

Report on an announced inspection of

HMP Bristol

by HM Chief Inspector of Prisons

29 September – 3 October 2014

Glossary of terms

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Introduction

HMP Bristol is a Victorian category B local prison that at the time of this inspection held 586 adult and young adult men, well above its certified normal accommodation of 424. When we previously inspected the prison in May 2013 we were very concerned by what we found. That inspection was a bruising experience for the prison and because of our concerns we announced we would return earlier than usual. This inspection found that the governor and staff had made huge efforts to make progress and to respond to our recommendations. Although significant concerns remained, considerable progress had been made and the prison now had some positive momentum which should help to achieve the further improvements required.

The prison had a needy transient population, typical of an inner city local prison. More than a quarter of the prisoners reported mental health problems and an average of 50 prisoners were under the care of the mental health team at any one time. Almost a third of prisoners reported to us that they had a drug problem when they entered the prison and almost a quarter had problems with alcohol. Seventy per cent needed help with accommodation or employment on release. Two-thirds of prisoners were unsentenced or serving sentences of less than six months. As before, most prisoners spent less than three months in the prison. There were significant limitations on the resources the prison had to meet these needs. The physical environment remained poor. There had been little investment in the quality of accommodation and despite efforts by the prison, many communal areas and cells were in poor physical condition; not sufficiently clean and with broken furniture. There was an infestation of cockroaches on some units.

The prison had to cope with some significant staff vacancies. These were not just among officer posts but affected some critical administrative roles that were crucial to prisoner outcomes. Managers were frustrated by the poor performance of some regional contracts, such as laundry, that caused unacceptable problems but which they felt unable to influence.

When we inspected in 2013 we were critical of the staff culture and were concerned by the attitudes of some staff. There had been a marked improvement by the time of this inspection. In our survey, 81% of prisoners told us staff treated them with respect compared with 67% in 2013; 33% compared with 23% said a member of staff had checked on them personally in the last week. Our own observations were consistent with prisoners' perceptions. Improvements in relationships between staff and prisoners helped to mitigate some of the other weaknesses in the prison and provided a platform for further improvement. This was just as well because failures in some basic services caused real frustration. The external laundry facilities and kit provision were inadequate and prisoners were humiliated by their inability to obtain clean, properly fitting clothing that was in good repair. Bedding, towels and cleaning materials were also in short supply. Staff shortages meant there were long delays in administering the processes that enabled prisoners to use the phone and some new prisoners waited a week or more before they could phone their family. Prisoners' views on the food had improved; quality and quantity were better but poor supervision of serveries meant portions were not always given fairly. The number of complaints had increased but the complaints system was working better, replies were appropriate and the prison was responding to the concerns that were consistently raised.

Health services had also improved and prisoners were much more positive about them than before. Mental health provision was very good. The new Brunel Unit provided a range of interventions in a therapeutic environment to stabilise men with enduring mental health problems before they moved back to the wings. It is likely that in the past, in Bristol and in other prisons, these men would have been held in the segregation unit.

The strategic management of equality and diversity was weak and although this was beginning to be addressed, outcomes for prisoners with protected characteristics were mixed. Arrangements to identify and meet the needs of prisoners from minority groups were weak. About 25% of prisoners

were from black and minority ethnic backgrounds and they reported similarly to or better than white prisoners. Eleven per cent of prisoners were foreign nationals but visits from Home Office immigration staff had recently ceased and these prisoners had no one with whom they could discuss their case. Two prisoners were being held solely on immigration powers beyond the end of their sentence date. Some prisoners with disabilities received inadequate support and although some limited provision for older prisoners had recently been introduced, we found older prisoners and those with disabilities locked in their cells during the day. Younger prisoners were disproportionately represented in disciplinary processes. There was no specific support for gay, bisexual or transgender prisoners. Faith provision was good and previous gaps in provision were being addressed.

The most serious issue still affecting the prison was the level of violence. Seventeen per cent of prisoners told us they felt unsafe at the time of the inspection, which was similar to other local prisons, but levels of violence had risen sharply since the last inspection and were now considerably higher than in similar prisons. Not enough had been done to investigate individual incidents and deal with perpetrators and victims or to understand and address wider trends. One in six men sought protection on A wing. This was a vulnerable prisoner and safer custody wing but poor allocation processes meant that the mix of prisoners was such that levels of victimisation and violence were higher than elsewhere in the prison. One vulnerable young adult on the wing had been the victim of predatory behaviour by an older man and despite staff being aware of the risk, not enough was done to protect him.

