delivered by unsupervised peer orderlies and we were not assured that all new arrivals received it. The structured timetable included gym, library and education assessments and both prisoners and staff told us that all prisoners received these. Delays in completing aspects of induction meant that new prisoners were locked up on their wing, and long delays before they were allocated to activity resulted in many staying on the wing with little to occupy them.

**S7** Although most prisoners said that they did not feel unsafe, the number of reported assaults was high and 42% of black and minority ethnic prisoners said that they had been intimidated by other prisoners. Opportunities for bullying were evident, particularly on the billeted units, which had poor lighting in the outside areas between buildings, very limited CCTV coverage and where staff supervision was minimal because of the extent of the site they had to cover. We found some prisoners who found it difficult to cope (including those who had accrued debts in prison) were too frightened to leave their cells when other prisoners were about

and had opted to isolate themselves inside their cells. The systems to evaluate risk and monitor the reported levels of violence had improved since the last inspection, and relationships between violence reduction and the security department had strengthened. The collection of data on recorded incidents was generally consistent and the sharing of intelligence had also improved. However, the quality of investigations into alleged or suspected incidents was often poor and there was evidence of under-reporting. Many of the interventions described in the violence reduction policy had not been implemented. Support plans for the more vulnerable prisoners were generally poor.

- S8 The number of self-harming incidents was low. Safer custody committee meetings were well attended and had a good standard of discussion about relevant issues, including analysis of data about patterns and trends of self-harming behaviour. Entries in assessment, care in custody and teamwork (ACCT) case management documents showed a dynamic response to meeting prisoner needs, but care mapping was sometimes weak and attendance at reviews occasionally poor. The Listener scheme (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) was well supported but the Listener suite on residential unit one was dirty. Prisoners did not have telephone access to the Samaritans during the night. Conditions in the constant watch cell on unit one were poor and there was evidence that strip clothing was used and not recorded.
- S9 The prison was beginning to develop a policy to deal with prisoners at risk because of mental or other disability, age or illness, but this was not adequately developed.
- S10 Security arrangements were broadly proportionate and did not unnecessarily restrict prisoner access to the regime. High levels of security information were received but were not always processed or reacted to promptly. Appropriate security objectives were set and monitored but were not communicated effectively to staff. The random mandatory drug testing positive rate was low, but in our survey more respondents than the comparator said it was easy to get illegal drugs, and the prison was facing but tackling a significant drug problem. There was evidence of good information sharing between departments and active supply reduction measures, but suspicion drug tests were not completed consistently or processed in time.
- S11 Although there was evidence that the incentives and earned privileges (IEP) scheme was used strategically to encourage responsible behaviour, we were not convinced that staff were always clear about its operation. The regime for the small number of prisoners on basic was too austere with only a minimal amount of time out of their cells. We found that prisoners could be demoted to basic following an alleged single incident of poor behaviour without a thorough enough investigation of the facts, and reviews were often cursory.
- S12 The number of adjudications had increased since the last inspection, and we found evidence that further charges were not laid within appropriate timescales. Many records of adjudications showed insufficient exploration of charges before a finding of guilt, and the quality assurance process was inadequate.
- S13 Incidents involving the use of force were high and higher than at the last inspection – around 60% had involved the use of control and restraint, including around 15% with full and sustained use. Governance of use of force, including the use of batons, was weak. Many records were incomplete and varied in quality – many lacked detail and even when there was opportunity, incidents were not de-escalated quickly enough. Planned interventions were not routinely filmed or reviewed and we were very concerned by some that we were able to watch. Despite having no special accommodation, we found some ungoverned and unrecorded use of unfurnished accommodation in the segregation unit and residential units.

- S14 Throughput of the segregation unit was higher than at the last inspection. The average length of stay was longer than we usually see, and too many prisoners remained there for too long. We were not assured that the figure provided for prisoners seeking refuge was accurate and believed the number to be higher. The environment was poor: some cells contained graffiti, had insufficient furniture and were damp, and exercise yards were austere cages. Although the regime generally allowed for daily access to showers, telephone calls and exercise, for most it was extremely limited and devoid of any constructive activity. Documentation to authorise segregation was completed poorly and, where set, behaviour targets were perfunctory.
- S15 Clinical treatment for substance misusers had improved and psychosocial support services were developing. Some group work courses had been introduced but there was no peer support scheme or service user involvement. The prison still lacked an alcohol-related offending behaviour programme.

## Respect

- S16 *Accommodation varied from good to poor. Staff-prisoner relationships were very good. Formal arrangements for equality and diversity, including consultation, were poor, and staff were completely unaware of the needs of prisoners from minority groups. Faith provision was mostly good. Complaints were not always answered appropriately. Legal services provision was adequate. Health services were satisfactory and developing. Prisoners were dissatisfied with the food. Prison shop provision was adequate. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S17 *At the last inspection in March 2011, we found that outcomes for prisoners in Haverigg were not sufficiently good against this healthy prison test. We made 74 recommendations in the area of respect.<sup>2</sup> At this follow-up inspection we found that 24 of the recommendations had been achieved, six partially achieved, 42 had not been achieved, and two were no longer relevant.*

- S18 Accommodation was spread out over a very large site, and residential accommodation varied from old billets (detached units previously used as armed forces sleeping quarters) to more modern units. Conditions on residential units varied: units four and six were reasonable and unit five was good, in contrast to the billeted accommodation on units two and three, which remained poor. Communal areas and cells on unit one were dirty and furniture was broken. The offensive display policy was not enforced across the prison and graffiti was widespread. Prisoner access to telephones was inadequate, and there were insufficient for the population.
- S19 In our survey, most prisoners said that staff treated them with respect and our observations suggested that, on the whole, the quality of relationships between staff and prisoners was very good, which offset weakness elsewhere. We saw many examples of positive staff engagement with prisoners on residential units, and some officers who dealt with difficult prisoners very patiently.

<sup>2</sup> 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 The strategic management of equality and diversity work was poor and the promotion of diversity throughout the prison was woefully underdeveloped. There was under-identification of prisoners from most protected characteristics and a lack of consultation with minority groups. Neither we nor the prison could be assured that prisoners from minority groups received equitable treatment. The number of discrimination complaints was low but we found some evidence of under-reporting, and prisoners lacked confidence in the processes and investigations. In our survey, black and minority ethnic prisoners were less positive than white respondents on indicators of safety and respect. However, monitoring data showed no areas consistently out of range for black and minority ethnic prisoners. Support for the small number of foreign national prisoners was adequate. Provision for prisoners with disabilities was inadequate, and there was no support for Gypsy, Romany or Traveller or gay or transgender prisoners. Faith provision for Muslim prisoners was insufficient but all other major faiths were provided for, and there was a good range of services and classes.
- S21 Some responses to prisoners' complaints were curt and did not answer the issue raised, and quality assurance was irregular and insufficiently robust. Legal services provision was adequate.
- S22 Prisoners expressed dissatisfaction with health services but we found that most aspects were satisfactory and had developed since our last inspection. Clinical governance arrangements were generally good, although those for dentistry were not clear. The relocated health centre was an improvement on the previous environment, but the small waiting area restricted patient flow resulting in inefficient clinics and prisoners having to queue outdoors. There was an appropriate spread of primary care clinics and opportunities for the care of long-term conditions, but some waiting lists and waiting times were too long. Dental waiting lists and waiting times were some of the longest we have seen and were totally unacceptable. Mental health services were good, although capacity was insufficient to meet demand.
- S23 The prison food was unpopular with most prisoners. We found that portion sizes were adequate but the food was unappetising. The kitchen remained grubby, and damaged equipment had affected the quality of food. Consultation arrangements for food and the prison shop were responsive. Although black and minority ethnic prisoners were more negative than white prisoners about the goods available through the prison shop, we found the provision broadly sufficient.

## Purposeful activity

- S24 *Time out of cell was reasonable for employed prisoners but there were insufficient activity places and too many prisoners were locked up during the core day. The prison had a good focus on education and vocational training but the inefficient use of places to maximise attendance at work and vocational training was a concern. Achievement outcomes were good. Prisoners benefited from good access to the library. PE provision was very good. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S25 *At the last inspection in March 2011, we found that outcomes for prisoners in Haverigg 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, four had been partially achieved, one had not been achieved and one was no longer relevant.*

- S26 In roll checks conducted during the working day we found a high average of 19% of the population locked in their cells. Most prisoners who were new and yet to be allocated to work and those who were unemployed were concentrated on residential units 1 and 2, where we found around 36% of prisoners locked up. The core day was implemented differently between wings. A fully employed prisoner could generally experience 10 hours or more a day out of their cell. Opportunities for association were limited to weekends, and only a few workers could access evening activities Monday to Thursday.
- S27 There were insufficient activity places for the population, and the places that were available were not used to capacity. However, managers had made well-informed curriculum choices to extend the range of activities to focus on skills useful for prisoners in progressing to employment and/or further training on release. Strategic and operational management was good, as was partnership working between the prison and its education and other training providers and support agencies.
- S28 A good focus on business enterprise in several activities had increased involvement with local communities and employers. Quality assurance, including self-assessment, was mostly good. Vocational training in some subjects was improving to reach its full potential. Allocation to vocational training and work was inefficient and did not optimise attendance, but punctuality at activity sessions was generally good. Prisoners received good individual advice and guidance to choose activities relevant to their sentence plan targets and resettlement goals.
- S29 Teaching was good in education and in some vocational training and work, and there was a good range of subjects and levels. Prisoners could combine work with pursuing accredited awards. The development of prisoners' English and mathematics skills was integrated well into the teaching of other subjects. The well-used resources included interactive white boards in education and specialist equipment in vocational and work areas. Planning for lessons was insufficiently detailed and did not include enough information to show how individual prisoners' needs would be met, or to promote equality and diversity.
- S30 Prisoners in vocational training, production workshops and the smokery (which produced high quality smoked food products) developed good technical skills and produced many high quality products, but the employability skills that prisoners developed were not routinely recorded.
- S31 The standards of prisoners' work in education was good and they behaved well. Achievement was high for prisoners who completed courses. There had been action to improve the low achievement rates at level 1 in English and mathematics. Qualified peer mentors worked well with education staff and gave prisoners individual support for learning.
- S32 The library was a well-maintained and pleasant environment that was conducive to learning. It was open in the evenings and at weekends, and also offered a wide range of activities to attract prisoners. The provision was promoted enthusiastically by the library staff and orderlies.
- S33 The sports facilities, fitness centre and wing gyms were well used for recreation in the evenings and at weekends, promoting healthy living, and a range of employment-focused accredited PE courses were offered in daytime sessions.

## Resettlement

- S34** *The separate reducing reoffending and offender management functions had reasonable links at a strategic level, but offender management and resettlement work were not well integrated. Prisoners had a lack of sentence planning support and contact with offender supervisors. Public protection arrangements were mostly good. Opportunities for release on licence had improved. There was some good work within individual resettlement pathways, with good visits provision for families, but prisoners had limited access to offending behaviour programmes. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S35** *At the last inspection in March 2011 we found that outcomes for prisoners in Haverigg were reasonably good against this healthy prison test. We made 22 recommendations in the area of resettlement. At this follow-up inspection we found that eight of the recommendations had been achieved, three had been partially achieved, nine had not been achieved and two were no longer relevant.*
- S36** The dual functions of offender management and reducing reoffending were generally well integrated strategically with monthly meetings. The reducing reoffending strategy was comprehensive and detailed with clearly defined objectives for all resettlement pathways. There were also good links with appropriate community partners. There had been a detailed needs analysis using the data for the 93% of the population subject to offender assessment system (OASys) assessment. However, operationally the integration of offender management and resettlement work was too variable and, in some cases, inconsistent, and in our survey only 51% of respondents said that they had done something or had something happen to them in the prison to reduce the likelihood of them reoffending.
- S37** The offender management department was in transition with several staff yet to be recruited and some very inexperienced staff in post. The limited resource meant that the prison needed to clarify how best to manage the service. Although most prisoners had an identified offender supervisor, many had little or no contact or engagement with them. In our survey, 61% of prisoners said that no one was working with them to achieve sentence plan targets. This problem was compounded by the fact that almost one-third of the population had an out-of-date or no offender assessment document. Despite this, in most of the cases we evaluated during the inspection, OASys assessments were completed to a reasonable standard and sentence plan targets identified appropriately. However, offender supervisors no longer attended offender assessment boards and pre-release boards, which meant some important information about prisoners needs could be missed. There was also a lack of quality assurance and casework supervision for offender supervisors to ensure consistency of services.
- S38** We found some examples of good quality offender management and wider staff engagement and support for prisoners, especially for those involved with the Kainos offender behaviour programme. For the small number of prisoners able to access release on temporary licence there were some positive outcomes, and the range of work placements had improved significantly since the last inspection. Public protection arrangements were generally good and well managed, with an appropriate focus on those presenting the highest risk.
- S39** Offender management department staff were usually involved in the release planning of prisoners identified as high or very high risk of harm. This was less often the case for medium and low risk prisoners, although largely offset by good pre-release planning through the resettlement team. Despite this, there was a lack of information sharing between pathway providers and offender management.

- S40 Accommodation support for prisoners on release still had little specialist input, but there was a good level and range of provision by the prison. The number of prisoners released with no fixed accommodation was very low at less than 1%. Some debt management support was provided by Shelter each week, although the level of need of the population and the effectiveness of the service needed to be assessed. Money management courses and the opportunity to open bank accounts were available.
- S41 There were good regional employment opportunities aimed at prisoners' employment, training and education progression on release and across the other pathways. We evidenced good multi-agency working and a variety of opportunities for specific preparation for release support, such as the use of the virtual campus (giving prisoners internet access to community education, training and employment opportunities) for CV writing and job search.
- S42 Prisoners due for release or transfer received good health care support and preparation. There were good links with community drug and alcohol services to facilitate treatment continuation on release for prisoners with substance misuse needs.
- S43 A small visitors' centre provided a good range of support for prisoners' families. The number of visits the prison could facilitate had increased, although the environment was now somewhat cramped. There was a reasonable range of further family support services, including family visits, parenting and family relationships courses, and Storybook Dads, which enabled prisoners to record stories for their children.
- S44 The prison provided insufficient offending behaviour work and the offending behaviour needs of many prisoners, even some identified as a high risk of harm, remained unmet. Although there was some basic programme work provided through the education, chaplaincy and substance misuse teams, the only nationally accredited offender behaviour programme was Kainos. A welcome new strategy to address domestic violence issues had yet to be fully implemented.

## Main concerns and recommendations

- S45 Concern: Although most prisoners felt safe, the identification, protection and support of prisoners who were being victimised was poor and opportunities for bullying were evident. We found too many prisoners frightened to leave their cells or seeking refuge in segregation. The violence reduction policy was not effectively implemented.

### **Recommendation: The identification, protection and support for victims of bullying should be improved by:**

- **Fully implementing the violence reduction policy and ensuring all staff should have the training and awareness necessary to do so**
- **The safer custody team ensuring that all suspected incidents are identified, recorded, effectively investigated and appropriate action taken against perpetrators and to support victims.**
- **Improving lighting and CCTV coverage in communal internal and external areas.**

S46 Concern: Use of force was high and higher than when we last inspected, but its oversight was inadequate. Around 60% of incidents involved the use of control and restraint. Many records were incomplete and the quality was variable, and records and planned intervention films suggested that some incidents were not de-escalated quickly enough. The prison was not focused on all incidents where batons were deployed, and we were not assured that all such uses were a proportionate response to the threat posed. We found ungoverned use of unfurnished accommodation.

**Recommendation: Incidents involving the use of force should be reduced. The governance of and accountability for the use of force, including uses of unfurnished accommodation, planned interventions and batons, should be improved. All planned use of force should be filmed and reviewed. Documentation of all such uses should also be enhanced.**

S47 Concern: The throughput of the segregation unit was high and higher than at the last inspection. The average length of stay was higher than we normally see and the environment was poor, with a limited regime for most prisoners and little to occupy them.

**Recommendation: The number of prisoners in the segregation unit should be reduced and the quality of regime and environment should be improved. (Repeated main recommendation HP54)**

S48 Concern: The prison was unaware of the numbers of prisoners from each minority group and there was little monitoring to ensure equitable treatment. There was no strategic plan for the management or development of work with minority groups, and the prison was unaware of the perceptions of such groups, although we found that black and minority ethnic prisoners had more negative perceptions than white prisoners across a range of indicators.

**Recommendation: The prison should develop a clear strategy based on a needs analysis to promote and improve outcomes for prisoners from all minority groups. This should include regular consultation and monitoring to understand their perceptions and to ensure equitable access to provision.**

# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

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

**1.1** *Many new arrivals were not aware they were transferring to Haverigg and felt unsafe and nauseous during transit. Escort vehicles were clean and staff engagement was positive. There were some delays in disembarking prisoners from vehicles, particularly over lunchtimes.*

**1.2** In our survey, prisoners were more negative than the comparator about journey times to the prison and cleanliness of escort vehicles. The prison was difficult to reach and even journeys from the nearest sending prisons took a long time, with the average journey taking between two and 3.5 hours. We were repeatedly told by prisoners and staff that prisoners felt unsafe in vehicles, nauseous on arrival (because of the many twists in the roads to the prison), and many told us they were unaware they were coming to Haverigg. Vans were generally clean, and relationships between escort staff and prisoners were friendly and respectful.

**1.3** Transfers to Haverigg were planned, but although the reception was supposed to be staffed over the lunch period to receive vehicles due to arrive then, staff were often redeployed elsewhere. This meant that there were sometimes delays of up to 40 minutes before prisoners were disembarked from the escort vehicles.

### Recommendations

**1.4** **Prisoners should be given sufficient notice that they are transferring to Haverigg.**  
(To NOMS)

**1.5** **Arriving prisoners should be disembarked from escort vehicles without delay.**

## Early days in custody

### Expected outcomes:

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

- 1.6** *Staff and prisoners who worked in reception put new arrivals at ease but all new prisoners were strip searched, mostly with no supporting intelligence. First night risk assessments were sensitive and properly focused, and conducted sensitively, but new arrivals did not receive a free telephone call. First night accommodation was poorly prepared but handover arrangements to night staff were appropriate. There was no staff oversight of induction and we were not assured that all prisoners completed a comprehensive programme. Delays in allocating new arrivals to work meant that they spent too long locked up.*
- 1.7** The initial holding room for new arrivals was clean but had no information for them. Poor sightlines limited staff supervision of the room, but this was offset by the short time that prisoners spent there. Communal areas in reception were clean. The second holding room was more comfortable, displayed some information and had a television. A prisoner orderly, who was also a trained Listener (trained by the Samaritans to provide confidential emotional support to fellow prisoners), welcomed new arrivals and made them a hot drink.
- 1.8** We observed good relationships between reception staff and prisoners. However, all new arrivals were routinely strip searched in the absence of supporting intelligence (see paragraph 1.42), and we saw strip searching carried out by just one member of staff, which was unacceptable (see recommendation 1.47).
- 1.9** New arrivals generally spent less than two hours in reception, where they had health and first night risk assessments. During the inspection there was a long delay in health care staff arriving at reception, which meant that prisoners spent about 40 minutes longer there than was necessary. There was a secondary health screen the following day. A dedicated group of first night officers worked from a private interview room. They were properly focused on risk and vulnerability, and carried out first night risk interviews in a caring and sensitive way. New arrivals did not receive a free telephone call. They were given £2 repayable telephone credit, but their personal identification number (PIN) was sometimes not activated on the day they arrived, which delayed contacts with their family. The chaplaincy saw all new prisoners the day after they arrived.
- 1.10** New arrivals were generally located on D1, the first night billet. First night accommodation was poorly prepared, and cells were dirty, covered in graffiti, and had no pillows or kettles. Although D1 had showers, we were not assured from our conversations with prisoners or the results of our survey that all prisoners accessed them on their first night. Two peer orderlies based on D1 introduced themselves to new arrivals, which they appreciated. Staff handover arrangements to night staff about new arrivals were appropriate, and such prisoners were checked during their first night.

- I.11** In our survey, more respondents than the comparator said they had received an induction but fewer said it covered everything they needed to know. Induction started the day after arrival when the DI peer orderlies went through an information booklet and answered questions. There was no staff oversight of this process, and we were not assured that the presentation covered everything that was needed or that all new arrivals received it, as there were no records to show completion of induction. The structured part of the programme included an education assessment and introduction to the library and gym, on a rolling programme on Tuesday to Thursday. New arrivals needed to complete these aspects before they were allocated to work. Although there were no formal induction records, we were more confident from our conversations with staff and prisoners that these modules took place consistently.

## Recommendations

- I.12** New arrivals should receive a free telephone call on their first night.
- I.13** First night cells should be clean, free from graffiti and properly equipped.
- I.14** The content and delivery of induction and monitoring of attendance should be improved, and all prisoners should be kept purposefully engaged until allocated to activities.

## Housekeeping point

- I.15** New arrivals should be able to take a shower on their first night.

## Bullying and violence reduction

### Expected outcomes:

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

- I.16** *Although most prisoners said that they did not feel unsafe, the number of reported assaults was high, and there was evidence of under-reporting. The systems to evaluate risk and monitor reported violence had improved, and there were stronger relationships between violence reduction and the security department. The violence reduction policy was comprehensive but not fully implemented. The quality of investigations into incidents was often poor, as were support plans for the more vulnerable. We found prisoners who had isolated themselves on residential wings who were too frightened to leave their cells.*

- I.17** Most prisoners said that they felt safe. They told us that they could steer clear of bullying and violent incidents if they stayed out of debt and generally got on with their time constructively. Prisoners also said that most staff took concerns seriously and took some action to address antisocial behaviour. However, opportunities for bullying were evident and the number of reported fights and assaults among prisoners was high, with 51 reported assaults in the previous six months, a rate of about 7.6 assaults per 100 prisoners. In our survey, 42% of black and minority ethnic respondents said that they had been intimidated by other prisoners. Due to the extent of the site and the spread of accommodation, staff

supervision of the billeted units was minimal, and this was compounded by a lack of physical deterrents. We found poor lighting around buildings, and communal grounds had very little CCTV coverage. Staff often had to deal with incidents after they had happened with very little evidence of what had occurred. The prison's analysis of security information had identified many areas as likely to be hot spots for violence (see also paragraph 2.24). There was also evidence of under-reporting of incidents. We were not assured that unexplained injuries were always identified, and we saw examples where injuries to prisoners had not been sufficiently investigated and some had gone unnoticed altogether (see main recommendation S45).

- I.18** Managerial structures to help reduce the level of violence had improved and were reasonably good. There was better use of security information to identify trends and patterns of violence, and there had been improvement in the poor links between violence reduction structures and the security department that we identified at the last inspection. For example, intelligence received from security information reports and prisoners' custodial history records had been used to inform specific tactical interventions, such as the removal of suspected bullies to the segregation unit to prevent violence incidents.
- I.19** A well-constructed safer custody committee met monthly to monitor progress of the violence reduction strategy. Minutes of meetings indicated good discussions about the number and scale of recorded incidents. Areas of risk in the prison based on the number and extent of violent incidents were identified, and incident mapping was used to identify areas where violence had or was likely to occur (see also paragraph I.17).
- I.20** A violence reduction policy document had been published in 2013 and was mostly based on an analysis of the identified patterns of reported violence in the prison. It was supported by other prison policies and procedures, such as use of segregation and the incentives and earned privileges (IEP) scheme. Information from a prisoner survey in July 2013 had been used to inform the strategy. However, many of the procedures to reduce violence and support victims outlined in the policy had not been implemented. A system to identify, monitor and change antisocial behaviour had not been implemented, and residential officers did not understand the described use of the IEP scheme, supported by identified interventions and regular reviews, to monitor behavioural change.
- I.21** The provision of planned support for victims, as set out in the policy, was also not delivered. In practice, prisoners on formal support plans had isolated themselves in residential wings, too frightened to leave their cells when other prisoners were unlocked (see main recommendation S45).
- I.22** The quality of investigations into alleged violence was often poor. In many cases, the scrutiny of allegations was cursory and investigation did not fully address the important issues. Many allegations or suspicions of bullying, particularly those reported directly to staff by prisoners, were not investigated at all if the prisoner was unable to name an alleged perpetrator (see main recommendation S45).
- I.23** A system for officers to report suspected incidents to the safer custody team was seldom used. As at the last inspection, many prisoners suspected of bullying were not reported to the safer custody team and not fully investigated. Despite this, in our survey, only 8% of respondents said that they felt unsafe in the prison, which was significantly better than the comparator of 13% (see main recommendation S45).

## Self-harm and suicide prevention

### Expected outcomes:

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

- I.24** *There was good analysis of data to provide information about patterns and trends of self-harming behaviour. Entries in case management documents showed a dynamic response to meeting prisoner needs, but care mapping was sometimes weak and attendance at reviews occasionally poor. Although seldom used, conditions in the constant watch cell on A wing were poor, and there was evidence that strip clothing was used and not recorded. The Listener scheme was well supported but prisoners did not have access to the Samaritans during the night.*
- I.25** The prevention of self-harm and suicide and violence reduction were managed by a full-time coordinating manager supported by a nominated safer custody officer. The safer custody committee monitored the overall implementation of the safer custody policy at well-attended monthly meetings. It used a wide range of information from the team to identify trends and patterns of behaviour by location, type, timing and peripheral circumstances of individual incidents. This analysis was used to develop the strategy and update the continuous improvement action plans.
- I.26** There had been 62 assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm opened in the six months to January 2014, which was similar to findings at the previous inspection. There had been no self-inflicted deaths since the previous inspection.
- I.27** There were six open ACCTs at the time of inspection. Staff entries in ACCT documents were very good and indicated dynamic responses to meeting prisoner needs. Although care mapping (a care support plan that is monitored) was sometimes weak and attendance at reviews occasionally poor, we were assured that prisoners in crisis were cared for appropriately and their immediate needs were met.
- I.28** We observed that staff usually knew and cared about the personal circumstances of individual prisoners in crisis and actively helped them to deal with their issues. All of the prisoners on ACCTs told us that officers treated them well and were responsive to their needs.
- I.29** There had been 34 separate incidents of self-harm in the in the six months to January 2014, but a small number of prisoners accounted for a disproportionate number – one prisoner was responsible for about 33% of the total and another for 15%.
- I.30** The Listener scheme was well established and publicised, and prisoners had 24-hour access to them, although the Listener suite was dirty when we visited. There were 14 Listeners at the time of our inspection. They were well supported and all those we spoke to said that they felt valued. However, a dedicated Samaritans telephone had been withdrawn, which meant that prisoners could not call this service while they were locked in their cells.

