

Report on an unannounced inspection of

HMP Woodhill

by HM Chief Inspector of Prisons

13–24 January 2014

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Introduction

Woodhill prison, located in Milton Keynes and part of the Prison Service's high security estate, is a complex and important prison with multiple functions. Designated a core local prison, one of only three in the country, it is mainly a local prison holding remand, newly sentenced and short-term prisoners from the South East Midlands. Its core function extends this responsibility to encompass newly arrived or potential category A prisoners from across the Midlands, adding greatly to the security and control requirements placed on the establishment. In addition, Woodhill also provides a very small facility for protected witnesses and a close supervision centre (or CSC). A CSC holds highly disruptive prisoners and is managed as part of an integrated system across several prisons in the high security estate. This system will be inspected separately by HM Inspectorate of Prisons, so the Woodhill CSC is not referred to in this report.

The challenges of managing this prison had recently increased, not least because of significant changes to the senior leadership team, including the relatively recent arrival of a new governor. It would be true to say that our assessments of Woodhill at recent inspections describe a prison that is just adequate or satisfactory. This inspection was no different with a very mixed set of assessments across our four tests of a healthy prison. As has been the case at Woodhill for a long time, the lack of purposeful activity remained a recurring theme.

There had been some improvement in the prison's approach to safety but outcomes were still not good enough, particularly for a core local. Prisoners were received into the prison reasonably well but the function of the first night centre was not well defined and it was used too much to hold prisoners with other vulnerabilities. Not all new arrivals therefore benefited fully from the services that were intended for them.

Significantly more prisoners reported feeling unsafe at this inspection than they did when we last visited, although levels were now broadly comparable to similar establishments. Too many prisoners said that they felt victimised. Recorded levels of assault were very high and double what we have seen in other local prisons, but the number of reported fights was similar. We were not, however, confident that all incidents had been adequately recorded. Arrangements to protect vulnerable prisoners were marginally better but more could have been done, and age-specific risk assessment was still lacking for those young adults held in the prison, particularly on the vulnerable prisoner unit.

The number of self-harm incidents was very high and almost double what we normally see in a local prison. Tragically five prisoners had taken their own lives in the prison since we last inspected. The prison's response to this situation, including to the recommendations of various enquiries by the Prisons and Probation Ombudsman, lacked rigour and required immediate improvement. Use of force remained high although much was at a low level and the management of such interventions was now much better. Management and accountability for the segregation of prisoners had also improved, although the regime on offer to such prisoners remained minimal.

Overall Woodhill was a respectful prison although the quality of relationships between staff and prisoners could no longer be described as a key strength as we reported previously. About three-quarters of prisoners felt respected by staff. While comparable to similar prisons, this was much reduced from our findings at the last inspection. We were concerned that 40% of prisoners said they felt victimised by staff, and the prison needed to take this perception seriously and understand it. The general environment in the prison was good and the quality of accommodation was reasonable, despite too many single cells being used to hold two prisoners. Shower facilities had been refurbished but access had deteriorated. The very few prisoners held on the protected witness unit were inevitably isolated but more could have been done to mitigate the oppressive environment in which they were held.

The prison was undertaking some good work to promote equality and we identified meaningful efforts to address outcomes across most of the protected characteristics. Health services were generally good with the exception of mental health provision, which was insufficient to meet demand. The prison received very high numbers of complaints but appeared to deal with them reasonably well. The quality of food was satisfactory, despite some very negative perceptions among prisoners.

The amount of time prisoners spent out of their cells had deteriorated considerably and association, notably in the evening, was very limited and further reduced by staff shortages. We also observed significant slippage in the prison's daily routines which caused prisoners to be locked up early. Learning and skills provision was being better managed and plans were in place to make further improvements, despite the lack of a meaningful analysis of need. There were too few purposeful activity places and nearly a quarter of the population were unemployed. There was little vocational training available and most teaching was no better than satisfactory. Overall not enough was being done to improve the employability of prisoners.

Resettlement work and the management of risk through offender management arrangements lacked coordination and tended to act in parallel, although a good analysis of need had been undertaken. The backlog of offender assessments had reduced but remained too large and included some high risk of harm cases. The quality of offender supervision and sentence planning was not good enough. Resettlement services were similarly of very variable quality despite reasonable structures to assess individual need. Services to support family contact were an exception to this, and had improved.

Woodhill is a prison that retains great potential, particularly in terms of the resources at its disposal. However, as we reported last time, outcomes for prisoners remained concerning and some were disappointing. The prison was experiencing a period of management change but there was reason to believe that the governor and his team were making serious attempts to assess the current situation with clarity and honesty. This was the right start but we hope to see more consistent and improved outcomes when we next inspect.

Nick Hardwick
HM Chief Inspector of Prisons

May 2014

Fact page

Task of the establishment

HMP Woodhill is a core local prison within the high-security estate. It holds remand and convicted adults and young prisoners, including those categorised as A. It also accommodates prisoners who are managed under the national protected witness scheme, close supervision centre (CSC)/Rule 46 and Managing Challenging Behaviour Strategy (MCBS) but the latter two units were not inspected on this occasion as they will be inspected as part of a national strategy.

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

Public

Region/Department

High Security Directorate, with links to the South Central area

Number held

778

Certified normal accommodation

660

Operational capacity

819

Date of last full inspection

3–13 January 2012

Brief history

HMP Woodhill was opened in 1992. It started as a local prison but in the late 1990s took on a high-security role as a core local prison.

Short description of residential units

House units 1–4 are divided into two wings, A and B. Each wing is designed to hold 60 prisoners in single cells. Some of these cells have been converted into doubles. House unit 5 is a more recent addition, with 51 cells, all doubles. House unit 6 has five wings and holds the CSC and MCBS prisoners as well as those subject to the national protected witness scheme.

The first night centre

The first night centre houses all new prisoners for their first few days in custody before moving to the induction unit.

House unit 1

House unit 1 has the induction unit on 1B, with a mix of remand and convicted prisoners on 1A.

House units 2 and 3

House units 2 and 3 accommodate a mix of remand and convicted prisoners.

House unit 4

House unit 4A holds a mix of remand and convicted prisoners.

House unit 4B is the vulnerable prisoner unit.

House unit 5

House unit 5 is the dedicated drug stabilisation unit.

House unit 6

House units 6 houses the national protected prisoner unit (PWU), which held only two prisoners at the time of the inspection.

Name of governor/director

Rob Davis

Escort contractor

GeoAmey

Health service provider

Central North-West London NHS Trust

Learning and skills providers

Milton Keynes City College

Independent Monitoring Board chair

Mary-Anne Dixey

About this inspection and report

A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, secure training centres, immigration detention facilities, police and court custody and military detention.

A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

A3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

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

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

- **outcomes for prisoners are good.**

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

- **outcomes for prisoners are reasonably good.**

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

- **outcomes for prisoners are not sufficiently good.**

There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- **outcomes for prisoners are poor.**

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

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
 - **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
 - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, 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.¹

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

Summary

Safety

S1 Reception was welcoming and procedures were efficient. The first night centre and processes were supportive but too many prisoners did not benefit from them. Induction arrangements were good for most but inadequate for vulnerable prisoners. More prisoners than at the time of the previous inspection said that they felt unsafe, and levels of victimisation were high. The particular needs and vulnerabilities of young adults had still not been fully considered. Levels of self-harm were high and there had been five self-inflicted deaths in custody since the previous inspection, but the quality of suicide and self-harm arrangements were generally poor. Security arrangements were mostly proportionate. The segregation unit environment was improving but some prisoners faced unofficial reduced regimes elsewhere. Use of force and special accommodation were well governed. Illicit drug availability had increased, although was similar to that at other prisons, but supply reduction was good. Drug treatment arrangements were reasonably good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**

S2 At the last inspection in 2012 we found that outcomes for prisoners in Woodhill were not sufficiently good against this healthy prison test. We made 20 recommendations in the area of safety. At this follow-up inspection we found that seven of the recommendations had been achieved, four had been partially achieved, seven had not been achieved and two were no longer relevant.

S3 The punctuality of vans collecting prisoners for court appearances had improved but some prisoners waited too long in court before being returned to the prison and some arrived very late in the day. There were some long delays in vans entering the prison and disembarking prisoners. All prisoners were handcuffed between vans and reception, without a risk assessment.

S4 Prisoners were positive about their reception experience. Reception processes were efficient and prisoner orderlies greeted and advised new arrivals. All arriving prisoners were strip-searched, irrespective of the risk posed. The first night team interviewed new arrivals in private, checked that they felt safe and gathered routine information.

S5 The dedicated first night centre provided a welcoming environment but was not reliably available for all new prisoners because the unit was used inappropriately to house other prisoners who were difficult to locate elsewhere. For those new arrivals located there, accommodation was adequately prepared, although graffiti was present. Staff were supportive and prisoners were given assistance to settle in. Some new prisoners were located directly onto general wings, without the same level of observation or support.

S6 There was a thorough four-stage induction process for most mainstream prisoners which started on the day after arrival. Induction was now provided for those on the vulnerable prisoner wing but was not reliably delivered or sufficiently comprehensive.

S7 At the time of the inspection, considerably more prisoners than at the time of the previous inspection reported feeling unsafe, although this was now in line with other local prisons. The reported level of prisoner assaults was high, and prisoners reported high levels of victimisation both by staff and prisoners. There was effective analysis of data at the safer custody meeting and actions were taken to make the prison safer but we were not assured that all data about violence were gathered. The three-stage anti-bullying process was ineffective in challenging behaviour and supporting victims. The particular needs and

vulnerabilities of young adults had still not been fully considered, with some young adult prisoners mixed with adults, including on the vulnerable prisoner wing, without an appropriate risk assessment.

- S8 There had been five self-inflicted deaths in custody since the previous inspection. Although effective actions had been formulated in response to some Prisons and Probation Ombudsman recommendations, other important actions required further development. The number of self-harm incidents and of prisoners subject to assessment, care in custody and teamwork (ACCT) case management procedures for prisoners at risk of suicide or self-harm remained far higher than at other local prisons. Prisoners who were subject to these processes felt well cared for but this was not reflected in case management arrangements, which remained poor, with some missing care maps, poorly attended review meetings and no consistency of case manager. Access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) was good and they were well supported. The number of prisoners on ACCTs being held in segregation had reduced considerably and governance arrangements were now more robust.
- S9 Security arrangements were mostly proportionate and not excessively influenced by the management of category A prisoners, although there were some procedures which remained excessive. Too many prisoners were subject to closed visits with insufficient intelligence to link them directly with trafficking through visits. The monthly security meetings considered a wide range of intelligence, including key threats. The flow of intelligence from staff was good but analysis was too limited.
- S10 Illicit drug availability had increased but was similar to that at other local prisons. There was a detailed supply-reduction strategy and proactive joint working between a range of departments to reduce the threat posed by tradable drugs.
- S11 The new incentives and earned privileges scheme had been implemented without significant impact. Documentation was generally poorly completed, particularly for prisoners on the basic level. Reviews and daily observations were not always fully recorded and it was difficult to ascertain how some decisions were justified.
- S12 The number of adjudications was similar to that at comparator prisons and the adjudications we observed were conducted appropriately.
- S13 There were relatively high levels of use of force, although many incidents were low level. The overall management of the use of force had improved considerably. The use of force meeting reviewed a wide range of data, monitored trends, including reviews of video-recorded incidents. The use of special accommodation had fallen drastically since the previous inspection, from around 40 per year to three in 2013. Monitoring was comprehensive and prisoners were removed at the earliest opportunity.
- S14 The capacity of the segregation unit had reduced owing to the refurbishment of damaged cells. Some prisoners were located on other units and subject to a reduced regime but without proper governance. The cleanliness and environment of the segregation unit had improved but the regime remained minimal. The management of prisoners on Rule 45 (segregation for own protection) had improved, with care plans for those staying for long periods and with most being returned to normal location eventually.

- S15 Care for prisoners with substance misuse needs was mostly good but treatment did not start until the day after arrival. Those requiring clinical treatment were safely monitored and managed on house unit 5, the designated stabilisation unit. However, the decision to stop subutex prescribing later in the year had caused considerable anxiety for prisoners and conflicted with clinical need. Controlled drug administration on house unit 5 was well supervised but less well monitored on other units. Prisoners with drug and/or alcohol problems could access a wide range of psychosocial interventions and mutual aid groups.

Respect

- S16 The quality of the accommodation and environment was good. Access to suitable and clean bedding and clothing was problematic. Not all prisoners could shower every day. Most prisoners said most staff treated them with respect, yet reported high levels of victimisation from staff. Diversity was well managed and there was effective support for most prisoners with protected characteristics. Faith provision was good. The number of prisoner complaints was high but quality assurance was good. Health provision had improved but mental health provision was too limited. Food was reasonable but served far too early. **Outcomes for prisoners were reasonably good against this healthy prison test.**
- S17 At the last inspection in 2012 we found that outcomes for prisoners in Woodhill were reasonably good against this healthy prison test. We made 17 recommendations in the area of respect.² At this follow-up inspection we found that 12 of the recommendations had been achieved, three had been partially achieved and two were no longer relevant.

- S18 The external environment was clean and well maintained. Wings were bright and spacious. Cellular accommodation was generally clean and better maintained than at the time of the previous inspection, although toilets remained poorly screened. Single cells occupied by two were too small and inadequately furnished. Insufficient clean clothing, bedding and towels were provided and not all prisoners could shower daily. Most showers had been refurbished and were clean but still lacked privacy.
- S19 The protected witness unit (PWU) was an oppressive environment, with facilities such as working showers, gym equipment and the visits room located on another, unoccupied unit.
- S20 Responses to prisoner applications were tracked and dealt with reasonably quickly.
- S21 Most prisoners, although fewer than at the time of the previous inspection, said that most staff treated them respectfully. We observed good staff engagement with individual prisoners on the PWU and reasonable engagement elsewhere but we saw some distant supervision on association. In our survey, 40% of prisoners reported victimisation by staff, and prisoners told us about favouritism shown by some staff as well as name-calling and intimidation.
- S22 Few prisoners said that they had a personal officer. Most electronic case notes were of poor quality, with few qualitative or regular comments. There were no recorded management checks. There was good, regular consultation with prisoners, and minutes showed that progress had been made.

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

- S23 The strategic management of equality and diversity was good, with local equality policies for each protected characteristic tailored to reflect local provision. Monthly prisoner equality meetings were attended by prisoner equality representatives and considered key issues, trends and ethnic monitoring data.
- S24 There was good consultation with prisoners about diversity matters, and issues were followed up. The number of discrimination incident report forms was relatively low and investigations were well managed.
- S25 The identification of prisoners with protected characteristics was good and data were comprehensive. There were good support arrangements for most prisoners with protected characteristics but no specific support arrangements for prisoners from a Gypsy/Romany/Traveller background. There was no specific provision for young adults.
- S26 More black and minority ethnic and Muslim prisoners than their white and non-Muslim counterparts reported being victimised by a member of staff because of their faith or ethnicity but the prison was taking active measures to address this.
- S27 The large group of foreign national prisoners had regular contact with the immigration authorities and were supported to access immigration legal advice. Translated materials were available and telephone interpreting services well used.
- S28 Prisoners with disabilities reported more negatively across a wide range of issues in our survey. We found no evidence of discrimination but met some prisoners with disabilities who felt isolated and spent long periods confined to their cells. Care plans were developed but were not routinely shared with wing staff. A paid carer scheme was in place for those on house unit 4 but had not been extended to all units. Emergency evacuation plans had been developed for most prisoners who needed them but they were not all readily available to wing staff.
- S29 Prisoners responding to our survey were more negative than at the time of the previous inspection about faith provision but we found it to be good. The chaplaincy was well integrated into the running of the prison, providing good resettlement mentoring and support to prisoners in crisis and their families. Facilities and access to worship and faith activities were good.
- S30 The number of prisoner complaints was high and over twice that at comparator prisons. Processes were timely and there were effective quality checks. Suitable information about legal services and bail information was provided during induction and bail needs were assessed.
- S31 Prisoners had good access to health services. There was a wide range of nursing and specialist clinics, and waiting times to see a GP, and for all clinics, had improved considerably. Prisoners were positive about the support they received in the inpatient unit. The regime there was relaxed but the time out of cell was not sufficiently purposeful. Medicine administration was not always carried out appropriately. Supervision had improved but was not always adequate. The management of medicines was good. Dental services were good.
- S32 Waiting times for mental health assessments had reduced but the range and quantity of mental health provision were insufficient to meet demand. Transfer times for prisoners to most NHS mental health services had improved but waiting times for transfer to some specialist services were very long.

- S33 Prisoners were very negative about the quality of the food provided. With the exception of breakfast packs, we found the food to be reasonable but served far too early.
- S34 Some prisoners waited too long for their first prison shop order. Consultation about the shop was good, with action taken as a result.

Purposeful activity

- S35 *The amount of time out of cell had deteriorated considerably and staff shortages reduced the amount of evening association. The management of learning and skills had improved and there were plans for further development. There were insufficient activity places for the population and high levels of unemployment. There had been little improvement in the quality of teaching and learning. There was insufficient focus on employability skills and too little vocational training available. Library provision was limited. The provision of both recreational and vocational PE was good. **Outcomes for prisoners were poor against this healthy prison test.***
- S36 *At the last inspection in 2012 we found that outcomes for prisoners in Woodhill were poor against this healthy prison test. We made 15 recommendations in the area of purposeful activity. At this follow-up inspection we found that six of the recommendations had been achieved, five had been partially achieved and four had not been achieved.*

- S37 For most prisoners, the amount of time out of cell had deteriorated considerably. The few prisoners who were fully employed could achieve just over nine hours unlocked per day but for others it was between four and six hours. Due to staff shortages, evening association was unduly restricted and regime slippage meant that prisoners were sometimes locked up early. Prisoners on the PWU had large amounts of time unlocked but they were poorly occupied and not enough was done to relieve the inevitable monotony of their experience.
- S38 The management of learning and skills had improved and there were well-advanced plans to develop provision, but there was no effective needs analysis or overall written strategy. Quality assurance and self-assessment processes had improved but there was insufficient use of management information to inform provision. There were too few activity places for the prison population, with less than half engaged in purposeful activity at any one time. Most activity places were full time, contributing to a high unemployment rate of 22%. Allocation processes were poor, with little consideration of prisoner need and no prioritisation of sentenced prisoners. Attendance for those allocated to education classes had improved and was adequate.
- S39 There was too little vocational training available and the range of education and vocational training did not focus enough on employability skills. There had been little improvement in the quality of teaching and learning. Most teaching and learning in education classes required improvement, although teaching in vocational areas was good.
- S40 Overall success rates for qualifications in education classes were high but too few prisoners achieved qualifications in English and mathematics. Success rates for vocational training were not measured.
- S41 Despite nine months without a provider, a functional but limited library service was provided but there had been no new library materials or access to an extended loans service over this time.

- S42 PE provision was good, with improved equipment, a wide range of activities and good access. There was an appropriate focus on healthy living. The range and level of qualifications had been extended and success rates were high.

Resettlement

- S43 A comprehensive needs analysis was in place but offender management did not have a sufficiently high profile in the wider prison. There was a backlog of offender assessment system (OASys) assessments, including for high risk of harm prisoners, and prisoners had too little contact with offender supervisors. This hindered their progress and created considerable frustration. Public protection arrangements were sound. Categorisation processes were well managed but too many prisoners were inappropriately held back from transfer. Too many home detention curfew releases were late. There was effective and early identification of resettlement needs but resettlement services were of variable quality. Accommodation and employment, training and education provision was inadequate but family provision had improved considerably. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S44 At the last inspection in 2012 we found that outcomes for prisoners in Woodhill were reasonably good against this healthy prison test. We made 15 recommendations in the area of resettlement. At this follow-up inspection we found that four of the recommendations had been achieved, two had been partially achieved, eight had not been achieved and one was no longer relevant.
- S45 A comprehensive needs analysis had been undertaken but the reducing reoffending strategy was inadequate as it did not include offender management. Offender management did not have a high enough profile across the prison and there were insufficient links between offender supervisors and other departments to coordinate reducing reoffending actions.
- S46 The backlog of offender assessment system (OASys) assessments had been reduced but was still too large and was directly hindering some prisoners' progression. Too few prisoners knew their offender supervisor and too many had little or no contact with them, to motivate and progress them. OASys assessments and risk management plans were generally of adequate quality but not all high risk of harm prisoners had them. The many short-term and remand prisoners had an effective assessment on arrival. Too many prisoners were released on home detention curfew after their earliest eligibility date.
- S47 Public protection arrangements were sound. The backlog of public protection assessments had been cleared, and contact restrictions were applied and reviewed appropriately. The public protection and interdepartmental risk management team meetings provided good oversight of issues and individual cases.
- S48 Categorisation reviews were completed on time. There was a lack of focus by offender supervisors and other staff on progressive transfers and some prisoners were on unnecessary transfer holds, which delayed their progress.
- S49 Prisoners potentially facing an indeterminate sentence were no longer identified or provided with information about the sentence. Not all indeterminate-sentenced prisoners had an up-to-date OASys assessment or sentence plan, and they no longer had access to a support forum.