Prisoners at risk of suicide and self-harm felt well supported, perhaps reflecting the much better attitudes of staff, but processes to care for them were weak. Reception and early days processes had much improved. Levels of use of force were comparable to local prisons and although throughput was high, prisoners in the segregation unit were well cared for and the Brunel Unit provided a valuable additional resource to deal with the most challenging men. Security was proportionate and the prison was taking robust action to reduce the supply of drugs. Nevertheless, the availability of legal highs such as 'Spice' was a problem, as found elsewhere in the prison system. In the last six months there had been seven Spice-related emergency admissions to hospital. Services for prisoners with substance abuse problems had improved since the last inspection and were now good.

Prisoners could have much more time out of their cells than at the previous inspection. Working prisoners had nine hours out of their cells during the week but for the large number of unemployed prisoners this was reduced to about five hours. Nevertheless, this was better than we often see in local prisons. The management of learning, work and skills required improvement and the prison did not use all its activity places efficiently. Allocation and attendance were poor. The prison had sufficient activity places to make sure everyone had at least something to do part time but too many prisoners had full time activity which meant some had none. There were too many occasions where prisoners were allocated to more than one activity at the same time.

The partnership between the prison and Weston College, the learning and skills provider, was improving and efforts had been made to tailor provision to the short stays most men had in the prison. Success rates in critical functional English and mathematics had improved and the use of trained peer mentors to support this on the wings was very good. Overall however, the quality of provision and achievements of prisoners was still too variable. The library was adequate and there was good PE provision but access to both was too limited.

The prison had begun to make plans for its new role as a resettlement prison. Offender management had deteriorated and was failing to meet the needs of a very transient population. Many prisoners were transferred without an assessment of their risks. As part of the reconfiguration of the estate to meet the requirement to establish resettlement prisons, prisoners were allocated to other prisons on the basis of their sentence length rather than the assessment of their offending-related need. We have seen elsewhere that this has caused considerable difficulty for receiving prisons. Prisoners who were eligible for home detention curfew were not considered, which was particularly disconcerting in an overcrowded prison estate. Unsentenced and short sentence prisoners did not have custody

plans. Multi-agency public protection arrangements (MAPPA) procedures for the most high risk prisoners were in disarray but public protection arrangements as a whole were reasonable.

Practical resettlement services had improved since the last inspection. New arrangements had reduced the number of men leaving the prison without settled accommodation, from 22% in April 2014 to 5% in September. Help for men to obtain work or training after release was good. Health care arrangements were also good. Resettlement support for men with substance abuse issues was excellent and the prison participated in a pilot scheme to train prisoners to give emergency life saving opiate overdose treatment after release. There was good support to help men manage their finances and debt after release but because processes to enable prisoners to set up bank accounts were too lengthy for those with short stays in the prison, the scheme had lapsed. Family support had improved and the Prison Advice and Care Trust (PACT) provided a very good service and organised family visits in the school holidays, but these were only available for enhanced prisoners. The visits hall was a good environment and the number of visit places had increased.

HMP Bristol has come a long way in a relatively short time since the last inspection. Nevertheless, some significant concerns remain and while some of these are outside the prison's direct control, it is important this does not discourage the prison from making the further improvements that could be made. The distance the prison has already travelled has involved real determination, hard work and resilience from managers and staff which needs to be recognised. It is important they now receive support to make the further improvements required.

Nick Hardwick
HM Chief Inspector of Prisons

February 2015

Fact page

Task of the establishment

HMP Bristol is a category B local prison holding male adults and young adults.

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

Public

Region/Department

South-West

Number held

586

Certified normal accommodation

424

Operational capacity

614

Date of last full inspection

6–17 May 2013

Brief history

The prison was built in 1883. B and C wings were added in the 1960s.

Short description of residential units

A wing is a 126-bed wing mainly for vulnerable prisoners.

B wing has 99 single cells and is the drug-free wing. It does not have in-cell sanitation.

C wing is a 148-bed wing, incorporating integrated drug treatment system/drug recovery and a dedicated detoxification unit on C3.

D wing (including the F wing annex) is a 116-bed wing and contains the dedicated first night and induction centre. This wing also holds Listeners and Insiders.

E wing is an 11-bed dedicated segregation wing, with two additional unfurnished cells.

G wing is a 125-bed wing.

The prison no longer has a separate health centre unit; it has a reintegration unit, named the Brunel unit, holding prisoners with complex mental health and physical needs.