- I.31** A gated cell on A wing was used for constant observations of prisoners thought to be at immediate risk of self-harm. We were told that it had been used about seven times in the previous six months, for less than two days in each case. The cell was poorly located in the middle of the ground floor of the busy residential unit, and completely lacked privacy from passing staff and prisoners. The safer custody manager told us that strip clothing had, on rare occasions, been used for prisoners in crisis located there; these occasion had not been recorded.

## Recommendations

- I.32** Staff should be trained in the development of effective care mapping for prisoners on assessment, care in custody and teamwork (ACCT) case management documents, and the quality of such mapping should be monitored.
- I.33** Prisoners should have 24-hour access to the Samaritans.
- I.34** A more appropriate location should be found for the gated cell in A wing which affords greater privacy from other prisoners and the condition of the cell should be improved.
- I.35** Strip clothing should be used only in the most extreme cases and occasions of use should be properly authorised by senior managers and recorded centrally.

## Housekeeping point

- I.36** Attendance at ACCT reviews should be improved.

## Safeguarding (protection of adults at risk)

### Expected outcomes:

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

- I.37** *The prison was beginning to develop a policy to deal with prisoners at risk because of mental or other disability, age or illness.*

- I.38** The prison was beginning to develop a structure to deal with prisoners at risk because of their mental or other disability, age or illness, and had begun to make links with the local community safeguarding board through attendance at two meetings. However, it had not yet published protocols setting out action for staff to take if they became aware that such a prisoner might have been abused or injured while in custody. The prison had not yet made arrangements with the community safeguarding board to review current practices at the prison and to identify formally the threshold at which formal adult protection protocols would be brought in. The prison had not published up-to-date advice about safeguarding adults, and staff were not aware about how to make referrals.

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

- I.39** Staff said they were not aware of formal protocols, but were focused on relevant issues and generally aware of their personal responsibility to protect prisoners at risk. Awareness training for staff had not been planned. However, the prison screened new arrivals and assessed their risk, including through cell sharing risk assessments and health interviews.

## Recommendation

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

## Security

### Expected outcomes:

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

- I.41** *Security arrangements were broadly proportionate and not unnecessarily restrictive. High levels of security information were received but were not always processed or reacted to promptly. Despite this, the prison successfully found a high number of mobile telephones, drugs and alcohol. Appropriate security objectives were set and monitored. The prison tackled its large drug problem actively, but drug testing procedures were sometimes inadequate. There was good information sharing with relevant departments.*

- I.42** Security arrangements were broadly proportionate, apart from the strip searching of prisoners on reception, after visits and on entry to the segregation unit (see paragraphs 1.8 and 1.70). Security was given a high priority and the prison was properly focused on trying to maintain a safe environment, and managed this without unnecessarily restricting prisoner access to the regime. The security meeting was well attended and informed by an intelligence assessment report that allowed it to set and monitor appropriate objectives, although these were not always communicated effectively to staff.

- I.43** In the previous six months, 2,125 security information reports (SIRs) were submitted but were not always processed efficiently, and required actions, including target searching and suspicion drug testing, which were not always completed within an acceptable time. Despite this, there had been good finds, including 'hooch' (illicitly brewed alcohol), drugs, drug paraphernalia and mobile telephones. The main challenge facing the security department was preventing the inward trafficking of unauthorised items, including mobile telephones, illegal drugs and new psychoactive substances (see below). Security worked well with other departments and was focused on gang, drug and debt-related issues, which it addressed actively and in a measured and proportionate way. The remoteness of the prison and lengthy perimeter meant it was particularly vulnerable to things being thrown over the fence. However the prison was sighted on this and had taken proactive steps to reduce such activity including: a new fence at the most vulnerable point, increased perimeter checks including with drug dogs, joint operations with the police intelligence officer, use of mobile telephone blockers, engagement with the local community to report any untoward activity in the proximity of the fence, and disruption of groups or individuals who were believed to coordinate such activity within the prison, all of which seemed to be having a positive impact within the prison.

- I.44** Drug availability continued to be a problem. Although the random MDT rate only averaged 3.75% in the previous 6 months against a target of 12%, this did not match prisoners' perception. In our survey, 44% of prisoners said it was easy to get illegal drugs in the prison and 31% said it was easy to get alcohol compared with 31% and 19% respectively in other category C prisons, and 10% of prisoners told us they had developed a drug problem in the prison. Tests results and finds were for Subutex (buprenorphine,) cannabis and diverted medication, but there was increasing evidence that 'spice' (a synthetic cannabinoid) was available in the prison. Spice could not be tested for under MDT, which might account for the discrepancy between MDT figures and survey results. However, the prison was actively trying to ascertain the scale of the problem in order to tackle it.
- I.45** The new drug testing suite was satisfactory but there were not enough staff to meet all requests for suspicion testing, positive MDT results were not always processed in time for charges to be brought (see paragraph I.60), and the required number of random tests had not been met in one month. There was evidence of good information sharing between security and health care departments, and there had been appropriate steps to address the diversion of prescribed medication. Supply reduction was well integrated into the drug strategy.
- I.46** At the time of the inspection, 12 prisoners were subject to closed visits and a further 20 had had these restrictions in the previous six months. Closed visits were generally used for reasons relating directly to the trafficking of unauthorised items through visits and usually applied for a minimum of three months, even when there was no further intelligence to support this at the monthly reviews.

## Recommendations

- I.47** Prisoners should only be strip searched on the basis of intelligence or specific suspicion, and this should always be conducted by two officers.
- I.48** The mandatory drug test (MDT) programme should be sufficiently resourced to undertake the required level of random and target testing and to process positive tests on time.

## Housekeeping points

- I.49** Security objectives should be better communicated to all staff.
- I.50** Closed visits reviews should only recommend ongoing application when there is further intelligence to support their use.

## Incentives and earned privileges<sup>4</sup>

### Expected outcomes:

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

**I.51** *There was some evidence that the incentives and earned privileges (IEP) scheme was used strategically to encourage responsible behaviour, but the regime for the small number of prisoners on basic was too austere and meant that those who were unemployed were only unlocked for up to an hour a day. Prisoners could be demoted to basic following an alleged single incident of poor behaviour without a thorough enough investigation of the facts, and reviews of prisoners on basic level were often cursory.*

**I.52** At the time of inspection, most prisoners (64%) were on the enhanced level of the IEP scheme and comparatively few (about 1.5%) were on basic. The scheme offered the standard differentials in access to private cash, computer games, visits and time out of cell, which were reasonable. There was also specific accommodation for enhanced prisoners on residential units three and four, but enhanced level prisoners could remain on the other residential units if they wished. We were told that the scheme was used strategically to support a 'zero tolerance' approach to violence (that all antisocial behaviour should be addressed), but we were not convinced that staff were always clear about its operation (see also paragraph I.20).

**I.53** Prisoners were considered for immediate demotion to the basic level due to single acts of violence or alleged bullying following an investigation. However, some prisoners had been demoted to basic following an alleged single incident of poor behaviour without a thorough enough investigation of the facts.

**I.54** The regime for prisoners on basic level was too austere. Although they did not usually stay on basic for longer than two weeks, prisoners who did not work were locked in their cells nearly all day, apart from half an hour domestic period, usually in the morning, when they were expected to shower, clean their cells and use the telephone. At the time of inspection, all prisoners on basic were unemployed.

**I.55** Reviews of prisoners on basic were usually on time but often cursory, and there was little information to assure us that progress in changes to behaviour or circumstances were monitored or acted on. Individual behaviour targets were not set, and officers who knew the prisoner were not engaged in formal planning for them.

### Recommendations

**I.56** **The regime for prisoners on the basic level should be improved, and the incentives and earned privileges (IEP) policy should clarify progression through this level.** (Repeated recommendation 7.50)

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

- I.57 Decisions to demote prisoners to basic should be fully justified and always followed by a thorough investigation.**
- I.58 Individual targets for prisoners on basic level to improve their behaviour should be set, monitored and reviewed, and officers who know the prisoner should be fully engaged in the planning process.**

## Discipline

### Expected outcomes:

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

**I.59** *The use of all disciplinary measures was too high, and the analysis of data across all areas of discipline was poor. Many adjudication records showed insufficient investigation before a finding of guilt, and quality assurance was underdeveloped. There was inadequate oversight and accountability for all aspects of use of force. Too many records were incomplete and force was not always de-escalated quickly enough. We saw some unprofessional behaviour and excessive force in a film of a planned intervention. The environment and regime in the segregation unit were poor. Unit staff were knowledgeable about those in their care and engaged well.*

### Disciplinary procedures

- I.60** There had been 970 adjudications between July and December 2013, which was higher than at the previous inspection. We also found evidence where further charges were not processed due to staff shortages in MDT (see paragraph I.45) and the segregation unit. Some charges could have been better dealt with less formally. Prisoners were given sufficient time to prepare their case and could seek legal advice on request. The records of hearings that we reviewed varied in quality and many showed insufficient exploration of the charge before a finding of guilt. Punishments were generally in line with published tariffs. Quality assurance was underdeveloped and did not highlight the quality of the exploration of charges. The collation of data on adjudications was inadequate, and data were not properly analysed or acted on at the adjudication standardisation meeting.

### Recommendations

- I.61 All disciplinary charges should be fully investigated, with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved.**
- I.62 The adjudication standardisation meeting should improve its analysis of data on disciplinary procedures and use the information more effectively.**

### The use of force

- I.63** Force had been used on 58 occasions between July and December 2013, which was higher than at the last inspection. In our survey, more respondents with disabilities than without said that control and restraint had been used against them. This was unusual but had not been monitored by the prison and therefore was difficult to explain. In the records that we

sampled, control and restraint had been applied in around 60% of incidents, with full and sustained use in about 15% of cases. Many records were incomplete, lacked detail and, even when there was opportunity, did not show de-escalation quickly enough.

- I.64** Planned interventions were not routinely filmed or reviewed. Those we were able to watch highlighted some major concerns about unprofessional staff behaviour and excessive use of force. We referred one particular incident to the governor.
- I.65** We were not assured that the four incidents between July and December 2013 where staff had drawn, but not used, batons were proportionate responses to the risk posed. The prison was not focused on all these incidents and there was no additional scrutiny to ensure proportionality.
- I.66** There had been no special accommodation since the designated cell in the segregation unit had been decommissioned following our last inspection. Despite this, we found considerable evidence from staff and in use of force records that unfurnished accommodation was used to hold prisoners who had been restrained. This involved the removal of furniture and personal possessions from cells, and was not subject to the appropriate accountability and governance required for unfurnished accommodation.
- I.67** The use of force committee met monthly but did not analyse data for trends and patterns and was not focused on the issues of incomplete records, the quality of planned interventions, proportionality of baton use or ungoverned use of unfurnished accommodation (see main recommendation S46).

## Segregation

- I.68** In the six months to the end of December 2013, there had been 94 periods of segregation, which was higher than at the last inspection. As a response to prisoners seeking segregation as a means of bypassing transfer procedures, the prison had adopted a strategy of not routinely transferring prisoners directly from the unit. However, records of the frequency of this were incomplete, and the prison had no sense of how successful this strategy was. Figures suggested that more prisoners were segregated for reasons of good order than for their own protection, but staff and prisoners told us that many prisoners who engaged in disruptive activities, such as climbing on to roofs, did so because they felt unsafe. The average length of stay in the segregation unit was 28 days, which was unusually high, and many prisoners spent far longer there (see main recommendation S47).
- I.69** Communal areas in the segregation unit were clean but some parts were old and worn. Some cells were damp, contained graffiti and inappropriate displays, had insufficient furniture and dirty, unscreened toilets with no toilet seat. The shower area was clean but insufficiently private. The bare exercise yards were austere cages with no seating.
- I.70** New arrivals on the unit were generally strip searched, often without a robust risk assessment (see recommendation I.47). However, protocols for unlocking individual prisoners were proportionate to their risk. Between July and December 2013, nine ACCTs were opened on prisoners held in the segregation unit, and we were confident that there was proper oversight to justify this.
- I.71** All segregated prisoners had access to a basic daily regime, including showers and telephone calls, but the exercise period was an insufficient 30 minutes. Other than some structured activity for a prisoner on ACCT held in the gated cell, the regime for most was limited. Education staff did not visit the unit (see paragraph 3.21 and recommendation 3.24), and there were insufficient opportunities for off-unit activities. Segregated prisoners were not

permitted to have a television in their cell, and many complained of a lack of constructive activity to occupy them.

- I.72** Multidisciplinary reviews of prisoners in segregation were timely but authorising documentation was often completed poorly and many targets were perfunctory. Reintegration planning for longer term residents was undeveloped. Although segregation was monitored, the data were not used meaningfully to identify and address trends.
- I.73** Prisoners were complimentary about their treatment by unit staff. Staff we spoke to were knowledgeable about prisoners in their care, and we observed some relaxed and friendly engagement.

## Recommendation

- I.74 Segregation review documentation should be completed thoroughly and include meaningful targets.**

## Substance misuse

### Expected outcomes:

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

**I.75** *Substance misuse nurses were now in post and prisoners received better care, but prescribing options were still limited and prisoners queuing for methadone continued to lack shelter. Psychosocial interventions were developing, but there was no alcohol-related offending behaviour programme despite evident need.*

- I.76** Clinical and psychosocial support for prisoners with substance misuse problems was now delivered by one provider, which led to a fully integrated service. All prisoners receiving opiate substitute treatment had a key worker and individual care plan, which was reviewed regularly. At the time of the inspection 64 prisoners received methadone (56% on a reducing basis), and one was prescribed lofexidine for detoxification. There was better joint working with the specialist GP, and reduction regimes were flexible, but treatment options still excluded buprenorphine (Subutex). Liaison between substance misuse and mental health teams to coordinate the care of dual diagnosis patients was still ad hoc. Methadone was administered from two main sites, but on unit two, prisoners had to queue outside in all weathers without shelter.
- I.77** The establishment had recently updated the annual needs analysis, the substance misuse strategy document was up to date and contained detailed action plans, and drug strategy meetings took place regularly with relevant departments represented.
- I.78** In our survey, 53% of respondents, against the comparator of 65%, said they received support with their drug problem, and only 39%, against 64%, with their alcohol problem. The substance misuse service was not yet fully staffed and although the team had an open door policy, there had been a waiting list for allocation to a worker until recently. The active caseload was 130 (including 64 in clinical treatment), which was low for the size of the population. Interventions included one-to-one work and an eight-session 'My Recovery' course (providing motivational support to prisoners with drug and alcohol problems), which had been developed by the service. Self-management and recovery training (SMART) and

alcohol awareness groups had been introduced in January 2014, but had no service user involvement or peer support. Prisoners on methadone who were unemployed could access designated education and gym sessions, and a 12-step self-help group was available through the chaplaincy. The prison had not yet introduced an alcohol-related offending behaviour programme, although the needs analysis stated that: 'Alcohol abuse and its link with violent offending is becoming increasingly a feature in the prisoner profile' (*The Criminogenic Needs Analysis 2013 for HMP Haverigg*, p 9).

## Recommendations

- I.79 Prescribing options for opiate dependent prisoners should include buprenorphine treatment.**
- I.80 Substance misuse and mental health services should formalise joint working to ensure effective care coordination for dual diagnosis clients.**
- I.81 The establishment should improve the environment for prisoners waiting to receive methadone.**
- I.82 The prison should introduce a structured alcohol programme that addresses alcohol related offending.** (Repeated recommendation 9.43)

## Housekeeping point

- I.83** The substance misuse service should develop regular service user feedback to inform future developments, including peer support.



## Section 2. Respect

### Residential units

#### Expected outcomes:

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

**2.1** *The standard of accommodation varied across the prison, and the billets on units two and three remained poor. Communal areas and cells on residential unit one were dirty and furniture was broken. The offensive display policy was not enforced across the prison and graffiti was widespread. Prisoners could wear their own clothes but, apart from unit five, there were no laundry arrangements.*

**2.2** Accommodation for 644 prisoners was provided in six residential units, of which two were modern units separated by secure fences. Cells in the billets on unit two (previously known as Fairfield) were secure and prisoners were locked in during the night. Prisoners on units three and four (previously Blencathra and Great Gable) had keys to their cells and were not locked in them, although the doors to each billet were locked at night. Units one and five (formerly Skiddaw and Langdale) were modern purpose-built units with traditional cells. Unit five held about 64 prisoners in single cells who were taking part in the Kainos course (see paragraph 4.56). Unit six (formerly Helvellyn) was an older wood-clad building that housed up to 80 long-term, predominantly indeterminate-sentenced prisoners.

**2.3** There was wide variation in the quality of residential accommodation. Some living conditions had improved since the last inspection but in other areas remained poor. Although communal areas in the billeted units were generally clean, showers leaked and furniture was worn and broken. Some cells were dirty, floors were worn in many places, and there was offensive graffiti on many walls, particularly on units two and three. There was no evidence that the offensive displays policy was applied, and posters that were prohibited were clearly displayed in many cells and on a few cell doors. Many prisoner notice boards were broken and had no up-to-date information.

**2.4** Cells on unit two had integral sanitation, but some toilets were not adequately screened and were stained and dirty. Cells on units three and four did not have sanitation facilities, but prisoners were not locked in their cells and had good access to the communal toilets.

**2.5** Units two and three had separate association billets with poorly maintained recreation equipment, such as a single pool and table tennis table. The unit two association billet was reasonably clean but poorly supervised by staff, and graffiti scratched into furniture was widespread. The fitness room that prisoners could use during association was well equipped but dirty.

**2.6** There was no in-cell call bell system on unit three. There was a general prison alarm bell at the entrance to the billeted units, but prisoners said that they would press these only when there was an emergency such as a serious violent incident or fire. Staff supervision of the billeted units was poor. Lighting and CCTV coverage was poor (see paragraph 1.17).

- 2.7** Although unit one was well designed with wide galleried landings that provided good sightlines, many areas were grubby and floors were encrusted with dirt, particularly on the upper landing. Many cells were dirty and cell furniture was broken. Graffiti was widespread and we found some pornographic material displayed in a few cells. Some information notices were out of date, and there was no provision for prisoners with reading difficulties.
- 2.8** The living environments in units four, five and six were generally good. Communal areas and cells were clean, well furnished and reasonably well maintained.
- 2.9** All prisoners could wear their own clothes but only unit five had its own laundry rooms. Prisoners could have their clothes washed in the prison laundry, but many said that their clothes were not properly cleaned and that items were often not returned. There were good supplies of clean prison clothing for those who wanted it, and weekly prison clothing exchanges.
- 2.10** Management of the prisoner applications system was generally consistent and most prisoners said that it was fairly administered. However, we found that many were not responded to within three working days, and the date of response was not routinely recorded.
- 2.11** There were no restrictions on the number of letters prisoners could send or receive, but there were not enough telephones on most units.

## Recommendations

- 2.12 Association rooms should be better equipped and kept clean and well maintained.**
- 2.13 All cells should have call bells, and these should be answered within five minutes.** (Repeated recommendation 2.7)
- 2.14 There should be a clear policy prohibiting offensive displays that should be applied consistently.** (Repeated recommendation 2.9)
- 2.15 All toilets in cells should be clean and adequately screened.**
- 2.16 There should be facilities to allow prisoners to wash their own clothes.** (Repeated recommendation 2.17)
- 2.17 There should be arrangements to enable wing staff to chase up applications not responded to within three working days, and the date of response should be routinely recorded.** (Repeated recommendation 3.38)
- 2.18 There should be sufficient telephones for prisoners on all residential units.**

## Housekeeping points

- 2.19** All residential areas should be clean and well maintained. (Repeated recommendation 2.3)
- 2.20** Up-to-date notices should be displayed and in formats suitable for the prison's population. (Repeated recommendation 2.8)

## Staff-prisoner relationships

### Expected outcomes:

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

**2.21** *Relationships between staff and prisoners were generally very good. We saw many examples of positive staff engagement with prisoners on residential units and some officers who dealt with difficult prisoners patiently. We were not assured that the personal officer scheme was properly connected to sentence management.*

**2.22** In our survey, 84% of respondents said that staff treated them with respect, against the comparator of 77%. Our own observations confirmed this perception, and the quality of relationships between staff and prisoners that we saw were generally very good. We observed many officers, on all units, who engaged positively with prisoners, and some that were particularly good on units one, four, five and six. Many staff, particularly residential officers, had a good awareness of the needs of their prisoners and had a high level of interest in them. However, a few officers had low expectations of prisoners and spoke of them dismissively.

**2.23** Staff responses to difficult behaviour were not overly reactive, and in specific cases residential officers dealt with angry prisoners in a calm, caring and effective way. Officers on unit one dealt with the complex needs of vulnerable prisoners patiently and had developed positive caring relationships, which helped offset the gaps in formal violence reduction protocols and support for the more vulnerable (see also section on violence reduction).

**2.24** However, we also observed a lack of supervision on the billeted wings, where officers did not patrol landings or other communal areas often enough. Although the physical layout and number of separate huts and buildings spread over a wide area made supervision difficult, the lack of officer presence was a concern. In the billets on unit two, for example, only 52% of respondents to our survey said that they had an officer that they could turn to if they had a problem, only 9% said that staff checked on them regularly and none said that staff spoke to them during association. All these responses were significantly worse than those on all the other residential units.

**2.25** The personal officer scheme was better developed than at the previous inspection. Entries in prisoner records showed good and regular engagement with prisoners, but there little to show any involvement with sentence management.

**2.26** Prisoners were consulted about general routines and facilities on each residential unit through monthly prisoner consultation meetings. Meetings were usually well attended. The minutes we saw indicated that the issues and views prisoners raised were taken seriously.

### Recommendations

**2.27** **Staff supervision of the billeted residential units, particularly unit two, should be improved.**

**2.28** **Personal officers should engage in sentence planning.**

## 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 characteristic<sup>5</sup> are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.**

**2.29** *The management of equality and diversity was inadequate, and there had been no analysis of the needs of the population. Identification of prisoners from minority groups was poor and there were no consultation arrangements. Data collected were restricted to race. Complaints about discrimination required improvement. Black and minority ethnic prisoners had worse perceptions about their treatment than white prisoners. Services for foreign national and older prisoners were adequate, but identification of and support for prisoners with disabilities were not. There was no positive support for gay or bisexual prisoners.*

### Strategic management

- 2.30** The prison's equality and diversity policy was out of date, not based on a needs analysis of the population to identify the support needed and did not cover all the protected characteristics. A recent action plan did not adequately address the underdevelopment of diversity work. The bimonthly equality meeting, chaired by the head of safety, was poorly attended and had limited discussion of statistical analysis or protected characteristics. There were poor systems to identify new arrivals from minority groups, which led to their under-identification, and neither we nor the prison could be assured that prisoners from minority groups received equitable treatment (see main recommendation S48). The full-time equality and diversity officer was regularly deployed to other duties, and many prisoners told us they did not know who the officer was.
- 2.31** SMART (systematic monitoring and analysis of race equality treatment) monitoring data were collected but there was no similar monitoring of other protected characteristics. The SMART data were also not routinely scrutinised by the equality committee, although the data did not indicate that black and minority ethnic prisoners were treated disproportionately in key aspects of the regime.
- 2.32** Four prisoner equality representatives had been appointed the week before the inspection but had received no training or role brief. Equality work was not included in the induction for new arrivals. There were no consultation arrangements for prisoners from minority groups.
- 2.33** The promotion of diversity was underdeveloped, except for religious festivals. There were few displays in the prison promoting equality and diversity.

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

- 2.34** Twelve discrimination incident reporting forms (DIRFs) had been submitted in the previous six months, which was low for the type of prison. Forms were freely available, except on unit two where they were held in the wing office. Many prisoners told us that they lacked confidence in the reporting processes and investigations. Incidents were not always investigated thoroughly, and quality assurance was not regular or effective in addressing issues. We found examples of incidents in SIRs that had not been reported on a DIRF.
- 2.35** Some prisoners from minority groups said staff lacked cultural awareness. Although we saw no evidence of this, some staff we spoke to were unaware of protected characteristics or their duty to promote equality and diversity. Around 80% of staff had been trained in diversity awareness training.

## Recommendations

- 2.36** **There should be adequately resourced arrangements to cover and support the role of the equality and diversity officer.** (Repeated recommendation 4.8)
- 2.37** **Discrimination incident reporting forms should be freely available in all areas, all incidents should be investigated thoroughly and quality assurance should be robust.**
- 2.38** **All staff should be regularly made aware of their duty to promote equality and diversity.**

## Housekeeping points

- 2.39** Attendance at the equality meeting should be improved.
- 2.40** Information on equality and diversity should be provided to all new arrivals.