- S50 Prisoners' immediate resettlement needs were assessed on arrival and referrals were made where appropriate, but this information was not routinely shared with the offender supervisor. The quality of resettlement services was variable.
- S51 Accommodation advice was provided by trained staff but recent staff shortages had made it difficult for prisoners to access support promptly. Too many prisoners had been released with no fixed abode in the previous six months.
- S52 Employment, training and education provision was weak. National Careers Service staff interviewed prisoners due for release but provided limited support. The pre-release programme had been discontinued and opportunities for prisoners to develop skills in presentation, CV production and preparation for interviews were limited. There were few links with employers.
- S53 There were effective systems for health discharge planning, although the care programme approach for prisoners with severe mental illness was underused. There were good procedures for the care and management of terminally ill patients but access to suitable cells was limited. There was good release planning for prisoners with substance misuse issues, and appropriate throughcare links had been established with local community agencies.
- S54 There was good identification of debt and benefit issues, and prisoners were referred to agencies for advice and casework support. There were no courses on money management or budgeting but prisoners were now able to open bank accounts before release.
- S55 Provision under the children, families and contact with the outside world pathway had improved greatly with the addition of family visits, the reintroduction of Storybook Dads (in which detainees record stories for their children), a family advice service and a relationships course. The visitors centre and staff provided a welcoming environment for prisoners' families, and visitors were admitted to the prison without undue delays. Visits booking arrangements were poor.
- S56 The range of offending behaviour programmes was adequate for the population, waiting lists were manageable and places were appropriately prioritised.

Main concerns and recommendations

- S57 Concern: In our survey, prisoners reported very high levels of victimisation both from staff and prisoners.
Recommendation: Prisoners' views and perceptions of victimisation should be fully explored and action taken to reduce the levels experienced.
- S58 Concern: There were high levels of self-harm (including five self-inflicted deaths over the previous two years) and high numbers of prisoners subject to ACCT processes. Not all Prisons and Probation Ombudsman recommendations had been fully developed and case management arrangements for those on ACCTs were generally poor.
Recommendation: All Prisons and Probation Ombudsman recommendations following deaths in custody should be fully implemented. The use of assessment, care in custody and teamwork (ACCT) procedures should be reviewed to ensure that they are only used when prisoners are at risk of self-harm, and the quality of assessment, reviews and case management should be improved.

S59 Concern: There were too few activity places, with less than half the population engaged in purposeful activity at any one time. Most activity places were full time, contributing to a high unemployment rate, and there was little consideration of prisoner need and no prioritisation for sentenced prisoners.

Recommendation: The number of activity places should be increased. Allocation processes should be reviewed to enable more prisoners to attend on a part-time basis and allocation should be based on meeting prisoner needs.

S60 Concern: Too many prisoners did not have an up-to-date OASys assessment and many were kept on transfer hold, hindering their ability to transfer and progress.

Recommendation: The backlog of offender assessment system (OASys) assessments should be eliminated. Transfer holds should be reviewed and used only in exceptional circumstances.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1** *Escort van punctuality had improved substantially and conditions on escorts were reasonable but prisoners were unnecessarily handcuffed between reception and vans.*
- I.2** In our survey, prisoners were more negative than at the time of the previous inspection about their treatment by escort staff, the cleanliness of vans, the provision of information about the prison and their property accompanying them, although their responses were broadly in line with those at other local prisons. The vans we inspected were clean and carried refreshments.
- I.3** Escort vans for court appearances arrived punctually. Delays were monitored and the percentage of escorts leaving the prison late had reduced from 20% at the time of the previous inspection to 2%.
- I.4** Prisoners appearing in court were not brought back immediately after their cases had been heard and many had long waits in court holding rooms. Some arrived at the prison unacceptably late in the evening, putting pressure on first night and safety arrangements.
- I.5** Some vans had long delays on arrival before entering the prison and disembarking prisoners. All prisoners were handcuffed between reception and escort vans, regardless of their risk level.
- I.6** Video-link provision was good, with two dedicated courtrooms for hearings and private interview booths for legal consultation.

Recommendations

- I.7** **Subject to risk assessment, prisoners should not be handcuffed between reception and escort vehicles, and should be informed of transfer on the evening before the move.** (Repeated recommendation I.8)
- I.8** **Prisoners should not have long waits in court before being transferred to the prison and the number of prisoners arriving late in the evening should be reduced.**

Early days in custody

Expected outcomes:

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

- I.9** Reception arrangements and conditions were generally good, although all prisoners, including those who had transferred, received a full search. The first night centre accommodation was not available for all newly arrived prisoners and induction was not delivered reliably.

- I.10** Reception was bright and clean, with information notices and televisions in holding rooms showing both public broadcasting and prison information channels.
- I.11** Staff were welcoming and efficient. All prisoners, including those transferred from other establishments, were given a full search, irrespective of the risk they presented. Prisoners did not stay long in reception, and food was provided for those who were there at mealtimes. A team of prisoners in reception had a designated role in greeting and advising new arrivals, as well as providing a Listening service (whereby prisoners trained by the Samaritans provided confidential emotional support to fellow prisoners).
- I.12** There was a dedicated first night centre for all prisoners, including vulnerable prisoners. The first night team interviewed new arrivals in private, and checked for any immediate needs and that they felt safe. A free telephone call was available for all prisoners except those about whom there were public protection concerns. Staff did not make a call on their behalf and some prisoners we spoke to had not been able to contact their families by telephone for several days because of delays in getting PIN telephone credit or their numbers added to the system.
- I.13** Although cells on the first night centre had some graffiti, they were clean and well equipped. Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) mixed with new prisoners during association to provide informal advice, and overnight observations were appropriate for new prisoners. In our survey, 77% of respondents said that they had felt safe on their first night, which was higher than at comparator prisons but much worse than at the time of the previous inspection.
- I.14** Not all new prisoners spent their first night on the unit. Those requiring detoxification services went to house unit 5, where they received appropriate support. Up to half the places on the first night centre were not available because they were taken up by prisoners deemed unsuitable for other wings or waiting for a place on the vulnerable prisoner unit. This meant that many newly arrived prisoners were distributed around the prison, and we were not assured that they received equivalent care and appropriate supervision.
- I.15** Mainstream prisoners from the first night centre were transferred promptly to the induction wing, where a well-designed, four-stage induction programme was delivered by staff and prisoners, starting on the day after arrival. In our survey, most respondents said that they had been on an induction course but several of the newly arrived prisoners we spoke to said that they did not receive the full induction because they had been located on other wings.

- I.16** Induction arrangements on house unit 4B for vulnerable prisoners had improved slightly. A prisoner representative delivered a structured induction presentation once a week, but it was not sufficiently comprehensive, not always presented on the same day and was occasionally cancelled.

Recommendations

- I.17** **Prisoners transferred in from other establishments should not be given a full search unless indicated by a risk assessment.**
- I.18** **All newly arrived prisoners should receive a high standard of first night accommodation, care and monitoring.**
- I.19** **All newly arrived prisoners should receive a full induction programme.**

Bullying and violence reduction

Expected outcomes:

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

- I.20** *The violence reduction policy and anti-bullying monitoring required review and improvement. Levels of assaults were high and prisoners reported higher levels of victimisation than at other establishments. Analysis of data on violence was reasonable but not all incidents were recorded. There had been no formal review of the safety of vulnerable prisoners, and age-appropriate risk assessment of young adults was not carried out.*

- I.21** The violence reduction policy was out of date, too generic and not yet informed by a needs analysis.
- I.22** In our survey, more prisoners than at the time of the previous inspection said that they currently felt unsafe (15% versus 9%), although this was in line with other local prisons. More prisoners than at comparator establishments and than at the time of the previous inspection said that they had been victimised by other prisoners (32% versus 24% and 27%, respectively). Specifically, more than the comparator had been intimidated, had their property stolen and been victimised by other prisoners because of debt, religion, disability and gang-related issues. The proportion reporting that they had been victimised by staff was even greater, at 40%, compared with 28% at similar prisons and 25% at the time of the previous inspection. The most common reasons reported here were debt, drugs and medication, religion and ethnic background (see also section on staff-prisoner relationships and main recommendation S57).
- I.23** There were significant gaps in the collection of data on violent incidents across the prison. Some assaults were not logged and not all unexplained injuries were investigated and recorded. The recorded level of assaults on prisoners and staff was more than double that at other local prisons but the level of fights was similar. Detailed information about incidents that had been logged was analysed at the monthly safer custody meeting and appropriate action was taken in response.

- I.24** There was a three-stage anti-bullying process, linked to the incentives and earned privileges (IEP) scheme. The process relied on monitoring the behaviour of alleged bullies but the setting of behaviour targets in the records we examined had not been effective. The process included victim support plans but these had not been completed in all cases and had not included behaviour targets.
- I.25** Concerns raised at the time of the previous inspection about the safety of vulnerable prisoners had not been fully addressed. Although they had better access to consultation, and vulnerable prisoners told us that staff were now more proactive in identifying and challenging bullying and intimidation, there had been no formal review or action plan agreed to meet prisoners' concerns. The policy to undertake an age-specific risk assessment on all young prisoners resident on the vulnerable prisoner wing had not been followed and we found that this had been carried out on only two young prisoners, out of the seven on the wing.

Recommendations

- I.26** All available data about violence and intimidation should be collected and all incidents investigated.
- I.27** All young adults should be subject to a suitable risk and vulnerability assessment before location. (Repeated recommendation HP55)
- I.28** The safety of prisoners on the vulnerable prisoner wing should be reviewed and improved. (Repeated recommendation I.35)

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.29** The incidence of self-harm and the number of assessment, care in custody and teamwork (ACCT) documents opened were high and the quality of documentation was poor, although prisoners reported feeling well cared for. There had been a large number of self-inflicted deaths in custody and the quality of responses to Prisons and Probation Ombudsman recommendations was mixed. Prisoners had access to a well-trained Listener team.

- I.30** The self-harm management strategy had been revised and provided good guidance in the identification, care and monitoring of prisoners at risk of self-harm. The safer custody officer provided a wide range of statistical information to the safer custody meeting and this was analysed to identify problem areas.
- I.31** The incidence of self-harm was high, with 252 events recorded in the previous six months, which was more than double the local prison average. The number of ACCT documents opened in the previous six months was also higher but the number open at the time of the inspection was much lower than in 2012, indicating that they were being managed more actively and closed when required.

- I.32** The quality of many of the ACCT documents we examined was poor, although prisoners currently under ACCT procedures told us that they felt well cared for. We found examples of ACCTs that had been open for several days without an accompanying care map, consistent case managers or multidisciplinary reviews (see main recommendation S58).
- I.33** At the time of the inspection, no prisoners subject to ACCT procedures were being held in segregation, and procedures for authorising the segregation of such prisoners were more robust than at the time of the previous inspection.
- I.34** There had been five self-inflicted deaths in custody since the previous inspection. Some common themes had been identified in the Prisons and Probation Ombudsman's reports, and action plans to meet the recommendations had been produced. Although some of these dealt effectively with ongoing issues, others required further development to ensure safer practice and provide a more creative response (see main recommendation S58).
- I.35** The team of 19 Listeners was well trained and supported. There was only one Listener suite in operation and meetings had to take place in the Listener's or prisoner's cell, although Listeners told us that the rota system worked well and that they were readily available.

Safeguarding (protection of adults at risk)

Expected outcomes:

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

- I.36** Some progress in developing a safeguarding strategy had been made but there was still no staff training in place.
- I.37** There was no local adult safeguarding policy or training for staff in making adult safeguarding referrals.
- I.38** There had been some progress in establishing contact between health managers and local authority safeguarding staff, and an initial meeting had been held in the prison to allocate responsibilities for taking the strategy forward.

Recommendation

- I.39** A local adult safeguarding policy and referral processes should be developed and implemented.

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

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.40** Security arrangements were mostly proportionate. There was a strong flow of intelligence from across the prison. Illicit drug availability had increased but there was a good focus on supply reduction.

- I.41** Security arrangements were mostly proportionate to the risks posed and not excessively influenced by the management of category A prisoners, who were managed effectively within the general population. However some processes were unreasonable, such as the routine handcuffing of prisoners on and off escort vehicles (see recommendation I.7), the routine strip-searching of all arriving prisoners, the application of some escape list ('E-list⁴') conditions and the imposition of closed visits without evidence of direct trafficking through visits.
- I.42** The well-attended monthly security meeting considered a wide range of intelligence, including key threats identified at the more analytical monthly intelligence meeting. Monthly objectives were agreed and communicated to relevant heads of function. However, there was little prison-wide knowledge of these, and the list of objectives on the security information noticeboard was almost a year out of date.
- I.43** Dynamic security was reasonable, although levels of interaction with prisoners were variable. There was a regular and comparatively high flow of intelligence from staff which was monitored by two intelligence analysts, but there was no monitoring of trends and hotspots.
- I.44** The establishment's random mandatory drug testing positive rate averaged 11.1% in the previous six months, which was higher than at the time of the previous inspection but similar to that at other local prisons. In our survey, a similar number of respondents to the comparator but more than at the time of the previous inspection (31% versus 22%) said that it was easy to get illegal drugs. Most intelligence reports related to drugs, as a result of which 69 suspicion tests had been completed in the previous six months, although a further 29 had been requested and not completed. The non-completion rate was not monitored. The prison was suitably focused on the threat posed by drugs, including tradable drugs. There was a detailed supply-reduction strategy which promoted good joint working with health services, activities and drug services staff, resulting in a reduction in prescribing, better supervision of medicine issue and more proactive security responses to intelligence received.

⁴ A prisoner is placed on the escape list (E list) where there are reasonable grounds for believing that there is a serious risk of an attempt to escape. Prisoners on the E list are subject to a range of restrictions including the requirement to wear identifiable E list clothing and have their activities and movements closely monitored.

Recommendations

- I.45 Visits sanctions should be imposed only when there is sufficient evidence to suggest visits-related trafficking activity.** (Repeated recommendation I.58)
- I.46 Security intelligence should be monitored for trends and hotspots.**
- I.47 A mechanism to monitor suspicion testing should be developed, to ensure that all tests are undertaken within the required time frame.** (Repeated recommendation I.60)

Housekeeping point

- I.48 All staff should be fully aware of the monthly security objectives.**

Incentives and earned privileges⁵

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.49** *The new national incentives and earned privileges policy had recently been implemented. Some staff and prisoners were unsure about how to assess prisoners on expiry of the new entry level of the scheme. Warnings were given for minor offences against discipline and were appropriate. Documentation was generally poorly completed and it was difficult to ascertain how some decisions were justified.*

- I.50** The new national IEP policy had recently been implemented without significant impact. The policy fully explained the scheme. However, some staff and prisoners were unsure of how prisoners should be assessed on expiry of the new entry level, and many assessments were incomplete.
- I.51** All demotions and promotions were based on a review but applications for enhanced status were not always dealt with quickly enough. Warnings were given for minor offences against discipline and were appropriate.
- I.52** The differentials between the three levels of the scheme were not sufficient to encourage improved behaviour and prisoners complained about the lack of incentives. Prisoners could receive different rates of pay for performing the same job, depending on their IEP status.

⁵ 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.53** Documentation was generally poorly completed, particularly for prisoners on the basic level of the scheme. Contributions were not obtained from other departments and we were not assured that the prisoner always attended boards, so it was difficult to ascertain how some decisions were justified. Staff did not always record daily observations for those on the basic level and we found evidence of reviews being cancelled owing to a lack of information, prolonging the period that prisoners remained on that level. We found no evidence of management checks of reviews.

Recommendations

- I.54** **The incentives and earned privileges (IEP) policy should be fully applied, with appropriate quality assurance and management checks.**
- I.55** **Prisoners should not receive different rates of pay for performing the same work because of their IEP status.**

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.56** *Adjudication processes were sound but there was insufficient quality assurance. The management oversight of use of force was much improved and recording was thorough. The general environment of the segregation unit had improved but, owing to recent damage, too many prisoners were held off-unit without the necessary governance. There were good links between the unit and the mental health team.*

Disciplinary procedures

- I.57** There had been 748 adjudications in the previous six months, which was similar to the number at comparator prisons. Records showed a good level of enquiry and gave a clear account of the events leading up to the charge. Prisoners were given every opportunity to engage in each stage of the process and due consideration was given to witnesses and requests for legal advice. Adjudication standardisation meetings were regular and reviewed a range of data, including the specific data relating to young prisoners.

The use of force

- I.58** The management of the use of force had improved considerably, with better monitoring through a twice-monthly meeting. This included comprehensive reviews of events and video recordings of planned interventions.
- I.59** The number of incidents involving the use of force remained relatively high but many were low level and the use of control and restraint techniques had fallen. There had been some serious incidents, with high levels of violence, involving a small group of prisoners, which had been well managed, with proportionate responses from the staff involved.

- I.60 Almost all of the records we viewed were complete, with well-constructed reports that clearly demonstrated attempts to de-escalate incidents. However, although there was clear evidence that most planned interventions were video-recorded and reviewed, the system for storing the video did not enable future access.
- I.61 Use of special accommodation had fallen drastically since the previous inspection, from around 40 per year to just three in 2013. Use of special accommodation was justified, monitoring was comprehensive and prisoners were removed at the earliest opportunity.

Housekeeping point

- I.62 The storage of recorded incidents of use of force should be improved to ensure future access.

Segregation

- I.63 At the time of the inspection, some cells on the segregation unit were out of use due to damage by prisoners, considerably reducing the capacity of the unit. The number of prisoners segregated had therefore fallen and was lower than at comparator prisons.
- I.64 Some prisoners served periods of punishment on the wings, and others who would normally have been subject to segregation for reasons such as seeking their own protection (beyond that provided by the vulnerable prisoner unit) were also on the wings, including the first night centre. These prisoners had a reduced regime, with lower levels of governance than would be required in a segregation unit.
- I.65 Cleanliness and the general environment of the segregation unit had improved, including refurbishment of the showers. Most cells were clean but some (predominantly the few for those staying for long periods) were cluttered and dirty.
- I.66 There was some provision of in-cell education and art studies but otherwise the regime on the unit was minimal, with no shared exercise or activity, irrespective of the risks posed.
- I.67 The management of those subject to Rule 45 (segregation for own protection) had improved and we saw evidence of reintegration planning, with staged gradual access to the general regime to test compliance and prepare prisoners for a return to normal location. Few prisoners were transferred out of the unit to other prisons. Care plans were in place for those staying on the unit for long periods.
- I.68 The segregation unit exercise yards were small, although some fitness equipment had been installed on one yard.
- I.69 The segregation monitoring and review group (SMARG) had not met for over six months.
- I.70 There were good links with the mental health team. Segregation unit staff had weekly supervision and advice sessions for relating to the prisoners in their care.

Recommendations

- I.71 **Prisoners should not be subject to a reduced regime without appropriate authority, governance and monitoring arrangements in place.**
- I.72 **The regime on the segregation unit should be improved, particularly for those prisoners segregated for their own protection, and should include activities and exercise in association where appropriate.**

Housekeeping point

- I.73 Segregation monitoring and review group meetings should be held at least quarterly.

Substance misuse

Expected outcomes:

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

- I.74 *The designated stabilisation unit provided a safe environment for drug- and alcohol-dependent prisoners but opiate substitute treatment did not start until the day after arrival and prisoners were anxious about imminent changes to prescribing regimes. There was a wide range of psychosocial support but this was not sufficiently well integrated with clinical interventions.*
- I.75 Alcohol detoxification for new prisoners started immediately but opiate-dependent prisoners only received symptomatic relief until they had been assessed by the clinical substance misuse team on the day after arrival.
- I.76 At the time of the inspection, 74 prisoners were receiving methadone and 13 buprenorphine (subutex), mostly on a maintenance basis, and 18 were undergoing alcohol detoxification. While controlled drug administration was well supervised on the stabilisation unit (house unit 5), monitoring was less rigorous on other house blocks, where most prisoners prescribed subutex were located (see section on health services). A recent decision to stop subutex as a treatment option had caused considerable anxiety to some prisoners and conflicted with clinical need.
- I.77 Clinical reviews took place regularly but recovery workers did not attend and there were no joint care plans to integrate clinical and psychosocial support. Although a care pathway had been developed for prisoners with substance- and mental health-related problems, the mental health team's skills mix did not include dual diagnosis expertise and the substance misuse service was not represented at care coordination meetings.
- I.78 There was 24-hour nurse cover, good monitoring and sufficient spaces for prisoners on the stabilisation unit. A range of group-work modules had been introduced and a more structured programme of support was ready to be implemented.