Name of governor/director

Andrea Albutt

Escort contractor

GEOAmev

Health service provider

Physical health providers: Bristol Community Health and MedCo Secure Health Services

Mental health provider: Avon and Wiltshire NHS Partnership

Dental services: Somerset Partnership NHS Foundation Trust

Learning and skills providers

Weston College

Independent Monitoring Board chair

Mike Flannery

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 procedures were streamlined and swift. First night processes, including risk assessments, had improved considerably. Recorded levels of violence were relatively high. The delivery of safer custody was poor, with little response to violent incidents and inadequate collation and analysis of data. Too little was done to keep vulnerable prisoners and some young adults safe. Prisoners at risk of suicide and self-harm felt well cared for but care planning was weak. Security arrangements had improved and were proportionate. Drug availability had reduced and good supply reduction processes were in place but the use of spice was a concern. Levels of use of force were similar to those at comparator prisons. The number of prisoners segregated was high but they were well managed and the Brunel unit was an effective resource for more problematic prisoners. Substance misuse services were good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S2 *At the last inspection in May 2013 we found that outcomes for prisoners in Bristol 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 eight of the recommendations had been achieved, four had been partially achieved and eight had not been achieved.*

S3 Some prisoners waited too long in court for transport back to the prison but journey times were reasonably short and most prisoners said that they had been treated well by escort staff.

S4 The reception area was very busy, small and cramped but was clean and well decorated. Staff were welcoming and clearly focused on meeting the needs of prisoners. Effective and streamlined processes helped prisoners to move quickly to the first night centre.

S5 There was effective collaborative work between first night officers, peer support workers and Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) to support new arrivals. Initial safety screening for all new prisoners had improved and was good. Immediate needs were identified and dealt with during private interviews with officers and health services staff. The first night centre provided a good environment but the conditions in some cells used to accommodate prisoners during their first night were poor.

S6 Induction had improved and was comprehensive but tracking systems were underdeveloped and we were not assured that all prisoners, particularly those on C wing, received the full programme.

S7 Similar numbers of prisoners to those in comparator prisons said that they currently felt unsafe but the results for some minority groups were more negative. The number of violent incidents had increased sharply and was considerably higher than that at similar prisons. Despite this, there had been little progress in the management of bullying and violence. There was still no prison-wide safety strategy, and the extent and nature of the violence, and action taken to make the prison safer, were unclear as data collection and analysis were poor.

- S8 A relatively high number of prisoners sought protection on A wing and there was no effective screening process. Despite this being a vulnerable prisoner and safer custody wing, more prisoners there than on other wings said that they were being victimised by other prisoners. Levels of violence on this wing were unusually high, yet not enough was being done to make the wing safer. There was no formal assessment to manage the risks posed to young adults by other prisoners, including sex offenders, and we found evidence that they were put at preventable risk. Prisoners lacked confidence in the management of bullying and victimisation. Few incidents were investigated and little was done to challenge bullying behaviour or support victims.
- S9 The number of self-harm incidents was the same as at the time of the previous inspection but slightly lower than at other local prisons. Although prisoners were positive about the support they received under assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm, the quality of records, particularly care maps, and the identification of triggers and related issues were poor. There had been no deaths in custody since the previous inspection. Recommendations from previous Prisons and Probation Ombudsman reports had been addressed but were not part of the continuous improvement plan, so ongoing progress was not monitored.
- S10 Procedural security was well managed. The management of intelligence was generally good and there were effective links with the local police, but safer custody staff made insufficient use of security information. Important elements of dynamic security had improved, and the supervision of prisoners on the wings was better.
- S11 Fewer prisoners than at the time of the previous inspection said that it was easy to get illegal drugs at the prison, although this was now in line with the comparator. The mandatory drug testing rate was relatively low but was not a reliable indicator of drug use as the new psychoactive substance, 'spice', could not be detected by current testing methods. Supply reduction initiatives were adapting to the presence of spice and illicit buprenorphine as the main drugs of choice, and fewer than at comparator prisons and at the time of the previous inspection said that they had developed a drug problem while at the prison.
- S12 The number of adjudications was high but the ones we viewed were appropriate and hearings were conducted fairly. The number of incidents involving the use of force was similar to that at comparator prisons. Written accounts from officers usually gave assurances that actions were justified and proportionate but the collection and analysis of data to identify patterns or trends were underdeveloped.
- S13 The number of prisoners in segregation over the previous six months was comparatively high but the average length of stay was reasonably short. Relationships between staff and prisoners on the unit were very good and staff managed some challenging behaviour well but the regime was limited, particularly for those segregated for long periods. The Brunel unit continued to be used to good effect as a place for progression for more complex cases.
- S14 The quality of provision for prisoners with drug and alcohol needs had improved. Clinical and psychosocial services were well integrated and the psychosocial team offered a good balance of harm reduction and recovery-focused interventions. Clinical treatment was sound. The role of C wing as a treatment unit had been clarified, although the environment was poor and the organisation and supervision of medication queues were deficient, resulting in a loss of privacy and an increased risk of diversion.