## Protected characteristics

- 2.41** Support for prisoners covered by protected characteristic was underdeveloped and the lack of a needs analysis meant that neither the equality and diversity officer nor managers were clear about the needs of minority groups. In our survey, black and minority ethnic respondents were less positive than white respondents across a range of indicators of safety and respect. There had been no black and minority ethnic prisoner consultation meetings to consider these perceptions.
- 2.42** Our survey indicated that approximately 5% of the population were from a Gypsy, Romany or Traveller background, although the prison had identified just one. There was no support group in place.
- 2.43** There were 17 foreign national prisoners at the time of the inspection, which included 10 Irish nationals and two detainees. One detainee had been held 18 months beyond the end of his sentence. Detainees did not have access to the facilities available at an immigration removal centre, such as the internet, fax machines and a less restrictive regime. There were no consultation arrangements for foreign national prisoners and most did not know who the equality and diversity officer was. Limited information was translated into foreign languages, although the foreign national prisoners we spoke to had a good understanding of English. The library contained a selection of foreign language books. Foreign nationals who did not receive visits could apply for a free five-minute telephone call to their country of origin.

- 2.44** In our survey, around 15% of respondents identified themselves as having a disability, equating to approximately 90 prisoners across the establishment. The prison had no record of new arrivals who had declared themselves to have a disability, except the small number with a physical disability. Not all prisoners with a physical disability had a personal emergency evacuation plan (PEEP), and those we examined were perfunctory. There were no multidisciplinary care plans for prisoners requiring one, no paid carer or buddy scheme, and no consultation arrangements for prisoners with disabilities. However, in our survey prisoners with disabilities were more positive than those without across a range of respect indicators.
- 2.45** There were seven prisoners over the age of 60 at the time of the inspection. Retirement pay was comparable with other pay rates, and retired prisoners were not charged for in-cell television. The PE department provided regular activities for those over 50.
- 2.46** One prisoner had identified himself as gay or bisexual to the equality and diversity officer. The provision for gay and bisexual prisoners was poor, and there were no displays promoting positive imagery of gay people.

## Recommendations

- 2.47** **Immigration detainees should not be held in prison unless there are exceptional reasons to do so following risk assessment.**
- 2.48** **Prisoners with a disability who have additional needs should have a care plan and, if appropriate, a personal emergency evacuation plan. Those who require day-to-day support should be offered a paid carer or buddy.**

## Housekeeping point

- 2.49** The prison should display positive gay and bisexual images across the establishment, as well as information about sources of support and help.

## Faith and religious activity

### Expected outcomes:

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

- 2.50** *The chaplaincy was well integrated into the prison. Prisoners were negative about faith provision but most was good.*

- 2.51** The chaplaincy was well integrated into prison life. Despite this, in our survey, only 45% of respondents, against the comparator of 53%, said their religious beliefs were respected and only 47%, against 59%, said they could speak to a religious leader in private. With the exception of Islamic services, the provision for major faiths was adequately covered. The Muslim chaplain only attended for Friday prayers. Faith facilities were adequate for the number of prisoners attending corporate worship, and access was unrestricted. There was good promotion of religious festivals. The chaplaincy provided and facilitated a wide range classes, groups and pastoral care.

## Recommendation

**2.52** There should be an increase in faith provision for Muslim prisoners.

## Complaints

### Expected outcomes:

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

**2.53** *Prisoners were negative about the formal complaints system. Responses to complaints required improvement and quality assurance was ineffective.*

**2.54** In our survey, 55% of respondents said it was easy to make a formal complaint, against the comparator of 61%. Only 28%, against 34%, said complaints had been dealt with fairly, and only 30%, against 36%, that they had been handled promptly. The most common subjects for complaint were property and transfer/allocation. In the previous six months, there had been 1,026 complaints, which was comparable to similar prisons.

**2.55** Some responses to formal complaints that we examined could have been dealt with through the applications process. Some responses did not address the prisoner by their preferred name, were curt, indicated insufficient investigation into the complaint and did not answer the issue raised. However, most complaints were answered on time. Complaint forms were not readily accessible in some units.

**2.56** The deputy governor aimed to quality assure 5% of responses to complaints, but this was irregular and had not led to an improvement in the quality of replies. The senior management team did not analyse trend data regularly.

## Recommendations

**2.57** **All replies to complaints should adequately address the issues raised by prisoners and use the prisoner's preferred name.** (Repeated recommendation 3.43)

**2.58** **There should be a robust quality assurance scheme for complaints and regular analysis of trends.**

## Legal rights

### Expected outcomes:

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

**2.59** *Legal services provision was adequate but new arrivals were not informed of how to access advice. Contact with a legal adviser by telephone was restricted but legal visits were adequate.*

- 2.60** There was no trained legal services officer, although offender supervisors and wing staff directed prisoners to legal representation when requested. Legal service provision was not covered in the induction process.
- 2.61** There was a suitable range of legal texts in the library and access was adequate. In our survey, only 33% of respondents said it was easy to communicate with a legal representative, against the comparator of 49%. Prisoners on some units had restricted access to telephones to contact legal advisers. In our survey, fewer respondents than the comparator said it was easy to attend legal visits. We found that legal visits provision was adequate, although the location of the prison sometimes made visiting difficult.

## Housekeeping point

- 2.62** New arrivals should be informed during induction of how to obtain legal services, and access to legal telephone calls should be unrestricted.

## Health services

### Expected outcomes:

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

- 2.63** *The relocated health centre was an improvement on the previous environment, although the dental facilities were unsuitable for some patients with disabilities and the small waiting area meant that patients had to wait outside for long periods, which was unacceptable. The development of primary care had been impeded by staffing capacity and a chronic inability to fill vacancies. Dental waiting lists and waiting times were the longest we have seen and were totally unacceptable. Mental health services were good although capacity was insufficient to meet demand.*

## Governance arrangements

- 2.64** The health service was commissioned by Health and Justice (North East and Cumbria), NHS England, Durham, Darlington and Tees area team, and the primary care provider was Cumbria Partnership NHS Trust (the partnership trust). There was a partnership board with a rolling cumulative table of actions. Contracting arrangements had become very complex with several commissioning agencies and half-a-dozen contractors. The health needs assessment required updating.
- 2.65** There were conventional approaches to clinical governance. The partnership trust received a good spread of clinical information on primary care services. Serious incidents were rare. Arrangements for clinical governance of the dental service were unclear.
- 2.66** In our survey, respondents were very dissatisfied with the quality of health care compared with the comparator and the previous inspection. Health was a standing agenda item at the prisoner consultation group, and there was evidence of responsiveness to suggestions about health care, but messages did not reach most prisoners.

- 2.67** There was a partnership trust locality manager, who did not work full time in the prison. A senior clinical nurse, registered nurses and other clinicians providing care from 7.30am to 7.30pm. Funding for a senior nurse manager position had been secured and was being advertised. A chronic problem in recruiting staff to vacant posts had contributed to a lack of progress in developing health services. Health staff had access to training as required and were up to date with mandatory requirements. Clinical supervision was available through peer group or one-to-one meetings. The senior clinical nurse led on the care of older prisoners.
- 2.68** SystemOne (electronic patient record) was in use. Some care plans for patients with long-term conditions were available on SystemOne. Clinical approaches were evidence based. The clinical audit of medical records was infrequent. There was good surveillance of the prescribing of divertible medications, which were regularly audited.
- 2.69** There was a policy on the management of communicable diseases and guidance on the expected approach to tuberculosis. The information sharing protocol was within the safeguarding policy; patients were asked to consent to the acquisition and sharing of confidential information as necessary. Barrier protection was available, but poorly advertised.
- 2.70** The health care centre had been relocated into a prefabricated building that was previously in another prison. It offered superior clinical standards to the previous building, although the dental suite was on the first floor, and not accessible for prisoners with mobility problems, and the waiting area was too small and restricted to 10 patients at a time. We observed patients waiting for excessive times in the waiting room, commonly up to an hour before and after their appointments. Patients also waited outside the building, exposed to the elements, for long periods, which was unacceptable. Patients said they often gave up and went away. A bid had been submitted for a new health care facility.
- 2.71** There were two health care rooms on the wings, which were of good quality. All facilities were subject to annual infection control audit, which showed a good 85% compliance. Cleaning was not as frequent or deep as staff expected. A cleanliness audit in June 2013 resulted in a 59% compliance result, which was just adequate, and a repeat audit was due.
- 2.72** Automated external defibrillators (AEDs), resuscitation equipment and oxygen were available at strategic locations and regularly checked. Twenty-two per cent of uniformed officers had been trained in the use of AEDs and could access them.
- 2.73** There had been about five health complaints a month in 2013/14 to date – 95% concerned prescribing and medicine supply. Patients had access to the partnership trust patient advice and liaison service. The responses to complaints we sampled were prompt and focused on the issues raised, with apologies and explanations as appropriate. Health services had received some compliments in 2013.
- 2.74** There was a multi-departmental prison health promotion action plan with active campaigning – although it could have been more systematic on the wings. We did not see a strategy that underpinned the action plan.

## Recommendations

- 2.75** **There should be an up-to-date health assessment that includes the dental needs of the population.**
- 2.76** **The partnership board should ensure that reporting mechanisms for the clinical governance of the dental services are sufficiently robust.**

- 2.77** Cumbria Partnership NHS Trust should support its prison health service in finding solutions to the chronic inability to recruit staff to vacancies.
- 2.78** The dental suite should be accessible to prisoners with serious mobility issues.
- 2.79** The Partnership Board should ensure that the waiting capacity of the health centre is sufficient for efficient throughput of clinics, that patients should not have to wait there for excessive periods before and following their appointments, and that waiting patients are not exposed to the elements.

### Housekeeping point

- 2.80** There should be frequent and regular clinical audit of medical records.

### Delivery of care (physical health)

- 2.81** Health care staff saw new arrivals in reception and provided information about health services. The information was a photocopy of a photocopy and of poor quality, but was to be improved. New arrivals received a prompt health screen and a full health assessment within two days, including an assessment for learning disability.
- 2.82** Prisoners could access health care through completion of a pictorial health application that they posted in dedicated boxes on the wings. The health application box on one wing did not preserve confidentiality as it lacked a lid. Too many prisoners we spoke with lacked confidence in the health application system. Information on how to access health care was not displayed on every wing.
- 2.83** Patients could access a GP within 48 hours in an emergency, although prisoners believed this to be two weeks; the did-not-attend rate for the GP was commendably low at around 1% to 2.5%, although it was higher for other clinics. At the time of our visit, the Gables Medical Practice from the North East had commenced providing GP services. The GP out-of-hours cover was provided by the local Cumbria on-call medical service.
- 2.84** There was a good range of daily primary care clinics for triage, treatments, physiotherapy, optometry, sexual health and others, and there were well man checks for older patients. There was an active programme of immunisation for hepatitis, although nurses were frustrated that services for patients with hepatitis C were not more developed. Care of patients with lifelong conditions, such as asthma, diabetes and heart disease, was good, through nurse-led clinics. Minor ailment protocols were available to assist with triage. Smoking cessation was run by the gymnasium. There were 59 prisoners on the waiting list and the average waiting time was 12 weeks, although some prisoners had waited much longer, which was not acceptable. Action was in hand to rectify this.
- 2.85** The external appointments system was well managed, although administrative staff felt that the number of daily escort slots was inadequate at times. Few were cancelled for security reasons.

### Housekeeping point

- 2.86** Information on how to access health care should always be displayed on the wings.

## Pharmacy

- 2.87** The pharmacy services were limited to the supply of medicines and weekly visits to check stock levels and expiry dates. There was no report of the visits, although the service level agreement made reference to one. The standard operating procedures (SOPs) had been reviewed and emailed to the team to read and sign off. We found evidence that the previous SOPs had been signed.
- 2.88** Most medicines were supplied as named patient and appropriately labelled. Dispensed by/checked boxes were used on the labels to identify who was involved in the dispensing. Most medicines dispensed at the prison were supervised and checked by the doctor. However, at weekends and other times when the doctor was not available, medicines were still sometimes dispensed and labelled by nurses.
- 2.89** Most patients, 92%, received their medication as in possession. There was an up-to-date in-possession policy to support this, which included a risk assessment. Completed risk assessments were available on SystemOne. Supervised medication could only take place at certain times due to the number of nursing staff, and medication with doses outside these times was reviewed and changed.
- 2.90** Patient group directions (authorising appropriate health care professionals to supply and administer prescription-only medicine) were limited to vaccines, some pain relief products and an inhaler – although nurses could provide medicines to treat minor ailments under that protocol. The prison shop list allowed prisoners to buy medication such as dry skin cream and mouth ulcer gel.
- 2.91** Systems in the health care treatment room ensured safe pharmaceutical stock management. The facility used to store patient named medication was not large enough to allow clear separation of the medication to reduce the risk of errors.
- 2.92** The pharmacist undertook a monthly analysis of prescribing data focusing on particular groups of medication, such as those liable to abuse.

## Recommendations

- 2.93** **Patients should have access to a complete pharmaceutical service, including pharmacy-led clinics and medicine use reviews.**
- 2.94** **Nurses should not dispense medicines other than in exceptional circumstances.**  
(Repeated recommendation 5.49)

## Housekeeping points

- 2.95** The findings and recommendations from the pharmacy visits should be provided in a report.
- 2.96** The administration of supervised medication should be at times that ensure that patients get the best treatment possible.
- 2.97** There should be additional storage space in the health care treatment room to allow the safe storage of named patient medication.

## Dentistry

- 2.98** The dental suite was of a very high standard with separate decontamination facilities. However, there was no maintenance contract for the dental chair, which had an electrical fault at the time of our visit. The range of dental treatments available was good. However, there were 100 patients on the urgent waiting list and another 100 in treatment, which were among the longest dental waiting lists we have seen. The waiting time for urgent treatment was between six weeks and five months, which was unacceptable. The failure-to-attend rate when we visited was 16%. Prisoners with dental problems out of hours could be seen by a nurse or on-call GP, and the dentist was willing to attend for an emergency.

## Recommendations

- 2.99** There should be a maintenance contract for the dental chair that includes emergency call out and fixing.
- 2.100** The dental waiting lists should be managed down to acceptable levels.

## Delivery of care (mental health)

- 2.101** The partnership provided an integrated mental health service with primary and secondary care components. There was insufficient staffing to meet demand. A new provider with an enlarged establishment was due to commence in March 2014.
- 2.102** There was an open referral system and cases were allocated following triage. There were 50 to 70 patients on the caseload at a time. Registered mental health nurses, a psychological therapist and visiting psychiatrist provided a good range of interventions for common, complex and serious mental health problems. Approaches included self-help guidance, guided reading, counselling, brief and solution-focused therapies, cognitive and analytic approaches, and medical management within the care programme approach (CPA). There were no support groups yet but they were planned. It was sometimes difficult for staff to secure confidential rooms for therapy. The team contributed to ACCT reviews, although could not contribute to all forums due to time constraints.
- 2.103** Nurses were case managers within the CPA and coordinated care with external services. One patient had been transferred out under the Mental Health Act in the last year, within a reasonable timescale.
- 2.104** More than half of all uniformed officers, 55%, had been trained in mental health awareness, which was good practice as it increased the potential for the identification and referral of prisoners with mental health problems.

## Housekeeping point

- 2.105** There should be sufficient confidential rooms for psychological therapies.

## Good practice

- 2.106** *The number of uniformed officers trained in mental health awareness was commendable as it increased the potential for identification and referral of prisoners who were vulnerable because of mental health problems.*

## Catering

### Expected outcomes:

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

**2.107** *Prisoners were negative about the food and we found some that was unappetising. There were good opportunities for prisoners to dine out of their cells. The cleanliness in the kitchen was poor. Consultation arrangements were adequate.*

**2.108** In our survey and in structured groups, fewer prisoners than the comparator were positive about the quality of the food. We found the food to be plentiful but unappetising. The menu operated over a four-week cycle, with hot options for lunch and the evening meal and provision for vegan, vegetarian, religious, healthy and medical diets. Fruit and vegetables were available daily. However, breakfast packs were issued the day before they were to be eaten and were inadequate.

**2.109** Meals were served at 12.15 and 5pm in two recently decorated dining halls for prisoners from units two, three and four, while prisoners elsewhere could dine out on their respective unit. Serveries were not cleaned after the evening meal until the following day. Servery workers were correctly dressed but we saw food being served with gloved hands rather than utensils, which was inappropriate. There was no servery in the segregation unit and food there was served from the trolley by incorrectly dressed staff, which was poor practice.

**2.110** Standards of hygiene in the kitchen were inadequate. Many areas were grubby and the fabric of the building was poor, although funding had been secured to repair some damaged walls. Some equipment was in a poor state of repair and this had affected the quality of food. Halal food was not prepared separately from other food. Prisoners who worked there could achieve a range of qualifications, up to a level 2 national vocational qualification.

**2.111** Prisoners were consulted about the food through a twice-yearly survey, the prisoner council meeting and the use of food comments books.

### Recommendations

**2.112** **Breakfast packs should be issued on the day they are to be eaten.**

**2.113** **Food in the segregation unit should be supplied from a servery and by correctly dressed staff.**

**2.114** **Halal food should be prepared separately from other foods.**

**2.115** **All areas used to prepare, cook or serve food should be clean and well maintained.** (Repeated recommendation HP58)

### Housekeeping point

**2.116** Food should only be served with the correct utensils.

## Purchases

### Expected outcomes:

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

**2.117** *New arrivals could buy a reception pack but could wait too long for their first shop order. The shop list broadly met the needs of prisoners. Consultation arrangements were responsive.*

**2.118** New arrivals with money could buy a smoker's pack and £2 telephone credit while those without were given an advance. There was no alternative provision for those who did not smoke. Depending on the day they arrived, prisoners could wait up to 12 days for their first shop order, which was too long and could lead to them getting into debt.

**2.119** In our survey, only 21% of black and minority ethnic respondents said that the range of goods sold by the prison shop met their needs against 47% of white respondents. Despite this, there had been consultation with all prisoners through an annual survey and the shop list had been amended. We found the range of goods broadly met the needs of the population.

**2.120** There were several catalogues that prisoners could order from but the prison charged 50p administration for each order. Newspapers and magazines were available to order from a local newsagent.

### Recommendation

**2.121** **New arrivals should be able to buy items from the prison shop within their first 24 hours, and should have the option of buying a non-smoker's pack.**

### Housekeeping point

**2.122** Prisoners should not be charged an administration fee for catalogue orders.

## Section 3. Purposeful activity

### Time out of cell

#### Expected outcomes:

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

**3.1** *Time out of cell was very good for many prisoners, although too many were locked up during our roll checks, particularly on units one and two. There were no opportunities for evening association, and daily domestic periods did not allow all prisoners to maintain family ties effectively.*

**3.2** In our survey, respondents were more positive than the comparator about opportunities for exercise and time out cell but less favourable about access to association. The recently introduced core day was complex and further complicated because some wings operated slightly differently. A fully employed prisoner could generally experience 10 hours or more out of cell each day, and this was even better for those who lived on units where they were not locked into cells. Depending on their location, unemployed prisoners could achieve two to three hours out of cell a day but those on the basic level had as little as one hour unlocked. We found some prisoners who were not unlocked until lunchtime.

**3.3** At roll checks during the morning and afternoon, we found about 19% of the population locked in their cells, which was too high for a training prison. The majority of unemployed prisoners and those not yet allocated to work were on residential units one and two, and if the data covering them were disaggregated, around 36% of the prisoners on these units were locked up. At the time of the inspection, there were only 77 unemployed prisoners, and the number we found locked up was offset by the closure of some work areas and a backlog of work allocations after the Christmas period.

**3.4** Opportunities for association were limited to weekends and only 10% of prisoners could access evening activities on Monday to Thursday. Employed prisoners had limited access to outside exercise, but daily 30-minute exercise periods were available to prisoners not at work. Unemployed prisoners were given an additional daily 30-minute domestic period when they could shower and make telephone calls, but for some this was early in the morning when working family members were unavailable.

### Recommendation

**3.5 All prisoners should be able to achieve 10 hours out of cell and one hour for outside exercise every day.**

<sup>6</sup> 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.

## Learning and skills and work activities

### Expected outcomes:

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

**3.6** *The management of learning and skills was good. Quality assurance was good in education and vocational training but needed extending to wider prison activities. Partners worked well to meet prisoners' needs. A range of curriculum focused well on employment and further training on release. The range of vocational training at level 2 had been extended, giving prisoners progression opportunities. Around 85% of prisoners were involved in activities, including 55% who were taking accredited awards. There were not enough activity places to meet current needs, and not all were used to full capacity, but there was to be an increase in vocational training places. Prisoner achievement of accreditation and qualifications was good, they produced high standards of work, and their punctuality and behaviour were good. Teaching on education programmes and vocational training was good overall. The library provided a good service and was used well.*

**3.7** *Ofsted<sup>7</sup> made the following assessments about the learning and skills and work provision:*

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

### Management of learning and skills and work

**3.8** Strategic and operational management of learning and skills and work were good. Effective use of labour market intelligence had informed managers' decisions when planning the curriculum. There was effective management and teamwork across the learning and skills and work provision, and its partner organisations.

**3.9** All activities had a strong focus on developing skills for prisoners to progress to employment or further training on release. Curriculum developments emphasised business enterprise and had increased involvement with local communities and businesses, in line with the prison's new regional resettlement role. Managers had prepared well for the arrival of short-stay prisoners, who had only a short time of their custodial sentence left to serve, with the provision of short courses and accredited units of longer qualifications that they could complete on release.

**3.10** The management of the Offenders' Learning and Skills Service (OLASS) provision by The Manchester College (TMC) was good. Managers had taken effective and timely action to increase the provision in English and mathematics to match the changing population's needs.

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

- 3.11** Education was offered part-time and prisoners could attend up to three sessions a week on release from full-time work or vocational training. This helped improve and extend prisoners' knowledge and skills but was an inefficient use of places, as it reduced attendance in work and vocational training activities. Class attendance was further disrupted when visits took place at the same time.
- 3.12** Quality assurance arrangements, including self-assessment, were good overall. Data analysis and evaluation were used effectively to inform decisions. Quality improvement planning was highly effective. TMC's session observation process identified areas for improvement in teaching, learning and assessment, but the observation systems for other accredited provision were less effective, especially as the prison's process had ceased. There was not enough promotion of equality and diversity in sessions, and staff had not been trained to support them in this. This led to some missed opportunities to illustrate how an understanding of such issues would help prisoners in their transition into sustainable employment (for example, asking if shoes should be removed for cultural, hygiene or family reasons before entering a house to carry out repairs).

## Recommendations

- 3.13** **The prison should ensure that activity places are used efficiently.**
- 3.14** **Staff in learning and skills should complete equality and diversity training to give them the skills and knowledge to enhance prisoners' understanding in learning sessions.**
- 3.15** **The Manchester College processes for observing and evaluating the quality of accredited activities should be extended to non-OLASS provision to inform improvements in teaching, learning and assessment.**

## Provision of activities

- 3.16** The range of activities met the needs of the prison population. Approximately 85% of prisoners were engaged in learning and skills and work activities, with 55% on courses leading to an accredited education or vocational qualification. There were 594 full-time activity places, including 150 vocational training and 70 education places each session, but these were insufficient for the population and not used efficiently.
- 3.17** Around 378 prison work places provided a variety of activities for prisoners. These included wing-based work, classroom assistants, farms and gardens, laundry, motor engineering, recycling, painting, kitchen work, the smokery (which had a longstanding reputation for producing excellent smoked meat, fish, cheeses and vegetables), bicycle repairs, textiles, woodwork, the prison magazine and printing work, prison orderlies, cleaners, prison shop and community work. A hundred prisoners were taking work-based vocational training awards related to their work activity.
- 3.18** The range of education and vocational courses provided by TMC was very good. Functional skills in English and mathematics were offered from entry level 1 to level 2, information technology at levels 1 to 3, digital imaging at level 2 and computing at entry level. Web design, customer service, peer mentoring, money management, citizenship, assertiveness and decision making, cookery and industrial cleaning were offered at levels 1 and 2. Parent craft, family relations, healthy living, anger management and preparation for work were offered at level 1. The curriculum was broad and supported prisoners in improving their skills across many resettlement pathways.

- 3.19** Vocational training was offered at level 2 in five construction trades, and up to level 3 in brickwork. The 'preparing to teach in the lifelong learning sector' (PTLLS) course was offered at level 3 and prisoners progressed from this and the peer mentoring course to supporting other prisoners in education and vocational training. Seven prisoners were taking awards using distance learning.
- 3.20** The Lakes College provided horticulture awards in the farms and gardens and catering awards in the prison kitchen and the smokery. Fusion 21 provided a level 2 kitchen and bathroom fitting course and a plastering course that was due to start. The prison provided accredited forklift driving training to three prisoners a week. Prisoners working in recycling, the bicycle repair workshop, laundry and textiles workshop could gain accredited awards. The motor engineering workshop had been closed for several months due to staff illness. Qualifications had stopped being offered in the two woodwork areas, although there were teacher-trained prison staff, due to increased production targets.
- 3.21** Around 77 prisoners were unemployed, which was low and included 43 who had recently been dismissed and were awaiting redeployment. Some work areas, such as the textiles workshop, were frequently used to aid prisoners' reintegration into work, supported by highly skilled staff. Eleven prisoners felt unable to leave their cells for safety reasons and nine were in the segregation unit, but only one had received education support, and tutors did not systematically visit prisoners in these areas.
- 3.22** Allocation to activities was prompt following discussion at the labour board, which included the prisoner. Pay rates for prisoners did not disadvantage those participating in accredited activities.