- I.79** The prison's substance misuse strategy had been reviewed and contained an action plan. A comprehensive needs analysis had been conducted in 2012 and was due to be repeated later in 2014. Monthly drug strategy meetings had a high profile and were well attended (see also section on security).
- I.80** Prisoners had good access to psychosocial support and 260 actively engaged. A wide range of recovery-focused group-work modules had been introduced, and were also available to prisoners with alcohol problems. Service users could participate in designated gym sessions, complementary therapies and mutual aid groups such as Alcoholics Anonymous and Narcotics Anonymous. A peer support scheme and prisoner consultation groups were also in place.

Recommendations

- I.81** Treatment for opiate-dependent prisoners should start on arrival and prescribing regimes should be flexible, based on individual need and in line with national guidance.
- I.82** Clinical and psychosocial support for prisoners should be fully integrated and include joint care plans.
- I.83** Substance misuse and mental health services should improve care coordination for dual diagnosis prisoners.

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 outside environment was excellent and well maintained. House units were bright and spacious and cellular accommodation was generally clean. The protected witness unit provided an oppressive environment. Single cells occupied by two prisoners were too small and inadequately equipped. Prisoners were not provided with sufficient clothing. Laundry facilities were adequate. Showers had been refurbished but these and toilets were still not suitably screened, and access to showers had deteriorated. Responses to applications were tracked but application forms were not freely available. Prisoners reported few problems in accessing telephones. All mail for prisoners on wings housing category A prisoners was read and there were delays in posting mail out at weekends.*

- 2.2** The external environment was exceptionally clean and well maintained. The house units were bright and spacious. Cellular accommodation was generally clean and better maintained than at the time of the previous inspection. Prisoners told us that they had no problems in getting cleaning materials.

- 2.3** On all units, single cells occupied by two prisoners were too small and inadequately furnished, with no lockable cabinets. The protected witness unit (PWU) was a discrete wing holding just 2 prisoners. It provided an oppressive environment as these prisoners rarely left the unit and had little to occupy or stimulate them (see section on purposeful activity). Facilities such as working showers, gym equipment and the visits room were located on another, unoccupied wing on the same unit.

- 2.4** In our survey, only 39% of prisoners, against the 54% comparator and 69% at the time of the previous inspection, said that they were normally offered sufficient clothing for the week. They also complained about the lack of clean towels and bedding. Staff confirmed that the availability of these items was problematic, and the stores we saw were poorly stocked. Laundry facilities were available on all units and were adequate for the population.

- 2.5** Access to showers had deteriorated with the introduction of split association periods. Only 72% of prisoners, considerably less than the comparator (77%) and than at the time of the previous inspection (95%), said that they could shower daily. Most showers had been refurbished and were clean but both these and toilets were still not suitably screened.

- 2.6** Applications were logged on all wings and responses tracked. Staff clearly attempted to manage as many applications as possible via face-to-face interaction. However, application forms were not freely available outside the dedicated daily 'application' sessions.

- 2.7** Despite the reduction in association (see section on time out of cell), prisoners reported few problems in accessing telephones. All telephones had privacy hoods. There were delays in posting mail out at weekends, with Friday's outgoing post not leaving the prison until Monday morning, although incoming post was processed on Saturdays. For prisoners on units holding category A prisoners, all incoming mail was censored, and all letters not written in English had to be translated, irrespective of whether the prisoner was category A.

Recommendations

- 2.8 Two prisoners should not be held in cells designed for one.**
- 2.9 The protected witness unit (PWU) should be located on a unit with all the required facilities.**
- 2.10 Prisoners should have access to sufficient clean clothing, bedding and towels.**
- 2.11 All prisoners should be able to shower daily, and showers and toilets should be suitably screened.**
- 2.12 Non-category A prisoners should not have their mail routinely censored or translated.**

Housekeeping points

- 2.13 All double cells should have lockable cabinets.**
- 2.14 Application forms should be freely available.**

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.

2.15 *In our survey, fewer prisoners than at the time of the previous inspection said that staff treated them respectfully, few said that they had a personal officer and 40% reported victimisation by staff. We saw generally reasonable engagement with individual prisoners but saw some distant supervision on association. Most electronic case notes were of a poor quality and there were no recorded management checks. Good consultation with prisoners took place regularly.*

- 2.16** In our survey, 77% of prisoners said that most staff treated them respectfully, which was similar to the comparator but considerably less than at the time of the previous inspection (88%).
- 2.17** Disturbingly, in our survey 40% of prisoners said that they had been victimised by staff, for a variety of reasons (see section on bullying and violence reduction). In our groups, prisoners told us of favouritism shown to some prisoners. Individuals reported intimidation by staff and name-calling for reasons such as having a disability (see main recommendation S57). We saw generally reasonable engagement between staff and prisoners. Supervision during association was good on some units but distant on others, with staff remaining away from the areas where prisoners congregated. On the PWU, relationships with the small group of prisoners were good.
- 2.18** There was no publicised personal officer scheme, although officers' names were written on cell cards. In our survey, only 16% of respondents said that they had a personal officer, against the 44% comparator, and 68% said that there was a member of staff they could turn to for help, against the 73% comparator and 83% at the time of the previous inspection.

- 2.19** Electronic case notes were sparse and mostly of poor quality, with few qualitative or regular comments. We found no evidence of management checks.
- 2.20** Consultation with prisoners was good and regular, and minutes of the prisoner consultative council (PCC) showed progress made. Some meetings concentrated on particular topics such as the prison shop and catering, when complaints in these areas increased. Prisoners on the PWU were not regularly consulted formally and complained that they had not had their opinions considered at the main PCC meeting.

Recommendation

- 2.21** **Electronic case notes should reflect engagement between staff and prisoners and the circumstances of individual prisoners. Management checks should be undertaken to ensure quality.**

Housekeeping point

- 2.22** Prisoners on the protected witness unit should be consulted regularly and their views presented to the prisoner consultative council meeting.

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 characteristic⁶ 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.

- 2.23** *The strategic management of equality and diversity was good. There were good consultation arrangements with prisoners, which fed into senior meetings to discuss equality issues, trends and data. However, not all protected characteristics were monitored and discussed at meetings. Equality information was well promoted around the prison. In our survey, more black and minority ethnic and Muslim prisoners than their white and non-Muslim counterparts said that they had been victimised by a member of staff because of their faith or ethnicity but the prison was taking active measures to address this. Prisoners with disabilities reported negatively across a range of issues, and felt unsafe. There was good support for older prisoners, those with disabilities, foreign national prisoners and gay and bisexual prisoners. Gypsy/Traveller/Romany prisoners did not receive any specific support and there was no tailored provision for young adults.*

⁶ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Strategic management

- 2.24** The strategic management of equality and diversity was good. The overarching equality policy was thorough, and local equality policies for each protected characteristic were up to date and tailored to reflect local provision.
- 2.25** Monthly prisoner equality meetings were chaired by the governor or deputy governor and were well attended, including prisoner equality representatives. Meetings considered key issues, trends and ethnic monitoring data, using a comprehensive report from the equality team. However, there was little discussion of issues concerning prisoners from a Gypsy/Traveller/Romany background or young adults. An action plan was used to monitor progress against agreed tasks, and key issues were reported to senior management team meetings.
- 2.26** The number of discrimination incident report forms submitted was low, at 32 in the previous six months. Investigation procedures were thorough, most were prompt and all were reviewed by the governor. There were no arrangements for external quality assurance.
- 2.27** There was good consultation with prisoners about diversity matters, and issues were followed up. Three equality officers worked well together to cover all equality tasks, and were well known among prisoners and staff. Information about the type of support available and the contact details of the equality team were well publicised to prisoners. Most units had a staff equality representative, but not all had a prisoner equality representative, despite efforts to recruit more volunteers.

Housekeeping points

- 2.28** Equality meetings should cover all protected characteristics.
- 2.29** Investigation of discrimination incidents should be externally quality assured.

Protected characteristics

- 2.30** The identification of prisoners with protected characteristics was good and data were comprehensive. The equality team ran a number of dedicated forums for black and minority ethnic prisoners and foreign nationals, and a general clinic on most units each month. The clinic allowed prisoners to drop in for one-to-one support and ensured that equality staff were well known around the prison.
- 2.31** In our survey, more black and minority ethnic and Muslim prisoners than their white and non-Muslim counterparts said that they had been victimised by a member of staff because of their faith or ethnicity. Only half of Muslim prisoners, against 80% of non-Muslims, said that most staff treated them respectfully. Active measures were being taken to address these perceptions through regular forums and work with the chaplaincy.
- 2.32** There was no dedicated support for prisoners from a Gypsy/Traveller/Romany background (although they were encouraged to attend the general consultation meetings), and the number identified by the prison was lower than in our survey.
- 2.33** There were 120 foreign national prisoners at the time of inspection, representing 14% of the population. A wide range of translated material was available, including induction packs, prisoner information handbooks and material about how to make a complaint. Professional telephone interpreting services were used appropriately during induction and were

accessible by unit staff for use at other times. Prisoners of the same nationality were located close together where possible, and unit staff knew which prisoners could help with interpreting. The foreign nationals coordinator maintained good records of all prisoners, and several forums had been held in the previous six months.

- 2.34** At the time of the inspection, 25 immigration detainees were being held, several for some months, beyond their sentence expiry. Those we spoke to were frustrated at not being moved to immigration removal centres, and some were located a long way from family in other parts of the UK. There were monthly clinics, attended by immigration authorities. A local firm of immigration solicitors attended the prison once a month and ran a free clinic for prisoners. Lists of immigration solicitors were available on all units and from the foreign nationals coordinator.
- 2.35** At the time of the inspection, there were 91 prisoners with a disability (representing 11.9% of the population), and there was an effective screening system to identify them. The disabled and older prisoner liaison officer (DOPLO) met all older prisoners and those with a disability soon after arrival. A thorough log of their needs and daily routines was maintained and used to inform a care plan, although this was not shared with staff on the units. Reasonable adjustments to cells were made promptly, although there had been some delays in repairing and sourcing adequate wheelchairs.
- 2.36** There was generally good support and engagement with older prisoners and those with disabilities. However, prisoners with disabilities reported more negatively across a wide range of issues in our survey. Although we did not find evidence of discrimination, we met two prisoners with disabilities who felt isolated and spent long periods in their cells. There was a paid carer scheme for those on the vulnerable prisoner unit but this was not promoted on other units. Carers we spoke to offered useful support but this had not been formalised into an agreed plan. A group for older prisoners run by the Salvation Army met regularly and the gym held regular dedicated sessions for older prisoners. Personal evacuation plans had been developed for most, but not all, prisoners who needed them but not all wing staff knew about them.
- 2.37** There were policies for gay or bisexual, and transgender prisoners, and some good recent awareness training for staff. A local support group, Q:alliance, attended a monthly support group organised for prisoners who identified as gay or bisexual and also offered one-to-one support to those who did not want to attend a group.

Recommendations

- 2.38** **The negative perceptions of Muslim and black and minority ethnic prisoners about staff behaviour should be addressed.**
- 2.39** **Prisoners from a Gypsy/Traveller/Romany background and young prisoners should be able to access specific support.**
- 2.40** **Relevant information from care plans about the daily living needs of older prisoners and those with disabilities should be shared with wing staff.**
- 2.41** **The carer scheme should be available to all prisoners with support needs, and formalised support plans should be provided which are monitored and reviewed regularly.**

Housekeeping points

- 2.42** Sufficient wheelchairs should be provided to meet the needs of prisoners, and prompt repairs carried out when necessary.
- 2.43** Personal emergency evacuation plans should be in place for all prisoners who need them, and should be easily available to wing staff.

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.

- 2.44** *Faith provision was generally good, although prisoners in our survey were negative about some aspects of it. The chaplaincy provided good support to prisoners and was well integrated into the life of the prison. There were good links with local community and faith organisations, and the resettlement chaplain had supported some referrals for post-release mentoring. Faith facilities were good.*
- 2.45** In our survey, fewer prisoners than at comparator establishments and than at the time of the previous inspection said that they could speak to a religious leader of their faith in private and that it was easy to attend religious services. However, we found faith provision to be generally good.
- 2.46** The chaplaincy was well integrated into the running of the prison. All newly arrived prisoners were seen by a member of the team, and the services available were clearly advertised around the prison. The team provided good support to prisoners in crisis and to their families. The resettlement chaplain had assisted a small number of prisoners to access mentoring schemes with local community organisations on release.
- 2.47** Facilities for worship and faith activities were good. There were purpose-built ablution facilities and a well-used community hall and multi-faith area. A range of faith-based classes were available and the chaplaincy was building good links with community groups and outside speakers.
- 2.48** A range of cultural and religious festivals had been celebrated and promoted, including Black History Month. A Disability Day in October 2013 had been attended by 130 prisoners and eight external organisations, including health charities, learning disability support groups and advice agencies.

Recommendation

- 2.49** **The negative perceptions of some prisoners about access to chaplains and ease of attending services should be explored and addressed.**

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.

- 2.50** *The number of prisoner complaints was high. Quality control processes and the general quality of responses were good.*

- 2.51** The number of complaints submitted was over double that in comparator prisons. The most common complaints were about access to property and the inability to gain employment.
- 2.52** In our survey, more prisoners than at comparator prisons said that it was easy to make a complaint, and forms were freely available on all wings. Clear instructions on how to make a complaint and the subsequent appeal process were displayed in residential units.
- 2.53** Responses to complaints were timely and those we saw were generally polite and answered the complaint appropriately. There was regular quality control and we saw some robust challenges and responses to staff. Monitoring was comprehensive and a monthly report identified areas of concern for the senior management team to address.

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.

- 2.54** *Prisoners with bail information needs were identified promptly, and recall packs issued to those on licence recall. Arrangements for legal visits were effective and there was good provision of legal information in the library.*

- 2.55** Bail needs were identified during induction and information about legal services was well promoted. Issues were followed up by resettlement and legal services officers, who also issued recall packs to those on licence recall.
- 2.56** Provision for legal visits was good and visits rooms were clean. There was a good supply of legal books in the library.
- 2.57** In our survey, more prisoners than at the time of the previous inspection (41% versus 31%) said that their legal mail had been opened by staff. However we found such instances to be infrequent and procedures to document such instances were appropriate.

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.

- 2.58** There was good access to health services. A wide range of nursing and specialist clinics was provided and the waiting times to see a GP, and for all clinics, had improved. Pharmacy services were satisfactory but medicine administration was not always carried out appropriately. Supervision of drug administration by discipline staff had improved but was not always adequate. Dental services were good. The integrated mental health team provided a reasonable service but the range of support available was too limited and provision did not meet demand. Transfer times for prisoners to most NHS mental health services had improved but waiting times for transfer to some specialist services were very long.

Governance arrangements

- 2.59** The new provider of services was now well established and there were good joint working relationships, with the governor and head of health care attending the partnership board. Health services were provided in a large health centre, a separate inpatient facility and treatment rooms on each of the house units. Most clinical areas were well equipped and appropriate.
- 2.60** A comprehensive health needs assessment had been completed in 2013 and was used to inform the development and delivery of services. Clinical governance meetings were held regularly and there was a good level of communication. At the time of the inspection, there were few vacancies.
- 2.61** Health services were well managed by a senior nurse, supported by a deputy and two senior nurses leading primary care and mental health services. Clinical staff were qualified in specialist skills and available 24 hours a day. Training needs were well supported by the provider and there was access to local courses. Most mandatory training was up to date but there had been a delay in the provision of basic life support courses. There were robust mechanisms for providing clinical supervision to all staff.
- 2.62** GPs delivered clinics twice daily and were available to see all new receptions; a more limited service was available over the weekend. The out-of-hours cover was provided by the same GPs. Pharmacy services were supplied by the in-house pharmacy, which was staffed by three pharmacists and two registered technicians. Dental services were provided by the NHS and up to five sessions were delivered each week.
- 2.63** Emergency resuscitation equipment was located on each of the house units, in reception and in the health centre. The kit was well maintained but automated external defibrillators (AEDs) were not checked daily. Clinical records were compiled using SystmOne (the electronic clinical record) and remaining paper records were archived appropriately when required.
- 2.64** In our survey, fewer prisoners than at comparator prisons and than at the time of the previous inspection rated the overall quality of health services as good. Prisoner views were discussed at a monthly health care forum, with representation from each of the house units.

Health care complaints were well managed using the general prison process or NHS system as appropriate. There were an average of 50 such complaints each month and the selection that we saw had been dealt with in a timely and sensitive manner.

- 2.65** Prisoners were given information about the health services available but there was nothing available in languages other than English. A good health promotion strategy had been developed and a range of health promotion screening and advice was provided. The waiting rooms in the health centre were of a good size but contained little to occupy patients and no health promotion literature, although this was available on the house units. Prisoners were told how to acquire condoms if required.

Recommendations

- 2.66 All staff should receive annual mandatory training in basic life support skills.**
- 2.67 Health care information should be available in a range of languages.**

Housekeeping points

- 2.68** Automated external defibrillators should be checked daily.
- 2.69** Waiting rooms in the health centre should display relevant health promotion material.

Delivery of care (physical health)

- 2.70** Health care facilities in reception were good and initial screening was carried out effectively by senior nurses. All prisoners received secondary screening.
- 2.71** Three GPs were contracted to provide clinics throughout the week. Attendance rates were satisfactory and waiting times had improved considerably, with the longest wait being eight days for a routine appointment at the time of the inspection. Nurses prioritised patients but none had received any training in triage. There were three practice nurses and one nurse prescriber and they delivered a wide range of clinics. Visiting specialists provided additional support, reducing the need for outside hospital appointments. Waiting times for all clinics had improved. In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection were satisfied with access to the doctor and nurse.
- 2.72** Segregated prisoners were seen by health services staff each day and by mental health nurses when required. Relationships between the segregation unit and health services staff were good. Arrangements for patients' outside hospital appointments were well managed and there were few cancellations as a result of a lack of escort staff.
- 2.73** The 15-bed inpatient unit provided a pleasant living environment. Prisoners were only admitted for clinical reasons, against clear admission criteria. All residents had comprehensive individual care plans. Prisoners spoke highly of the care they received there and we saw positive, respectful interactions. Although most patients were unlocked throughout the day, there was insufficient recovery-focused activity.

Recommendations

- 2.74 Nurses should be trained in triage to ensure consistency of treatment.**
- 2.75 The regime for inpatients should include appropriate therapeutic activity.**

Pharmacy

- 2.76** Pharmacy staff did not see patients, and no community-equivalent services were provided. Patients received their medication either under supervised administration or weekly or monthly in possession, according to a risk assessment; however, this was not recorded on the computer software used by the prescribers. The assessments were not robust or reviewed in accordance with the policy; the policy was being reviewed at the time of the inspection.
- 2.77** Patients received their medicines in a timely manner, with all prescriptions being dispensed and supplied on the same day. There was the facility for night-time doses to be given at appropriate times, and on some house units medication requiring 12-hourly doses was given appropriately, although on one house unit they were not, with doses given at 8am and 3pm. Little stock was used, with most medication supplied on a named-patient basis.
- 2.78** Medication to be given under supervision was supplied by nurses, with improved supervision by discipline staff, but at times administration was intermittent because of the lack of availability of a discipline officer. On at least two house units, we saw nurses putting medicines into separate pots before the arrival of the patient, and on all house units we saw pot lids labelled with patients' names, implying that this practice occurred throughout the prison. We were told that patients who could not leave their cells were supplied in this way, with the administration charts being marked once the nurse had returned to the treatment room; this did not follow Nursing and Midwifery Council guidance. Some medicines were crushed before administration, for security reasons; there had been a full risk assessment of this practice before it had started.
- 2.79** Medicines were mostly stored appropriately. However, in the first night centre the medicines and controlled drugs cabinets were unlocked, even though there were no staff present in the treatment room. The maximum and minimum temperatures of the refrigerator in this room were not monitored, with only the current temperature measured, even though it was used to store vaccines, which are heat sensitive. On house unit 6, the temperature in the treatment room was relatively high and may not have been suitable for medicine storage.
- 2.80** The out-of-hours cupboard contained medication for supply when the pharmacy was closed. Access to this was limited to nursing staff, and medication for discharge or court was stored there until needed. A variety of medicines were available for supply by nurses on patient group directions.

Recommendations

- 2.81 Patients should have direct access to pharmacy staff, and pharmacist-led clinics should be set up.**
- 2.82 All medicine administration times should be regularly supervised by discipline staff.**

- 2.83 The use of pots before administration of medication is dangerous and should stop.**
- 2.84 Administration charts should be filled in immediately after administration, in accordance with Nursing and Midwifery Council guidance.**

Housekeeping points

- 2.85** The review for drug administration and electronic recording of risk assessments should be carried out as soon as possible.
- 2.86** Both the maximum and minimum temperatures of all refrigerators should be recorded daily.