Respect

- S15 *The living conditions for prisoners had not improved sufficiently and access to basic items such as sufficient clean clothes, bedding and furniture remained unacceptable. Prisoners did not always receive replies to applications and too many complaints were late. Delays in enabling telephone contact caused considerable distress. Staff–prisoner relationships had improved considerably. Managerial oversight of equality and diversity was weak and the needs of some minority groups were not being met. Faith provision was satisfactory. Health services had improved and were very good. The food provided was reasonably good **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S16 *At the last inspection in May 2013 we found that outcomes for prisoners in Bristol were poor against this healthy prison test. We made 35 recommendations in the area of respect. At this follow-up inspection we found that 17 of the recommendations had been achieved, five had been partially achieved, 12 had not been achieved and one was no longer relevant.*
- S17 Little investment had been made in the quality of accommodation, so the living conditions for prisoners had not improved, with many cells and communal areas worn, grubby and ill equipped. We found an infestation of cockroaches on some residential units. Access to showers was good but many were poorly maintained and insufficiently private. Many cells designed for single occupancy held two prisoners and were cramped. Prisoners struggled to get access to basic facilities and items. There was far too little prison clothing, towels and bedding to meet need and the quality and cleanliness was often unacceptable. Insufficient cell cleaning materials were provided. Application forms were not routinely available on the wings and prisoners lacked confidence in the system as replies were often delayed and not tracked. There were sufficient telephones around the prison but delays in accessing PIN telephone numbers caused considerable anxiety for prisoners, particularly in their first few weeks at the establishment.
- S18 Staff–prisoner relationships had improved considerably and we saw consistently positive interactions between them. More prisoners than at other local prisons and than at the time of the previous inspection said that staff treated them respectfully, had checked on them recently and mixed with them during association.
- S19 Attention given to equality and diversity had only recently increased and there had been insufficient managerial oversight, with no local needs analysis or policy and an ineffective action plan. The monitoring of the treatment and conditions of prisoners across all relevant protected characteristics was undertaken against some key areas but was not widely used to assess access to regime activities. A full range of focus groups had recently been introduced but were yet to become embedded and it was too soon to judge their effectiveness. Trained prisoner equality representatives were in place on most wings to provide first-hand support to prisoners. Responses to discrimination incident report forms were reasonable and quality assurance was appropriate.
- S20 Almost a quarter of prisoners were from a black and minority ethnic background and they reported mostly similarly or more positively than white prisoners in our survey.
- S21 Good use was made of professional interpreting services for the large foreign national population but there was no longer any independent immigration advice available and access to Home Office Immigration and Enforcement staff had recently ceased.

- S22 There was good screening during the reception process to identify prisoners with disabilities and those aged over 50. Health care plans were formulated for such prisoners and were reviewed when appropriate. However, there was a lack of involvement of wing staff, who were not aware of the needs of prisoners with disabilities, which meant that some of these were not met.
- S23 The needs of young adults had not been assessed and there was no strategy directing their management or ensuring that their needs were met.
- S24 There was no formal support for gay or bisexual prisoners and no transgender policy.
- S25 Prisoners in our survey were negative about access to faith services, chaplains and respect for their beliefs, although prisoners in our groups were positive. Despite significant vacancies, the faith team met the needs of the population, with regular services and supporting classes.
- S26 Prisoner complaint forms were not always available on the wings. Responses to complaints were often late, although their quality had improved and quality assurance and trend analysis were in place.
- S27 Legal services were not formally provided but facilities for legal visits were good and bail support was available.
- S28 Health services had improved and far more prisoners in our survey than at similar prisons and than at the time of the previous inspection were satisfied with them. A wide range of primary care and screening clinics was available and appointments with outside hospitals were rarely cancelled because of a lack of escorts. Chronic disease management was satisfactory. Access to GP clinics had much improved. Prisoners were able to consult the pharmacist and medicines were given at therapeutic times, but the medicine queues were not sufficiently well supervised. Access to the dentist had improved, with most being seen within six weeks. High-quality mental health care was delivered and those with enduring problems had access to the Brunel unit, which provided a good therapeutic environment. Patients transferred to secure mental health units were moved promptly.
- S29 Prisoners were relatively satisfied with the quality of the food provided and that which we tasted was of a very good quality. With the exception of the breakfast pack, portion sizes were reasonable but the supervision of serveries was inconsistent and some prisoners took more than their entitlement. Prison shop arrangements were mostly good, although some prisoners waited too long for their first substantive order, which increased the risk of debt.