## Recommendations

- 3.23** **There should be cover for staff absence to ensure that all activities take place.**
- 3.24** **Education staff should offer education support for prisoners in the segregation unit and those who are unable to leave their cells.**

## Quality of provision

- 3.25** The overall quality of teaching, learning and assessment was good. Staff were skilled and experienced at working with prisoners and held appropriate teacher training and subject qualifications. The resources were generally good, and included interactive white boards in many areas, which were used proficiently by both staff and prisoners. Equipment in the cookery room needed refurbishment for hygiene reasons; some ovens were rusty and worktops required resealing.
- 3.26** Staff managed behaviour well and prisoners displayed a high level of maturity and mutual respect. In a few education lessons, prisoners became bored and disinterested, and some left classes for other appointments and failed to return, which affected their learning and the teacher's planning.
- 3.27** Most teaching in education classes was good. Staff used a very effective range of learning strategies, including group work interspersed with practical tasks, to reinforce and check learning. In most classes the more able prisoners were given challenging tasks, while qualified peer mentors provided encouraging support for the less able.

- 3.28** Vocational training was good overall. Workshops were clean, tidy and well equipped, and activities fully occupied the prisoners throughout the core day. However, tools in the painting and decorating workshop were worn and needed replacement. Orderlies were used well to provide peer support, especially for mastering difficult tasks.
- 3.29** Prison and vocational training staff had commercial skills. Some had recently been recruited from industry and were good role models on up-to-date work practices and in providing information on running a self-employed business, which supported prisoners' resettlement needs well.
- 3.30** Staff integrated English and mathematics well into most teaching and training sessions, with good examples in cookery, painting and decorating, and brickwork. Prisoners displayed very good writing skills and comprehension of language in creative writing classes.
- 3.31** Session plans did not always detail how individual prisoners' needs would be met or what they would be expected to complete in the session, and they had insufficient detail on how equality and diversity topics would be included (see also paragraph 3.12).
- 3.32** Induction sessions to encourage involvement in education, learning and skills were very well managed. Multi-agency teams provided good information, advice and guidance to groups and in individual interviews with prisoners. Prisoners' sentence plan targets and individual needs and resettlement goals were considered well when planning activities.

## Recommendations

- 3.33** **The rusty ovens in the education cookery classroom should be replaced and work surfaces repaired to ensure high quality hygiene.**
- 3.34** **Session planning should cover how prisoners' individual needs will be met and be clear about what each prisoner is expected to achieve, so progress can be easily monitored.**

## Housekeeping point

- 3.35** The worn and old tools in the painting and decorating workshop should be replaced.

## Education and vocational achievements

- 3.36** Most longer stay prisoners achieved well in education and vocational training, with high achievement rates on most programmes. However, overall rates for English and mathematics at level 1 had declined slightly since 2011/12, when they were around 80%, to 56% and 62% respectively in 2012/13. Most prisoners achieved accredited units in English reading and writing, but a significant minority did not achieve the speaking and listening unit, so did not gain the full level 1 award. Progression awards had been successfully introduced to bridge the gap in learning between entry level 3 awards and level 1 in functional skills. The standards of prisoners' work in education classes were good. Work was marked well to show prisoners where they needed to make improvements.
- 3.37** Achievement of qualifications was high in vocational subjects. High levels of skill were demonstrated in brickwork, painting and decorating, industrial cleaning and tiling. Prisoners' work ethic varied across activity areas, and the employability and interpersonal skills they developed were not routinely recorded.

- 3.38** Prisoners in the smokery, woodwork, recycling and farms and gardens areas learned good technical and commercial skills. Products such as garden benches, summer houses and toy boxes were made to high commercial standards and sold to local communities, and through the shop by the visitors' centre. Vegetables, fruits and plants grown by prisoners working in the farms and gardens went for retail sale at local farmers' markets and in the shop, or were used in the prison kitchens and gardens for prisoners and staff.
- 3.39** The work ethic in the smokery was extremely good. Prisoners here worked much longer hours than in other areas, which helped prepare them well for employment on release. Those who were eligible for release on temporary licence (ROTL) attended local farmers' markets with staff to sell smokery produce.
- 3.40** Attendance and punctuality at education and vocational training were good and prisoners did not waste time in moving between their residential units and activity locations.

## Recommendations

- 3.41** Prisoner achievement of English and mathematics level 1 awards should be improved, with particular focus on completing the speaking and listening aspect.
- 3.42** The development of prisoners' improved employability and interpersonal skills in education, vocational training and work areas should be recorded.

## Library

- 3.43** The library, provided by Cumbria County Council library services, was well managed. It was run by a librarian, five library supervisors and four full-time orderlies, who were required to have good literacy and numeracy skills. Although some orderlies had previously qualified as mentors in education, the skills they gained while working in the library were not accredited or recorded.
- 3.44** Prisoner access to the library was good with at least one timetabled session a week, during the day, evening or at the weekend. Most prisoners could use the facility every day if they wished, during association and movement periods. There was an annual survey of library users' views, but there was no information collected on why prisoners were not using the facility to improve and widen its appeal. Enthusiastic staff worked well with education and health services staff to provide books to individual prisoners to support their course work or improve their well-being.
- 3.45** The book stock was good for the size of the population and stock loss was low. The stock was updated frequently and the books were very well displayed and kept in a good condition. The stock included a wide range of fiction, non-fiction, quick/easy reads, foreign language and audio books, as well as books to support education and vocational training courses. Daily newspapers and magazines, as well as music CDs, were available and regularly accessed. Computer games were available for enhanced status prisoners to borrow.
- 3.46** Prisoners made good use of six laptop computers to practise for the driving licence theory test, and for construction site competency skills tests and other computer-based learning programmes. Prison Service Instructions and legal texts were up to date and readily available for reference.

- 3.47** The library supported the Toe by Toe scheme organised by the education department. In the previous 12 months, participation had been good, and 29 Toe by Toe trained mentors had supported 25 prisoners to learn to read. Further activities to promote literacy were good and included a four-week Storybook Dads course that helped prisoners to read books expressively out loud. In the previous 12 months, 69 prisoners had joined this course and 61 completed it.

## Recommendations

- 3.48** **Library staff should investigate the reasons why not all prisoners use the library and take action to extend its appeal across the prison.**
- 3.49** **The skills that orderlies develop while working in the library should be recognised and recorded.**

## Physical education and healthy living

### Expected outcomes:

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

**3.50** *Prisoners had good access to recreational and vocational PE. The facilities were well used and provided sufficient activities to meet the needs of different groups of prisoners. A good range of vocational qualifications was provided and achievement was high. There were regular quality improvement checks on the provision.*

- 3.51** The PE provision was good and well managed. Six well-qualified and experienced PE instructors worked across the prison to provide a range of recreational activities and vocational PE courses. Facilities were mostly good and consisted of a large sports hall and two cardiovascular and free weights rooms. Several residential units had their own small cardiovascular rooms that were well used at weekends. Outside facilities were adequate and included a full-sized grassed football pitch. A wide range of recreational PE offered a variety of team games, circuit training and racquet sports.
- 3.52** All prisoners had access to at least two PE sessions a week, although many could access more sessions depending on their IEP status. All recreational PE was planned outside the core day so it did not affect full-time work.
- 3.53** A range of accredited courses was offered during the core day, with good progression opportunities from entry level 1 to level 3. Courses were well planned, ran frequently and varied in length and level to meet differing abilities and needs. Achievement rates were high, as most prisoners stayed on their programme and successfully completed it. There were observations of teaching, learning and assessment with agreed actions to develop and improve sessions.
- 3.54** Induction to the gym was thorough and integral to the education, learning and skills induction. Quality improvement processes were satisfactory. Instructors reviewed each course and identified what had gone well or could be improved. Retention, achievement and participation rates were well monitored to make improvements and ensure that all groups had equitable access. An annual prisoner survey helped to inform and develop the PE programme.

- 3.55** Links with the health care department were good. A health trainer course accredited prisoners to work with individuals to improve their well-being, for example, with weight loss and smoking cessation.
- 3.56** Showers had still not been fitted with privacy screens, which was a recommendation at our 2009 and 2011 inspections. Although most PE equipment was working some was old and outdated and needed replacement. There was sufficient classroom accommodation to support theory teaching and coaching, but some rooms had no heating and needed refurbishment. There was no planned replacement and refurbishment programme for PE equipment and facilities.

### Recommendations

- 3.57 Shower screens should be installed in the main gym showers as a matter of urgency.**
- 3.58 There should be a planned replacement and refurbishment programme for PE equipment and facilities.**

# Section 4. Resettlement

## Strategic management of resettlement

### Expected outcomes:

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

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

**Good planning ensures a seamless transition into the community.**

**4.1** *Offender management work was in transition. Shortfalls in staffing had led to a diminished service for prisoners, which was not well integrated with other work across the prison. Clear policies and strategic objectives were generally appropriate and based on a comprehensive needs analysis, but plans to rectify shortfalls were less clear.*

**4.2** The offender management function of the prison was in transition. Reflecting national policy, offender supervisors were being recruited from within the establishment to take on the dual function of offender management and wing-based supervisory officers. This had coincided with several probation staff leaving and a change of the head of offender management. As a consequence, the offender management department did not have its full staff and some who had been recruited were inexperienced. This had led to the suspension of some key functions, resulting in some major gaps in the overall provision.

**4.3** The prison's reducing reoffending and offender management policies had been updated within the previous six months. The reducing reoffending policy was particularly comprehensive and detailed, giving a clear outline of the provision available for prisoners under each resettlement pathway. The associated action plans for developments under each resettlement policy were also clearly defined. It was appropriate, given that 97% of the population were serving sentences of over 12 months, that plans were based on a comprehensive needs analysis using offender assessment system (OASys) data. There were also some good links with external partner organisations and forums.

**4.4** Although the heads of offender management and reducing reoffending understood the plans to rectify the shortfall in offender management provision, this was not reflected elsewhere in the wider offender management team, and there was no clear strategic plan or timescale to take the work forward. As an example, while it was believed that the lack of offender management representation at offender assessment boards following induction was only a temporary arrangement, there was no clear plan for when this would be resolved.

**4.5** Strategic links between the reducing reoffending and offender management functions were generally good with monthly strategic meetings to ensure appropriate developments between the two. However, a lack of integration at operational levels undermined some of this work. In our survey, only 51% of respondents said that they had done something or something had happened at the prison to make them less likely to reoffend in the future.

### Recommendations

**4.6** **The reducing reoffending and offender management functions of the establishment should be better integrated to ensure continuity of provision to meet prisoner needs.**

#### 4.7 There should be a clear plan to rectify the shortfall in offender management staffing.

## Offender management and planning

### Expected outcomes:

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

**4.8** *Many offender supervisor caseloads were high. The standard of completed OASys assessments was reasonable but too many were missing or out of date. Offender supervisor engagement with prisoners was often insufficient, and there was no supervision or case management support. Public protection arrangements were broadly good.*

**4.9** During the inspection we were joined by colleagues from HM Inspectorate of Probation who looked in detail at 20 offender management cases. A further 15 cases, primarily low and medium risk, were looked at in less detail.

**4.10** The offender management department consisted of three probation service officers and seven band four prison officers, managing all prisoners assessed as low or medium risk of harm, and three probation officer supervisors who managed indeterminate-sentenced prisoners (ISPs) and determinate prisoners assessed as high or very high risk of harm. On any day, only two of the officers were allocated to offender management and, due to diminished experience across the team, caseloads for some probation staff, while fluctuating, were extremely high at more than 80.

**4.11** While all prisoners were allocated an offender supervisor, their role was not clear. The model of offender management indicated that, following induction, each prisoner would be subject to an offender development board where both offender management objectives (as identified in OASys assessments for prisoners serving over 12 months) and employment, training and education (ETE) targets could be combined to ensure continuity and effectiveness. However, there had been no offender management representation for at least six months, and targets set at these meetings were almost exclusively for ETE. The problem was compounded by the number of prisoners who had an out-of-date OASys or none, which, at the time of the inspection, equated to over a third of the population. Many had transferred to Haverigg before an OASys had been completed – estimated as half of all those who transferred in during some months.

**4.12** Despite the backlog of OASys, most assessments in the cases we looked at (both high risk and others) were of a reasonable standard with appropriate sentence planning targets identified. However, other departments rarely made contributions to sentence planning.

**4.13** Beyond sentence planning, contact with prisoners by offender supervisors was inconsistent and, in many cases, non-existent. Although in our survey 77% of respondents, against the comparator of 68%, said that they had an offender supervisor, only 26%, against 36%, said their offender supervisor was working with them to achieve sentence plan targets, and 61%, against 65%, said that no one was working with them. The high caseloads for offender supervisors working with high risk prisoners meant that in many cases there were long periods with no contact, and when there was contact, the focus of this was not always clear.

- 4.14** We did see some good examples where offender supervisors and other staff worked well with prisoners, almost invariably when they were involved in the Kainos programme, the only nationally accredited programme, run by a charity, provided by the prison (see also paragraph 4.56). In one case, we came across a prisoner with a high level of needs, including learning difficulties, who had made good progress on educational activities linked to the sentence plan with a view to undertaking an accredited programme. This was due to excellent engagement, support and encouragement by the offender supervisor and other staff, leading to improvement and progress on the prisoner's sentence plan.
- 4.15** There was little direction and support to help offender supervisors prioritise their work and focus on the prisoners most likely to benefit from it. Quality assurance was limited to OASys, and no staff had received regular casework or professional supervision since the former head of offender management had left in July 2013.
- 4.16** In the previous six months, only 63 (34%) of the 185 cases considered for home detention curfew (HDC) had been successful. Our review of cases and processes showed that decisions were appropriate and based on a good range of information, with the relatively low number of successful applications reflecting the population now held at the prison.
- 4.17** Since our last inspection, the range of release on temporary licence (ROTL) provision had increased substantially. In the previous six months, there had been 1,560 releases, although for only 13 individuals. Prisoners had to be category D to qualify for consideration. For those who did work outside the prison, the experience was generally positive.

## Recommendations

- 4.18 Prisoners should not be transferred to HMP Haverigg without an up-to-date OASys assessment.**
- 4.19 All appropriate prisoners should have a completed and up-to-date OASys assessment.**
- 4.20 There should be offender management representation at prisoner development boards to ensure sentence plan targets are incorporated into reviews.**
- 4.21 All departments working with a prisoner, including his personal officer, employment, training and education providers and drug and alcohol services, should attend sentence planning boards, or at least provide written contributions.**
- 4.22 Offender supervision provision should be consistent and reflect the level of need for prisoners at HMP Haverigg, and such work and contact should be oriented to reducing levels of risk of harm and reoffending.**
- 4.23 All offender supervisors should be offered regular casework supervision, and offender management files should be subject to regular quality assurance checks.** (Repeated recommendation 9.8)

## Public protection

- 4.24** Public protection arrangements and processes were generally well managed. All new arrivals were screened appropriately and nearly all public protection cases were managed by one of the probation officers. At the time of the inspection, although there were no multi agency

public protection arrangements (MAPPA) level three cases (prisoners on the highest risk level), there were seven identified as level two (where the active involvement of one or more agency is required). The risk management board reviewed all such cases every three months. A further 63 cases were MAPPA level one and 248 recorded as MAPPA nominals (individuals targeted for legitimate security reasons).

- 4.25** Monitoring of prisoners identified as a risk to children (currently 93) and subject to harassment procedures (63) were also reviewed appropriately at the monthly board. Of the 20 high risk cases that we reviewed, two included significant child protection issues and both had objectives to manage these.

## Categorisation

- 4.26** At the time of the inspection, the prison held 29 category D prisoners (approximately 4.5% of the total). In the previous six months, 137 prisoners had been considered for recategorisation with 60 (44%) successful. There was no category D policy group, although such prisoners were managed reasonably well. Recategorisation reviews were reasonable and timely, and decisions were appropriate. Although many category D prisoners were based on residential unit six (known as the 'programmes unit') not all were, and prisoners who wished to remain on other accommodation could do so. Although there could be some delays in transferring prisoners to category D prisons, most were able to transfer within a few months.

## Indeterminate sentence prisoners

- 4.27** At the time of the inspection, the prison held 51 ISPs, of whom 19 were on an indeterminate sentence for public protection (IPP). Most of these prisoners were allocated to one of the probation officers. The prison had a specific ISP policy, updated in October 2013, which had comprehensive guidance for staff across the prison on how to work with such prisoners.
- 4.28** As with determinate sentence prisoners, there was no specific guidance or agreement on the frequency of contact between ISPs and offender supervisors, which tended to be reactive and when issues arose. Although there was no specific offending behaviour work with this group of prisoners, they were usually prioritised for the programmes available, whether Kainos or one of the other non-accredited programmes facilitated by the education or chaplaincy departments (see section on attitudes, thinking and behaviour).
- 4.29** Where appropriate, the prison facilitated town visits for ISPs and the prison now allocated time to the staff undertaking them.
- 4.30** The frequency of indeterminate sentence prisoner forums had slipped, and there had been none since September 2013. There were a minimum of two lifer family days each year, although there had been three in 2013.

## Housekeeping point

- 4.31** Indeterminate sentence prisoner forums should be provided regularly and meet the information needs of prisoners.

## Reintegration planning

### Expected outcomes:

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

**4.32** *The resettlement unit offered a good central focus on resettlement for prisoners due to be released but there was insufficient liaison and communication with offender supervisors. Resettlement boards did not include offender management representation. Pathway work was generally good and most areas offered appropriate support. There was insufficient work on addressing offending behaviour, although the domestic violence initiative was positive.*

**4.33** The prison released an average of around 57 prisoners a month. All prisoners were invited to attend the resettlement unit 10-12 weeks before release. Those arriving at the prison with less time than this still to serve were invited immediately they had completed their induction. Prison orderlies were based in the resettlement unit and coordinated appointments, and obtained some basic information for housing applications and bank accounts to be opened. Although there had been a review of how helpful prisoners found support from the unit, a more detailed survey was being completed at the time of the inspection.

**4.34** Prisoners were invited to a resettlement board before release to review their progress against targets set during the prisoner development boards and to identify any outstanding concerns. Although this model worked reasonably well, at the time of the inspection offender management representation had, like the development boards, been suspended. As a consequence, reviews did not cover all issues. Although most pathways offered a good service to prisoners, information was not consistently shared with offender supervisors and, therefore, with offender managers responsible for managing post-release licence supervision. Information held by pathway providers was also not routinely recorded on the P-Nomis IT system to facilitate information sharing.

### Recommendation

**4.35** **The prison should ensure that work by resettlement pathway providers is properly and effectively coordinated with that of offender supervisors to support release.**

### Housekeeping point

**4.36** All pathway providers should record work with prisoners on P-Nomis.

### Accommodation

**4.37** In our survey, significantly fewer prisoners than at our last inspection (13% against 24%) said that they had arrived at Haverigg with concerns about their housing. The prison still had no specialist housing provision, and such work to support prisoners being released was undertaken by the resettlement unit manager. Despite a lack of specialist training, considerable knowledge had been built up over the years and there were good links with external partners and service providers. Most prisoners were released to appropriate

accommodation, and the number released with no fixed accommodation was impressively low at less than 1% in the previous six months.

## Education, training and employment

- 4.38** The Conservation Volunteers (TCV) provided good careers advice and guidance. TCV staff were an integral part of the resettlement team who all shared an office, aiding good communication and the opportunity to provide an integrated service to prisoners. The TCV staff were highly skilled, and successfully engaged prisoners, even those initially reluctant, to get involved in education, training and work. Successful multi-agency working involved effective teamwork with The Manchester College's staff, for example, during the prison's education, learning and work induction programme.
- 4.39** The learning and skills and work provision offered a range of subjects to support regional employment opportunities and prepare prisoners for resettlement into local communities, in line with the prison's regional resettlement focus. There was good use of the virtual campus facility (giving prisoners internet access to community education, training and employment opportunities) to develop prisoners' online job search and application skills and complete curriculum vitae.
- 4.40** Prisoners eligible for ROTL worked in the prison shop for visitors outside the main gate and attended local farmers' markets, which had increased their involvement with local communities and employers. These activities helped develop prisoners' customer service skills, as well as forming some good links for employment on release. However, there were insufficient employer links to meet the wider resettlement needs of prisoners.
- 4.41** During heavy snow, prisoners had helped dig local farmers' sheep from drifts, which required good teamwork skills, and they had been involved with lambing, a new and powerful learning experience.

## Recommendation

- 4.42** **The prison should increase its links with employers to include more organisations, and support prisoners' release on temporary licence opportunities and resettlement into employment on release.**

## Health care

- 4.43** Prisoners were offered pre-release or transfer health checks. Harm minimisation information, take-home medication and assistance to locate a GP were given as appropriate. There were appropriate arrangements for palliative and end-of-life care.

## Drugs and alcohol

- 4.44** The substance misuse team responded to information requests from offender supervisors, but care/recovery plans were not consistently integrated with sentence plans and pre-release plans were not always shared. The substance misuse service provider offered both prison and community-based drug and alcohol support for prisoners due for release, which facilitated their throughcare and treatment continuity. A designated prison liaison worker from an external organisation was available to visit prisoners before release, and there were good links with drug intervention programme teams in other areas.

## Recommendation

- 4.45 Substance misuse and offender management services should improve information sharing.**

## Finance, benefit and debt

- 4.46** There was reasonable support for prisoners under this pathway. A money management course was available through the education department, and prisoners could open bank accounts before release.
- 4.47** The prison had a contract with Shelter to provide financial management and debt advice to prisoners two days a week. However, data collected from this service still did not include outcomes and so it was not possible to assess its effectiveness. Nevertheless, at the time of the inspection there was a debt management survey to determine the level of need and demand for the service.
- 4.48** All prisoners were also able to see a representative from Job Centre Plus. Although most prisoners took up this interview, only approximately 46% of those released in the previous six months indicated that they would be unemployed.

## Recommendation

- 4.49 Outcome data on finance, benefit and debt should be agreed and monitored to establish the extent of prisoner need, and there should be appropriate support to address identified issues.** (Repeated recommendation 9.39)

## Children, families and contact with the outside world

- 4.50** The visitors' centre was small but sufficient for the level of demand. It was run by a combination of paid and voluntary staff, who covered a snack bar in the centre and in the visits hall, as well as a small play area in the visits room. A family liaison worker had started during the week of our inspection. Information about visits, their procedures and the range of support available was limited and, although visitors we spoke to were extremely positive about their experiences, only 29% of prisoners in our survey, against the comparator of 35%, said they had been supported by staff to maintain contact with their family and friends.
- 4.51** Some prisoners told us that there were often delays in the start of visits and/or in the movement of visitors to the visits hall, usually because the booking-in process did not start until 1.30pm, which was not long enough to process all visitors in time for the 2pm start. However, during our inspection visits started on time each day.
- 4.52** Although we were told, and the local visits policy stated, that a drug dog indication alone would lead to a closed visit, the only prisoners on closed visits had been involved in or suspected of involvement in the passing of illicit items during visits.
- 4.53** Prisoners were moved to visits quickly and efficiently and went directly into the hall. They still had to wear coloured bibs during the visit. The visits hall was small but accommodated up to 23 groups of visitors, which was more than at our last inspection. However, this had been achieved by adding extra tables, which meant that some were cramped and too close to each other.

- 4.54** A parenting skill course was provided by the education department and Storybook Dads (see paragraph 3.47) was also available. As well as the separate lifer family days (see paragraph 4.30), the prison provided three general family visits a year through the chaplaincy. However, these days were still restricted to prisoners on the standard or enhanced IEP level.

## Recommendation

- 4.55** **Family visits should be available to prisoners regardless of their incentives and earned privileges status.** (Repeated recommendation 9.62)

## Attitudes, thinking and behaviour

- 4.56** There was very limited offending behaviour work. The only nationally accredited programme was the 'Challenge to Change' course provided by the charity Kainos, run exclusively on residential unit five. It was delivered largely as a therapeutic community (a participative, group-based approach to problem-solving and changing attitudes), although prisoners were able to have contact with others from across the establishment. The programme had only been running since April 2013 and although the attrition rate was high (only 12 prisoners had completed the first two courses out of 24 starters), those who had finished it spoke positively. The programme included post-release continued support in the community.
- 4.57** The only other programmes were the Sycamore Tree victim awareness course, delivered through the chaplaincy, and an assertiveness and decision making course run by the education department, which had been attended by 157 prisoners in the previous six months.
- 4.58** Although in theory prisoners could be transferred to another establishment to attend an offending behaviour programme, this was rare. We found several prisoners due to be released who had not undertaken any offending behaviour work during their sentence, despite being assessed as a high risk of harm and in custody for some time. In only two of the seven cases from the high risk of harm sample we examined was the prisoner moved to access resources linked to sentence planning, despite clear evidence of need.
- 4.59** The prison had identified a specific need in its population for work to address domestic violence, and had developed a relevant strategy. Although a positive initiative, it was too early to assess its impact on prisoners.