Dentistry

- 2.87** A large dental suite was located on the ground floor of the health centre and comprised a surgery and decontamination room. The suite was bright and well equipped and complied with infection control guidelines. Waiting times to see the dentist were acceptable, with waits of up to eight weeks. At the time of the inspection, there were 69 prisoners waiting for an appointment and the number of sessions was sufficient to meet the demand. Appointments were managed electronically using SystmOne and patients were triaged to ensure that priority cases were seen early. In the appointments we observed, patients were treated well but the surgery door remained open throughout the session, compromising privacy.

Housekeeping point

- 2.88** Subject to a risk assessment, the dental surgery door should be closed during treatment, to ensure that patients' privacy is maintained.

Delivery of care (mental health)

- 2.89** There were effective working relationships between prison and mental health staff. Although some prison officers had received mental health awareness training, there was no targeted training program to enable custodial staff to identify and support prisoners with mental health problems.
- 2.90** The mental health service had moved to an integrated primary and secondary mental health and learning disability service. Staffing shortages had had a serious impact on service delivery but there had been a consistent team of three mental health nurses, led by an experienced clinical manager. There were five sessions of forensic consultant psychiatrist time weekly.
- 2.91** The demand for mental health support was high. In our survey, 48% of prisoners said that they had mental health problems, considerably more than the comparator (35%) and than at the time of the previous inspection (37%). The team received an average of 90 referrals a month through the open referral system. Waiting times for assessment had improved but most non-urgent referrals still waited 2–4 weeks to be seen. There were robust systems to provide prompt emergency appointments and the availability of evening and weekend appointments improved access for prisoners who worked.

- 2.92** The team supported 112 prisoners with mild-to-moderate mental health needs and 18 with severe and enduring mental illness. In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection said that they were being helped with mental health issues but there were no counselling services, psychological therapies or groups available. There were good self-help support materials available.
- 2.93** Everyone on the mental health caseload had a care plan. Clinical records and community liaison were good.
- 2.94** Thirteen patients had been moved to NHS mental health facilities in 2013. Transfer times had improved but there was some delay when more specialist transfers were required.

Recommendations

- 2.95** All discipline officers should receive regular mental health awareness training to enable them to recognise and take appropriate action when a prisoner has mental health problems.
- 2.96** Prisoners should have timely access to a full range of support for mild and moderate mental health problems, including counselling, clinical psychology and group therapies.

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.

- 2.97** Our survey results about the food provided were poor. The food we tasted was reasonable but served too early. Consultation arrangements were good.

- 2.98** Only 13% of prisoners responding to our survey said that the food provided was good or very good, which was far worse than at comparator prisons and than at the time of the previous inspection. The food we tasted was reasonable and portion sizes were adequate. However, staff supervision was inadequate, allowing inequitable portion sizes to be served. Meals were served far too early, and we saw lunch being served at 11.20am. Breakfast packs were meagre and issued on the day before they were to be eaten.
- 2.99** The main kitchen was clean and reasonably well maintained. Food preparation areas were generally clean but the trolleys used to transport meals to the wings were filthy, with many containing burned-on old food.
- 2.100** Servery workers did not always wear protective clothing, and food temperature recording was poor. Kitchen workers received basic hygiene training but there was little opportunity to gain formal qualifications (see section on learning and skills and work activities).
- 2.101** There had been no food-related prisoner survey for over 12 months, although consultation was regular via the PCC.

Recommendations

- 2.102 Prisoners' poor perception of the food provided should be investigated and addressed.**
- 2.103 Lunch should not be served before 12 noon and the evening meal not before 5pm, and breakfast should be issued on the day it is to be eaten.**
- 2.104 Food hygiene arrangements should be improved, including the monitoring of food temperature and wearing of protective clothing.**

Purchases

Expected outcomes:

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

- 2.105** *Prisoners could wait too long for prison shop orders. Consultation about the shop was regular and effective.*
- 2.106** In our survey, fewer black and minority ethnic, foreign national and Muslim prisoners than their white, British and non-Muslim counterparts said that the prison shop sold a wide enough range of goods to meet their needs. However, there was regular consultation about the shop at the PCC, and the prison had taken steps to provide alternative suppliers to supplement shop provision in response to the concerns raised.
- 2.107** Waits for initial shop orders for newly arrived prisoners were long, and could be up to 21 days. This increased the risk of debt and bullying, and the provision of canteen smokers' packs or basic grocery packs during this period only partially mitigated the impact.
- 2.108** Access to catalogues was reasonable but a standard administration charge of 50 pence was added to each order.

Recommendations

- 2.109 The length of time that prisoners wait for their initial order should not exceed seven days.**
- 2.110 There should not be a charge for catalogue orders.**

Section 3. Purposeful activity

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.⁷

- 3.1** *The amount of time out of cell had deteriorated considerably. A little over a third of prisoners said that they went on association more than five times a week. At weekends, prisoners could be locked in their cells for over 17 hours, apart from being unlocked for their evening meal. Prisoners on the protected witness unit had no access to work, limited access to education and no evening association.*

- 3.2** The amount of time out of cell for the minority of prisoners who were fully employed and had evening association was just over nine hours per day. The reality for most prisoners was between four and six hours per day. Due to staff shortages, a restricted association rota had been introduced, whereby prisoners had alternate access to evening association. Regime slippage also led to prisoners being locked up earlier than they should have been.

- 3.3** Prisoners who worked full time experienced little association as this took place while they were working, and in the evening they were often locked up, in accordance with the rota. In our survey, only 38% of prisoners said that they went on association more than five times per week, against the 43% comparator and 72% at the time of the previous inspection.

- 3.4** Under the association rota, at weekends some prisoners could be locked in their cells for over 17 hours, apart from a short period when they were unlocked for their evening meal.

- 3.5** Exercise took place daily but on weekdays it was held during the morning work period, so was missed by those at work or education activities.

- 3.6** Prisoners held on the protected witness unit (PWU) had large amounts of time unlocked but no access to work and limited access to distance learning. Evening association was not available for them, and not enough was done to relieve the monotony of their experience.

Recommendations

- 3.7 All prisoners should have access to daily association and exercise.**

- 3.8 The regime on the PWU should be improved, to provide adequate work, education and association opportunities.**

⁷ 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.

- 3.9** *The management of learning and skills had improved and there were plans for further development. There were insufficient activity places for the population and high levels of unemployment. There had been little improvement in the quality of teaching and learning. There was insufficient focus on employability skills and too little vocational training available. Library provision was limited.*
- 3.10** Ofsted⁸ made the following assessments about the learning and skills and work provision:
- | | |
|--|----------------------|
| Achievements of prisoners engaged in learning and skills and work: | Requires improvement |
| Quality of learning and skills and work provision: | Requires improvement |
| Leadership and management of learning and skills and work: | Requires improvement |

Management of learning and skills and work

- 3.11** The recent appointment of a learning and skills manager had resulted in clear actions to improve the provision but much of this had yet to impact on the experiences of prisoners, and overall management still required further improvements. The prison's plans to introduce qualifications in horticulture and painting and decorating were well advanced. However, a written strategy for learning and skills, to ensure a coherent and unified approach to developing the provision, had not yet been developed.
- 3.12** A needs analysis, from July 2012, focused only on education and had not resulted in a clear plan to implement an appropriate curriculum. Insufficient attention was given to developing prisoners' English, mathematics and employability skills.
- 3.13** The most recent self-assessment report gave an accurate assessment of the quality of the provision. Teachers in education classes had individual action plans to help them to improve but vocational training teachers were not routinely observed. Observations of teaching were generally accurate but improvements in the quality of teaching were slow and not fully defined in the improvement plan.
- 3.14** A range of performance data was analysed and used to challenge the contracted education provider's achievements but this rigour did not apply to vocational training.

⁸ 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>.

- 3.15** The allocation of prisoners to work and education took insufficient account of individual educational needs and employment aspirations, and did not adequately prioritise sentenced prisoners (see main recommendation S59). However, the requirement for all prisoners with below level 1 skills in English and mathematics to attend education classes before starting work had resulted in a higher number of prisoners starting these qualifications.

Recommendation

- 3.16 A comprehensive needs analysis and improved use of data should inform provision and more attention should be given to improving prisoners' English, mathematics and employability skills.**

Housekeeping point

- 3.17** Observation of teaching and learning should be extended to vocational training.

Provision of activities

- 3.18** There were too few activity places, with less than half of the population engaged in purposeful activity at any one time and high levels of unemployment. Most work activities were full time, contributing to the high unemployment rate of 22% (see main recommendation S59).
- 3.19** There were 270 full-time work places and attendance was good, with 92% of places utilised, which was similar to the situation at the time of the previous inspection. Prisoners could work in waste management, the mosaics workshop, the assembly workshop, the kitchens, the gardens, the laundry or as orderlies on the wings. Work in the small assembly workshop was mundane and low skilled.
- 3.20** Programmes delivered by Milton Keynes College included English, mathematics, information and communications technology (ICT), business enterprise, art, music, catering, social and life skills, and business studies. Programmes were offered from entry level to level 1, with a few opportunities to study at levels 2 and 3 and to undertake distance learning and Open University courses.
- 3.21** There was too little vocational training available. Qualifications were available in ICT, industrial cleaning and catering. Few kitchen workers undertook qualifications in catering, other than essential food hygiene awards.

Recommendation

- 3.22 The number of vocational training opportunities should be increased.**

Quality of provision

- 3.23** Most teaching and learning was no better than satisfactory, although it was good in vocational areas. In the better lessons, teachers managed learning well and used a range of teaching methods that ensured that prisoners developed good independent learning skills and were able to self-assess the quality of their work objectively. Individual coaching was generally effective and ensured that learners made at least satisfactory progress. Teachers were well qualified and had good subject knowledge. However, in most lessons teachers did not adequately plan to meet individual needs. Classes often consisted of prisoners working towards differing levels of qualifications, with a wide range of starting points and abilities. Too often the teaching focused on the whole class rather than individual learners and in these lessons, too many prisoners did not make the progress of which they were capable.
- 3.24** In work and vocational training, the relationship between staff and the prisoners was good. Prisoners were fully engaged and enthusiastic about their learning. However, teachers did not use individual learning plans effectively to set targets and record progress.
- 3.25** Too often, teachers did not take sufficient time at the end of lessons to ensure that prisoners had achieved their in-class goals and understood the progress they were making against their personal starting point.
- 3.26** Initial assessment arrangements were appropriate. However, teachers did not use the results sufficiently to plan learning. Support for prisoners with additional learning needs, such as dyslexia, was underdeveloped.

Recommendations

- 3.27** **The quality of teaching and learning training should be improved.**
- 3.28** **The quality of individual learning plans should be improved and include the planning and monitoring of personal and social skills and employability skills in all areas.**
- 3.29** **The results of initial assessment should be better used in planning learning activities to meet individual needs.**

Education and vocational achievements

- 3.30** Overall success rates for qualifications in education classes were high but too few of the qualifications provided the skills and knowledge likely to improve prisoners' chances of finding employment on release. Too few prisoners gained qualifications in English, mathematics and employability skills, and success rates for these qualifications varied too much.
- 3.31** The prison had not, until recently, collected sufficient data to analyse the success rates of vocational courses, although most prisoners who completed these programmes achieved the intended qualification. The standard of work in the mosaics workshop was generally good and a few prisoners had progressed to self-employment or art college.

Recommendation

- 3.32 The number of prisoners gaining qualifications in vocational subjects, employability skills and English and mathematics should be increased further.**

Library

- 3.33** At the time of the inspection, the prison had not had a library service provider for nine months. The library was managed and operated by a prison officer, supported by two prisoner orderlies. A new service provider was due to take over management of the library but not until April 2014. New prisoners did not routinely receive information about library services.
- 3.34** The quality and quantity of library materials were adequate but no new library materials had been introduced for nine months. The stock available for foreign national prisoners was adequate. A limited but out-of-date range of music CDs, audio books and language tapes was available. Prison Service Orders were current and readily available. A small collection of books was available for prisoners on the segregation unit, the inpatient unit and the PWU. The prison was not linked to an extended loans service.
- 3.35** The library was open four and a half days a week, but not during the evenings or at weekends. Prisoners attending education classes had good access to it. Library sessions were scheduled for other prisoners, including full-time workers, but no data were collected to monitor these arrangements or to ensure that access was adequate and fair.

Recommendations

- 3.36 The range of library resources should be updated and extended.** (Repeated recommendation 3.40)
- 3.37 Data on the use of the library and its stock should be collected and used to improve access.**

Housekeeping point

- 3.38** A loans system should be introduced to provide access to texts not in stock.

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.

- 3.39** *The gym was popular and effective, and access was good. It had good links to the health care department and promoted healthy living well. It provided an appropriate range of activities for older prisoners and a wide range of relevant qualifications, for which success rates were high.*

- 3.40** Prisoners received a thorough induction to the gym within two days of arrival, including a health screening assessment. Where appropriate, they were referred to the health care department.
- 3.41** Access to recreational gym sessions was good, and on average 55% of prisoners made use of the facilities. Enhanced-level prisoners could attend up to five sessions a week; all others could attend up to four sessions a week. Full-time workers and enhanced-level prisoners could attend the gym during the evening and at weekends. The department had a strong focus on healthy living and provided appropriate individual programmes for prisoners referred from the health care department and drug treatment service, as well as dedicated sessions for older prisoners. Vulnerable prisoners had adequate access to the gym.
- 3.42** The gym was large and provided a variety of indoor activities, including football, badminton, tennis and circuit training. The area dedicated to cardiovascular machines had been extended to accommodate resistance exercise equipment. Additional exercise equipment was available for prisoners on the PWU but was unsupervised. An all-weather five-a-side pitch was available for football and jogging. Shower and changing facilities were adequate.
- 3.43** Suitably qualified staff provided a wide range of vocational programmes. Qualifications were available at levels 1 and 2, and included active IQ health and fitness, emergency first aid, and healthy food and special diets. Qualification success for PE courses was high.

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** *The reducing reoffending strategy was limited but a good needs analysis had been completed. Offender management did not have a high enough profile across the prison, and as a result formal information exchange with offender supervisors was limited. Offender management and resettlement staff worked too much in isolation of each other. Offender supervisors were appropriately trained but uniformed offender supervisors did not receive regular practice-based supervision.*

- 4.2** There had been no head of offender management throughout most of 2013 and this had significantly hindered the progress made since the previous inspection.
- 4.3** The reducing reoffending strategy was underdeveloped and did not include offender management. As a result, offender management did not have a high enough profile across the prison and not all staff understood its purpose or importance. Strategic links between offender management and resettlement were limited, with the head of the offender management unit (OMU) not yet attending the reducing reoffending committee meeting. There was also a lack of information exchange between wing, resettlement, induction and safer custody staff and the OMU.
- 4.4** The strategy had an action plan, which covered the resettlement pathways and was monitored at the regular committee meeting. However, there was little evidence of evaluation of outcomes. Priorities for offender management were not included in the action plan, making it difficult to see how progress would be made or monitored.
- 4.5** A good needs analysis had been completed in December 2012, drawing on a range of data and sources of information, including offender assessment system (OASys) assessments. This provided clear recommendations and included an analysis of the different types of prisoner held at the establishment.
- 4.6** The OMU staff group was positive and clear about their role. There was good commitment to training and almost all of the nine offender supervisors we interviewed said that they had been sufficiently well trained. However, uniformed offender supervisors did not receive regular practice-based supervision, to support effective case management and promote accountability.

Recommendations

- 4.7** **The reducing reoffending strategy should include a detailed vision for offender management, supported by a clear action plan which is monitored and evaluated.** (Repeated recommendation 4.7)

- 4.8 All offender supervisors should receive regular supervision to promote effective case management.**

Housekeeping point

- 4.9** Information exchange between the offender management unit and other departments should be improved.

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.

- 4.10** *The backlog of offender assessment system (OASys) assessments had reduced but was still too large, and we found examples of high risk of harm cases without a current assessment. Prisoners did not always know their offender supervisor and contact with those serving over 12 months was ad hoc or absent in too many cases. The quality of sentence plans was inadequate and insufficient attention was given to progressing prisoners, including transfers to other prisons. Some home detention curfew releases were late. Categorisation work was up to date but some prisoners' progressive moves were delayed. There was no specific support or provision for indeterminate-sentenced prisoners.*
- 4.11** Staff shortages and cross-deployment in the OMU had hindered work and led to a large backlog of OASys assessments. Although a short-term action plan had reduced the number of OASys assessments waiting to be completed, at the time of the inspection there were still over 50 outstanding. Some were many months late and some were for high risk of harm and indeterminate-sentenced prisoners (ISPs) (see main recommendation S60). Prisoners without an OASys assessment experienced difficulties in progressing, and this was one of the main areas of frustration reported to us during the inspection.
- 4.12** The quality of OASys assessments completed by external offender managers was mixed but the few we looked at which had been completed by the offender supervisors at the prison were good. Probation officers and the senior probation officer at the establishment provided excellent quality assurance of these.
- 4.13** No risk of serious harm assessment had been completed in 25% of the 20 in-scope cases (prisoners serving 12 months or more and classified as posing a high risk to the public) we looked at. Too many of these cases did not have an adequate risk management plan.
- 4.14** In our survey, fewer prisoners than at other local prisons said that they had a named offender supervisor. Initial contact with an offender supervisor was delayed in too many cases. Contact with prisoners in scope of the offender management model was also variable; some received regular contact, while others went for months with no meaningful contact. Two of the cases we inspected had not seen an offender supervisor over the previous year. In another case, the offender supervisor was under the erroneous impression that the prisoner had been transferred out of the establishment and had therefore not contacted him for some months. There was no management oversight of contact levels.

- 4.15** Prisoners serving under 12 months did not have an allocated offender supervisor. However, resettlement officers assessed the immediate needs of the many short-term and remand prisoners on arrival and made appropriate referrals.
- 4.16** The quality of sentence plans was inadequate. Education, chaplaincy and wing staff made no contribution to sentence planning. Sentence plan objectives were relevant but not always well written, and timescales were often too broad. In the cases we inspected, the sentence plan had been adequately reviewed in only three out of eight in-scope cases.
- 4.17** Transfers to other prisons to progress sentence plans were not always proactively pursued (see section on categorisation). This was reflected in our survey, where fewer prisoners than at comparator establishments said that they had plans to progress to another prison to achieve sentence plan targets.
- 4.18** Home detention curfew assessments were up to date and, where possible, started 12 weeks before the eligibility date. Despite this, too many prisoners were released after their earliest eligibility date. Some reasons for this were beyond the control of the prison (for example, prisoners arriving at the establishment with only a couple of weeks left to serve) but we saw some examples of delays in administrative processes – for example, in issuing paperwork to offender managers. The timeliness of release was not routinely monitored to identify and manage these problems.

Recommendations

- 4.19** **The quality of OASys assessments and sentence plans should be improved.**
- 4.20** **All sentenced prisoners should have an active offender supervisor, who maintains contact with them to oversee delivery of the plans and responds to any important changes.** (Repeated recommendation 4.14)
- 4.21** **The timeliness of release on home detention curfew should be monitored and appropriate action taken to address any weaknesses in processes.**

Public protection

- 4.22** Public protection procedures were sound and timely. The backlog of public protection assessments we had seen at the time of the previous inspection had been cleared. Screening was carried out on arrival to identify potential cases requiring contact restrictions. Assessments of the restrictions required were undertaken by offender supervisors and the prisoner was clearly informed about these and how to appeal.
- 4.23** Contributions to external multi-agency public protection arrangements (MAPPA) meetings and panels were appropriate. MAPPA level 3 cases were discussed at the public protection meeting and the interdepartmental risk management team (IRMT) set and reviewed contact restrictions for other risk of harm cases.
- 4.24** The IRMT meeting was held weekly, to manage the workload. It was adequately multidisciplinary and attended. The violent and sexual offenders register was used appropriately.

Categorisation

- 4.25** The backlog of category A reviews that we had seen at the previous inspection had been cleared and the work was now up to date. Review paperwork for all categories of prisoners had been adequately completed.
- 4.26** Categorisation reviews were completed on time. Although there was a good level of transfers out of the establishment, there was a lack of focus by some offender supervisors and other staff on progressive transfers and some prisoners were on unnecessary transfer holds, which delayed their progress. For example, some prisoners were held back if they worked in particular work areas. We found one example where a prisoner had been on a transfer hold for a year as he worked in the kitchen. Others had been held back as they were Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). Transfer holds were not reviewed regularly enough and they were not subject to management oversight (see main recommendation S60).

Indeterminate sentence prisoners

- 4.27** At the time of the inspection, there were about 70 ISPs at the establishment, with some located on house unit 6 and managed under the close supervision centre (CSC)/Rule 46 and Managing Challenging Behaviour Strategy (MCBS) – see fact page. The support forum running at the time of the previous inspection had ended and prisoners potentially facing an indeterminate sentence were no longer identified or provided with information about the sentence. Some ISPs did not have an up to date OASys assessment or sentence plan.
- 4.28** Parole reports for these prisoners were up to date.

Recommendation

- 4.29** **Indeterminate-sentenced prisoners should have access to a regular support structure and forums.**

Housekeeping point

- 4.30** Those on remand potentially facing an indeterminate sentence should be identified on arrival and promptly seen by their offender supervisor to explain the potential sentence and its implications.

Reintegration planning

Expected outcomes:

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

- 4.31** *In our survey, few prisoners said that they had been helped to prepare for release. A good immediate needs assessment led to referrals but was not routinely shared with the offender management unit. The discharge board was not sufficiently well developed. Resettlement provision was variable. While support with health, drugs and financial issues on release were good, the education, training and employment and accommodation pathways were weaker. Provision under the children and families pathway had improved greatly but visitors said that it was difficult to book a visit. Two appropriate accredited offending behaviour programmes were provided as well as the well-attended Sycamore Tree victim awareness programme.*

- 4.32** In our survey, fewer prisoners (8%) than at other local prisons (14%) and than at the time of the previous inspection (12%) said that a member of staff had helped them to prepare for release. Resettlement staff saw prisoners on arrival and before release. A range of agencies, such as Citizens Advice, was available to assess prisoners and provide support. A detailed resettlement assessment was completed but the information was not routinely shared with the offender supervisor. Resettlement officers did not always formulate a clear resettlement intervention plan but referrals were made to relevant resettlement agencies.

- 4.33** The discharge board did not cover all the resettlement pathways and was sometimes held too near release, making it difficult to ensure that there was adequate time to address all relevant needs.

Recommendations

- 4.34** **The information gathered through the initial resettlement interview should be shared with offender management unit staff for inclusion in the OASys assessment and sentence plan.** (Repeated recommendation 4.36)

- 4.35** **The quality of the resettlement intervention plan should be improved, and the discharge board should include more resettlement agencies and be undertaken in time to address issues before release.**

Accommodation

- 4.36** Housing needs were assessed on arrival and referrals made to a housing advice worker from St Giles Trust, with some additional accommodation support available from Citizens Advice. The housing advice worker tried to see all prisoners six to eight weeks before release but recent staff shortages had made it difficult for prisoners to access support promptly. In the previous six months, nearly one in five (a total of 137) prisoners had been released with no fixed abode, which was high.

Recommendation

- 4.37 Prisoners should be supported early on in their sentence to secure accommodation on release.**

Education, training and employment

- 4.38** The pre-release programme had ended and opportunities for prisoners to develop skills in presentation, producing a CV and preparing for interviews were limited.
- 4.39** Overall, the National Careers Service (NCS) provision required improvement. NCS staff interviewed prisoners due for release to identify need and refer them to agencies in the prison. However, too many were just provided with telephone numbers for the local NCS office in their release area. The NCS provider, Tribal, did not adequately record these activities, and data showed that only 20% of prisoners were interviewed before release. There were few links with employers.

Recommendations

- 4.40 Prisoners should have access to more help to produce high-quality CVs, and a programme to prepare them for release.**
- 4.41 The service provided by the National Careers Service should be improved and better links with employers developed.**

Health care

- 4.42** Health discharge planning was well organised and provided sufficient time to prepare any necessary medications and referral letters. The care programme approach for patients with enduring mental health problems was underused. Policies and procedures were available for palliative and end-of-life care for the terminally ill but access to cells suitable for treatment was limited.

Recommendations

- 4.43 Prisoners with severe and enduring mental illness should be managed using the care programme approach.**
- 4.44 Facilities for the treatment of the terminally ill should be improved.**

Drugs and alcohol

- 4.45** The substance misuse service received referrals from the OMU but care plans were not consistently integrated with sentence plans. There was evidence of comprehensive release plans, and all prisoners received harm reduction advice on release. A detailed release planning protocol had been agreed with the local community service provider and local workers visited the prison regularly to discuss release arrangements.

Recommendation

- 4.46 Where relevant, sentence plans should include substance misuse care plan objectives.**

Finance, benefit and debt

- 4.47** There was good identification of debt and benefit issues on arrival and prisoners were referred to Citizens Advice and Jobcentre Plus for good quality advice and casework support. A total of 184 prisoners had been assisted with advice and support on finance and debt issues by Citizens Advice between July and December 2013. Information on debt support and how to open bank accounts was on display in units. A scheme had started in May 2013 to enable prisoners to open bank accounts before release, and at the time of the inspection 15 prisoners had done so. There were no courses in money management or budgeting.

Recommendation

- 4.48 Courses in money management and budgeting should be provided.**

Children, families and contact with the outside world

- 4.49** Provision under this pathway had improved greatly with the addition of family visits, held six times a year, during school holidays, and the reintroduction of Storybook Dads (in which detainees record stories for their children). Thames Valley Trust provided a helpful Family Matters advice service in the visitors centre and prisoners were able to access a relationships course in the education department, with two further courses funded for fathers by Thames Valley Partnership and MK Dons.
- 4.50** The visitors centre, run by Prison Advice and Care Trust (PACT) staff, provided a welcoming environment for prisoners' families. It was a bright, cheerful area, with adequate facilities. The centre opened before the start of visits and closed well after visits ended. Visitors were admitted to the prison without undue delays. Visitors told us that they were treated well by prison staff during the entry process and we saw good-humoured interactions.
- 4.51** The visits hall was large and bright. Vulnerable prisoners were located in a balcony area out of sight of mainstream prisoners, which allowed for a more relaxed environment.
- 4.52** The play area was run by volunteers from PACT and was open for every visits session. PACT staff also assisted at the family visits, providing themed organised activities for prisoners and their children. A refreshments area was open for every visits session.
- 4.53** Visitors and prisoners complained about difficulties in booking visits by telephone and not receiving acknowledgments for email bookings. We were unable to get a response when calling the visits line.

Recommendation

- 4.54 Visits booking procedures should be improved.**

Attitudes, thinking and behaviour

- 4.55** Two accredited offending behaviour programmes, the thinking skills programme (TSP) and Resolve (an anger management programme), were provided and were appropriate for the population. TSP was delivered six times a year and Resolve at least twice. The chaplaincy delivered the Sycamore Tree victim awareness programme three times a year, providing up to 60 places. Annual targets were achieved and drop-out rates were low. Waiting lists were manageable and places were appropriately prioritised. TSP was delivered at least once a year to the vulnerable prisoner population on house unit 4B.
- 4.56** We saw some good examples of prisoners progressing quickly through programmes. Good post-course reports were provided to offender supervisors by TSP and Resolve but the Sycamore Tree programme provided little formal feedback.

Housekeeping point

- 4.57** Offender supervisors should receive regular and formal feedback about prisoners' participation in the Sycamore Tree programme.

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** Prisoners' views and perceptions of victimisation should be fully explored and action taken to reduce the levels experienced. (S57)
- 5.2** All Prisons and Probation Ombudsman recommendations following deaths in custody should be fully implemented. The use of assessment, care in custody and teamwork (ACCT) procedures should be reviewed to ensure that they are only used when prisoners are at risk of self-harm, and the quality of assessment, reviews and case management should be improved. (S58)
- 5.3** The number of activity places should be increased. Allocation processes should be reviewed to enable more prisoners to attend on a part-time basis and allocation should be based on meeting prisoner needs. (S59)
- 5.4** The backlog of offender assessment system (OASys) assessments should be eliminated Transfer holds should be reviewed and used only in exceptional circumstances. (S60)

Recommendation To Prison Escort and Custody Service

- 5.5** Prisoners should not have long waits in court before being transferred to the prison and the number of prisoners arriving late in the evening should be reduced. (I.8)

Recommendations To the governor

Courts, escort and transfers

- 5.6** Subject to risk assessment, prisoners should not be handcuffed between reception and escort vehicles, and should be informed of transfer on the evening before the move. (I.7, repeated recommendation I.8)

Early days in custody

- 5.7** Prisoners transferred in from other establishments should not be given a full search unless indicated by a risk assessment. (I.17)
- 5.8** All newly arrived prisoners should receive a high standard of first night accommodation, care and monitoring. (I.18)

5.9 All newly arrived prisoners should receive a full induction programme. (1.19)

Bullying and violence reduction

5.10 All available data about violence and intimidation should be collected and all incidents investigated. (1.26)

5.11 All young adults should be subject to a suitable risk and vulnerability assessment before location. (1.27, repeated recommendation HP55)

5.12 The safety of prisoners on the vulnerable prisoner wing should be reviewed and improved. (1.28, repeated recommendation 1.35)

Safeguarding

5.13 A local adult safeguarding policy and referral processes should be developed and implemented. (1.39)

Security

5.14 Visits sanctions should be imposed only when there is sufficient evidence to suggest visits-related trafficking activity. (1.45, repeated recommendation 1.58)

5.15 Security intelligence should be monitored for trends and hotspots. (1.46)

5.16 A mechanism to monitor suspicion testing should be developed, to ensure that all tests are undertaken within the required time frame. (1.47, repeated recommendation 1.60)

Incentives and earned privileges

5.17 The incentives and earned privileges (IEP) policy should be fully applied, with appropriate quality assurance and management checks. (1.54)

5.18 Prisoners should not receive different rates of pay for performing the same work because of their IEP status. (1.55)

Discipline

5.19 Prisoners should not be subject to a reduced regime without appropriate authority, governance and monitoring arrangements in place. (1.71)

5.20 The regime on the segregation unit should be improved, particularly for those prisoners segregated for their own protection, and should include activities and exercise in association where appropriate. (1.72)

Substance misuse

5.21 Treatment for opiate-dependent prisoners should start on arrival and prescribing regimes should be flexible, based on individual need and in line with national guidance. (1.81)

5.22 Clinical and psychosocial support for prisoners should be fully integrated and include joint care plans. (1.82)

- 5.23** Substance misuse and mental health services should improve care coordination for dual diagnosis prisoners. (1.83)

Residential units

- 5.24** Two prisoners should not be held in cells designed for one. (2.8)
- 5.25** The protected witness unit (PWU) should be located on a unit with all the required facilities. (2.9)
- 5.26** Prisoners should have access to sufficient clean clothing, bedding and towels. (2.10)
- 5.27** All prisoners should be able to shower daily, and showers and toilets should be suitably screened. (2.11)
- 5.28** Non-category A prisoners should not have their mail routinely censored or translated. (2.12)

Staff-prisoner relationships

- 5.29** Electronic case notes should reflect engagement between staff and prisoners and the circumstances of individual prisoners. Management checks should be undertaken to ensure quality. (2.21)

Equality and diversity

- 5.30** The negative perceptions of Muslim and black and minority ethnic prisoners about staff behaviour should be addressed. (2.38)
- 5.31** Prisoners from a Gypsy/Traveller/Romany background and young prisoners should be able to access specific support. (2.39)
- 5.32** Relevant information from care plans about the daily living needs of older prisoners and those with disabilities should be shared with wing staff. (2.40)
- 5.33** The carer scheme should be available to all prisoners with support needs, and formalised support plans should be provided which are monitored and reviewed regularly. (2.41)

Faith and religious activity

- 5.34** The negative perceptions of some prisoners about access to chaplains and ease of attending services should be explored and addressed. (2.49)

Health services

- 5.35** All staff should receive annual mandatory training in basic life support skills. (2.66)
- 5.36** Health care information should be available in a range of languages. (2.67)
- 5.37** Nurses should be trained in triage to ensure consistency of treatment. (2.74)
- 5.38** The regime for inpatients should include appropriate therapeutic activity. (2.75)

- 5.39** Patients should have direct access to pharmacy staff, and pharmacist-led clinics should be set up. (2.81)
- 5.40** All medicine administration times should be regularly supervised by discipline staff. (2.82)
- 5.41** The use of pots before administration of medication is dangerous and should stop. (2.83)
- 5.42** Administration charts should be filled in immediately after administration, in accordance with Nursing and Midwifery Council guidance. (2.84)
- 5.43** All discipline officers should receive regular mental health awareness training to enable them to recognise and take appropriate action when a prisoner has mental health problems. (2.95)
- 5.44** Prisoners should have timely access to a full range of support for mild and moderate mental health problems, including counselling, clinical psychology and group therapies. (2.96)

Catering

- 5.45** Prisoners' poor perception of the food provided should be investigated and addressed. (2.102)
- 5.46** Lunch should not be served before 12 noon and the evening meal not before 5pm, and breakfast should be issued on the day it is to be eaten. (2.103)
- 5.47** Food hygiene arrangements should be improved, including the monitoring of food temperature and wearing of protective clothing. (2.104)

Purchases

- 5.48** The length of time that prisoners wait for their initial order should not exceed seven days. (2.109)
- 5.49** There should not be a charge for catalogue orders. (2.110)

Time out of cell

- 5.50** All prisoners should have access to daily association and exercise. (3.7)
- 5.51** The regime on the PWU should be improved, to provide adequate work, education and association opportunities. (3.8)

Learning and skills and work activities

- 5.52** A comprehensive needs analysis and improved use of data should inform provision and more attention should be given to improving prisoners' English, mathematics and employability skills. (3.16)
- 5.53** The number of vocational training opportunities should be increased. (3.22)
- 5.54** The quality of teaching and learning training should be improved. (3.27)
- 5.55** The quality of individual learning plans should be improved and include the planning and monitoring of personal and social skills and employability skills in all areas. (3.28)

- 5.56** The results of initial assessment should be better used in planning learning activities to meet individual needs. (3.29)
- 5.57** The number of prisoners gaining qualifications in vocational subjects, employability skills and English and mathematics should be increased further. (3.32)
- 5.58** The range of library resources should be updated and extended. (3.36, repeated recommendation 3.40)
- 5.59** Data on the use of the library and its stock should be collected and used to improve access. (3.37)

Strategic management of resettlement

- 5.60** The reducing reoffending strategy should include a detailed vision for offender management, supported by a clear action plan which is monitored and evaluated. (4.7, repeated recommendation 4.7)
- 5.61** All offender supervisors should receive regular supervision to promote effective case management. (4.8)

Offender management and planning

- 5.62** The quality of OASys assessments and sentence plans should be improved. (4.19)
- 5.63** All sentenced prisoners should have an active offender supervisor, who maintains contact with them to oversee delivery of the plans and responds to any important changes. (4.20, repeated recommendation 4.14)
- 5.64** The timeliness of release on home detention curfew should be monitored and appropriate action taken to address any weaknesses in processes. (4.21)
- 5.65** Indeterminate-sentenced prisoners should have access to a regular support structure and forums. (4.29)

Reintegration planning

- 5.66** The information gathered through the initial resettlement interview should be shared with offender management unit staff for inclusion in the OASys assessment and sentence plan. (4.34, repeated recommendation 4.36)
- 5.67** The quality of the resettlement intervention plan should be improved, and the discharge board should include more resettlement agencies and be undertaken in time to address issues before release. (4.35)
- 5.68** Prisoners should be supported early on in their sentence to secure accommodation on release. (4.37)
- 5.69** Prisoners should have access to more help to produce high-quality CVs, and a programme to prepare them for release. (4.40)
- 5.70** The service provided by the National Careers Service should be improved and better links with employers developed. (4.41)

- 5.71** Prisoners with severe and enduring mental illness should be managed using the care programme approach. (4.43)
- 5.72** Facilities for the treatment of the terminally ill should be improved. (4.44)
- 5.73** Where relevant, sentence plans should include substance misuse care plan objectives. (4.46)
- 5.74** Courses in money management and budgeting should be provided. (4.48)
- 5.75** Visits booking procedures should be improved. (4.54)

Housekeeping points

Security

- 5.76** All staff should be fully aware of the monthly security objectives. (1.48)

Discipline

- 5.77** The storage of recorded incidents of use of force should be improved to ensure future access. (1.62)
- 5.78** Segregation monitoring and review group meetings should be held at least quarterly. (1.73)

Residential units

- 5.79** All double cells should have lockable cabinets. (2.13)
- 5.80** Application forms should be freely available. (2.14)

Staff-prisoner relationships

- 5.81** Prisoners on the protected witness unit should be consulted regularly and their views presented to the prisoner consultative council meeting. (2.22)

Equality and diversity

- 5.82** Equality meetings should cover all protected characteristics. (2.28)
- 5.83** Investigation of discrimination incidents should be externally quality assured. (2.29)
- 5.84** Sufficient wheelchairs should be provided to meet the needs of prisoners, and prompt repairs carried out when necessary. (2.42)
- 5.85** Personal emergency evacuation plans should be in place for all prisoners who need them, and should be easily available to wing staff. (2.43)

Health services

- 5.86** Automated external defibrillators should be checked daily. (2.68)
- 5.87** Waiting rooms in the health centre should display relevant health promotion material. (2.69)

- 5.88** The review for drug administration and electronic recording of risk assessments should be carried out as soon as possible. (2.85)
- 5.89** Both the maximum and minimum temperatures of all refrigerators should be recorded daily. (2.86)
- 5.90** Subject to a risk assessment, the dental surgery door should be closed during treatment, to ensure that patients' privacy is maintained. (2.88)

Learning and skills and work activities

- 5.91** Observation of teaching and learning should be extended to vocational training. (3.17)
- 5.92** A loans system should be introduced to provide access to texts not in stock. (3.38)

Strategic management of resettlement

- 5.93** Information exchange between the offender management unit and other departments should be improved. (4.9)

Offender management and planning

- 5.94** Those on remand potentially facing an indeterminate sentence should be identified on arrival and promptly seen by their offender supervisor to explain the potential sentence and its implications. (4.30)

Reintegration planning

- 5.95** Offender supervisors should receive regular and formal feedback about prisoners' participation in the Sycamore Tree programme. (4.57)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Karen Dillon	Inspector
Sarah Cutler	Inspector
Catherine Shaw	Researcher
Ewan Kennedy	Researcher
Rachel Murray	Researcher

Specialist inspectors

Sigrid Engelen	Substance misuse inspector
Michael Bowen	Health services inspector
Majella Pearce	Health services inspector
Sue Melvin	Pharmacist
Ian Craig	CQC inspector
Phil Romain	Ofsted inspector
Richard Beaumont	Ofsted inspector
Charles Clarke	Ofsted inspector
Tony Rolley	Probation inspector
Beverley Reid	Probation inspector
Ian Simpkins	Probation 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 2012, staff in reception were welcoming and reception procedures were efficient. The first night centre and processes were supportive and most prisoners felt safe on their first night. Induction arrangements were generally good but inadequate for vulnerable prisoners and those on house unit 6 (closed supervision centre, protected witness unit and MCBS). Violence reduction arrangements were reasonably good and few prisoners reported feeling unsafe, although bullying on the vulnerable prisoner unit was evident. The particular needs and vulnerabilities of young adults had not been fully considered. The quality of suicide and self-harm arrangements for some prisoners was poor. Security arrangements were mostly proportionate. Illicit drug use was low. The level of use of force was high and governance was poor. Special accommodation was used excessively. Segregation processes were reasonable but reintegration planning was weak. Clinical and psychosocial services for prisoners requiring support with substance misuse were satisfactory. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Measures, including training and monitoring, should be taken to improve the quality of assessment, care in custody and teamwork (ACCT) assessment, reviews and case management. The use of ACCT should be reviewed to ensure that it is only used when prisoners are at risk of suicide or self-harm. Alternative support mechanisms should be put in place for prisoners who need support but are not at risk of self-harm. Segregation and special accommodation should be used only exceptionally and as a last resort for prisoners in crisis and at risk of suicide and self-harm. (HP53)

Partially achieved

The monitoring and governance of the use of force and use of special accommodation should be urgently reviewed to achieve a reduction in their use. (HP54)

Achieved

All young adults should be subject to a suitable risk and vulnerability assessment before location. (HP55)

Not achieved (recommendation repeated, I.27)

Risk assessment arrangements in the close supervision centre should encourage appropriate time out of cell and risk assessment decisions should be fully recorded and subject to quality assurance.