## Recommendations

- 4.60** **The prison should provide a full range of accredited programmes to meet the offending behaviour needs of the population.** (Repeated recommendation 9.69)
- 4.61** **Prisoners who need offending behaviour programmes and appropriate work not provided at Haverigg should be transferred to an establishment where such work is available as soon as is practicable.**

## Section 5. Summary of recommendations and housekeeping points

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

### Main recommendations

To the governor

- 5.1** The identification, protection and support for victims of bullying should be improved by:
- Fully implementing the violence reduction policy and ensuring all staff should have the training and awareness necessary to do so
  - The safer custody team ensuring that all suspected incidents are identified, recorded, effectively investigated and appropriate action taken against perpetrators and to support victims.
  - Improving lighting and CCTV coverage in communal internal and external areas. (S45)
- 5.2** Incidents involving the use of force should be reduced. The governance of and accountability for the use of force, including uses of unfurnished accommodation, planned interventions and batons, should be improved. All planned use of force should be filmed and reviewed. Documentation of all such uses should also be enhanced. (S46)
- 5.3** The number of prisoners in the segregation unit should be reduced and the quality of regime and environment should be improved. (S47, repeated main recommendation HP54)
- 5.4** The prison should develop a clear strategy based on a needs analysis to promote and improve outcomes for prisoners from all minority groups. This should include regular consultation and monitoring to understand their perceptions and to ensure equitable access to provision. (S48)

### Recommendations

To NOMS

- 5.5** Prisoners should be given sufficient notice that they are transferring to Haverigg. (1.4)
- 5.6** Immigration detainees should not be held in prison unless there are exceptional reasons to do so following risk assessment. (2.47)

### Recommendation

To the deputy director of custody

- 5.7** Prisoners should not be transferred to HMP Haverigg without an up-to-date OASys assessment. (4.18)

## Recommendations

To the governor

### Courts, escort and transfers

- 5.8** Arriving prisoners should be disembarked from escort vehicles without delay. (1.5)

### Early days in custody

- 5.9** New arrivals should receive a free telephone call on their first night. (1.12)
- 5.10** First night cells should be clean, free from graffiti and properly equipped. (1.13)
- 5.11** The content and delivery of induction and monitoring of attendance should be improved, and all prisoners should be kept purposefully engaged until allocated to activities. (1.14)

### Self-harm and suicide

- 5.12** Staff should be trained in the development of effective care mapping for prisoners on assessment, care in custody and teamwork (ACCT) case management documents, and the quality of such mapping should be monitored. (1.32)
- 5.13** Prisoners should have 24-hour access to the Samaritans. (1.33)
- 5.14** A more appropriate location should be found for the gated cell in A wing which affords greater privacy from other prisoners and the condition of the cell should be improved. (1.34)
- 5.15** Strip clothing should be used only in the most extreme cases and occasions of use should be properly authorised by senior managers and recorded centrally. (1.35)

### Safeguarding

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

### Security

- 5.17** Prisoners should only be strip searched on the basis of intelligence or specific suspicion, and this should always be conducted by two officers. (1.47)
- 5.18** The mandatory drug test (MDT) programme should be sufficiently resourced to undertake the required level of random and target testing and to process positive tests on time. (1.48)

### Incentives and earned privileges

- 5.19** The regime for prisoners on the basic level should be improved, and the incentives and earned privileges (IEP) policy should clarify progression through this level. (1.56, repeated recommendation 7.50)
- 5.20** Decisions to demote prisoners to basic should be fully justified and always followed by a thorough investigation. (1.57)

- 5.21** Individual targets for prisoners on basic level to improve their behaviour should be set, monitored and reviewed, and officers who know the prisoner should be fully engaged in the planning process. (1.58)

### Discipline

- 5.22** All disciplinary charges should be fully investigated, with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved. (1.61)
- 5.23** The adjudication standardisation meeting should improve its analysis of data on disciplinary procedures and use the information more effectively. (1.62)
- 5.24** Segregation review documentation should be completed thoroughly and include meaningful targets. (1.74)

### Substance misuse

- 5.25** Prescribing options for opiate dependent prisoners should include buprenorphine treatment. (1.79)
- 5.26** Substance misuse and mental health services should formalise joint working to ensure effective care coordination for dual diagnosis clients. (1.80)
- 5.27** The establishment should improve the environment for prisoners waiting to receive methadone. (1.81)
- 5.28** The prison should introduce a structured alcohol programme that addresses alcohol related offending. (1.82, repeated recommendation 9.43)

### Residential units

- 5.29** Association rooms should be better equipped and kept clean and well maintained. (2.12)
- 5.30** All cells should have call bells, and these should be answered within five minutes. (2.13, repeated recommendation 2.7)
- 5.31** There should be a clear policy prohibiting offensive displays that should be applied consistently. (2.14, repeated recommendation 2.9)
- 5.32** All toilets in cells should be clean and adequately screened. (2.15)
- 5.33** There should be facilities to allow prisoners to wash their own clothes. (2.16, repeated recommendation 2.17)
- 5.34** There should be arrangements to enable wing staff to chase up applications not responded to within three working days, and the date of response should be routinely recorded. (2.17, repeated recommendation 3.38)
- 5.35** There should be sufficient telephones for prisoners on all residential units. (2.18)

### Staff-prisoner relationships

- 5.36** Staff supervision of the billeted residential units, particularly unit two, should be improved. (2.27)

**5.37** Personal officers should engage in sentence planning. (2.28)

### Equality and diversity

- 5.38** There should be adequately resourced arrangements to cover and support the role of the equality and diversity officer. (2.36, repeated recommendation 4.8)
- 5.39** Discrimination incident reporting forms should be freely available in all areas, all incidents should be investigated thoroughly and quality assurance should be robust. (2.37)
- 5.40** All staff should be regularly made aware of their duty to promote equality and diversity. (2.38)
- 5.41** Prisoners with a disability who have additional needs should have a care plan and, if appropriate, a personal emergency evacuation plan. Those who require day-to-day support should be offered a paid carer or buddy. (2.48)

### Faith and religious activity

**5.42** There should be an increase in faith provision for Muslim prisoners. (2.52)

### Complaints

- 5.43** All replies to complaints should adequately address the issues raised by prisoners and use the prisoner's preferred name. (2.57, repeated recommendation 3.43)
- 5.44** There should be a robust quality assurance scheme for complaints and regular analysis of trends. (2.58)

### Health services

- 5.45** There should be an up-to-date health assessment that includes the dental needs of the population. (2.75)
- 5.46** The partnership board should ensure that reporting mechanisms for the clinical governance of the dental services are sufficiently robust. (2.76)
- 5.47** Cumbria Partnership NHS Trust should support its prison health service in finding solutions to the chronic inability to recruit staff to vacancies. (2.77)
- 5.48** The dental suite should be accessible to prisoners with serious mobility issues. (2.78)
- 5.49** The Partnership Board should ensure that the waiting capacity of the health centre is sufficient for efficient throughput of clinics, that patients should not have to wait there for excessive periods before and following their appointments, and that waiting patients are not exposed to the elements. (2.79)
- 5.50** Patients should have access to a complete pharmaceutical service, including pharmacy-led clinics and medicine use reviews. (2.93)
- 5.51** Nurses should not dispense medicines other than in exceptional circumstances. (2.94, repeated recommendation 5.49)

- 5.52** There should be a maintenance contract for the dental chair that includes emergency call out and fixing. (2.99)
- 5.53** The dental waiting lists should be managed down to acceptable levels. (2.100)

### Catering

- 5.54** Breakfast packs should be issued on the day they are to be eaten. (2.112)
- 5.55** Food in the segregation unit should be supplied from a servery and by correctly dressed staff. (2.113)
- 5.56** Halal food should be prepared separately from other foods. (2.114)
- 5.57** All areas used to prepare, cook or serve food should be clean and well maintained. (2.115, repeated recommendation HP58)

### Purchases

- 5.58** New arrivals should be able to buy items from the prison shop within their first 24 hours, and should have the option of buying a non-smoker's pack. (2.121)

### Time out of cell

- 5.59** All prisoners should be able to achieve 10 hours out of cell and one hour for outside exercise every day. (3.5)

### Learning and skills and work activities

- 5.60** The prison should ensure that activity places are used efficiently. (3.13)
- 5.61** Staff in learning and skills should complete equality and diversity training to give them the skills and knowledge to enhance prisoners' understanding in learning sessions. (3.14)
- 5.62** The Manchester College processes for observing and evaluating the quality of accredited activities should be extended to non-OLASS provision to inform improvements in teaching, learning and assessment. (3.15)
- 5.63** There should be cover for staff absence to ensure that all activities take place. (3.23)
- 5.64** Education staff should offer education support for prisoners in the segregation unit and those who are unable to leave their cells. (3.24)
- 5.65** The rusty ovens in the education cookery classroom should be replaced and work surfaces repaired to ensure high quality hygiene. (3.33)
- 5.66** Session planning should cover how prisoners' individual needs will be met and be clear about what each prisoner is expected to achieve, so progress can be easily monitored. (3.34)
- 5.67** Prisoner achievement of English and mathematics level 1 awards should be improved, with particular focus on completing the speaking and listening aspect. (3.41)
- 5.68** The development of prisoners' improved employability and interpersonal skills in education, vocational training and work areas should be recorded. (3.42)

- 5.69** Library staff should investigate the reasons why not all prisoners use the library and take action to extend its appeal across the prison. (3.48)
- 5.70** The skills that orderlies develop while working in the library should be recognised and recorded. (3.49)

#### **Physical education and healthy living**

- 5.71** Shower screens should be installed in the main gym showers as a matter of urgency. (3.57)
- 5.72** There should be a planned replacement and refurbishment programme for PE equipment and facilities. (3.58)

#### **Strategic management of resettlement**

- 5.73** The reducing reoffending and offender management functions of the establishment should be better integrated to ensure continuity of provision to meet prisoner needs. (4.6)
- 5.74** There should be a clear plan to rectify the shortfall in offender management staffing. (4.7)

#### **Offender management and planning**

- 5.75** All appropriate prisoners should have a completed and up-to-date OASys assessment. (4.19)
- 5.76** There should be offender management representation at prisoner development boards to ensure sentence plan targets are incorporated into reviews. (4.20)
- 5.77** All departments working with a prisoner, including his personal officer, employment, training and education providers and drug and alcohol services, should attend sentence planning boards, or at least provide written contributions. (4.21)
- 5.78** Offender supervision provision should be consistent and reflect the level of need for prisoners at HMP Haverigg, and such work and contact should be oriented to reducing levels of risk of harm and reoffending. (4.22)
- 5.79** All offender supervisors should be offered regular casework supervision, and offender management files should be subject to regular quality assurance checks. (4.23, repeated recommendation 9.8)

#### **Reintegration planning**

- 5.80** The prison should ensure that work by resettlement pathway providers is properly and effectively coordinated with that of offender supervisors to support release. (4.35)
- 5.81** The prison should increase its links with employers to include more organisations, and support prisoners' release on temporary licence opportunities and resettlement into employment on release. (4.42)
- 5.82** Substance misuse and offender management services should improve information sharing. (4.45)
- 5.83** Outcome data on finance, benefit and debt should be agreed and monitored to establish the extent of prisoner need, and there should be appropriate support to address identified issues. (4.49, repeated recommendation 9.39)

- 5.84** Family visits should be available to prisoners regardless of their incentives and earned privileges status. (4.55, repeated recommendation 9.62)
- 5.85** The prison should provide a full range of accredited programmes to meet the offending behaviour needs of the population. (4.60, repeated recommendation 9.69)
- 5.86** Prisoners who need offending behaviour programmes and appropriate work not provided at Haverigg should be transferred to an establishment where such work is available as soon as is practicable. (4.61)

## Housekeeping points

### Early days in custody

- 5.87** New arrivals should be able to take a shower on their first night. (1.15)

### Self-harm and suicide

- 5.88** Attendance at ACCT reviews should be improved. (1.36)

### Security

- 5.89** Security objectives should be better communicated to all staff. (1.49)
- 5.90** Closed visits reviews should only recommend ongoing application when there is further intelligence to support their use. (1.50)

### Substance misuse

- 5.91** The substance misuse service should develop regular service user feedback to inform future developments, including peer support. (1.83)

### Residential units

- 5.92** All residential areas should be clean and well maintained. (2.19, repeated recommendation 2.3)
- 5.93** Up-to-date notices should be displayed and in formats suitable for the prison's population. (2.20, repeated recommendation 2.8)

### Equality and diversity

- 5.94** Attendance at the equality meeting should be improved. (2.39)
- 5.95** Information on equality and diversity should be provided to all new arrivals. (2.40)
- 5.96** The prison should display positive gay and bisexual images across the establishment, as well as information about sources of support and help. (2.49)

### Legal rights

- 5.97** New arrivals should be informed during induction of how to obtain legal services, and access to legal telephone calls should be unrestricted. (2.62)

### Health services

- 5.98** There should be frequent and regular clinical audit of medical records. (2.80)
- 5.99** Information on how to access health care should always be displayed on the wings. (2.86)
- 5.100** The findings and recommendations from the pharmacy visits should be provided in a report. (2.95)
- 5.101** The administration of supervised medication should be at times that ensure that patients get the best treatment possible. (2.96)
- 5.102** There should be additional storage space in the health care treatment room to allow the safe storage of named patient medication. (2.97)
- 5.103** There should be sufficient confidential rooms for psychological therapies. (2.105)

### Catering

- 5.104** Food should only be served with the correct utensils. (2.116)

### Purchases

- 5.105** Prisoners should not be charged an administration fee for catalogue orders. (2.122)

### Learning and skills and work activities

- 5.106** The worn and old tools in the painting and decorating workshop should be replaced. (3.35)

### Offender management and planning

- 5.107** Indeterminate sentence prisoner forums should be provided regularly and meet the information needs of prisoners. (4.31)

### Reintegration planning

- 5.108** All pathway providers should record work with prisoners on P-Nomis. (4.36)

## Example of good practice

- 5.109** The number of uniformed officers trained in mental health awareness was commendable as it increased the potential for identification and referral of prisoners who were vulnerable because of mental health problems. (2.106)

## Section 6. Appendices

### Appendix I: Inspection team

Nick Hardwick	Chief inspector
Kieron Taylor	Team leader
Andy Lund	Inspector
Keith McInnis	Inspector
Kellie Reeve	Inspector
Gordon Riach	Inspector
Ewan Kennedy	Research officer
Alissa Redmond	Research officer
Lucy Higgins	Research trainee

#### **Specialist inspectors**

Sigrid Engelen	Substance misuse inspector
Paul Roberts	Health services inspector
Elizabeth Wands-Murray	Care Quality Commission
Helen Jackson	Pharmacist
Julia Horsman	Ofsted inspector
Bob Cowdrey	Ofsted inspector
John Grimmer	Ofsted inspector
Steve Hailstone	Ofsted inspector
Paddy Doyle	Offender management inspector
Ian Simpkin	Offender management inspector
Iolo Madoc-Jones	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 March 2011, transfer arrangements and reception procedures were generally satisfactory although long. First night accommodation was in a poor condition and many prisoners felt unsafe on their first night. There had been some improvement in the approach to violence reduction, and prisoners with vulnerabilities were now better cared for, but we were not assured that the prison was fully sighted on all safety issues. Prisoners reported feeling less safe compared with similar prisons and our last inspection on a range of indicators. Suicide and self-harm procedures were reasonably good. Fewer prisoners were segregated than at our last visit but use of the unit remained high, including for those seeking protection. Use of force was relatively low but its governance was underdeveloped. Special accommodation in the segregation unit was not fit for purpose. The application of security was generally proportionate. Substance abuse had reduced but remained a significant challenge. Integrated drug treatment system arrangements required improvement. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

#### **Main recommendations**

The number of prisoners in the segregation unit should be reduced further, and the quality of regime and environment should be improved. (HP54)

**Not achieved** (main recommendation repeated, S46)

Managers should ensure improved working arrangements between security, safer custody, health care and residential staff to ensure they effectively record, monitor, investigate and deal with all matters relating to prisoner safety. (HP53)

**Partially achieved**

#### **Recommendations**

Prisoners transferred to HMP Haverigg should be offered sufficient toilet breaks. (1.1)

**Partially achieved**

Reception should remain fully open over the lunch period. (1.2)

**Not achieved**

Reception staff should be able to supervise prisoners in the holding rooms effectively. (1.4)

**Not achieved**

New arrivals should have regular access to Listeners on the first night unit. (1.9)

**Not achieved**

All new arrivals should be offered a shower and free telephone call. (1.10)

**Not achieved**

Induction compacts should be quality assured to ensure that prisoners have been seen by all relevant departments during induction. (1.18)

**Not achieved**

Induction and first night information should be available in a range of appropriate languages. (1.20)

**Partially achieved**

Prisoners should be unlocked when they are not actively involved in induction sessions. (1.23)

**Not achieved**

Prisoner requests to see Listeners should be dealt with quickly. (3.29)

**Achieved**

All prisoners on ACCTs should be provided with sufficient occupation, regardless of their location. (3.35)

**Partially achieved**

Staff should be trained in the revised violence reduction and anti-bullying strategy. (3.2)

**Not achieved**

The safer custody team should coordinate investigations into suspected incidents and be given the necessary information to maintain the tackling antisocial behaviour (TAB) register accurately. (3.6)

**Not achieved** (recommendation repeated 1.25)

Managers should ensure that monitoring entries in tackling antisocial behaviour (TAB) documents evidence staff engagement and support. (3.8)

**Not achieved**

There should be interventions for persistent bullies and victims of bullying. (3.9)

**Not achieved**

Relevant key information in wing observation books should be reflected in wing history files. (3.11)

**Achieved**

All staff should be actively involved in monitoring and addressing violence and bullying, and the TAB strategy should be understood and vigorously applied. (3.15)

**Not achieved** (recommendation repeated 1.26)

Work supervisors should routinely contribute to incentives and earned privileges (IEP) reviews. (7.42)

**Not achieved**

Personal officers should work with basic prisoners to help them modify their behaviour, and this should be evidenced in wing history files. (7.43)

**Partially achieved**

Wing history files should accurately reflect the behaviour of individual prisoners and ensure that they are appropriately dealt with under the IEP scheme. (7.44)

**Partially achieved**

Prisoners should not be downgraded from enhanced to basic as a result of a single incident. (7.49)

**Not achieved**

The regime for prisoners on the basic level should be improved, and the IEP policy should clarify progression through this level. (7.50)

**Not achieved** (recommendation repeated 1.58)

The security department should be adequately resourced to carry out all its functions, particularly intelligence-led searches. (7.3)

**Not achieved**

Identified staff should be trained as intelligence analysts and undertake appropriate analysis of security information. (7.4)

**Achieved**

Prisoners should only be placed on and remain on closed visits when there is sufficient specific intelligence to support this. (7.8)

**Partially achieved**

Strip searching of prisoners after visits should be intelligence-led or based on specific suspicion. (7.9)

**Not achieved**

Records of adjudications should always show that charges have been sufficiently investigated. (7.10)

**Not achieved**

Minor infringements of prison rules should be dealt with through less formal procedures. (7.12)

**Not achieved**

Governance of the use of force, including use of special accommodation, should be improved. (7.18)

**Not achieved**

All planned control and restraint interventions should be video recorded and subsequently reviewed. (7.19)

**Not achieved**

Any use of a baton should be robustly investigated to give assurance that its use is appropriate and proportionate. (7.20)

**Not achieved**

The special accommodation is unfit for purpose and should be decommissioned. (7.21)

**Achieved**

There should be reintegration planning to ensure prisoners in the segregation unit can return quickly to the main prison. (7.22)

**Not achieved**

Sufficient staff should be selected to work in the separation and care unit to allow consistent cover, and all should receive appropriate training. (7.24)

**Not achieved**

The segregation unit regime should be developed and include purposeful activity. (7.25)

**Not achieved**

The regime for prisoners on the basic privilege level who are located in the separation and care unit should be improved. (7.26)

**Achieved**

All prisoners in the segregation unit should have access to showers and exercise every day. (7.27)

**Achieved**

The communal shower and toilet in the separation and care unit should be refurbished and kept clean. (7.28)

**Achieved**

Unlocking arrangements for prisoners in the separation and care unit should be subject to an individual risk assessment. (7.29)

**Achieved**

Prisoners located in the separation and care unit should only be strip-searched where a risk assessment suggests this is appropriate. (7.34)

**Not achieved**

Documentation to authorise segregation should be completed thoroughly and contain individualised behaviour improvement targets, and prisoners should be given a copy. (7.35)

**Not achieved**

There should be care plans for longer term residents of the separation and care unit designed to encourage reintegration to prevent psychological deterioration. (7.36)

**Not achieved**

Data on segregation should be gathered and analysed for patterns and trends, and used to inform a segregation monitoring and review group which should take appropriate action on any concerns highlighted. (7.37)

**Not achieved**

Mandatory (MDT) and voluntary (VDT) drug testing suites should be separated, with separate equipment, and the MDT holding cells refurbished. (3.65)

**Achieved**

The MDT programme should undertake the required level of random and target testing. (3.69)

**Not achieved**

Medication should be administered in a safe and suitable environment. (3.54)

**Partially achieved**

Joint working between the mental health, the IDTS and the CARAT service should be formalised to facilitate the care coordination of dual diagnosis prisoners. (3.57)

**Not achieved**

The establishment should ensure that under the IDTS, the GP and nurses work jointly, and that the lack of integration between clinical IDTS and CARAT services is addressed. (3.61)

**Achieved**

Prescribing regimes for opiate-dependent prisoners should be flexible, based on individual need and adhere to national guidance. (3.62)

**Partially achieved**

Individual care plans and reviews should be developed which demonstrate patient involvement. (3.63)

**Achieved**

The prison should introduce a structured alcohol programme that addresses alcohol-related offending. (9.43)

**Not achieved** (repeated recommendation 1.85)

## Respect

### Prisoners are treated with respect for their human dignity.

*At the last inspection, in March 2011, the quality of accommodation, standard of basic amenities and cleanliness varied greatly across the units and were too often poor. Staff-prisoner relationships were similarly mixed. There were reasonable levels of respect but prisoners were ambivalent about staff. The personal officer scheme was adequate. Prisoners were negative about the quality of the food, and the standards of cleanliness in the kitchen, dining halls and serveries were poor. Outcomes for black and minority ethnic prisoners were reasonable but support for other strands of diversity was underdeveloped. The lack of structured support and the limited services for the increased number of foreign national prisoners was a particular concern. The prison had an engaged chaplaincy. Applications and complaints arrangements were adequate. The provision of health care showed improvement. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendations

The Fairfield unit is inherently unfit and unsafe for its present purpose and should be demolished. (HP55)

**No longer relevant**

The prison should put in place a clear strategy based on a needs analysis intended to promote and improve outcomes for prisoners across all the various strands of diversity. (HP56)

**Not achieved**

There should be a multidisciplinary foreign national prisoner committee and a dedicated foreign national coordinator with adequate facility time, supported by the foreign national clerk. (HP57)

**No longer relevant**

All areas used to prepare, cook or serve food should be clean and well maintained. (HP58)

**Not achieved** (repeated recommendation 2.115)

### Recommendations

Living conditions on Blencathra and Fairfield units should be improved. (2.1)

**Partially achieved**

All residential units should be clean and well maintained. (2.3)

**Not achieved** (repeated as housekeeping point 2.19)

All toilets in cells should be adequately screened. (2.4)

**Not achieved**

All association rooms and communal areas on billets should be clean and well maintained, and damaged equipment and furniture should be replaced. (2.6)

**Not achieved**

All cells should have call bells, and these should be answered within five minutes. (2.7)

**Not achieved** (repeated recommendation 2.13)

Up-to-date notices should be displayed and in formats suitable for the prison's population. (2.8)

**Partially achieved** (repeated as housekeeping point 2.20)

There should be a clear policy prohibiting offensive displays that should be applied consistently. (2.9)

**Not achieved** (repeated recommendation 2.14)

There should be additional telephones on Blencathra, Fairfield, Skiddaw and Langdale, based on an acceptable ratio of one telephone to 20 prisoners. (2.10)

**Not achieved**

Double cells should be equipped with lockable cupboards. (2.16)

**Not achieved**

There should be facilities to allow prisoners to wash their own clothes. (2.17)

**Not achieved** (repeated recommendation 2.16)

Prisoners should have regular timely access to stored property. (2.19)

**Achieved**

All prisoners should have weekly access to suitable cell cleaning materials. (2.21)

**Achieved**

Managers should ensure that personal officer entries in case notes are made regularly and consistently reflect engagement and knowledge of prisoners in their care. (2.29)

**Achieved**

Details about applications and complaints should be publicised in a range of languages. (3.36)

**Not achieved**

Access to application and complaint forms should be improved on Fairfield and Blencathra units. (3.37)

**Achieved**

There should be arrangements to enable wing staff to chase up applications not responded to within three working days, and the date of response should be routinely recorded. (3.38)

**Not achieved** (repeated recommendation 2.17)

Staff should adequately supervise prisoners on residential units and in association rooms. (2.22)

**Partially achieved**

Staff should refer to prisoners by their preferred names or titles. (2.26)

**Partially achieved**

Managers should ensure improvement in the quality of staff entries in prisoners' personal files. (2.27)

**Achieved**

All replies to complaints should adequately address the issues raised by prisoners and use the prisoner's preferred name. (3.43)

**Not achieved** (repeated recommendation 2.57)

The governor should carry out quality assurance checks of replies to complaints every month. (3.44)

**Not achieved**

Complaints against staff should always be thoroughly investigated and the reply quality checked by the governor. (3.45)

**Achieved**

Appropriately trained legal service staff should be appointed as soon as possible. (3.46)

**Not achieved**

The prison should investigate why black and minority ethnic and foreign national prisoners have more negative perceptions than white prisoners about access to a religious leader in private, and respond accordingly to any significant findings. (3.53)

**Achieved**

The diversity manager should be supported by designated liaison officers for each of the diversity strands, with adequate facility time to carry out this work. (4.1)

**Not achieved**

There should be regular monitoring of prisoners from minority groups to ensure they have equitable access to amenities and activities. (4.3)

**Not achieved**

The prison should include Travellers as part of the overarching diversity policy. (4.6)

**Not achieved**

There should be detailed analysis of ethnic monitoring to determine patterns and trends. This information should be accessible and clear to all prisoners and staff. (4.7)

**Not achieved**

There should be adequately resourced arrangements to cover and support the role of the race equality officer. (4.8)

**Not achieved** (repeated recommendation repeated 2.36)

All race equality action team members and prisoners' representatives should attend the required training. (4.9)

**Not achieved**

All staff should be trained and receive regular refresher training in race equality. (4.15)

**Not achieved**

Racist incident report forms and information about them should be freely available to prisoners in a range of languages. (4.20)

**Not achieved**

There should be appropriate interventions for prisoners who demonstrate racist behaviour. (4.23)