(HP56)

No longer relevant

Recommendations

Escort vans should be dependably punctual. (I.7)

Achieved

Subject to risk assessment, prisoners should not be handcuffed between reception and escort vehicles, and should be informed of transfer on the evening before the move. (1.8)

Not achieved (recommendation repeated, 1.7)

The prisoner orderly in reception should have a formal role in supporting and informing new prisoners. (1.17)

Achieved

There should be an adequate, structured induction programme for vulnerable prisoners and those allocated to house unit 6. (1.18)

Partially achieved

The safety of prisoners on the vulnerable prisoner wing should be reviewed and improved. (1.35)

Not achieved (recommendation repeated, 1.28)

Governance of safer custody, including the use of information, target setting and attendance at committee meetings, should be improved. (1.43)

Achieved

The governor should initiate contact with the local Director of Adult Social Services (DASS) and the Local Safeguarding Adults Board (LSAB) to develop local safeguarding processes. (1.47)

Not achieved

Senior managers should review the procedures for out-of-hours unlocks. (1.57)

Achieved

Visits sanctions should be imposed only when there is sufficient evidence to suggest visits-related trafficking activity. (1.58)

Not achieved (recommendation repeated, 1.45)

The range of drugs covered by mandatory drug testing should be widened to include the most commonly diverted medications, including gabapentin. (1.59)

No longer relevant

A mechanism to monitor suspicion testing should be developed, to ensure that all tests are undertaken within the required time frame. (1.60)

Not achieved (recommendation repeated, 1.47)

The segregation unit should be kept clean and well maintained. (1.84)

Achieved

There should be care plans for long-term residents of the segregation unit. (1.85)

Achieved

Staff working regularly in the segregation unit should be trained in mental health awareness. (1.86)

Partially achieved

Counselling, assessment, referral, advice and throughcare (CARAT) and clinical substance misuse services should further integrate and undertake joint care plans and reviews. (1.93)

Partially achieved

Steps should be taken to improve the supervision of medication administration, to prevent diversion, rather than refusing to initiate prisoners onto buprenorphine (Subutex). (1.94)

Not achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2012, the quality of accommodation and environment was generally good. Staff-prisoner relationships were mostly positive and interactive, including on house unit 6. The environment on house unit 6 was oppressive. Decisions around some risk assessment processes for prisoners on house unit 6 were not fully justified and governance was poor. The diversity strategy was comprehensive and most diversity strands were established. Provision for older prisoners and those with disabilities was good. In our survey, black and minority ethnic prisoners reported less favourably than white prisoners across many areas. Support for foreign national prisoners was effective. Faith provision was good. Staff shortages disrupted health services and compromised mental health provision. A good selection of meal choices was offered, and a wide range of goods was available in the prison shop. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

All required health services and clinics should be provided and waiting times for access to primary mental health services should be reduced. (HP57)

Achieved

Recommendations

A cleaning and maintenance schedule should be implemented across the house units that improves and standardises the overall cleanliness of all wings and ensures that privacy screening is available for showers and in-cell toilets. (2.15)

Achieved

The purpose of B wing on house unit 6 should be clearly communicated to staff and prisoners, and underlying systems and regime provision should be implemented to support this. (2.29)

No longer relevant

There should be clinical psychologist provision on house unit 6. (2.30)

No longer relevant

The prison should seek to understand the negative perceptions of prisoners on house unit 3 about staff, and address any concerns raised. (2.39)

Achieved

There should be a regular consultation forum with black and minority ethnic prisoners, to ensure that their views contribute to the overall management of equality and diversity. (2.58)

Achieved

A foreign nationals group should be held, so that information and support can be shared and offered and any areas of concern referred to the prisoner equality meeting for action. (2.59)

Achieved

Perceptions of inequality of treatment and access to some activities should be monitored by age and disability, and appropriate action taken to rectify any inequalities. (2.60)

Achieved

Personal emergency evacuation plans should be developed for all prisoners with disabilities who require them, and staff should be aware of them. (2.61)

Partially achieved

The health needs assessment of the prison population should be assessed and include prisoners with learning disabilities and personality disorders and recovery working. (2.85)

Achieved

Nursing staff should receive further training to be able to triage prisoners' health care needs. (2.99)

Achieved

Action should be undertaken to reduce waiting list and improve the application process to all clinics, particularly sexual health services. (2.100)

Achieved

The number of moved or cancelled external appointments should be monitored and inappropriate cancellations reduced. (2.101)

Achieved

Discipline staff should be available to manage queues for the administration of medication on all house units. (2.110)

Achieved

A full range of patient group directions should be available to enable more potent medication to be administered by the pharmacist or nurse. (2.111)

Achieved

There should be sufficient primary mental health care capacity to meet the needs of the population. (2.125)

Partially achieved

Prisoners needing assessment by specialist mental health services should be seen and transferred expeditiously within the current Government target for transfer. (2.126)

Achieved

Purposeful activity

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

At the last inspection, in 2012, time out of cell was good and few prisoners were locked up during the day. The regime on house unit 6 was poor and monotonous. There were insufficient good-quality activity places to enable prisoners to be fully occupied, and education places were not sufficiently utilised. Learning and skills provision was not sufficiently informed by a needs analysis and delivery was hampered by staff shortages. The quality and range of education were mainly adequate and there was too little vocational training. The range of work was reasonable and good work skills were developed but not accredited. Outcomes for learners were generally only satisfactory. Recreational PE provision was good. The library provided a reasonable service. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

The number of purposeful work and vocational training opportunities should be extended, to employ more of the prison's population. The quality of learning and skills provision and outcomes for prisoners should be improved. (HP58)

Not achieved

Recommendations

A detailed training needs analysis of different prisoner groups should be carried out, so that the range of education, work and vocational training opportunities reflects their needs and interests and informs future planning. (3.11)

Partially achieved

When security clearance delays the deployment of education staff, further contingency plans should be developed to limit the cancellation of classes and the negative impact on learners. (3.12)

Achieved

Prisoners' employability and vocational skills at work should be recorded and accredited. (3.20)

Not achieved

More literacy and numeracy support in vocational training and work areas should be provided. (3.21)

Partially achieved

Prisoners' sentence plan targets should be taken into account when allocating activities, to ensure that they are accessed in the correct sequence. (3.22)

Not achieved

Plans to improve the quality of the education induction for vulnerable prisoners should be implemented. (3.23)

Achieved

Learning and skills provision on house unit 6 should be extended. (3.24)

Partially achieved

Higher-level qualifications should be reintroduced for all prisoners studying in Prisons Information Communication Technology Academy (PICTA). (3.32)

Achieved

Specialist assessment and support for prisoners with dyslexia should be developed. (3.33)

Achieved

Success rates in functional skills English should be improved. (3.37)

Partially achieved

The range of library resources should be updated and extended. (3.40)

Partially achieved (recommendation repeated, 3.36)

A computer should be installed in the library, to enable better management of the library stock and systematic analysis of data. (3.41)

Not achieved

Physical education and healthy living

A suitable area should be provided that allows resistance and cardiovascular training to be combined, to provide integrated fitness activities. (3.47)

Achieved

PE qualifications should be extended to level 2, to give prisoners progression opportunities. (3.48)

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 2012, the reducing reoffending strategy covered all the pathways but further needs analysis was required to inform provision. Offender management did not have a sufficiently high profile in the wider prison and too few prisoners were actively sentence managed. The management of high risk of harm prisoners was generally good. Public protection arrangements were not effectively applied. Home detention curfew, parole and categorisation processes were well managed, although some category A prisoners faced unacceptable delays in their reviews. There was effective and early identification of resettlement needs. Resettlement services were generally good but too many prisoners did not know about them. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

The reducing reoffending strategy should include a detailed vision for offender management, supported by a clear action plan which is monitored and evaluated. (4.7)

Not achieved (recommendation repeated, 4.7)

A more robust and detailed resettlement needs analysis should be completed and used to inform the reducing reoffending strategy, and outcomes should be more carefully monitored to determine the effectiveness of provision. (4.8)

Partially achieved

All sentenced prisoners should have an active offender supervisor, who maintains contact with them to oversee delivery of the plans and responds to any important changes. (4.14)

Not achieved (recommendation repeated, 4.20)

Sentence plans should be more comprehensive and detailed. (4.15)

Partially achieved

Prisoners who are not eligible to be allocated an offender supervisor should have a formal custody plan and an identified member of staff to track and monitor progress. (4.16)

Not achieved

Assessments to determine the level and type of restrictions on contact should be completed for all relevant prisoners as soon as possible after their arrival at the establishment. (4.21)

Achieved

All category A reviews should be completed on time. (4.25)

Achieved

Family days should be available for indeterminate-sentenced prisoners (ISPs). (4.30)

Not achieved

The information gathered through the initial resettlement interview should be shared with offender management unit staff for inclusion in the offender assessment system (OASys) assessment and sentence plan. (4.36)

Not achieved (recommendation repeated, 4.34)

Links with employers should be developed to support prisoners' employment prospects on release. (4.42)

Not achieved

A therapeutic, group-based alcohol programme should be introduced. (4.52)

Not achieved

Prisoners should be able to open a bank account before the day of their release. (4.54)

Achieved

The plinth discouraging personal contact should be removed from the tables in the visits hall. (4.63)

Not achieved

An accredited parenting or family skills course should be provided. (4.64)

Achieved

Risk assessments should determine whether prisoners on house unit 6 are subject to high-risk visits conditions. (4.65)

No longer relevant

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	19	485	61.4
Recall	1	42	5.2
Convicted unSENTENCED	3	67	8.5
Remand	14	142	19
Civil prisoners	0	0	0
Other	1	20	2.6
Detainees	0	27	3.3
Total	38	783	100

Sentence	18–20-year-olds	21 and over	%
UnSENTENCED	20	270	35.3
Less than six months	2	67	8.4
six months to less than 12 months	0	44	5.4
12 months to less than 2 years	4	93	11.8
2 years to less than 4 years	0	65	7.9
4 years to less than 10 years	5	102	13
3 Years to less than 4 Years	2	53	6.7
10 years and over (not life)	0	24	2.09
ISPP (indeterminate sentence for public protection)	1	14	1.8
Life	4	51	8.5
Total	38	783	100

Age	Number of prisoners	%
Please state minimum age here:		
Under 21 years	38	4.6
21 years to 29 years	324	39.5
30 years to 39 years	257	31.3
40 years to 49 years	144	17.5
50 years to 59 years	43	5.2
60 years to 69 years	13	1.6
70 plus years	2	0.2
Please state maximum age here:		
Total	821	100

Nationality	18–20-year-olds	21 and over	%
British	32	638	81.6
Foreign nationals	2	118	14.6
Not stated	4	27	3.8
Total	38	783	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	2	36	4.6
Uncategorised sentenced	16	210	27.5
Unclassified	0	13	1.6
Category A High	0	4	0.5
Category A	1	17	2.2
Category B	0	87	10.6
Category C	0	378	46
Category D	0	15	1.8
Other (Provisional A)	5	22	3.3
YOI Closed	14	1	1.8
Total	38	783	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	25	479	61.4
Irish	0	5	0.6
Gypsy/Irish Traveller	0	6	0.7
Other white	0	57	6.9
Mixed			
White and black Caribbean	4	28	3.9
White and black African	0	4	0.5
White and Asian	1	2	0.4
Other mixed	0	10	1.2
Asian or Asian British			
Indian	0	9	1.1
Pakistani	0	20	2.4
Bangladeshi	0	5	0.6
Chinese	0	2	0.2
Other Asian	0	18	2.2
Black or black British			
Caribbean	2	45	5.7

African	5	26	3.8
Other black	0	23	2.8
<i>Other ethnic group</i>			
Arab	0	1	0.1
Other ethnic group	0	7	0.9
<i>Not stated</i>	0	1	0.1
<i>Code missing</i>	1	35	4.4
Total	38	783	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	4	137	17.2
Roman Catholic	5	152	19.1
Other Christian denominations	6	118	15.1
Muslim	8	112	14.6
Sikh	0	3	0.4
Hindu	0	5	0.6
Buddhist	1	10	1.3
Jewish	0	2	0.2
Not Stated	2	32	4.1
Other	0	18	2.2
No religion	12	194	25.1
Total	38	783	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)	0	1	0.01
Total	0	1	0.01

Sentenced prisoners only

Length of stay	18–20-year-olds	21 and over		
	Number		%	Number
Less than 1 month	3	0.4	84	
1 month to 3 months	6	0.7	152	
3 months to six months	1	0.1	98	
6 months to 1 year	5	0.6	116	
1 year to 2 years	3	0.4	41	
2 years to 4 years	0	0	11	
4 years or more	0	0	11	

Total	18	2.2	513
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Sentenced prisoners only

	18–20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/ restrictions).	13	253	32.4
Total	13	253	32.4

Unsentenced prisoners only

Length of stay	18–20-year-olds	21 and over	
	Number	%	Number
Less than 1 month	7	2.4	79
1 month to 3 months	8	2.8	91
3 months to six months	4	1.4	60
six months to 1 year	1	0.3	21
1 year to 2 years	0	0	4
2 years to 4 years	0	0	2
4 years or more	0	0	12
Other			1
Total	20	2.4	270

Main offence	18–20-year-olds	21 and over	%
Violence against the person	Not Available		
Sexual offences	Not Available		
Burglary	Not Available		
Robbery	Not Available		
Theft and handling	Not Available		
Fraud and forgery	Not Available		
Drugs offences	Not Available		
Other offences	Not Available		
Civil offences	Not Available		
Offence not recorded /holding warrant	Not Available		
Total			

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

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

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 13 January 2014 the prisoner population at HMP Woodhill was 754. This excluded the 19 prisoners detained in the close supervision centre (CSC) and the managing challenging behaviour unit (MCBU). Using the method described above, questionnaires were distributed to a sample of 206 prisoners.

We received a total of 164 completed questionnaires, a response rate of 80%. This included one questionnaire completed via interview. Thirteen respondents refused to complete a questionnaire, 14 questionnaires were not returned and 15 were returned blank.

Wing/Unit	Number of completed survey returns
House block 1	37
House block 2	39
House block 3	28
House block 4	35

House block 5	17
First night centre	4
Health care	3
Segregation unit	1

Presentation of survey results and analyses

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

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

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

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Woodhill in 2014 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 35 local prisons since April 2008.
- The current survey responses from HMP Woodhill in 2014 compared with the responses of prisoners surveyed at HMP Woodhill in 2012.
- 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 those who are British nationals and those who are foreign nationals.
- A comparison within the 2014 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- 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.

Survey summary

Section I: About You

Q1.2	How old are you?			
	<i>Under 21</i>	10 (6%)		
	<i>21 - 29</i>	56 (34%)		
	<i>30 - 39</i>	55 (34%)		
	<i>40 - 49</i>	35 (21%)		
	<i>50 - 59</i>	4 (2%)		
	<i>60 - 69</i>	3 (2%)		
	<i>70 and over</i>	1 (1%)		
Q1.3	Are you sentenced?			
	<i>Yes</i>	91 (57%)		
	<i>Yes - on recall</i>	12 (8%)		
	<i>No - awaiting trial</i>	31 (19%)		
	<i>No - awaiting sentence</i>	23 (14%)		
	<i>No - awaiting deportation</i>	3 (2%)		
Q1.4	How long is your sentence?			
	<i>Not sentenced</i>	57 (37%)		
	<i>Less than 6 months</i>	21 (14%)		
	<i>6 months to less than 1 year</i>	12 (8%)		
	<i>1 year to less than 2 years</i>	19 (12%)		
	<i>2 years to less than 4 years</i>	19 (12%)		
	<i>4 years to less than 10 years</i>	13 (8%)		
	<i>10 years or more</i>	3 (2%)		
	<i>IPP (indeterminate sentence for public protection)</i>	4 (3%)		
	<i>Life</i>	6 (4%)		
Q1.5	Are you a foreign national? (i.e. do not have UK citizenship.)			
	<i>Yes</i>	23 (14%)		
	<i>No</i>	139 (86%)		
Q1.6	Do you understand spoken English?			
	<i>Yes</i>	161 (99%)		
	<i>No</i>	1 (1%)		
Q1.7	Do you understand written English?			
	<i>Yes</i>	154 (95%)		
	<i>No</i>	8 (5%)		
Q1.8	What is your ethnic origin?			
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	101 (64%)	<i>Asian or Asian British - Chinese</i>	0 (0%)
	<i>White - Irish</i>	6 (4%)	<i>Asian or Asian British - other</i>	1 (1%)
	<i>White - other</i>	9 (6%)	<i>Mixed race - white and black Caribbean</i>	8 (5%)
	<i>Black or black British - Caribbean</i>	8 (5%)	<i>Mixed race - white and black African</i>	3 (2%)
	<i>Black or black British - African</i>	6 (4%)	<i>Mixed race - white and Asian</i>	0 (0%)
	<i>Black or black British - other</i>	2 (1%)	<i>Mixed race - other</i>	1 (1%)
	<i>Asian or Asian British - Indian</i>	1 (1%)	<i>Arab</i>	2 (1%)

	<i>Asian or Asian British - Pakistani</i>	6 (4%)	<i>Other ethnic group</i>	2 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	3 (2%)		
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?			
	Yes			9 (6%)
	No			150 (94%)
Q1.10	What is your religion?			
	<i>None</i>	47 (29%)	<i>Hindu</i>	0 (0%)
	<i>Church of England</i>	31 (19%)	<i>Jewish</i>	1 (1%)
	<i>Catholic</i>	42 (26%)	<i>Muslim</i>	22 (14%)
	<i>Protestant</i>	2 (1%)	<i>Sikh</i>	1 (1%)
	<i>Other Christian denomination</i>	7 (4%)	<i>Other</i>	6 (4%)
	<i>Buddhist</i>	1 (1%)		
Q1.11	How would you describe your sexual orientation?			
	<i>Heterosexual/ Straight</i>			156 (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			43 (27%)
	No			118 (73%)
Q1.13	Are you a veteran (ex- armed services)?			
	Yes			8 (5%)
	No			152 (95%)
Q1.14	Is this your first time in prison?			
	Yes			49 (30%)
	No			113 (70%)
Q1.15	Do you have children under the age of 18?			
	Yes			96 (60%)
	No			65 (40%)

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>			113 (70%)
	<i>2 hours or longer</i>			40 (25%)
	<i>Don't remember</i>			9 (6%)
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>			113 (70%)
	Yes			18 (11%)
	No			27 (17%)
	<i>Don't remember</i>			4 (2%)
Q2.3	On your most recent journey here, were you offered a toilet break?			
	<i>My journey was less than two hours</i>			113 (69%)
	Yes			5 (3%)
	No			40 (25%)
	<i>Don't remember</i>			5 (3%)

Q2.4	On your most recent journey here, was the van clean?	
	Yes	97 (60%)
	No	54 (33%)
	Don't remember	11 (7%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	125 (78%)
	No	32 (20%)
	Don't remember	4 (2%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well	45 (28%)
	Well	63 (39%)
	Neither	38 (23%)
	Badly	11 (7%)
	Very badly	2 (1%)
	Don't remember	3 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (please tick all that apply to you.)	
	Yes, someone told me	98 (60%)
	Yes, I received written information	5 (3%)
	No, I was not told anything	56 (34%)
	Don't remember	4 (2%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	125 (78%)
	No	29 (18%)
	Don't remember	6 (4%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?			
	Less than 2 hours	97 (60%)		
	2 hours or longer	58 (36%)		
	Don't remember	7 (4%)		
Q3.2	When you were searched, was this carried out in a respectful way?			
	Yes	139 (85%)		
	No	20 (12%)		
	Don't remember	4 (2%)		
Q3.3	Overall, how were you treated in reception?			
	Very well	41 (25%)		
	Well	68 (42%)		
	Neither	36 (22%)		
	Badly	12 (7%)		
	Very badly	3 (2%)		
	Don't remember	2 (1%)		
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)			
	Loss of property	17 (11%)	Physical health	27 (17%)
	Housing problems	27 (17%)	Mental health	48 (30%)
	Contacting employers	6 (4%)	Needing protection from other prisoners	9 (6%)

	Contacting family Childcare Money worries Feeling depressed or suicidal	59 (37%) 2 (1%) 37 (23%) 47 (29%)	Getting phone numbers Other Did not have any problems	45 (28%) 8 (5%) 40 (25%)
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?			
	Yes No <i>Did not have any problems</i>			46 (29%) 73 (46%) 40 (25%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)			
	Tobacco A shower A free telephone call Something to eat PIN phone credit Toiletries/ basic items <i>Did not receive anything</i>			123 (76%) 73 (45%) 99 (61%) 116 (72%) 50 (31%) 109 (68%) 6 (4%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)			
	Chaplain Someone from health services A Listener/Samaritans Prison shop/ canteen <i>Did not have access to any of these</i>			70 (45%) 116 (75%) 50 (32%) 35 (23%) 23 (15%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)			
	What was going to happen to you What support was available for people feeling depressed or suicidal How to make routine requests (applications) Your entitlement to visits Health services Chaplaincy <i>Not offered any information</i>			90 (58%) 72 (46%) 55 (35%) 59 (38%) 80 (52%) 69 (45%) 31 (20%)
Q3.9	Did you feel safe on your first night here?			
	Yes No <i>Don't remember</i>			124 (78%) 29 (18%) 7 (4%)
Q3.10	How soon after you arrived here did you go on an induction course?			
	Have not been on an induction course Within the first week More than a week <i>Don't remember</i>			32 (20%) 75 (47%) 41 (26%) 11 (7%)
Q3.11	Did the induction course cover everything you needed to know about the prison?			
	Have not been on an induction course Yes No <i>Don't remember</i>			32 (21%) 73 (47%) 41 (26%) 9 (6%)

Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?
	<i>Did not receive an assessment</i> 35 (22%)
	<i>Within the first week</i> 36 (23%)
	<i>More than a week</i> 66 (42%)
	<i>Don't remember</i> 19 (12%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....	Very easy	Easy	Neither	Difficult	Very difficult	N/A
	<i>Communicate with your solicitor or legal representative?</i>	21 (14%)	41 (27%)	23 (15%)	27 (18%)	20 (13%)	19 (13%)
	<i>Attend legal visits?</i>	25 (18%)	60 (42%)	19 (13%)	5 (4%)	6 (4%)	27 (19%)
	<i>Get bail information?</i>	8 (6%)	18 (13%)	18 (13%)	24 (18%)	20 (15%)	48 (35%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?						
		<i>Not had any letters</i>					23 (14%)
		<i>Yes</i>					65 (41%)
		<i>No</i>					71 (45%)
Q4.3	Can you get legal books in the library?						
		<i>Yes</i>					66 (42%)
		<i>No</i>					17 (11%)
		<i>Don't know</i>					75 (47%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:						
		Yes		No		Don't know	
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	63 (39%)		91 (57%)		6 (4%)	
	<i>Are you normally able to have a shower every day?</i>	115 (72%)		42 (26%)		2 (1%)	
	<i>Do you normally receive clean sheets every week?</i>	100 (63%)		57 (36%)		3 (2%)	
	<i>Do you normally get cell cleaning materials every week?</i>	98 (62%)		57 (36%)		4 (3%)	
	<i>Is your cell call bell normally answered within five minutes?</i>	37 (24%)		105 (67%)		14 (9%)	
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	102 (65%)		54 (34%)		1 (1%)	
	<i>If you need to, can you normally get your stored property?</i>	35 (22%)		68 (43%)		54 (34%)	
Q4.5	What is the food like here?						
		<i>Very good</i>					2 (1%)
		<i>Good</i>					19 (12%)
		<i>Neither</i>					48 (30%)
		<i>Bad</i>					40 (25%)
		<i>Very bad</i>					49 (31%)
Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?						
		<i>Have not bought anything yet/ don't know</i>					15 (9%)
		<i>Yes</i>					72 (46%)
		<i>No</i>					71 (45%)
Q4.7	Can you speak to a Listener at any time, if you want to?						
		<i>Yes</i>					88 (55%)
		<i>No</i>					12 (7%)
		<i>Don't know</i>					61 (38%)
Q4.8	Are your religious beliefs respected?						
		<i>Yes</i>					72 (45%)

No	33 (21%)
Don't know/ N/A	54 (34%)
Q4.9 Are you able to speak to a Chaplain of your faith in private if you want to?	
Yes	65 (40%)
No	15 (9%)
Don't know/ N/A	81 (50%)
Q4.10 How easy or difficult is it for you to attend religious services?	
I don't want to attend	37 (24%)
Very easy	25 (16%)
Easy	38 (24%)
Neither	16 (10%)
Difficult	8 (5%)
Very difficult	5 (3%)
Don't know	27 (17%)

Section 5: Applications and complaints

Q5.1 Is it easy to make an application?			
Yes	121 (76%)		
No	29 (18%)		
Don't know	9 (6%)		
Q5.2 Please answer the following questions about applications (If you have not made an application please tick the 'not made one' option.)			
Are applications dealt with fairly?	Not made one	Yes	No
	18 (12%)	80 (52%)	57 (37%)
Are applications dealt with quickly (within seven days)?	18 (13%)	70 (50%)	51 (37%)
Q5.3 Is it easy to make a complaint?			
Yes	92 (60%)		
No	28 (18%)		
Don't know	33 (22%)		
Q5.4 Please answer the following questions about complaints (If you have not made a complaint please tick the 'not made one' option.)			
Are complaints dealt with fairly?	Not made one	Yes	No
	67 (42%)	35 (22%)	56 (35%)
Are complaints dealt with quickly (within seven days)?	67 (46%)	33 (22%)	47 (32%)
Q5.5 Have you ever been prevented from making a complaint when you wanted to?			
Yes	39 (25%)		
No	116 (75%)		
Q5.6 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?			
Don't know who they are	76 (48%)		
Very easy	6 (4%)		
Easy	19 (12%)		
Neither	31 (19%)		
Difficult	22 (14%)		
Very difficult	5 (3%)		

Section 6: Incentive and earned privileges scheme

Q6.1	Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels)	
	Don't know what the IEP scheme is	19 (12%)
	Yes	70 (45%)
	No	50 (32%)
	Don't know	18 (11%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)	
	Don't know what the IEP scheme is	19 (12%)
	Yes	65 (41%)
	No	58 (37%)
	Don't know	16 (10%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	13 (8%)
	No	146 (92%)
Q6.4	If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?	
	I have not been to segregation in the last 6 months	132 (84%)
	Very well	6 (4%)
	Well	3 (2%)
	Neither	12 (8%)
	Badly	2 (1%)
	Very badly	2 (1%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	120 (77%)
	No	36 (23%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	106 (68%)
	No	51 (32%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	43 (27%)
	No	118 (73%)
Q7.4	How often do staff normally speak to you during association?	
	Do not go on association	6 (4%)
	Never	34 (21%)
	Rarely	54 (34%)
	Some of the time	45 (28%)
	Most of the time	10 (6%)
	All of the time	11 (7%)
Q7.5	When did you first meet your personal (named) officer?	
	I have not met him/her	135 (84%)
	In the first week	12 (7%)
	More than a week	2 (1%)

	<i>Don't remember</i>	12 (7%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	135 (87%)
	<i>Very helpful</i>	7 (4%)
	<i>Helpful</i>	10 (6%)
	<i>Neither</i>	3 (2%)
	<i>Not very helpful</i>	0 (0%)
	<i>Not at all helpful</i>	1 (1%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	<i>Yes</i>	61 (38%)
	<i>No</i>	98 (62%)
Q8.2	Do you feel unsafe now?	
	<i>Yes</i>	23 (15%)
	<i>No</i>	130 (85%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	<i>Never felt unsafe</i>	98 (63%)
	<i>Everywhere</i>	21 (13%)
	<i>Segregation unit</i>	5 (3%)
	<i>Association areas</i>	25 (16%)
	<i>Reception area</i>	5 (3%)
	<i>At the gym</i>	13 (8%)
	<i>In an exercise yard</i>	11 (7%)
	<i>At work</i>	8 (5%)
	<i>During movement</i>	14 (9%)
	<i>At education</i>	8 (5%)
	<i>At meal times</i>	14 (9%)
	<i>At health services</i>	9 (6%)
	<i>Visits area</i>	9 (6%)
	<i>In wing showers</i>	26 (17%)
	<i>In gym showers</i>	10 (6%)
	<i>In corridors/stairwells</i>	12 (8%)
	<i>On your landing/wing</i>	19 (12%)
	<i>In your cell</i>	17 (11%)
	<i>At religious services</i>	6 (4%)
Q8.4	Have you been victimised by other prisoners here?	
	<i>Yes</i>	51 (32%)
	<i>No</i>	108 (68%)
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>	16 (10%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	11 (7%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	26 (16%)
	<i>Having your canteen/property taken</i>	15 (9%)
	<i>Medication</i>	18 (11%)
	<i>Debt</i>	11 (7%)
	<i>Drugs</i>	7 (4%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	9 (6%)
	<i>Your nationality</i>	5 (3%)
	<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>	4 (3%)
	<i>You have a disability</i>	8 (5%)
	<i>You were new here</i>	8 (5%)
	<i>Your offence/ crime</i>	5 (3%)
	<i>Gang related issues</i>	9 (6%)

Q8.6	Have you been victimised by staff here?	
	Yes	63 (40%)
	No	96 (60%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	Insulting remarks (about you or your family or friends)	17 (11%)
	Physical abuse (being hit, kicked or assaulted)	9 (6%)
	Sexual abuse	0 (0%)
	Feeling threatened or intimidated	22 (14%)
	Medication	14 (9%)
	Debt	6 (4%)
	Drugs	8 (5%)
	Your race or ethnic origin	9 (6%)
	Your religion/religious beliefs	15 (9%)
	Your nationality	9 (6%)
	You are from a different part of the country than others	2 (1%)
	You are from a traveller community	0 (0%)
	Your sexual orientation	0 (0%)
	Your age	4 (3%)
	You have a disability	6 (4%)
	You were new here	8 (5%)
	Your offence/ crime	9 (6%)
	Gang related issues	7 (4%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	84 (59%)
	Yes	24 (17%)
	No	35 (24%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?:				
	Don't know	Very easy	Easy	Neither	Difficult
	14 (9%)	7 (4%)	39 (24%)	31 (19%)	46 (29%)
	The doctor				23 (14%)
	16 (11%)	18 (12%)	62 (41%)	20 (13%)	24 (16%)
	The nurse				11 (7%)
	31 (21%)	1 (1%)	16 (11%)	9 (6%)	26 (17%)
	The dentist				66 (44%)
Q9.2	What do you think of the quality of the health service from the following people?:				
	Not been	Very good	Good	Neither	Bad
	20 (13%)	15 (9%)	45 (28%)	22 (14%)	32 (20%)
	The doctor				26 (16%)
	17 (11%)	21 (14%)	58 (38%)	23 (15%)	14 (9%)
	The nurse				19 (13%)
	60 (40%)	6 (4%)	21 (14%)	20 (13%)	20 (13%)
	The dentist				23 (15%)
Q9.3	What do you think of the overall quality of the health services here?				
	Not been				13 (8%)
	Very good				8 (5%)
	Good				37 (24%)
	Neither				37 (24%)
	Bad				34 (22%)
	Very bad				24 (16%)
Q9.4	Are you currently taking medication?				
	Yes				101 (63%)
	No				60 (37%)

Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?	
	<i>Not taking medication</i>	60 (37%)
	<i>Yes, all my meds</i>	33 (20%)
	<i>Yes, some of my meds</i>	32 (20%)
	<i>No</i>	37 (23%)
Q9.6	Do you have any emotional or mental health problems?	
	<i>Yes</i>	77 (48%)
	<i>No</i>	84 (52%)
Q9.7	Are you being helped/ supported by anyone in this prison? (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff.)	
	<i>Do not have any emotional or mental health problems</i>	84 (55%)
	<i>Yes</i>	39 (25%)
	<i>No</i>	31 (20%)

Section 10: Drugs and alcohol

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

Q10.2	**Did you have a problem with alcohol when you came into this prison?**	
	Yes	36 (22%)
	No	125 (78%)
Q10.3	**Is it easy or difficult to get illegal drugs in this prison?**	
	Very easy	32 (20%)
	Easy	18 (11%)
	Neither	11 (7%)
	Difficult	2 (1%)
	Very difficult	4 (3%)
	Don't know	93 (58%)
Q10.4	**Is it easy or difficult to get alcohol in this prison?**	
	Very easy	10 (6%)
	Easy	15 (9%)
	Neither	11 (7%)
	Difficult	6 (4%)
	Very difficult	15 (9%)
	Don't know	101 (64%)
Q10.5	**Have you developed a problem with illegal drugs since you have been in this prison?**	
	Yes	14 (9%)
	No	145 (91%)
Q10.6	**Have you developed a problem with diverted medication since you have been in this prison?**	
	Yes	15 (9%)
	No	145 (91%)
Q10.7	**Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?**	
	Did not / do not have a drug problem	103 (68%)
	Yes	28 (19%)
	No	20 (13%)

Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	<i>Did not / do not have an alcohol problem</i>	125 (80%)
	Yes	19 (12%)
	No	13 (8%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	113 (76%)
	Yes	29 (19%)
	No	7 (5%)

Section III: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
	<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	
	Prison job	27 (17%)	7 (4%)	35 (22%)	21 (13%)	49 (31%)	17 (11%)
	Vocational or skills training	39 (26%)	6 (4%)	31 (21%)	27 (18%)	32 (22%)	13 (9%)
	Education (including basic skills)	34 (23%)	9 (6%)	42 (28%)	28 (19%)	26 (17%)	11 (7%)
	Offending behaviour programmes	49 (33%)	4 (3%)	13 (9%)	28 (19%)	32 (22%)	21 (14%)
Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)						
	<i>Not involved in any of these</i>	57 (38%)					
	Prison job	59 (39%)					
	Vocational or skills training	11 (7%)					
	Education (including basic skills)	42 (28%)					
	Offending behaviour programmes	17 (11%)					
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?						
	<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>			
	Prison job	48 (35%)	35 (25%)	42 (30%)	13 (9%)		
	Vocational or skills training	55 (49%)	27 (24%)	20 (18%)	11 (10%)		
	Education (including basic skills)	46 (36%)	47 (37%)	21 (17%)	13 (10%)		
	Offending behaviour programmes	54 (46%)	35 (30%)	17 (14%)	12 (10%)		
Q11.4	How often do you usually go to the library?						
	<i>Don't want to go</i>	34 (22%)					
	Never	45 (29%)					
	<i>Less than once a week</i>	36 (23%)					
	<i>About once a week</i>	36 (23%)					
	<i>More than once a week</i>	5 (3%)					
Q11.5	Does the library have a wide enough range of materials to meet your needs?						
	<i>Don't use it</i>	63 (41%)					
	Yes	39 (26%)					
	No	50 (33%)					
Q11.6	How many times do you usually go to the gym each week?						
	<i>Don't want to go</i>	35 (23%)					
	0	34 (22%)					
	1 to 2	17 (11%)					
	3 to 5	66 (43%)					
	<i>More than 5</i>	0 (0%)					
Q11.7	How many times do you usually go outside for exercise each week?						
	<i>Don't want to go</i>	23 (15%)					

<i>0</i>	17 (11%)
<i>1 to 2</i>	65 (41%)
<i>3 to 5</i>	37 (24%)
<i>More than 5</i>	15 (10%)

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

<i>Don't want to go</i>	6 (4%)
<i>0</i>	4 (3%)
<i>1 to 2</i>	28 (18%)
<i>3 to 5</i>	60 (38%)
<i>More than 5</i>	59 (38%)

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

<i>Less than 2 hours</i>	24 (15%)
<i>2 to less than 4 hours</i>	49 (31%)
<i>4 to less than 6 hours</i>	30 (19%)
<i>6 to less than 8 hours</i>	26 (16%)
<i>8 to less than 10 hours</i>	10 (6%)
<i>10 hours or more</i>	9 (6%)
<i>Don't know</i>	10 (6%)

Section 12: Contact with family and friends**Q12.1 Have staff supported you and helped you to maintain contact with your family/friends while in this prison?**

<i>Yes</i>	43 (28%)
<i>No</i>	110 (72%)

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

<i>Yes</i>	84 (54%)
<i>No</i>	71 (46%)

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

<i>Yes</i>	46 (29%)
<i>No</i>	112 (71%)

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

<i>I don't get visits</i>	22 (14%)
<i>Very easy</i>	18 (11%)
<i>Easy</i>	35 (22%)
<i>Neither</i>	17 (11%)
<i>Difficult</i>	28 (18%)
<i>Very difficult</i>	33 (21%)
<i>Don't know</i>	5 (3%)

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

<i>Not sentenced</i>	57 (37%)
<i>Yes</i>	54 (35%)
<i>No</i>	45 (29%)

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

<i>Not sentenced/ NA</i>	102 (65%)
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	No contact	21 (13%)
	Letter	17 (11%)
	Phone	10 (6%)
	Visit	18 (11%)
Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	37 (24%)
	No	118 (76%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	57 (37%)
	Yes	31 (20%)
	No	67 (43%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/ not sentenced	124 (78%)
	Very involved	11 (7%)
	Involved	10 (6%)
	Neither	4 (3%)
	Not very involved	6 (4%)
	Not at all involved	4 (3%)
Q13.6	Who is working with you to achieve your sentence plan targets? (please tick all that apply to you.)	
	Do not have a sentence plan/ not sentenced	124 (79%)
	Nobody	16 (10%)
	Offender supervisor	9 (6%)
	Offender manager	9 (6%)
	Named/ personal officer	0 (0%)
	Staff from other departments	5 (3%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/ not sentenced	124 (79%)
	Yes	20 (13%)
	No	3 (2%)
	Don't know	10 (6%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	Do not have a sentence plan/ not sentenced	124 (79%)
	Yes	5 (3%)
	No	14 (9%)
	Don't know	14 (9%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	Do not have a sentence plan/ not sentenced	124 (79%)
	Yes	5 (3%)
	No	10 (6%)
	Don't know	18 (11%)
Q13.10	Do you have a needs based custody plan?	
	Yes	11 (7%)
	No	74 (49%)
	Don't know	66 (44%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes	12 (8%)

No	139 (92%)
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**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	27 (18%)	37 (25%)	82 (56%)
Accommodation	25 (17%)	43 (29%)	78 (53%)
Benefits	25 (17%)	48 (32%)	75 (51%)
Finances	27 (19%)	33 (24%)	79 (57%)
Education	30 (21%)	40 (28%)	75 (52%)
Drugs and alcohol	34 (24%)	46 (33%)	61 (43%)

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

Not sentenced	57 (37%)
Yes	47 (31%)
No	49 (32%)



Main comparator and comparator to last time

Prisoner survey responses HMP Woodhill 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	HMP Woodhill 2014	Local prisons comparator
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		

Number of completed questionnaires returned	164	5969
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SECTION 1: General information

1.2	Are you under 21 years of age?	6%	6%
1.3	Are you sentenced?	64%	68%
1.3	Are you on recall?	8%	9%
1.4	Is your sentence less than 12 months?	21%	21%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	3%
1.5	Are you a foreign national?	14%	13%
1.6	Do you understand spoken English?	99%	98%
1.7	Do you understand written English?	95%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	27%	25%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	5%
1.1	Are you Muslim?	14%	12%
1.11	Are you homosexual/gay or bisexual?	1%	3%
1.12	Do you consider yourself to have a disability?	27%	22%
1.13	Are you a veteran (ex-armed services)?	5%	5%
1.14	Is this your first time in prison?	30%	31%
1.15	Do you have any children under the age of 18?	60%	54%

SECTION 2: Transfers and escorts

On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	25%	19%
	For those who spent two or more hours in the escort van:		
2.2	Were you offered anything to eat or drink?	37%	37%
2.3	Were you offered a toilet break?	10%	10%
2.4	Was the van clean?	60%	60%
2.5	Did you feel safe?	78%	75%
2.6	Were you treated well/very well by the escort staff?	67%	66%
2.7	Before you arrived here were you told that you were coming here?	60%	65%
2.7	Before you arrived here did you receive any written information about coming here?	3%	4%
2.8	When you first arrived here did your property arrive at the same time as you?	78%	81%

SECTION 3: Reception, first night and induction

3.1	Were you in reception for less than 2 hours?	60%	45%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	77%

HMP Woodhill 2014	HMP Woodhill 2012
164	188
6%	5%
64%	69%
8%	12%
21%	24%
3%	3%
14%	11%
99%	99%
95%	98%
27%	25%
6%	3%
14%	11%
1%	2%
27%	20%
5%	6%
30%	30%
60%	57%
25%	26%
37%	47%
10%	2%
60%	76%
78%	81%
67%	73%
60%	69%
3%	5%
78%	92%
60%	63%
85%	92%

Main comparator and comparator to last time

Key to tables

		HMP Woodhill 2014	Local prisons comparator
	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		
3.3	Were you treated well/very well in reception?	67%	63%
	When you first arrived:		
3.4	Did you have any problems?	75%	74%
3.4	Did you have any problems with loss of property?	11%	15%
3.4	Did you have any housing problems?	17%	22%
3.4	Did you have any problems contacting employers?	4%	6%
3.4	Did you have any problems contacting family?	37%	31%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	5%
3.4	Did you have any money worries?	23%	23%
3.4	Did you have any problems with feeling depressed or suicidal?	29%	22%
3.4	Did you have any physical health problems?	17%	18%
3.4	Did you have any mental health problems?	30%	21%
3.4	Did you have any problems with needing protection from other prisoners?	6%	8%
3.4	Did you have problems accessing phone numbers?	28%	30%
	For those with problems:		
3.5	Did you receive any help/ support from staff in dealing with these problems?	39%	34%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	76%	85%
3.6	A shower?	45%	33%
3.6	A free telephone call?	62%	58%
3.6	Something to eat?	72%	75%
3.6	PIN phone credit?	31%	59%
3.6	Toiletries/ basic items?	68%	60%
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	45%	46%
3.7	Someone from health services?	75%	69%
3.7	A Listener/Samaritans?	32%	36%
3.7	Prison shop/ canteen?	23%	18%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	58%	48%
3.8	Support was available for people feeling depressed or suicidal?	46%	45%
3.8	How to make routine requests?	36%	41%
3.8	Your entitlement to visits?	38%	44%
3.8	Health services?	52%	51%
3.8	The chaplaincy?	45%	46%
3.9	Did you feel safe on your first night here?	77%	73%
3.10	Have you been on an induction course?	80%	80%