**Not achieved**

An external body should check racist incident report forms every month. (4.26)

**Not achieved**

There should be an annual race equality survey and regular consultation with black and minority ethnic prisoners to inform and develop the race equality action plan and policy. (4.27)

**Not achieved**

There should be a foreign national strategy based on an up-to-date analysis of the needs of foreign national prisoners and including a time-bound action plan, and prescribing the involvement of all relevant departments and staff. (4.32)

**Not achieved**

Arrangements for free international telephone calls should accommodate foreign national prisoners from the day of their arrival. (4.33)

**Not achieved**

The foreign national policy should be reviewed and agreed actions should be fully adhered to. (4.39)

**Not achieved**

Foreign national prisoners should be held on all wings in the prison. (4.40)

**Achieved**

There should be a monthly foreign national prisoner forum. (4.41)

**Not achieved**

Foreign national prisoners who speak little or no English should be identified and measures to address their needs put in place. (4.42)

**Not achieved**

All new arrivals should be assessed to establish whether they have a disability, a care plan drawn up and assessments reviewed at least annually. (4.43)

**Not achieved**

All older prisoners and those with disabilities should be regularly consulted about their individual needs. (4.44)

**Not achieved**

Prisoners past the age of retirement should not have to pay for their television. (4.45)

**Achieved**

Written personal emergency and evacuation plans should be completed for prisoners who require them and should be readily available to staff. (4.50)

**Not achieved**

A dedicated disability liaison officer should be appointed. (4.51)

**Not achieved**

There should be annual needs analysis of prisoners with disabilities and older prisoners and a combined policy document formulated based on the findings. (4.52)

**Not achieved**

Gender and sexual orientation strands of diversity should be developed. (4.54)

**Not achieved**

Food comments books should be available for prisoners. (8.2)

**Achieved**

There should be meaningful consultation with prisoners about the catering, and their suggestions should be used to inform the provision of meals. (8.3)

**Achieved**

An adequate breakfast should be provided to prisoners in the morning. (8.4)

**Not achieved**

The brunch meal at weekends should be served no earlier than 12 noon and dinner no earlier than 5pm. (8.5)

**Not achieved**

Conditions in the two dining halls should be improved. (8.6)

**Achieved**

Containers to keep food warm should be provided to prisoners who wish to take their meals to their residential unit. (8.7)

**Not achieved**

The heated food trolleys should be kept clean. (8.8)

**Achieved**

Arrangements for the management and serving of food on Skiddaw should be improved. (8.13)

**Partially achieved**

New arrivals should be able to buy items from the prison shop within their first 24 hours. (8.15)

**Not achieved** (see recommendation 2.121)

The prison should explore and address the negative perceptions of black and minority ethnic prisoners about the range of items on the prison shop list. (8.17)

**Achieved**

Prisoners should not be charged an administrative fee for catalogue orders. (8.18)

**Not achieved**

There should be an annual prisoner survey on the prison shop. (8.21)

**Achieved**

There should be a full security assessment of the treatment rooms, including the storage arrangements for controlled drugs. (5.4)

**Achieved**

All staff should be trained to use the resuscitation equipment deployed at the prison. (5.6)

**Achieved**

Prisoners should have free telephone access to the PCT's complaints system. (5.14)

**Achieved**

The arrangements for GP services should be altered so that the same GP does not work every day. (5.23)

**Achieved**

Prisoners in labour band one should have appropriate occupational health checks and vaccinations. (5.25)

**Achieved**

Health services staff should follow up all prisoners who fail to attend for appointments. (5.29)

**Achieved**

In-possession medication risk assessments should be readily available to staff prescribing and administering medications. (5.45)

**Achieved**

Nurses should not dispense medicines other than in exceptional circumstances. (5.49)

**Partially achieved** (repeated recommendation 2.94)

Medication queues should be adequately supervised. (5.56)

**Achieved**

The pharmacist should carry out a clinical audit of abusable medication. (5.60)

**Achieved**

## Purposeful activity

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

*At the last inspection, in March 2011, the provision of learning and skills had improved significantly since our last inspection. There were broadly sufficient activity places to meet the needs of the population, although allocation and programming arrangements could be further developed. Vocational training and opportunities to acquire skills in workshops and other work areas were similarly good. Education and work induction arrangements met prisoner need, and access to education as well as the quality and range of provision were good. The library was a good resource. Access to recreational and accredited learning in PE was impressive. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Main recommendations

There should be better coordination of prisoner attendance at education and work to ensure better utilisation of activity places. (HP59)

**Partially achieved**

### Recommendations

Prisoners on Fairfield and Skiddaw not engaged in activity should be permitted domestic time out of cell each morning to shower and access other amenities. (6.4)

**Partially achieved**

Staff on Skiddaw should adhere to the published unlock routine. (6.5)

**Partially achieved**

There should be recognition of prisoners' improved employability and skill development in all workshops for prisoners not yet ready to participate in the available accredited qualifications. (6.17)

**Partially achieved**

The conditions in the sewing machine repair shop should be improved. (6.22)

**No longer relevant**

Learners in vocational training should have more opportunities to progress from level 1 qualifications to level 2. (6.28)

**Achieved**

Resource materials to support learning should be widened to ensure all individual learning needs are met. (6.31)

**Achieved**

The PE showers should be appropriately screened. (6.43)

**Not achieved**

The central fitness area should offer better accommodation with improved showering facilities and ventilation. (6.49)

**Achieved**

Prisoners on the basic regime should have the opportunity to attend recreational PE twice a week. (6.50)

**Achieved**

## Resettlement

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

*At the last inspection, in March 2011, there were strategies to address reducing reoffending, public protection and offender management, but there was no active plan for the increased and significant number of category D prisoners. Assessments of prisoners' resettlement need at induction and reviews before release were well managed and ensured necessary referrals and links to appropriate departments. The work of the offender management unit was reasonable, and work with high-risk and indeterminate-sentenced prisoners was generally good. Public protection arrangements were appropriate. Resettlement pathway work was reasonable, although there were few offending behaviour programmes and no use of release on temporary licence. Outcomes for prisoners were reasonably good against this healthy prison test.*

### **Main recommendations**

The category D steering group should be reconvened as soon as possible to develop a strategy for category D and provisional category D prisoners and ensure their effective management. (HP60)

**Not achieved**

### **Recommendations**

Progress against development objectives should be reviewed regularly. (9.3)

**Achieved**

All offender supervisors should be offered regular casework supervision, and offender management files should be subject to regular quality assurance checks. (9.8)

**Not achieved** (repeated recommendation 4.23)

There should be more opportunities for release on temporary licence. (9.13)

**Achieved**

Offender supervisors should have dedicated time in the offender management unit to ensure the continuity and consistency of provision. (9.17)

**Achieved**

Prisoners who have provisionally passed their category D board should be transferred as soon as possible. (9.18)

**Partially achieved**

Staff time for escorted visits for indeterminate-sentenced prisoners should be profiled to ensure that there is sufficient staff facility time to meet the needs of the lifer population. (9.22)

**Achieved**

There should be specific housing training for staff and prisoners involved in providing accommodation advice and support. (9.24)

**Partially achieved**

The housing support provision should be improved and include some specialist input. (9.27)

**Partially achieved**

The prison should survey prisoners to ascertain the level of concern about sharing personal information with peer advisers, and resulting recommendations should be taken forward through the resettlement pathway group. (9.28)

**Not achieved**

The prison should develop links with employers to inform course development and increase employment opportunities for prisoners on release. (9.34)

**Achieved**

Outcome data on finance, benefit and debt should be agreed and monitored to establish the extent of prisoner need, and there should be appropriate support to address identified issues. (9.39)

**Not achieved** (repeated recommendation 4.49)

There should be a money management programme. (9.40)

**Achieved**

Compliance and voluntary drug testing provision and compacts should be clearly differentiated (9.46).

**No longer relevant**

A drug strategy manager should be consistently available to implement and monitor the strategy (9.54)

**Achieved**

There should be a peer support scheme to offer additional support to prisoners who complete the P-ASRO programme (9.55)

**No longer relevant**

Prisoners should not have to wear bibs during visits. (9.59)

**Not achieved**

There should be a separate holding room for prisoners waiting to receive visits. (9.60)

**Not achieved**

A positive indication by a drug dog should only result in a closed visit where there is other supporting intelligence. (9.61)

**Not achieved**

Family visits should be available to prisoners regardless of their incentives and earned privileges status. (9.62)

**Not achieved** (repeated recommendation 4.55)

There should be more opportunities for access to visits to meet prisoner demand. (9.68)

**Achieved**

The prison should provide a full range of accredited programmes to meet the offending behaviour needs of the population. (9.69)

**Not achieved** (repeated recommendation 4.60)

## Appendix III: Prison population profile

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

Status	21 and over	%
Sentenced	594	93.0
Detainee	2	0.3
Recall	43	6.7
<b>Total</b>	<b>639</b>	<b>100</b>

Sentence	21 and over	%
Unsentenced	3	0.5
Less than 6 months	17	2.7
6 months to less than 12 months	26	4.1
12 months to less than 2 years	68	10.6
2 years to less than 4 years	208	32.6
4 years to less than 10 years	227	35.5
10 years and over (not life)	39	6.1
ISPP (indeterminate sentence for public protection)	19	3.0
Life	32	8.0
<b>Total</b>	<b>639</b>	<b>100</b>

Age	Number of prisoners	%
21 years to 29 years	257	40.2
30 years to 39 years	221	34.6
40 years to 49 years	107	16.7
50 years to 59 years	46	7.2
60 years to 69 years: <i>maximum age=66</i>	8	1.3
<b>Total</b>	<b>639</b>	<b>100</b>

Nationality	21 and over	%
British	622	97.3
Foreign nationals	17	2.7
<b>Total</b>	<b>639</b>	<b>100</b>

Security category	21 and over	%
Category C	610	95.5
Category D	29	4.5
<b>Total</b>	<b>639</b>	<b>100</b>

Ethnicity	21 and over	%
White		
British	544	85.1
Irish	6	0.9
Gypsy/Irish Traveller	1	0.2
Other white	5	0.8
	<b>556</b>	<b>87.0</b>
Mixed		
White and black Caribbean	10	1.6
White and black African	2	0.3

White and Asian	1	0.2
Other mixed	2	0.3
	<b>15</b>	<b>2.3</b>
Asian or Asian British		
Indian	6	0.9
Pakistani	23	3.6
Bangladeshi	4	0.6
Other Asian	9	1.4
	<b>42</b>	<b>6.6</b>
Black or black British		
Caribbean	11	1.7
African	1	0.2
Other black	5	0.8
	<b>17</b>	<b>2.7</b>
Other ethnic group	2	0.3
<b>Total</b>	<b>639</b>	<b>100</b>

<b>Religion</b>	<b>21 and over</b>	<b>%</b>
Church of England	141	22.1
Roman Catholic	198	31.0
Other Christian denominations	54	8.5
Muslim	53	8.3
Sikh	1	0.2
Jewish	3	0.5
Buddhist	12	1.9
No religion	170	26.6
<b>Total</b>	<b>639</b>	<b>100</b>

**Sentenced prisoners only**

<b>Length of stay</b>	<b>21 and over</b>	
	<b>Number</b>	<b>%</b>
Less than 1 month	93	14.6
1 month to 3 months	126	19.7
3 months to 6 months	164	25.7
6 months to 1 year	153	23.9
1 year to 2 years	82	12.8
2 years to 4 years	16	2.5
4 years or more	2	0.3
<b>Total</b>	<b>636</b>	<b>99.5</b>

**Unsentenced prisoners only**

<b>Length of stay</b>	<b>21 and over</b>	
	<b>Number</b>	<b>%</b>
1 month to 3 months	1	0.15
6 months to 1 year	2	0.3
<b>Total</b>	<b>3</b>	<b>0.5</b>

**Main offence – information not available**

## Appendix IV: Summary of prisoner questionnaires and interviews

### Prisoner survey methodology

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

### Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment<sup>8</sup>. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

### Distributing and collecting questionnaires

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

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

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

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

### Survey response

At the time of the survey on 6 January 2014 the prisoner population at HMP Haverigg was 642. Using the method described above, questionnaires were distributed to a sample of 198 prisoners.

We received a total of 157 completed questionnaires, a response rate of 79%. This included one questionnaire completed via interview. Eight respondents refused to complete a questionnaire, 22 questionnaires were not returned and 11 were returned blank.

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<sup>8</sup> 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
1A	17
1B	12
2	50
3	26
4	17
5	21
6	10
Segregation unit	4

### Presentation of survey results and analyses

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

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<sup>9</sup> differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Haverigg in 2014 compared with responses from prisoners surveyed in all other category C trainer prisons. This comparator is based on all responses from prisoner surveys carried out in 39 category C trainer prisons since April 2008.
- The current survey responses from HMP Haverigg in 2014 compared with the responses of prisoners surveyed at HMP Haverigg in 2011.
- A comparison within the 2014 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2014 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A best and worst wing analysis showing responses from residential units 1A, 2, 3, 4 and 5 in the 2014 survey.

<sup>9</sup> 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

<b>Q1.2</b>	<b>How old are you?</b>		
	<i>Under 21</i>		0 (0%)
	<i>21 - 29</i>		66 (42%)
	<i>30 - 39</i>		54 (35%)
	<i>40 - 49</i>		21 (13%)
	<i>50 - 59</i>		12 (8%)
	<i>60 - 69</i>		3 (2%)
	<i>70 and over</i>		0 (0%)
<b>Q1.3</b>	<b>Are you sentenced?</b>		
	<i>Yes</i>		140 (90%)
	<i>Yes - on recall</i>		14 (9%)
	<i>No - awaiting trial</i>		0 (0%)
	<i>No - awaiting sentence</i>		0 (0%)
	<i>No - awaiting deportation</i>		1 (1%)
<b>Q1.4</b>	<b>How long is your sentence?</b>		
	<i>Not sentenced</i>		1 (1%)
	<i>Less than 6 months</i>		3 (2%)
	<i>6 months to less than 1 year</i>		9 (6%)
	<i>1 year to less than 2 years</i>		19 (12%)
	<i>2 years to less than 4 years</i>		41 (27%)
	<i>4 years to less than 10 years</i>		63 (41%)
	<i>10 years or more</i>		11 (7%)
	<i>IPP (indeterminate sentence for public protection)</i>		1 (1%)
	<i>Life</i>		6 (4%)
<b>Q1.5</b>	<b>Are you a foreign national? (i.e. do not have UK citizenship.)</b>		
	<i>Yes</i>		8 (5%)
	<i>No</i>		147 (95%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>		
	<i>Yes</i>		155 (100%)
	<i>No</i>		0 (0%)
<b>Q1.7</b>	<b>Do you understand written English?</b>		
	<i>Yes</i>		155 (100%)
	<i>No</i>		0 (0%)
<b>Q1.8</b>	<b>What is your ethnic origin?</b>		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	131 (84%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	4 (3%)	<i>Asian or Asian British - other</i> 2 (1%)
	<i>White - other</i>	2 (1%)	<i>Mixed race - white and black Caribbean</i> 4 (3%)
	<i>Black or black British - Caribbean</i>	0 (0%)	<i>Mixed race - white and black African</i> 2 (1%)
	<i>Black or black British - African</i>	0 (0%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	0 (0%)	<i>Mixed race - other</i> 0 (0%)
	<i>Asian or Asian British - Indian</i>	0 (0%)	<i>Arab</i> 1 (1%)

<i>Asian or Asian British - Pakistani</i>	6 (4%)	<i>Other ethnic group</i>	2 (1%)
<i>Asian or Asian British - Bangladeshi</i>	1 (1%)		

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

Yes	7 (5%)
No	146 (95%)

**Q1.10 What is your religion?**

<i>None</i>	49 (32%)	<i>Hindu</i>	0 (0%)
<i>Church of England</i>	40 (26%)	<i>Jewish</i>	0 (0%)
<i>Catholic</i>	46 (30%)	<i>Muslim</i>	10 (6%)
<i>Protestant</i>	4 (3%)	<i>Sikh</i>	0 (0%)
<i>Other Christian denomination</i>	2 (1%)	<i>Other</i>	3 (2%)
<i>Buddhist</i>	1 (1%)		

**Q1.11 How would you describe your sexual orientation?**

<i>Heterosexual/ Straight</i>	154 (99%)
<i>Homosexual/Gay</i>	0 (0%)
<i>Bisexual</i>	2 (1%)

**Q1.12 Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs.)**

Yes	23 (15%)
No	133 (85%)

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

Yes	10 (6%)
No	146 (94%)

**Q1.14 Is this your first time in prison?**

Yes	54 (35%)
No	102 (65%)

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

Yes	86 (55%)
No	71 (45%)

**Section 2: Courts, transfers and escorts****Q2.1 On your most recent journey here, how long did you spend in the van?**

<i>Less than 2 hours</i>	19 (12%)
<i>2 hours or longer</i>	135 (86%)
<i>Don't remember</i>	3 (2%)

**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>	19 (12%)
Yes	101 (65%)
No	32 (21%)
<i>Don't remember</i>	4 (3%)

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

<i>My journey was less than two hours</i>	19 (12%)
Yes	6 (4%)
No	127 (81%)
<i>Don't remember</i>	5 (3%)

<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>		
	Yes		93 (59%)
	No		54 (34%)
	Don't remember		10 (6%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>		
	Yes		129 (82%)
	No		27 (17%)
	Don't remember		1 (1%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>		
	Very well		34 (22%)
	Well		72 (46%)
	Neither		35 (22%)
	Badly		5 (3%)
	Very badly		7 (4%)
	Don't remember		4 (3%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (please tick all that apply to you.)</b>		
	Yes, someone told me		91 (58%)
	Yes, I received written information		25 (16%)
	No, I was not told anything		41 (26%)
	Don't remember		1 (1%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>		
	Yes		141 (91%)
	No		12 (8%)
	Don't remember		2 (1%)

### Section 3: Reception, first night and induction

<b>Q3.1</b>	<b>How long were you in reception?</b>			
	Less than 2 hours		90 (57%)	
	2 hours or longer		59 (38%)	
	Don't remember		8 (5%)	
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>			
	Yes		136 (88%)	
	No		11 (7%)	
	Don't remember		7 (5%)	
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>			
	Very well		47 (30%)	
	Well		83 (54%)	
	Neither		11 (7%)	
	Badly		8 (5%)	
	Very badly		4 (3%)	
	Don't remember		2 (1%)	
<b>Q3.4</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>			
	Loss of property	25 (16%)	Physical health	14 (9%)
	Housing problems	19 (12%)	Mental health	19 (12%)
	Contacting employers	3 (2%)	Needing protection from other prisoners	5 (3%)

<i>Contacting family</i>	22 (14%)	<i>Getting phone numbers</i>	12 (8%)
<i>Childcare</i>	1 (1%)	<i>Other</i>	5 (3%)
<i>Money worries</i>	17 (11%)	<i>Did not have any problems</i>	74 (48%)
<i>Feeling depressed or suicidal</i>	15 (10%)		

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

<i>Yes</i>	24 (16%)
<i>No</i>	54 (36%)
<i>Did not have any problems</i>	74 (49%)

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

<i>Tobacco</i>	135 (87%)
<i>A shower</i>	39 (25%)
<i>A free telephone call</i>	45 (29%)
<i>Something to eat</i>	67 (43%)
<i>PIN phone credit</i>	90 (58%)
<i>Toiletries/ basic items</i>	99 (63%)
<i>Did not receive anything</i>	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.)**

<i>Chaplain</i>	60 (40%)
<i>Someone from health services</i>	109 (72%)
<i>A Listener/Samaritans</i>	38 (25%)
<i>Prison shop/ canteen</i>	24 (16%)
<i>Did not have access to any of these</i>	27 (18%)

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

<i>What was going to happen to you</i>	77 (51%)
<i>What support was available for people feeling depressed or suicidal</i>	51 (34%)
<i>How to make routine requests (applications)</i>	54 (36%)
<i>Your entitlement to visits</i>	42 (28%)
<i>Health services</i>	73 (49%)
<i>Chaplaincy</i>	63 (42%)
<i>Not offered any information</i>	40 (27%)

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

<i>Yes</i>	123 (80%)
<i>No</i>	24 (16%)
<i>Don't remember</i>	7 (5%)

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

<i>Have not been on an induction course</i>	10 (6%)
<i>Within the first week</i>	78 (51%)
<i>More than a week</i>	56 (36%)
<i>Don't remember</i>	10 (6%)

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

<i>Have not been on an induction course</i>	10 (7%)
<i>Yes</i>	73 (48%)
<i>No</i>	56 (37%)
<i>Don't remember</i>	13 (9%)

<b>Q3.12</b>	<b>How soon after you arrived here did you receive an education ('skills for life') assessment?</b>	
	<i>Did not receive an assessment</i>	24 (16%)
	<i>Within the first week</i>	41 (27%)
	<i>More than a week</i>	71 (47%)
	<i>Don't remember</i>	16 (11%)

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

<b>Q4.1</b>	<b>How easy is it to.....</b>						
		Very easy	Easy	Neither	Difficult	Very difficult	N/A
	<i>Communicate with your solicitor or legal representative?</i>	17 (12%)	32 (22%)	25 (17%)	27 (18%)	20 (14%)	26 (18%)
	<i>Attend legal visits?</i>	21 (15%)	34 (25%)	18 (13%)	12 (9%)	10 (7%)	43 (31%)
	<i>Get bail information?</i>	8 (6%)	13 (10%)	12 (9%)	9 (7%)	13 (10%)	73 (57%)
<b>Q4.2</b>	<b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b>						
	<i>Not had any letters</i>					33 (22%)	
	<i>Yes</i>					55 (37%)	
	<i>No</i>					62 (41%)	
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>						
	<i>Yes</i>					74 (49%)	
	<i>No</i>					5 (3%)	
	<i>Don't know</i>					71 (47%)	
<b>Q4.4</b>	<b>Please answer the following questions about the wing/unit you are currently living on:</b>						
		Yes	No	Don't know			
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	105 (70%)	43 (29%)	1 (1%)			
	<i>Are you normally able to have a shower every day?</i>	140 (93%)	10 (7%)	1 (1%)			
	<i>Do you normally receive clean sheets every week?</i>	124 (83%)	24 (16%)	2 (1%)			
	<i>Do you normally get cell cleaning materials every week?</i>	83 (55%)	63 (42%)	5 (3%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	34 (24%)	71 (51%)	35 (25%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	107 (71%)	42 (28%)	2 (1%)			
	<i>If you need to, can you normally get your stored property?</i>	31 (21%)	86 (57%)	34 (23%)			
<b>Q4.5</b>	<b>What is the food like here?</b>						
	<i>Very good</i>					1 (1%)	
	<i>Good</i>					29 (19%)	
	<i>Neither</i>					32 (21%)	
	<i>Bad</i>					52 (34%)	
	<i>Very bad</i>					38 (25%)	
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>						
	<i>Have not bought anything yet/ don't know</i>					1 (1%)	
	<i>Yes</i>					65 (43%)	
	<i>No</i>					85 (56%)	
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>						
	<i>Yes</i>					69 (46%)	
	<i>No</i>					16 (11%)	
	<i>Don't know</i>					66 (44%)	

<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>	
	Yes	69 (45%)
	No	10 (7%)
	Don't know/ N/A	73 (48%)
<b>Q4.9</b>	<b>Are you able to speak to a chaplain of your faith in private if you want to?</b>	
	Yes	71 (47%)
	No	10 (7%)
	Don't know/ N/A	70 (46%)
<b>Q4.10</b>	<b>How easy or difficult is it for you to attend religious services?</b>	
	<i>I don't want to attend</i>	46 (31%)
	Very easy	30 (20%)
	Easy	37 (25%)
	Neither	6 (4%)
	Difficult	5 (3%)
	Very difficult	2 (1%)
	Don't know	24 (16%)

### Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>	
	Yes	126 (86%)
	No	14 (10%)
	Don't know	7 (5%)
<b>Q5.2</b>	<b>Please answer the following questions about applications (<i>If you have not made an application please tick the 'not made one' option.</i>)</b>	
		Not made one    Yes    No
	Are applications dealt with fairly?	14 (10%)    72 (51%)    55 (39%)
	Are applications dealt with quickly (within seven days)?	14 (10%)    50 (37%)    72 (53%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>	
	Yes	79 (55%)
	No	23 (16%)
	Don't know	42 (29%)
<b>Q5.4</b>	<b>Please answer the following questions about complaints (<i>If you have not made a complaint please tick the 'not made one' option.</i>)</b>	
		Not made one    Yes    No
	Are complaints dealt with fairly?	67 (46%)    22 (15%)    57 (39%)
	Are complaints dealt with quickly (within seven days)?	67 (48%)    22 (16%)    52 (37%)
<b>Q5.5</b>	<b>Have you ever been prevented from making a complaint when you wanted to?</b>	
	Yes	30 (21%)
	No	111 (79%)
<b>Q5.6</b>	<b>How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?</b>	
	<i>Don't know who they are</i>	50 (35%)
	Very easy	13 (9%)
	Easy	17 (12%)
	Neither	26 (18%)
	Difficult	22 (15%)
	Very difficult	15 (10%)

### Section 6: Incentive and earned privileges scheme

<b>Q6.1</b>	<b>Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels).</b>	
	<i>Don't know what the IEP scheme is</i>	2 (1%)
	Yes	82 (54%)
	No	46 (30%)
	<i>Don't know</i>	21 (14%)
<b>Q6.2</b>	<b>Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels).</b>	
	<i>Don't know what the IEP scheme is</i>	2 (1%)
	Yes	80 (54%)
	No	50 (34%)
	<i>Don't know</i>	15 (10%)
<b>Q6.3</b>	<b>In the last six months have any members of staff physically restrained you (C&amp;R)?</b>	
	Yes	9 (6%)
	No	141 (94%)
<b>Q6.4</b>	<b>If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?</b>	
	<i>I have not been to segregation in the last 6 months</i>	121 (83%)
	Very well	4 (3%)
	Well	7 (5%)
	Neither	5 (3%)
	Badly	6 (4%)
	Very badly	2 (1%)

### Section 7: Relationships with staff

<b>Q7.1</b>	<b>Do most staff treat you with respect?</b>	
	Yes	123 (84%)
	No	24 (16%)
<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	Yes	99 (67%)
	No	49 (33%)
<b>Q7.3</b>	<b>Has a member of staff checked on you personally in the last week to see how you are getting on?</b>	
	Yes	33 (22%)
	No	115 (78%)
<b>Q7.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<i>Do not go on association</i>	7 (5%)
	Never	52 (35%)
	Rarely	38 (25%)
	Some of the time	33 (22%)
	Most of the time	12 (8%)
	All of the time	8 (5%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i>	70 (47%)
	<i>In the first week</i>	28 (19%)

<i>More than a week</i>	32 (21%)
<i>Don't remember</i>	20 (13%)

**Q7.6 How helpful is your personal (named) officer?**

<i>Do not have a personal officer/ I have not met him/ her</i>	70 (48%)
<i>Very helpful</i>	24 (17%)
<i>Helpful</i>	28 (19%)
<i>Neither</i>	11 (8%)
<i>Not very helpful</i>	7 (5%)
<i>Not at all helpful</i>	5 (3%)

**Section 8: Safety****Q8.1 Have you ever felt unsafe here?**

<i>Yes</i>	46 (31%)
<i>No</i>	103 (69%)

**Q8.2 Do you feel unsafe now?**

<i>Yes</i>	12 (8%)
<i>No</i>	134 (92%)

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

<i>Never felt unsafe</i>	103 (73%)	<i>At meal times</i>	10 (7%)
<i>Everywhere</i>	15 (11%)	<i>At health services</i>	6 (4%)
<i>Segregation unit</i>	3 (2%)	<i>Visits area</i>	3 (2%)
<i>Association areas</i>	20 (14%)	<i>In wing showers</i>	11 (8%)
<i>Reception area</i>	4 (3%)	<i>In gym showers</i>	5 (4%)
<i>At the gym</i>	8 (6%)	<i>In corridors/stairwells</i>	10 (7%)
<i>In an exercise yard</i>	14 (10%)	<i>On your landing/wing</i>	16 (11%)
<i>At work</i>	9 (6%)	<i>In your cell</i>	10 (7%)
<i>During movement</i>	18 (13%)	<i>At religious services</i>	4 (3%)
<i>At education</i>	5 (4%)		

**Q8.4 Have you been victimised by other prisoners here?**

<i>Yes</i>	30 (20%)
<i>No</i>	117 (80%)

**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>	13 (9%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	8 (5%)
<i>Sexual abuse</i>	1 (1%)
<i>Feeling threatened or intimidated</i>	18 (12%)
<i>Having your canteen/property taken</i>	6 (4%)
<i>Medication</i>	3 (2%)
<i>Debt</i>	4 (3%)
<i>Drugs</i>	4 (3%)
<i>Your race or ethnic origin</i>	6 (4%)
<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>	7 (5%)
<i>You are from a traveller community</i>	1 (1%)
<i>Your sexual orientation</i>	0 (0%)
<i>Your age</i>	3 (2%)
<i>You have a disability</i>	1 (1%)
<i>You were new here</i>	7 (5%)
<i>Your offence/ crime</i>	1 (1%)

	<i>Gang related issues</i>	7 (5%)
<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>	
	Yes	42 (29%)
	No	104 (71%)
<b>Q8.7</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i>	16 (11%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	5 (3%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	9 (6%)
	<i>Medication</i>	6 (4%)
	<i>Debt</i>	1 (1%)
	<i>Drugs</i>	1 (1%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	2 (1%)
	<i>Your nationality</i>	1 (1%)
	<i>You are from a different part of the country than others</i>	4 (3%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	2 (1%)
	<i>You have a disability</i>	0 (0%)
	<i>You were new here</i>	2 (1%)
	<i>Your offence/ crime</i>	0 (0%)
	<i>Gang related issues</i>	4 (3%)
<b>Q8.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	<i>Not been victimised</i>	95 (70%)
	Yes	16 (12%)
	No	25 (18%)

### Section 9: Health services

<b>Q9.1</b>	<b>How easy or difficult is it to see the following people?:</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	13 (9%)	5 (3%)	36 (24%)	16 (11%)	54 (36%)	25 (17%)
	The nurse	10 (7%)	20 (14%)	52 (36%)	18 (13%)	31 (22%)	12 (8%)
	The dentist	17 (12%)	0 (0%)	11 (8%)	7 (5%)	31 (22%)	76 (54%)
<b>Q9.2</b>	<b>What do you think of the quality of the health service from the following people?:</b>						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	14 (9%)	16 (11%)	30 (20%)	27 (18%)	28 (19%)	34 (23%)
	The nurse	9 (6%)	20 (14%)	46 (32%)	37 (25%)	17 (12%)	17 (12%)
	The dentist	42 (29%)	10 (7%)	23 (16%)	20 (14%)	16 (11%)	32 (22%)
<b>Q9.3</b>	<b>What do you think of the overall quality of the health services here?</b>						
	<i>Not been</i>					6 (4%)	
	<i>Very good</i>					12 (8%)	
	<i>Good</i>					33 (23%)	
	<i>Neither</i>					29 (20%)	
	<i>Bad</i>					33 (23%)	
	<i>Very bad</i>					31 (22%)	
<b>Q9.4</b>	<b>Are you currently taking medication?</b>						
	Yes					58 (39%)	
	No					91 (61%)	

<b>Q9.5</b>	<b>If you are taking medication, are you allowed to keep some/ all of it in your own cell?</b>	
	<i>Not taking medication</i>	91 (61%)
	<i>Yes, all my meds</i>	35 (23%)
	<i>Yes, some of my meds</i>	19 (13%)
	<i>No</i>	5 (3%)
<b>Q9.6</b>	<b>Do you have any emotional or mental health problems?</b>	
	<i>Yes</i>	43 (29%)
	<i>No</i>	106 (71%)
<b>Q9.7</b>	<b>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)</b>	
	<i>Do not have any emotional or mental health problems</i>	106 (72%)
	<i>Yes</i>	21 (14%)
	<i>No</i>	20 (14%)

### Section 10: Drugs and alcohol

<b>Q10.1</b>	<b>Did you have a problem with drugs when you came into this prison?</b>	
	<i>Yes</i>	38 (26%)
	<i>No</i>	111 (74%)
<b>Q10.2</b>	<b>Did you have a problem with alcohol when you came into this prison?</b>	
	<i>Yes</i>	19 (13%)
	<i>No</i>	130 (87%)
<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	<i>Very easy</i>	39 (27%)
	<i>Easy</i>	26 (18%)
	<i>Neither</i>	12 (8%)
	<i>Difficult</i>	4 (3%)
	<i>Very difficult</i>	6 (4%)
	<i>Don't know</i>	60 (41%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	<i>Very easy</i>	18 (12%)
	<i>Easy</i>	28 (19%)
	<i>Neither</i>	12 (8%)
	<i>Difficult</i>	10 (7%)
	<i>Very difficult</i>	12 (8%)
	<i>Don't know</i>	67 (46%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	<i>Yes</i>	14 (10%)
	<i>No</i>	133 (90%)
<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	<i>Yes</i>	10 (7%)
	<i>No</i>	138 (93%)
<b>Q10.7</b>	<b>Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?</b>	
	<i>Did not / do not have a drug problem</i>	100 (70%)
	<i>Yes</i>	23 (16%)
	<i>No</i>	20 (14%)

<b>Q10.8</b>	<b>Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?</b>	
	<i>Did not / do not have an alcohol problem</i>	130 (88%)
	Yes	7 (5%)
	No	11 (7%)
<b>Q10.9</b>	<b>Was the support or help you received, while in this prison, helpful?</b>	
	<i>Did not have a problem/ did not receive help</i>	114 (79%)
	Yes	22 (15%)
	No	8 (6%)

### Section II: Activities

<b>Q11.1</b>	<b>How easy or difficult is it to get into the following activities, in this prison?</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	10 (7%)	24 (16%)	44 (30%)	27 (18%)	27 (18%)	15 (10%)
	Vocational or skills training	19 (13%)	19 (13%)	50 (35%)	22 (15%)	19 (13%)	13 (9%)
	Education (including basic skills)	14 (10%)	24 (17%)	61 (42%)	20 (14%)	14 (10%)	12 (8%)
	Offending behaviour programmes	30 (21%)	9 (6%)	33 (23%)	21 (14%)	22 (15%)	31 (21%)
<b>Q11.2</b>	<b>Are you currently involved in the following? (Please tick all that apply to you.)</b>						
	<i>Not involved in any of these</i>						35 (24%)
	Prison job						90 (62%)
	Vocational or skills training						29 (20%)
	Education (including basic skills)						30 (21%)
	Offending behaviour programmes						24 (16%)
<b>Q11.3</b>	<b>If you have been involved in any of the following, while in this prison, do you think they will help you on release?</b>						
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	Prison job	21 (15%)	47 (35%)	54 (40%)	14 (10%)		
	Vocational or skills training	26 (23%)	50 (43%)	26 (23%)	13 (11%)		
	Education (including basic skills)	24 (20%)	47 (40%)	34 (29%)	13 (11%)		
	Offending behaviour programmes	34 (28%)	46 (37%)	28 (23%)	15 (12%)		
<b>Q11.4</b>	<b>How often do you usually go to the library?</b>						
	<i>Don't want to go</i>						17 (11%)
	Never						12 (8%)
	Less than once a week						53 (36%)
	About once a week						44 (30%)
	More than once a week						22 (15%)
<b>Q11.5</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>						
	<i>Don't use it</i>						26 (18%)
	Yes						91 (62%)
	No						29 (20%)
<b>Q11.6</b>	<b>How many times do you usually go to the gym each week?</b>						
	<i>Don't want to go</i>						27 (18%)
	0						35 (24%)
	1 to 2						31 (21%)
	3 to 5						37 (25%)
	More than 5						16 (11%)

<b>Q11.7</b>	<b>How many times do you usually go outside for exercise each week?</b>	
	<i>Don't want to go</i>	8 (6%)
	<i>0</i>	18 (13%)
	<i>1 to 2</i>	31 (22%)
	<i>3 to 5</i>	34 (24%)
	<i>More than 5</i>	52 (36%)
<b>Q11.8</b>	<b>How many times do you usually have association each week?</b>	
	<i>Don't want to go</i>	8 (6%)
	<i>0</i>	8 (6%)
	<i>1 to 2</i>	17 (12%)
	<i>3 to 5</i>	15 (10%)
	<i>More than 5</i>	96 (67%)
<b>Q11.9</b>	<b>How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)</b>	
	<i>Less than 2 hours</i>	21 (15%)
	<i>2 to less than 4 hours</i>	20 (14%)
	<i>4 to less than 6 hours</i>	9 (6%)
	<i>6 to less than 8 hours</i>	27 (19%)
	<i>8 to less than 10 hours</i>	25 (17%)
	<i>10 hours or more</i>	27 (19%)
	<i>Don't know</i>	15 (10%)

### Section 12: Contact with family and friends

<b>Q12.1</b>	<b>Have staff supported you and helped you to maintain contact with your family/friends while in this prison?</b>	
	<i>Yes</i>	41 (29%)
	<i>No</i>	101 (71%)
<b>Q12.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	<i>Yes</i>	48 (34%)
	<i>No</i>	95 (66%)
<b>Q12.3</b>	<b>Have you had any problems getting access to the telephones?</b>	
	<i>Yes</i>	56 (39%)
	<i>No</i>	87 (61%)
<b>Q12.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	<i>I don't get visits</i>	21 (15%)
	<i>Very easy</i>	6 (4%)
	<i>Easy</i>	9 (6%)
	<i>Neither</i>	6 (4%)
	<i>Difficult</i>	35 (24%)
	<i>Very difficult</i>	65 (45%)
	<i>Don't know</i>	2 (1%)

### Section 13: Preparation for release

<b>Q13.1</b>	<b>Do you have a named offender manager (home probation officer) in the probation service?</b>	
	<i>Not sentenced</i>	1 (1%)
	<i>Yes</i>	117 (81%)
	<i>No</i>	26 (18%)

<b>Q13.2</b>	<b>What type of contact have you had with your offender manager since being in prison? (please tick all that apply to you.)</b>	
	<i>Not sentenced/ NA</i>	27 (19%)
	<i>No contact</i>	49 (35%)
	<i>Letter</i>	44 (31%)
	<i>Phone</i>	15 (11%)
	<i>Visit</i>	27 (19%)
<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	<i>Yes</i>	110 (77%)
	<i>No</i>	33 (23%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	<i>Not sentenced</i>	1 (1%)
	<i>Yes</i>	98 (69%)
	<i>No</i>	44 (31%)
<b>Q13.5</b>	<b>How involved were you in the development of your sentence plan?</b>	
	<i>Do not have a sentence plan/ not sentenced</i>	45 (32%)
	<i>Very involved</i>	13 (9%)
	<i>Involved</i>	31 (22%)
	<i>Neither</i>	10 (7%)
	<i>Not very involved</i>	11 (8%)
	<i>Not at all involved</i>	31 (22%)
<b>Q13.6</b>	<b>Who is working with you to achieve your sentence plan targets? (please tick all that apply to you.)</b>	
	<i>Do not have a sentence plan/ not sentenced</i>	45 (33%)
	<i>Nobody</i>	55 (40%)
	<i>Offender supervisor</i>	24 (18%)
	<i>Offender manager</i>	14 (10%)
	<i>Named/ personal officer</i>	4 (3%)
	<i>Staff from other departments</i>	11 (8%)
<b>Q13.7</b>	<b>Can you achieve any of your sentence plan targets in this prison?</b>	
	<i>Do not have a sentence plan/ not sentenced</i>	45 (32%)
	<i>Yes</i>	56 (40%)
	<i>No</i>	19 (14%)
	<i>Don't know</i>	19 (14%)
<b>Q13.8</b>	<b>Are there plans for you to achieve any of your sentence plan targets in another prison?</b>	
	<i>Do not have a sentence plan/ not sentenced</i>	45 (32%)
	<i>Yes</i>	19 (14%)
	<i>No</i>	61 (44%)
	<i>Don't know</i>	14 (10%)
<b>Q13.9</b>	<b>Are there plans for you to achieve any of your sentence plan targets in the community?</b>	
	<i>Do not have a sentence plan/ not sentenced</i>	45 (32%)
	<i>Yes</i>	24 (17%)
	<i>No</i>	42 (30%)
	<i>Don't know</i>	29 (21%)
<b>Q13.10</b>	<b>Do you have a needs based custody plan?</b>	
	<i>Yes</i>	7 (5%)
	<i>No</i>	73 (51%)
	<i>Don't know</i>	62 (44%)

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

Yes	19 (14%)
No	120 (86%)

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

	<i>Do not need help</i>	Yes	No
Employment	36 (26%)	25 (18%)	75 (55%)
Accommodation	41 (30%)	31 (23%)	65 (47%)
Benefits	33 (25%)	40 (30%)	61 (46%)
Finances	35 (27%)	25 (19%)	72 (55%)
Education	35 (27%)	30 (23%)	63 (49%)
Drugs and alcohol	38 (29%)	38 (29%)	53 (41%)

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

<i>Not sentenced</i>	1 (1%)
Yes	70 (51%)
No	67 (49%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP Haverigg 2014

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

#### Key to tables

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Percentages which are not highlighted show there is no significant difference					
<b>Number of completed questionnaires returned</b>		157	6444	157	175
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	0%	2%	0%	0%
1.3	Are you sentenced?	99%	100%	99%	100%
1.3	Are you on recall?	9%	10%	9%	8%
1.4	Is your sentence less than 12 months?	8%	6%	8%	8%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	10%	1%	4%
1.5	Are you a foreign national?	5%	10%	5%	10%
1.6	Do you understand spoken English?	100%	99%	100%	
1.7	Do you understand written English?	100%	98%	100%	
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%	27%	12%	16%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	4%	5%	3%
1.1	Are you Muslim?	7%	13%	7%	8%
1.11	Are you homosexual/gay or bisexual?	1%	3%	1%	3%
1.12	Do you consider yourself to have a disability?	15%	18%	15%	14%
1.13	Are you a veteran (ex-armed services)?	6%	6%	6%	
1.14	Is this your first time in prison?	35%	38%	35%	32%
1.15	Do you have any children under the age of 18?	55%	52%	55%	49%
<b>SECTION 2: Transfers and escorts</b>					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	86%	45%	86%	77%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	74%	73%	74%	
2.3	Were you offered a toilet break?	4%	9%	4%	
2.4	Was the van clean?	59%	66%	59%	
2.5	Did you feel safe?	82%	81%	82%	
2.6	Were you treated well/very well by the escort staff?	68%	71%	68%	61%
2.7	Before you arrived here were you told that you were coming here?	58%	61%	58%	
2.7	Before you arrived here did you receive any written information about coming here?	16%	18%	16%	
2.8	When you first arrived here did your property arrive at the same time as you?	91%	89%	91%	88%
<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	57%	51%	57%	

## Main comparator and comparator to last time

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3.2 When you were searched in reception, was this carried out in a respectful way?	88%	84%	88%	82%
3.3 Were you treated well/very well in reception?	84%	74%	84%	68%
When you first arrived:				
3.4 Did you have any problems?	52%	61%	52%	64%
3.4 Did you have any problems with loss of property?	16%	16%	16%	17%
3.4 Did you have any housing problems?	13%	15%	13%	24%
3.4 Did you have any problems contacting employers?	2%	3%	2%	3%
3.4 Did you have any problems contacting family?	14%	21%	14%	20%
3.4 Did you have any problems ensuring dependants were being looked after?	1%	2%	1%	4%
3.4 Did you have any money worries?	11%	15%	11%	14%
3.4 Did you have any problems with feeling depressed or suicidal?	10%	13%	10%	14%
3.4 Did you have any physical health problems?	9%	12%	9%	
3.4 Did you have any mental health problems?	13%	12%	13%	
3.4 Did you have any problems with needing protection from other prisoners?	3%	4%	3%	4%
3.4 Did you have problems accessing phone numbers?	8%	18%	8%	14%
For those with problems:				
3.5 Did you receive any help/ support from staff in dealing with these problems?	31%	37%	31%	
When you first arrived here, were you offered any of the following:				
3.6 Tobacco?	87%	74%	87%	90%
3.6 A shower?	25%	30%	25%	34%
3.6 A free telephone call?	29%	42%	29%	34%
3.6 Something to eat?	43%	62%	43%	79%
3.6 PIN phone credit?	58%	50%	58%	
3.6 Toiletries/ basic items?	64%	44%	64%	
<b>SECTION 3: Reception, first night and induction continued</b>				
When you first arrived here did you have access to the following people:				
3.7 The chaplain or a religious leader?	40%	52%	40%	
3.7 Someone from health services?	72%	70%	72%	
3.7 A Listener/Samaritans?	25%	32%	25%	
3.7 Prison shop/ canteen?	16%	21%	16%	8%
When you first arrived here were you offered information about any of the following:				
3.8 What was going to happen to you?	51%	51%	51%	51%
3.8 Support was available for people feeling depressed or suicidal?	34%	42%	34%	53%
3.8 How to make routine requests?	36%	46%	36%	53%
3.8 Your entitlement to visits?	28%	44%	28%	47%
3.8 Health services?	49%	55%	49%	54%
3.8 The chaplaincy?	42%	49%	42%	49%

## Key to tables

## Main comparator and comparator to last time

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3.9	Did you feel safe on your first night here?	80%	83%	80%	76%
3.10	Have you been on an induction course?	94%	91%	94%	92%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	52%	63%	52%	64%
3.12	Did you receive an education (skills for life) assessment?	84%	83%	84%	
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	33%	49%	33%	35%
4.1	Attend legal visits?	40%	52%	40%	40%
4.1	Get bail information?	16%	15%	16%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	37%	41%	37%	45%
4.3	Can you get legal books in the library?	49%	43%	49%	
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	70%	68%	70%	72%
4.4	Are you normally able to have a shower every day?	93%	93%	93%	91%
4.4	Do you normally receive clean sheets every week?	83%	79%	83%	86%
4.4	Do you normally get cell cleaning materials every week?	55%	72%	55%	62%
4.4	Is your cell call bell normally answered within five minutes?	24%	38%	24%	23%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71%	69%	71%	71%
4.4	Can you normally get your stored property, if you need to?	21%	26%	21%	21%
4.5	Is the food in this prison good/very good?	20%	26%	20%	21%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	43%	45%	43%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	46%	57%	46%	50%
4.8	Are your religious beliefs are respected?	45%	53%	45%	57%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	47%	59%	47%	58%
4.10	Is it easy/very easy to attend religious services?	45%	50%	45%	
<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	86%	83%	86%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	57%	61%	57%	61%
5.2	Do you feel applications are dealt with quickly (within seven days)?	41%	48%	41%	54%
5.3	Is it easy to make a complaint?	55%	61%	55%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	28%	34%	28%	31%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	30%	36%	30%	38%
5.5	Have you ever been prevented from making a complaint when you wanted to?	21%	17%	21%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	21%	29%	21%	20%
<b>SECTION 6: Incentives and earned privileges scheme</b>					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	54%	54%	54%	59%

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6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	54%	47%	54%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	6%	5%	6%	5%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	46%	40%	46%	
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	84%	77%	84%	71%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	67%	75%	67%	73%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	22%	29%	22%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	13%	20%	13%	11%
7.5	Do you have a personal officer?	53%	73%	53%	69%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	69%	63%	69%	68%
<b>SECTION 8: Safety</b>					
8.1	Have you ever felt unsafe here?	31%	32%	31%	42%
8.2	Do you feel unsafe now?	8%	13%	8%	23%
8.4	Have you been victimised by other prisoners here?	20%	23%	20%	19%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	9%	10%	9%	9%
8.5	Hit, kicked or assaulted you?	6%	6%	6%	7%
8.5	Sexually abused you?	1%	1%	1%	1%
8.5	Threatened or intimidated you?	12%	14%	12%	
8.5	Taken your canteen/property?	4%	4%	4%	5%
8.5	Victimised you because of medication?	2%	4%	2%	
8.5	Victimised you because of debt?	3%	3%	3%	
8.5	Victimised you because of drugs?	3%	3%	3%	6%
8.5	Victimised you because of your race or ethnic origin?	4%	3%	4%	5%
8.5	Victimised you because of your religion/religious beliefs?	3%	2%	3%	3%
8.5	Victimised you because of your nationality?	1%	2%	1%	
8.5	Victimised you because you were from a different part of the country?	5%	4%	5%	5%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.5	Victimised you because of your sexual orientation?	0%	1%	0%	2%
8.5	Victimised you because of your age?	2%	2%	2%	3%
8.5	Victimised you because you have a disability?	1%	2%	1%	2%
8.5	Victimised you because you were new here?	5%	4%	5%	4%
8.5	Victimised you because of your offence/crime?	1%	4%	1%	1%
8.5	Victimised you because of gang related issues?	5%	4%	5%	4%
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	29%	28%	29%	27%

## Main comparator and comparator to last time

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	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	11%	10%	11%	12%
8.7	Hit, kicked or assaulted you?	3%	3%	3%	5%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	6%	12%	6%	
8.7	Victimised you because of medication?	4%	4%	4%	
8.7	Victimised you because of debt?	1%	2%	1%	
8.7	Victimised you because of drugs?	1%	3%	1%	4%
8.7	Victimised you because of your race or ethnic origin?	4%	5%	4%	8%
8.7	Victimised you because of your religion/religious beliefs?	1%	3%	1%	4%
8.7	Victimised you because of your nationality?	1%	3%	1%	
8.7	Victimised you because you were from a different part of the country?	3%	3%	3%	7%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	1%
8.7	Victimised you because of your age?	1%	2%	1%	3%
8.7	Victimised you because you have a disability?	0%	2%	0%	2%
8.7	Victimised you because you were new here?	1%	4%	1%	4%
8.7	Victimised you because of your offence/crime?	0%	4%	0%	3%
8.7	Victimised you because of gang related issues?	3%	2%	3%	3%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	40%	39%	40%	38%
<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	28%	32%	28%	35%
9.1	Is it easy/very easy to see the nurse?	50%	54%	50%	63%
9.1	Is it easy/very easy to see the dentist?	8%	13%	8%	15%
	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?	34%	48%	34%	54%
9.2	The nurse?	48%	59%	48%	62%
9.2	The dentist?	33%	42%	33%	48%
9.3	The overall quality of health services?	33%	44%	33%	39%
9.4	Are you currently taking medication?	39%	47%	39%	49%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	92%	85%	92%	
9.6	Do you have any emotional well being or mental health problems?	29%	26%	29%	33%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	51%	49%	51%	
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	26%	23%	26%	31%