HMP Woodhill 2014	HMP Woodhill 2012
67%	76%
75%	65%
11%	12%
17%	20%
4%	5%
37%	22%
1%	1%
23%	20%
29%	20%
17%	15%
30%	18%
6%	4%
28%	22%
39%	47%
76%	81%
45%	53%
62%	72%
72%	83%
31%	36%
68%	76%
45%	62%
75%	81%
32%	53%
23%	31%
58%	71%
46%	58%
36%	57%
38%	58%
52%	64%
45%	61%
77%	91%
80%	83%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better		HMP Woodhill 2014		Local prisons comparator
	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				
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	59%	58%		70%
3.12	Did you receive an education (skills for life) assessment?	78%	74%		70%
SECTION 4: Legal rights and respectful custody					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	41%	40%		47%
4.1	Attend legal visits?	60%	57%		55%
4.1	Get bail information?	19%	21%		26%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	41%	40%		31%
4.3	Can you get legal books in the library?	42%	38%		40%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	39%	54%		69%
4.4	Are you normally able to have a shower every day?	72%	77%		95%
4.4	Do you normally receive clean sheets every week?	63%	79%		84%
4.4	Do you normally get cell cleaning materials every week?	62%	59%		87%
4.4	Is your cell call bell normally answered within five minutes?	24%	35%		46%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	65%	64%		72%
4.4	Can you normally get your stored property, if you need to?	22%	24%		30%
4.5	Is the food in this prison good/very good?	13%	22%		24%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46%	47%		45%
4.7	Are you able to speak to a Listener at any time, if you want to?	55%	57%		65%
4.8	Are your religious beliefs are respected?	45%	52%		62%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	40%	53%		62%
4.10	Is it easy/very easy to attend religious services?	40%	46%		48%
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	76%	77%		80%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	58%	56%		69%
5.2	Do you feel applications are dealt with quickly (within seven days)?	58%	43%		53%
5.3	Is it easy to make a complaint?	60%	51%		64%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	38%	32%		47%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	41%	32%		51%
5.5	Have you ever been prevented from making a complaint when you wanted to?	25%	19%		14%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	16%	21%		22%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	45%	45%		51%

	HMP Woodhill 2014		HMP Woodhill 2012
	59%	70%	
	78%	70%	
	41%	47%	
	60%	55%	
	19%	26%	
	41%	31%	
	42%	40%	
	39%	69%	
	72%	95%	
	63%	84%	
	62%	87%	
	24%	46%	
	65%	72%	
	22%	30%	
	13%	24%	
	46%	45%	
	55%	65%	
	45%	62%	
	40%	62%	
	40%	48%	
	76%	80%	
	58%	69%	
	58%	53%	
	60%	64%	
	38%	47%	
	41%	51%	
	25%	14%	
	16%	22%	
	45%	51%	

Main comparator and comparator to last time

Key to tables

		HMP Woodhill 2014	Local prisons comparator	HMP Woodhill 2014	HMP Woodhill 2012
	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				
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	44%	41%	44%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	8%	7%	8%	7%
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?	36%	37%	36%	62%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	77%	74%	77%	88%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	68%	73%	68%	83%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	27%	28%	27%	45%
7.4	Do staff normally speak to you most of the time/all of the time during association?	13%	18%	13%	26%
7.5	Do you have a personal officer?	16%	44%	16%	49%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	81%	65%	81%	76%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	38%	40%	38%	35%
8.2	Do you feel unsafe now?	15%	17%	15%	9%
8.4	Have you been victimised by other prisoners here?	32%	24%	32%	27%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	10%	11%	10%	13%
8.5	Hit, kicked or assaulted you?	7%	7%	7%	6%
8.5	Sexually abused you?	0%	1%	0%	1%
8.5	Threatened or intimidated you?	16%	14%	16%	16%
8.5	Taken your canteen/property?	9%	5%	9%	5%
8.5	Victimised you because of medication?	11%	5%	11%	4%
8.5	Victimised you because of debt?	7%	3%	7%	3%
8.5	Victimised you because of drugs?	4%	4%	4%	3%
8.5	Victimised you because of your race or ethnic origin?	4%	3%	4%	4%
8.5	Victimised you because of your religion/religious beliefs?	6%	2%	6%	3%
8.5	Victimised you because of your nationality?	3%	3%	3%	2%
8.5	Victimised you because you were from a different part of the country?	3%	3%	3%	4%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.5	Victimised you because of your sexual orientation?	0%	1%	0%	0%
8.5	Victimised you because of your age?	3%	2%	3%	1%
8.5	Victimised you because you have a disability?	5%	3%	5%	3%
8.5	Victimised you because you were new here?	5%	5%	5%	6%
8.5	Victimised you because of your offence/crime?	3%	5%	3%	5%
8.5	Victimised you because of gang related issues?	6%	4%	6%	3%
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	40%	28%	40%	25%
	Since you have been here, have staff:				

Main comparator and comparator to last time

Key to tables

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	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.7	Made insulting remarks about you, your family or friends?	11%	11%	11%	11%
8.7	Hit, kicked or assaulted you?	6%	4%	6%	3%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	14%	12%	14%	9%
8.7	Victimised you because of medication?	9%	5%	9%	6%
8.7	Victimised you because of debt?	4%	2%	4%	0%
8.7	Victimised you because of drugs?	5%	4%	5%	1%
8.7	Victimised you because of your race or ethnic origin?	6%	4%	6%	4%
8.7	Victimised you because of your religion/religious beliefs?	9%	3%	9%	4%
8.7	Victimised you because of your nationality?	6%	3%	6%	2%
8.7	Victimised you because you were from a different part of the country?	1%	3%	1%	2%
8.7	Victimised you because you are from a Traveller community?	0%	2%	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	1%
8.7	Victimised you because of your age?	3%	2%	3%	1%
8.7	Victimised you because you have a disability?	4%	2%	4%	2%
8.7	Victimised you because you were new here?	5%	5%	5%	4%
8.7	Victimised you because of your offence/crime?	6%	4%	6%	4%
8.7	Victimised you because of gang related issues?	4%	2%	4%	1%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	41%	32%	41%	45%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	29%	25%	29%	23%
9.1	Is it easy/very easy to see the nurse?	53%	48%	53%	47%
9.1	Is it easy/very easy to see the dentist?	11%	10%	11%	10%
	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?	43%	43%	43%	46%
9.2	The nurse?	59%	54%	59%	56%
9.2	The dentist?	30%	30%	30%	34%
9.3	The overall quality of health services?	32%	38%	32%	39%
9.4	Are you currently taking medication?	63%	50%	63%	52%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	64%	61%	64%	67%
9.6	Do you have any emotional well being or mental health problems?	48%	35%	48%	37%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	56%	42%	56%	41%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	30%	35%	30%	26%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
10.2	Did you have a problem with alcohol when you came into this prison?	22%	26%	22%	18%
10.3	Is it easy/very easy to get illegal drugs in this prison?	31%	30%	31%	22%
10.4	Is it easy/very easy to get alcohol in this prison?	16%	13%	16%	15%
10.5	Have you developed a problem with drugs since you have been in this prison?	9%	8%	9%	5%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	9%	8%	9%	8%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	58%	63%	58%	49%
10.8	Have you received any support or help with your alcohol problem while in this prison?	59%	59%	59%	56%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	81%	76%	81%	83%
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	27%	30%	27%	48%
11.1	Vocational or skills training?	25%	29%	25%	35%
11.1	Education (including basic skills)?	34%	44%	34%	45%
11.1	Offending behaviour programmes?	12%	18%	12%	24%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	39%	44%	39%	53%
11.2	Vocational or skills training?	7%	9%	7%	12%
11.2	Education (including basic skills)?	28%	27%	28%	26%
11.2	Offending behaviour programmes?	11%	8%	11%	7%
11.3	Have you had a job while in this prison?	65%	69%	65%	72%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	39%	41%	39%	37%
11.3	Have you been involved in vocational or skills training while in this prison?	51%	55%	51%	58%
	For those who have had vocational or skills training while in this prison:				
11.3	Do you feel the vocational or skills training will help you on release?	46%	48%	46%	37%
11.3	Have you been involved in education while in this prison?	64%	67%	64%	65%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	58%	54%	58%	47%
11.3	Have you been involved in offending behaviour programmes while in this prison?	54%	53%	54%	53%
	For those who have been involved in offending behaviour programmes while in this prison:				
11.3	Do you feel the offending behaviour programme(s) will help you on release?	55%	46%	55%	33%
11.4	Do you go to the library at least once a week?	26%	33%	26%	33%
11.5	Does the library have a wide enough range of materials to meet your needs?	26%	35%	26%	36%
11.6	Do you go to the gym three or more times a week?	43%	29%	43%	42%
11.7	Do you go outside for exercise three or more times a week?	33%	39%	33%	32%
11.8	Do you go on association more than five times each week?	38%	43%	38%	72%

Key to tables

Main comparator and comparator to last time

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11.9	Do you spend ten or more hours out of your cell on a weekday?	6%	10%	
SECTION 12: Friends and family				
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	28%	34%	
12.2	Have you had any problems with sending or receiving mail?	54%	47%	
12.3	Have you had any problems getting access to the telephones?	29%	33%	
12.4	Is it easy/ very easy for your friends and family to get here?	34%	37%	
SECTION 13: Preparation for release				
For those who are sentenced:				
13.1	Do you have a named offender manager (home probation officer) in the probation service?	55%	62%	
For those who are sentenced what type of contact have you had with your offender manager:				
13.2	No contact?	38%	42%	
13.2	Contact by letter?	30%	28%	
13.2	Contact by phone?	18%	13%	
13.2	Contact by visit?	32%	37%	
13.3	Do you have a named offender supervisor in this prison?	24%	32%	
For those who are sentenced:				
13.4	Do you have a sentence plan?	32%	39%	
For those with a sentence plan:				
13.5	Were you involved/very involved in the development of your plan?	60%	58%	
Who is working with you to achieve your sentence plan targets:				
13.6	Nobody?	50%	43%	
13.6	Offender supervisor?	28%	32%	
13.6	Offender manager?	28%	27%	
13.6	Named/ personal officer?	0%	11%	
13.6	Staff from other departments?	16%	19%	
For those with a sentence plan:				
13.7	Can you achieve any of your sentence plan targets in this prison?	61%	59%	
13.8	Are there plans for you to achieve any of your targets in another prison?	15%	26%	
13.9	Are there plans for you to achieve any of your targets in the community?	15%	31%	
13.10	Do you have a needs based custody plan?	7%	7%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	8%	14%	
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?	31%	29%	
13.12	Accommodation?	36%	38%	
13.12	Benefits?	39%	39%	
13.12	Finances?	30%	23%	
13.12	Education?	35%	29%	
13.12	Drugs and alcohol?	43%	45%	
For those who are sentenced:				
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	49%	47%	

HMP Woodhill 2014	HMP Woodhill 2012
6%	17%
28%	36%
54%	45%
29%	25%
34%	38%
55%	55%
38%	48%
30%	19%
18%	11%
32%	36%
24%	25%
32%	31%
60%	58%
50%	53%
28%	36%
28%	31%
0%	25%
16%	19%
61%	47%
15%	
15%	
7%	4%
8%	12%
31%	34%
36%	47%
39%	53%
30%	34%
35%	41%
43%	53%
49%	52%



Diversity analysis

Key question responses (ethnicity, foreign national and religion) HMP Woodhill 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	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better						
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
Number of completed questionnaires returned		43	116	23	139	22	138
1.3	Are you sentenced?	62%	66%	46%	67%	71%	63%
1.5	Are you a foreign national?	31%	7%			14%	14%
1.6	Do you understand spoken English?	100%	100%	95%	100%	100%	99%
1.7	Do you understand written English?	93%	97%	83%	98%	91%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			62%	21%	77%	18%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	5%	10%	5%	0%	7%
1.1	Are you Muslim?	42%	4%	14%	14%		
1.12	Do you consider yourself to have a disability?	17%	32%	23%	28%	18%	27%
1.13	Are you a veteran (ex-armed services)?	3%	6%	9%	4%	5%	5%
1.14	Is this your first time in prison?	47%	23%	57%	25%	46%	27%
2.6	Were you treated well/very well by the escort staff?	62%	69%	71%	66%	59%	68%
2.7	Before you arrived here were you told that you were coming here?	52%	64%	50%	62%	59%	61%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	86%	83%	86%	68%	88%
3.3	Were you treated well/very well in reception?	63%	70%	74%	66%	50%	70%
3.4	Did you have any problems when you first arrived?	76%	75%	83%	74%	77%	74%
3.7	Did you have access to someone from health care when you first arrived here?	88%	70%	80%	74%	81%	73%
3.9	Did you feel safe on your first night here?	74%	79%	83%	77%	73%	79%
3.10	Have you been on an induction course?	93%	74%	86%	79%	86%	80%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	39%	43%	37%	41%	41%	41%

Key to tables

Diversity analysis

	Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners		Foreign national prisoners	British prisoners		Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse									
	Any percentage highlighted in orange shows a significant difference in prisoners' background details									
	Percentages which are not highlighted show there is no significant difference									
4.4	Are you normally offered enough clean, suitable clothes for the week?	42%	38%		61%	36%		23%	41%	
4.4	Are you normally able to have a shower every day?	74%	72%		73%	72%		63%	75%	
4.4	Is your cell call bell normally answered within five minutes?	33%	20%		43%	21%		23%	25%	
4.5	Is the food in this prison good/very good?	19%	12%		17%	12%		14%	14%	
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	30%	54%		35%	47%		18%	50%	
4.7	Are you able to speak to a Listener at any time, if you want to?	49%	59%		43%	56%		41%	56%	
4.8	Do you feel your religious beliefs are respected?	44%	45%		59%	42%		29%	46%	
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	54%	35%		57%	37%		46%	39%	
5.1	Is it easy to make an application?	77%	78%		52%	81%		73%	78%	
5.3	Is it easy to make a complaint?	49%	65%		37%	64%		53%	62%	
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	43%	46%		38%	46%		28%	48%	
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	39%		29%	42%		28%	44%	
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	8%		14%	7%		14%	7%	
7.1	Do most staff, in this prison, treat you with respect?	74%	78%		68%	78%		50%	80%	
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	71%	68%		75%	66%		57%	69%	
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	16%	12%		22%	12%		0%	15%	
7.4	Do you have a personal officer?	19%	15%		22%	15%		9%	16%	
8.1	Have you ever felt unsafe here?	30%	42%		32%	40%		33%	39%	
8.2	Do you feel unsafe now?	16%	14%		29%	13%		15%	15%	
8.3	Have you been victimised by other prisoners?	21%	37%		29%	33%		24%	33%	
8.5	Have you ever felt threatened or intimidated by other prisoners here?	7%	21%		14%	17%		14%	16%	
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	7%	3%		14%	2%		0%	4%	
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	12%	4%		19%	4%		5%	5%	
8.5	Have you been victimised because of your nationality? (By prisoners)	7%	2%		14%	1%		0%	3%	

Diversity analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better						
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	6%	9%	5%	0%	5%
8.6	Have you been victimised by a member of staff?	44%	38%	38%	40%	68%	35%
8.7	Have you ever felt threatened or intimidated by staff here?	21%	12%	14%	14%	28%	11%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	16%	2%	9%	5%	18%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	21%	6%	9%	10%	41%	4%
8.7	Have you been victimised because of your nationality? (By staff)	12%	4%	14%	5%	5%	6%
8.7	Have you been victimised because you have a disability? (By staff)	5%	4%	9%	3%	5%	3%
9.1	Is it easy/very easy to see the doctor?	30%	29%	35%	28%	32%	29%
9.1	Is it easy/ very easy to see the nurse?	58%	50%	50%	54%	55%	54%
9.4	Are you currently taking medication?	56%	66%	70%	61%	46%	64%
9.6	Do you feel you have any emotional well being/mental health issues?	42%	51%	37%	49%	46%	47%
10.3	Is it easy/very easy to get illegal drugs in this prison?	26%	34%	17%	34%	41%	30%
11.2	Are you currently working in the prison?	40%	38%	35%	39%	19%	40%
11.2	Are you currently undertaking vocational or skills training?	5%	8%	0%	9%	5%	8%
11.2	Are you currently in education (including basic skills)?	38%	24%	50%	24%	43%	24%
11.2	Are you currently taking part in an offending behaviour programme?	12%	11%	0%	13%	29%	9%
11.4	Do you go to the library at least once a week?	33%	25%	50%	22%	19%	27%
11.6	Do you go to the gym three or more times a week?	74%	32%	43%	43%	63%	40%
11.7	Do you go outside for exercise three or more times a week?	33%	33%	30%	33%	29%	33%
11.8	On average, do you go on association more than five times each week?	31%	41%	19%	41%	47%	36%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	3%	6%	5%	5%	5%	5%
12.2	Have you had any problems sending or receiving mail?	56%	53%	28%	60%	73%	50%
12.3	Have you had any problems getting access to the telephones?	30%	29%	23%	31%	46%	27%

Diversity Analysis



Key question responses (disability) HMP Woodhill 2014

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

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		43	118
1.3	Are you sentenced?	61%	65%
1.5	Are you a foreign national?	12%	15%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	97%	94%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	16%	31%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	6%
1.1	Are you Muslim?	10%	15%
1.13	Are you a veteran (ex-armed services)?	7%	3%
1.14	Is this your first time in prison?	21%	33%
2.6	Were you treated well/very well by the escort staff?	57%	70%
2.7	Before you arrived here were you told that you were coming here?	58%	62%
3.2	When you were searched in reception, was this carried out in a respectful way?	79%	88%
3.3	Were you treated well/very well in reception?	62%	69%
3.4	Did you have any problems when you first arrived?	97%	66%
3.7	Did you have access to someone from health care when you first arrived here?	77%	74%
3.9	Did you feel safe on your first night here?	58%	85%
3.10	Have you been on an induction course?	54%	89%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	50%	37%

Diversity Analysis

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	34%	40%
4.4	Are you normally able to have a shower every day?	64%	76%
4.4	Is your cell call bell normally answered within five minutes?	17%	26%
4.5	Is the food in this prison good/very good?	10%	15%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	49%	44%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	55%
4.8	Do you feel your religious beliefs are respected?	47%	43%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	39%	40%
5.1	Is it easy to make an application?	68%	80%
5.3	Is it easy to make a complaint?	69%	57%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	44%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	15%	6%
7.1	Do most staff, in this prison, treat you with respect?	64%	81%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	65%	69%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	15%	12%
7.4	Do you have a personal officer?	15%	15%
8.1	Have you ever felt unsafe here?	73%	27%
8.2	Do you feel unsafe now?	32%	10%
8.3	Have you been victimised by other prisoners?	65%	22%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	35%	10%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	8%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	13%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	10%	1%

Key to tables

Diversity Analysis

		Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.5	Have you been victimised because of your age? (By prisoners)	10%	0%
8.5	Have you been victimised because you have a disability? (By prisoners)	20%	0%
8.6	Have you been victimised by a member of staff?	58%	35%
8.7	Have you ever felt threatened or intimidated by staff here?	25%	10%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	8%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	17%	7%
8.7	Have you been victimised because of your nationality? (By staff)	13%	3%
8.7	Have you been victimised because of your age? (By staff)	10%	0%
8.7	Have you been victimised because you have a disability? (By staff)	13%	1%
9.1	Is it easy/very easy to see the doctor?	35%	27%
9.1	Is it easy/ very easy to see the nurse?	51%	54%
9.4	Are you currently taking medication?	90%	52%
9.6	Do you feel you have any emotional well being/mental health issues?	90%	32%
10.3	Is it easy/very easy to get illegal drugs in this prison?	39%	29%
11.2	Are you currently working in the prison?	26%	42%
11.2	Are you currently undertaking vocational or skills training?	5%	8%
11.2	Are you currently in education (including basic skills)?	31%	25%
11.2	Are you currently taking part in an offending behaviour programme?	13%	11%
11.4	Do you go to the library at least once a week?	26%	25%
11.6	Do you go to the gym three or more times a week?	26%	49%
11.7	Do you go outside for exercise three or more times a week?	28%	33%
11.8	On average, do you go on association more than five times each week?	39%	38%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	0%	7%
12.2	Have you had any problems sending or receiving mail?	62%	52%
12.3	Have you had any problems getting access to the telephones?	22%	32%