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10.2 Did you have a problem with alcohol when you came into this prison?	13%	17%	13%	16%
10.3 Is it easy/very easy to get illegal drugs in this prison?	44%	31%	44%	34%
10.4 Is it easy/very easy to get alcohol in this prison?	31%	19%	31%	
10.5 Have you developed a problem with drugs since you have been in this prison?	10%	8%	10%	11%
10.6 Have you developed a problem with diverted medication since you have been in this prison?	7%	7%	7%	
For those with drug or alcohol problems:				
10.7 Have you received any support or help with your drug problem while in this prison?	53%	65%	53%	
10.8 Have you received any support or help with your alcohol problem while in this prison?	39%	64%	39%	
For those who have received help or support with their drug or alcohol problem:				
10.9 Was the support helpful?	73%	80%	73%	91%
<b>SECTION 11: Activities</b>				
Is it very easy/ easy to get into the following activities:				
11.1 A prison job?	46%	43%	46%	
11.1 Vocational or skills training?	49%	37%	49%	
11.1 Education (including basic skills)?	59%	52%	59%	
11.1 Offending behaviour programmes?	29%	21%	29%	
Are you currently involved in any of the following activities:				
11.2 A prison job?	62%	60%	62%	73%
11.2 Vocational or skills training?	20%	16%	20%	26%
11.2 Education (including basic skills)?	21%	26%	21%	28%
11.2 Offending behaviour programmes?	16%	13%	16%	15%
11.3 Have you had a job while in this prison?	85%	83%	85%	92%
For those who have had a prison job while in this prison:				
11.3 Do you feel the job will help you on release?	41%	42%	41%	52%
11.3 Have you been involved in vocational or skills training while in this prison?	77%	73%	77%	84%
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?	56%	59%	56%	63%
11.3 Have you been involved in education while in this prison?	80%	79%	80%	83%
For those who have been involved in education while in this prison:				
11.3 Do you feel the education will help you on release?	50%	61%	50%	60%
11.3 Have you been involved in offending behaviour programmes while in this prison?	72%	71%	72%	81%
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?	52%	53%	52%	50%
11.4 Do you go to the library at least once a week?	45%	47%	45%	56%
11.5 Does the library have a wide enough range of materials to meet your needs?	62%	45%	62%	
11.6 Do you go to the gym three or more times a week?	36%	36%	36%	48%
11.7 Do you go outside for exercise three or more times a week?	60%	46%	60%	68%
11.8 Do you go on association more than five times each week?	67%	74%	67%	84%
11.9 Do you spend ten or more hours out of your cell on a weekday?	19%	16%	19%	24%

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<b>SECTION 12: Friends and family</b>					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	29%	35%	29%	33%
12.2	Have you had any problems with sending or receiving mail?	34%	44%	34%	35%
12.3	Have you had any problems getting access to the telephones?	39%	24%	39%	30%
12.4	Is it easy/ very easy for your friends and family to get here?	10%	27%	10%	
<b>SECTION 13: Preparation for release</b>					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	82%	83%	82%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	43%	33%	43%	
13.2	Contact by letter?	39%	38%	39%	
13.2	Contact by phone?	13%	26%	13%	
13.2	Contact by visit?	24%	33%	24%	
13.3	Do you have a named offender supervisor in this prison?	77%	68%	77%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	69%	70%	69%	74%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	46%	55%	46%	46%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	61%	46%	61%	
13.6	Offender supervisor?	26%	36%	26%	
13.6	Offender manager?	15%	27%	15%	
13.6	Named/ personal officer?	4%	13%	4%	
13.6	Staff from other departments?	12%	17%	12%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	60%	65%	60%	49%
13.8	Are there plans for you to achieve any of your targets in another prison?	20%	22%	20%	
13.9	Are there plans for you to achieve any of your targets in the community?	25%	29%	25%	
13.10	Do you have a needs based custody plan?	5%	7%	5%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	14%	17%	14%	17%
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?	25%	35%	25%	
13.12	Accommodation?	32%	38%	32%	
13.12	Benefits?	40%	39%	40%	
13.12	Finances?	26%	27%	26%	
13.12	Education?	32%	36%	32%	
13.12	Drugs and alcohol?	42%	46%	42%	
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?	51%	56%	51%	52%

## Diversity analysis



### Key question responses (ethnicity) HMP Haverigg 2014

**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
	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		
<b>Number of completed questionnaires returned</b>		<b>19</b>	<b>137</b>
1.3	Are you sentenced?	95%	100%
1.5	Are you a foreign national?	5%	5%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	5%
1.1	Are you Muslim?	55%	0%
1.12	Do you consider yourself to have a disability?	10%	16%
1.13	Are you a veteran (ex-armed services)?	0%	7%
1.14	Is this your first time in prison?	42%	33%
2.6	Were you treated well/very well by the escort staff?	74%	66%
2.7	Before you arrived here were you told that you were coming here?	58%	59%
3.2	When you were searched in reception, was this carried out in a respectful way?	90%	89%
3.3	Were you treated well/very well in reception?	84%	84%
3.4	Did you have any problems when you first arrived?	55%	51%
3.7	Did you have access to someone from health care when you first arrived here?	84%	71%
3.9	Did you feel safe on your first night here?	74%	81%
3.10	Have you been on an induction course?	89%	94%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	22%	35%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White 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?	66%	71%
4.4	Are you normally able to have a shower every day?	84%	94%
4.4	Is your cell call bell normally answered within five minutes?	11%	27%
4.5	Is the food in this prison good/very good?	10%	20%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	21%	47%
4.7	Are you able to speak to a Listener at any time, if you want to?	42%	47%
4.8	Do you feel your religious beliefs are respected?	47%	46%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	37%	49%
5.1	Is it easy to make an application?	73%	87%
5.3	Is it easy to make a complaint?	58%	54%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	42%	56%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	55%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	7%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	74%	85%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	58%	69%
7.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	0%	15%
7.4	Do you have a personal officer?	68%	52%
8.1	Have you ever felt unsafe here?	42%	29%
8.2	Do you feel unsafe now?	5%	9%
8.3	Have you been victimised by other prisoners?	42%	17%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	16%	12%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	26%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	26%	0%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	1%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White 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		
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	1%
8.6	Have you been victimised by a member of staff?	42%	26%
8.7	Have you ever felt threatened or intimidated by staff here?	5%	6%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	16%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	10%	0%
8.7	Have you been victimised because of your nationality? (By staff)	5%	0%
8.7	Have you been victimised because you have a disability? (By staff)	0%	0%
9.1	Is it easy/very easy to see the doctor?	10%	30%
9.1	Is it easy/ very easy to see the nurse?	37%	53%
9.4	Are you currently taking medication?	26%	41%
9.6	Do you feel you have any emotional well being/mental health issues?	32%	29%
10.3	Is it easy/very easy to get illegal drugs in this prison?	61%	42%
11.2	Are you currently working in the prison?	47%	64%
11.2	Are you currently undertaking vocational or skills training?	5%	22%
11.2	Are you currently in education (including basic skills)?	32%	19%
11.2	Are you currently taking part in an offending behaviour programme?	5%	18%
11.4	Do you go to the library at least once a week?	37%	46%
11.6	Do you go to the gym three or more times a week?	32%	37%
11.7	Do you go outside for exercise three or more times a week?	53%	61%
11.8	On average, do you go on association more than five times each week?	63%	68%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	10%	20%
12.2	Have you had any problems sending or receiving mail?	53%	31%
12.3	Have you had any problems getting access to the telephones?	47%	37%

## Diversity analysis



### Key question responses (disability) HMP Haverigg 2014

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

#### Key to tables

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	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		
<b>Number of completed questionnaires returned</b>		<b>23</b>	<b>133</b>
1.3	Are you sentenced?	<b>100%</b>	<b>99%</b>
1.5	Are you a foreign national?	4%	5%
1.6	Do you understand spoken English?	<b>100%</b>	<b>100%</b>
1.7	Do you understand written English?	<b>100%</b>	<b>100%</b>
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	9%	13%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	17%	2%
1.1	Are you Muslim?	9%	6%
1.12	Do you consider yourself to have a disability?		
1.13	Are you a veteran (ex-armed services)?	9%	6%
1.14	Is this your first time in prison?	18%	38%
2.6	Were you treated well/very well by the escort staff?	74%	66%
2.7	Before you arrived here were you told that you were coming here?	61%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	96%	87%
3.3	Were you treated well/very well in reception?	96%	82%
3.4	Did you have any problems when you first arrived?	69%	49%
3.7	Did you have access to someone from health care when you first arrived here?	92%	69%
3.9	Did you feel safe on your first night here?	79%	80%
3.10	Have you been on an induction course?	100%	92%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	32%	34%

## Key to tables

## Diversity analysis

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	87%	67%
4.4	Are you normally able to have a shower every day?	96%	92%
4.4	Is your cell call bell normally answered within five minutes?	31%	23%
4.5	Is the food in this prison good/very good?	35%	16%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	52%	41%
4.7	Are you able to speak to a Listener at any time, if you want to?	65%	42%
4.8	Do you feel your religious beliefs are respected?	61%	42%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	63%	45%
5.1	Is it easy to make an application?	82%	86%
5.3	Is it easy to make a complaint?	54%	55%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	56%	54%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	46%	56%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	13%	5%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	91%	83%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	83%	64%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	17%	13%
7.4	Do you have a personal officer?	65%	51%
8.1	Have you ever felt unsafe here?	32%	31%
8.2	Do you feel unsafe now?	13%	7%
8.3	Have you been victimised by other prisoners?	13%	22%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	13%	12%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	4%	0%
8.5	Have you been victimised because of your age? (By prisoners)	4%	2%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.5	Have you been victimised because you have a disability? (By prisoners)	4%	0%
8.6	Have you been victimised by a member of staff?	38%	27%
8.7	Have you ever felt threatened or intimidated by staff here?	0%	7%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	2%
8.7	Have you been victimised because of your nationality? (By staff)	0%	1%
8.7	Have you been victimised because of your age? (By staff)	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	0%	0%
9.1	Is it easy/very easy to see the doctor?	39%	25%
9.1	Is it easy/ very easy to see the nurse?	62%	48%
9.4	Are you currently taking medication?	82%	32%
9.6	Do you feel you have any emotional well being/mental health issues?	69%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	59%	42%
11.2	Are you currently working in the prison?	59%	62%
11.2	Are you currently undertaking vocational or skills training?	18%	20%
11.2	Are you currently in education (including basic skills)?	18%	21%
11.2	Are you currently taking part in an offending behaviour programme?	13%	17%
11.4	Do you go to the library at least once a week?	44%	45%
11.6	Do you go to the gym three or more times a week?	9%	42%
11.7	Do you go outside for exercise three or more times a week?	59%	60%
11.8	On average, do you go on association more than five times each week?	52%	70%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	18%	19%
12.2	Have you had any problems sending or receiving mail?	22%	36%
12.3	Have you had any problems getting access to the telephones?	37%	40%

Wing comparison



Prisoner survey responses (wing breakdown) HMP Haverigg 2014

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

Key to tables

		Residential unit 1A	Residential unit 2	Residential unit 3	Residential unit 4	Residential unit 5	Total
	Percentages highlighted in green show the best score across wings						
	Percentages highlighted in blue show the worst score across wings						
<b>Number of completed questionnaires returned</b>		<b>17</b>	<b>50</b>	<b>26</b>	<b>17</b>	<b>21</b>	<b>131</b>
<b>SECTION 1: General information</b>							
1.2	Are you under 21 years of age?	0%	0%	0%	0%	0%	0%
1.3	Are you sentenced?	94%	100%	100%	100%	100%	99%
1.3	Are you on recall?	6%	14%	4%	6%	5%	9%
1.4	Is your sentence less than 12 months?	0%	13%	4%	6%	10%	8%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	0%	0%	6%	0%	1%
1.5	Are you a foreign national?	17%	6%	4%	0%	5%	6%
1.6	Do you understand spoken English?	100%	100%	100%	100%	100%	100%
1.7	Do you understand written English?	100%	100%	100%	100%	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	17%	10%	4%	29%	9%	12%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	8%	4%	0%	5%	5%
1.1	Are you Muslim?	12%	4%	4%	19%	5%	7%
1.11	Are you homosexual/gay or bisexual?	0%	2%	0%	0%	0%	1%
1.12	Do you consider yourself to have a disability?	0%	25%	15%	0%	24%	16%
1.13	Are you a veteran (ex-armed services)?	0%	6%	8%	0%	19%	7%
1.14	Is this your first time in prison?	12%	26%	60%	64%	14%	34%
1.15	Do you have any children under the age of 18?	59%	56%	46%	47%	52%	53%
<b>SECTION 2: Transfers and escorts</b>							
On your most recent journey here:							
2.1	Did you spend more than 2 hours in the van?	88%	82%	85%	94%	81%	85%
2.5	Did you feel safe?	83%	82%	77%	94%	81%	83%
2.6	Were you treated well/very well by the escort staff?	59%	70%	50%	64%	71%	64%
2.7	Before you arrived here were you told that you were coming here?	64%	53%	46%	71%	52%	55%
2.8	When you first arrived here did your property arrive at the same time as you?	88%	88%	93%	94%	90%	90%
<b>SECTION 3: Reception, first night and induction</b>							
3.1	Were you in reception for less than 2 hours?	41%	66%	58%	41%	52%	56%
3.2	When you were searched in reception, was this carried out in a respectful way?	94%	90%	89%	88%	86%	89%
3.3	Were you treated well/very well in reception?	77%	85%	81%	88%	81%	83%
When you first arrived:							
3.4	Did you have any problems?	44%	60%	38%	31%	66%	51%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		Residential unit 1A	Residential unit 2	Residential unit 3	Residential unit 4	Residential unit 5	Total
Percentages highlighted in blue show the worst score across wings							
3.4	Did you have any problems with loss of property?	19%	22%	4%	6%	9%	14%
3.4	Did you have any housing problems?	12%	16%	0%	6%	24%	13%
3.4	Did you have any problems contacting employers?	0%	4%	0%	0%	5%	2%
3.4	Did you have any problems contacting family?	19%	18%	8%	6%	19%	15%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	0%	0%	0%	5%	1%
3.4	Did you have any money worries?	12%	16%	8%	6%	9%	12%
3.4	Did you have any problems with feeling depressed or suicidal?	12%	12%	0%	12%	19%	11%
3.4	Did you have any physical health problems?	0%	12%	8%	0%	14%	9%
3.4	Did you have any mental health problems?	6%	16%	12%	0%	24%	13%
3.4	Did you have any problems with needing protection from other prisoners?	0%	4%	0%	6%	9%	4%
3.4	Did you have problems accessing phone numbers?	6%	4%	0%	12%	19%	7%
When you first arrived here, were you offered any of the following:							
3.6	Tobacco?	88%	94%	85%	71%	86%	87%
3.6	A shower?	17%	27%	27%	17%	29%	25%
3.6	A free telephone call?	29%	27%	19%	41%	43%	30%
3.6	Something to eat?	41%	43%	31%	59%	57%	45%
3.6	PIN phone credit?	64%	63%	46%	23%	71%	56%
3.6	Toiletries/ basic items?	59%	63%	58%	71%	62%	62%
<b>SECTION 3: Reception, first night and induction continued</b>							
When you first arrived here did you have access to the following people:							
3.7	The chaplain or a religious leader?	31%	42%	36%	47%	48%	41%
3.7	Someone from health services?	62%	80%	60%	88%	66%	73%
3.7	A Listener/Samaritans?	12%	18%	20%	41%	29%	23%
3.7	Prison shop/ canteen?	6%	15%	16%	12%	14%	14%
When you first arrived here were you offered information about any of the following:							
3.8	What was going to happen to you?	56%	47%	32%	59%	55%	48%
3.8	Support available for people feeling depressed or suicidal?	31%	32%	8%	47%	35%	30%
3.8	How to make routine requests?	25%	38%	16%	53%	40%	34%
3.8	Your entitlement to visits?	6%	28%	16%	47%	40%	27%
3.8	Health services?	44%	51%	28%	71%	55%	49%
3.8	The chaplaincy?	44%	40%	20%	59%	50%	41%
3.9	Did you feel safe on your first night here?	82%	82%	80%	83%	77%	81%
3.10	Have you been on an induction course?	100%	94%	93%	100%	95%	95%
3.12	Did you receive an education (skills for life) assessment?	77%	90%	76%	88%	84%	84%
<b>SECTION 4: Legal rights and respectful custody</b>							
In terms of your legal rights, is it easy/very easy to:							
4.1	Communicate with your solicitor or legal representative?	36%	22%	31%	41%	42%	31%
4.1	Attend legal visits?	38%	34%	50%	41%	41%	40%
4.1	Get bail information?	35%	19%	14%	6%	19%	18%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		Residential unit 1A	Residential unit 2	Residential unit 3	Residential unit 4	Residential unit 5	Total
Percentages highlighted in blue show the worst score across wings							
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	23%	25%	39%	53%	61%	36%
4.3	Can you get legal books in the library?	47%	49%	48%	36%	53%	47%
For the wing/unit you are currently on:							
4.4	Are you normally offered enough clean, suitable clothes for the week?	53%	68%	68%	94%	90%	72%
4.4	Are you normally able to have a shower every day?	83%	88%	100%	100%	100%	93%
4.4	Do you normally receive clean sheets every week?	69%	90%	79%	64%	90%	82%
4.4	Do you normally get cell cleaning materials every week?	64%	59%	35%	17%	74%	52%
4.4	Is your cell call bell normally answered within five minutes?	12%	25%	13%	13%	41%	22%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	64%	65%	83%	83%	63%	70%
4.4	Can you normally get your stored property, if you need to?	6%	20%	17%	17%	37%	20%
4.5	Is the food in this prison good/very good?	6%	39%	16%	17%	5%	22%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	36%	48%	34%	12%	63%	41%
4.7	Are you able to speak to a Listener at any time, if you want to?	36%	39%	38%	77%	37%	43%
4.8	Are your religious beliefs are respected?	59%	43%	38%	53%	47%	46%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	53%	45%	50%	36%	50%	47%
4.10	Is it easy/very easy to attend religious services?	47%	40%	48%	47%	53%	45%
<b>SECTION 5: Applications and complaints</b>							
5.1	Is it easy to make an application?	87%	84%	79%	88%	95%	85%
5.3	Is it easy to make a complaint?	40%	45%	59%	64%	55%	51%
5.5	Have you ever been prevented from making a complaint when you wanted to?	14%	16%	18%	36%	25%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	25%	18%	13%	12%	26%	18%
<b>SECTION 6: Incentives and earned privileges scheme</b>							
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	38%	46%	48%	64%	75%	52%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	33%	51%	65%	59%	55%	53%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	6%	10%	0%	0%	5%	5%
<b>SECTION 7: Relationships with staff</b>							
7.1	Do most staff, in this prison, treat you with respect?	75%	89%	74%	71%	95%	83%
7.2	Is there a member of staff, in this prison, who you can turn to for help if you have a problem?	56%	65%	52%	69%	85%	65%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	13%	25%	9%	17%	25%	19%
7.4	Do staff normally speak to you most of the time/all of the time during association?	19%	10%	0%	17%	10%	10%
7.5	Do you have a personal officer?	19%	53%	56%	71%	55%	52%
<b>SECTION 8: Safety</b>							
8.1	Have you ever felt unsafe here?	25%	33%	31%	17%	25%	28%
8.2	Do you feel unsafe now?	6%	15%	9%	0%	0%	8%
8.4	Have you been victimised by other prisoners here?	19%	20%	17%	17%	15%	18%
Since you have been here, have other prisoners:							
8.5	Made insulting remarks about you, your family or friends?	0%	11%	0%	12%	15%	8%
8.5	Hit, kicked or assaulted you?	0%	7%	0%	0%	5%	3%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		Residential unit 1A	Residential unit 2	Residential unit 3	Residential unit 4	Residential unit 5	Total
Percentages highlighted in blue show the worst score across wings							
8.5	Sexually abused you?	0%	2%	0%	0%	0%	1%
8.5	Threatened or intimidated you?	0%	11%	9%	12%	10%	9%
8.5	Taken your canteen/property?	0%	4%	0%	0%	10%	3%
8.5	Victimised you because of medication?	0%	4%	0%	0%	5%	2%
8.5	Victimised you because of debt?	6%	2%	0%	0%	0%	2%
8.5	Victimised you because of drugs?	0%	4%	0%	0%	5%	2%
8.5	Victimised you because of your race or ethnic origin?	6%	4%	0%	12%	5%	5%
8.5	Victimised you because of your religion/religious beliefs?	0%	2%	4%	12%	5%	4%
8.5	Victimised you because of your nationality?	6%	2%	0%	0%	0%	2%
8.5	Victimised you because you were from a different part of the country?	6%	7%	0%	0%	5%	4%
8.5	Victimised you because you are from a Traveller community?	0%	2%	0%	0%	0%	1%
8.5	Victimised you because of your sexual orientation?	0%	0%	0%	0%	0%	0%
8.5	Victimised you because of your age?	0%	4%	0%	0%	5%	2%
8.5	Victimised you because you have a disability?	0%	2%	0%	0%	0%	1%
8.5	Victimised you because you were new here?	0%	4%	0%	6%	10%	4%
8.5	Victimised you because of your offence/crime?	0%	0%	0%	6%	0%	1%
8.5	Victimised you because of gang related issues?	12%	2%	4%	0%	5%	4%
<b>SECTION 8: Safety continued</b>							
8.6	Have you been victimised by staff here?	31%	28%	35%	17%	27%	28%
	Since you have been here, have staff:						
8.7	Made insulting remarks about you, your family or friends?	6%	13%	13%	12%	16%	12%
8.7	Hit, kicked or assaulted you?	0%	0%	0%	6%	11%	3%
8.7	Sexually abused you?	0%	0%	0%	0%	0%	0%
8.7	Threatened or intimidated you?	0%	9%	4%	12%	5%	7%
8.7	Victimised you because of medication?	6%	4%	4%	6%	0%	4%
8.7	Victimised you because of debt?	0%	2%	0%	0%	0%	1%
8.7	Victimised you because of drugs?	0%	0%	0%	0%	0%	0%
8.7	Victimised you because of your race or ethnic origin?	12%	0%	4%	12%	5%	5%
8.7	Victimised you because of your religion/religious beliefs?	0%	0%	0%	6%	5%	2%
8.7	Victimised you because of your nationality?	6%	0%	0%	0%	0%	1%
8.7	Victimised you because you were from a different part of the country?	6%	2%	0%	12%	0%	3%
8.7	Victimised you because you are from a Traveller community?	0%	0%	0%	6%	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	0%	0%	0%	0%	0%
8.7	Victimised you because of your age?	0%	4%	0%	0%	0%	2%
8.7	Victimised you because you have a disability?	0%	0%	0%	0%	0%	0%
8.7	Victimised you because you were new here?	0%	2%	0%	0%	0%	1%
8.7	Victimised you because of your offence/crime?	0%	0%	0%	0%	0%	0%
8.7	Victimised you because of gang related issues?	12%	0%	4%	0%	5%	3%

## Wing comparison

### Key to tables

Percentages highlighted in green show the best score across wings		Residential unit 1A	Residential unit 2	Residential unit 3	Residential unit 4	Residential unit 5	Total
Percentages highlighted in blue show the worst score across wings							
<b>SECTION 9: Health services</b>							
9.1	Is it easy/very easy to see the doctor?	31%	30%	21%	12%	40%	28%
9.1	Is it easy/very easy to see the nurse?	69%	50%	39%	38%	65%	51%
9.1	Is it easy/very easy to see the dentist?	7%	9%	0%	0%	16%	7%
9.4	Are you currently taking medication?	19%	51%	35%	17%	40%	38%
9.6	Do you have any emotional well being or mental health problems?	19%	47%	21%	6%	35%	31%
<b>SECTION 10: Drugs and alcohol</b>							
10.1	Did you have a problem with drugs when you came into this prison?	31%	43%	13%	0%	31%	28%
10.2	Did you have a problem with alcohol when you came into this prison?	31%	17%	4%	0%	15%	14%
10.3	Is it easy/very easy to get illegal drugs in this prison?	62%	38%	31%	29%	55%	41%
10.4	Is it easy/very easy to get alcohol in this prison?	50%	27%	9%	29%	35%	28%
10.5	Have you developed a problem with drugs since you have been in this prison?	19%	9%	4%	0%	20%	10%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	12%	10%	0%	6%	5%	7%
<b>SECTION 11: Activities</b>							
Is it very easy/ easy to get into the following activities:							
11.1	A prison job?	56%	46%	50%	47%	40%	47%
11.1	Vocational or skills training?	60%	49%	37%	53%	45%	48%
11.1	Education (including basic skills)?	62%	62%	52%	59%	53%	58%
11.1	Offending behaviour programmes?	19%	27%	21%	29%	47%	28%
Are you currently involved in any of the following activities:							
11.2	A prison job?	38%	54%	82%	83%	63%	63%
11.2	Vocational or skills training?	19%	11%	28%	29%	16%	18%
11.2	Education (including basic skills)?	19%	26%	32%	12%	16%	23%
11.2	Offending behaviour programmes?	12%	9%	22%	12%	42%	17%
11.4	Do you go to the library at least once a week?	38%	51%	32%	29%	60%	44%
11.5	Does the library have a wide enough range of materials to meet your needs?	56%	68%	68%	53%	55%	62%
11.6	Do you go to the gym three or more times a week?	19%	20%	50%	64%	45%	36%
11.7	Do you go outside for exercise three or more times a week?	50%	66%	72%	59%	50%	61%
11.8	Do you go on association more than five times each week?	88%	67%	72%	77%	25%	65%
11.9	Do you spend ten or more hours out of your cell on a weekday?	0%	7%	54%	17%	15%	18%
<b>SECTION 12: Friends and family</b>							
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	33%	32%	13%	36%	15%	26%
12.2	Have you had any problems with sending or receiving mail?	47%	27%	41%	53%	15%	34%
12.3	Have you had any problems getting access to the telephones?	33%	36%	54%	29%	50%	41%
12.4	Is it easy/ very easy for your friends and family to get here?	0%	10%	18%	6%	10%	10%
<b>SECTION 13: Preparation for release</b>							
13.3	Do you have a named offender supervisor in this prison?	74%	73%	78%	88%	63%	75%
13.10	Do you have a needs based custody plan?	13%	4%	0%	6%	5%	5%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	15%	19%	17%	10%	15%