Purposeful activity

- S30 *The amount of time out of cell had improved and was relatively good. The management of learning and skills and work required further improvement. There were sufficient activity places for all prisoners to work part time but they were not effectively utilised, and allocation and attendance were poor. There was too little vocational training. The quality of teaching and learning had improved but was too variable. The achievement of those prisoners who took qualifications was good. Library provision was adequate and recreational PE provision was good but access to both was compromised by staff shortages. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S31 At the last inspection in May 2013 we found that outcomes for prisoners in Bristol were poor against this healthy prison test. We made 16 recommendations in the area of purposeful activity. At this follow-up inspection we found that four of the recommendations had been achieved, seven had been partially achieved, four had not been achieved and one was no longer relevant.

- S32 The amount of time out of cell had improved and was relatively good, at around nine hours a day for working prisoners during the week. For unemployed prisoners, this was less, at around five hours a day. During our roll checks, we found around 28% of prisoners locked up, which was much less than at the time of the previous inspection, and we were satisfied that all prisoners were unlocked for a domestic period for part of the day. Access to association and exercise was regular and was rarely cancelled.
- S33 Managers recognised weaknesses in the current purposeful activity provision and had a strong commitment to improving it. There were sufficient learning and skills and work activities for all prisoners to be engaged part time but processes for allocating work and monitoring attendance were ineffective. Too many places were full time and many were underutilised, leaving too many prisoners without an activity at all.
- S34 Education provision broadly met the needs of most prisoners, and the introduction of short accredited courses had been effective. There was insufficient vocational training and much of the work, particularly for vulnerable prisoners, was low skilled and repetitive, and too many prisoners were underemployed as wing workers.
- S35 The information and communications technology provision was of high quality and there was good coaching in the workshops. However, the quality of teaching, learning and assessment in education classes was too variable. Staff managed outreach education support particularly well for many prisoners with barriers to learning, and there was good use of peer mentors.
- S36 Too few prisoners had opportunities to take accredited qualifications and there was little recording or recognition of work skills. Achievements in accredited English and mathematics programmes had improved considerably and many prisoners made very good progress. Prisoners' behaviour was very good and they displayed high levels of respect for each other and for staff. Attendance was poor, particularly in education classes.
- S37 Some improvements had been made to the library environment but it was only open during the working day and access was further reduced by the lack of escorting staff.
- S38 The quality of recreational PE provision was good but PE qualifications were no longer offered. PE staff were frequently redeployed, which had a significant impact on the availability of supervised recreational PE. Too many prisoners attended PE during their allocated work time.

Resettlement

- S39 *Early strategic planning was in place for the establishment's new role as a resettlement prison. Offender management unit staff were struggling to meet the significant challenges of an ever-increasing throughput of short-term prisoners. Many prisoners who were eligible for home detention curfew were not considered for it. Most public protection measures were sound but multiagency public protection arrangements (MAPPA) procedures were poor. The demand for resettlement services was high and needs were assessed regularly. Pathway provision was mostly effective. Some children and families services had improved, although visits booking was very poor. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S40 *At the last inspection in May 2013 we found that outcomes for prisoners in Bristol were reasonably good against this healthy prison test. We made nine recommendations in the area of resettlement. At this follow-up inspection we found that six of the recommendations had been achieved, two had been partially achieved and one was no longer relevant.*
- S41 The new draft strategy on reducing reoffending was comprehensive and had been drawn up in preparation for the establishment's future role as a resettlement prison. It included an appropriate action plan but a needs assessment had not been completed. A management group overseeing reducing reoffending was now in place.
- S42 The quality of offender management had deteriorated and was not adequately meeting the needs of its population. The offender management unit faced the significant challenges of an ever-increasing throughput of short-term prisoners. Over 300 new prisoners were received each month and most prisoners had been in the prison for less than three months. Population pressures required the prison to transfer out a large number of prisoners each week. As a consequence, too many prisoners were transferred without an assessment or sentence plan to inform their move, and the objectives in the sentence plans that were completed were not always sufficiently comprehensive to address risk factors or reoffending. Many offender supervisors did not feel confident in their role and were redeployed too often.
- S43 There was no effective custody planning for unsentenced prisoners and those serving less than 12 months, who made up almost three-quarters of the population.
- S44 Many home detention curfew applications were not considered because of delays in administration, mostly caused by staff shortages.
- S45 Processes for identifying prisoners presenting a risk to the public, informing them of restrictions and applications for child contact, were reasonable. Multi-agency public protection arrangements (MAPPA) procedures were in disarray, with inaccurate recording, poor communication and insufficient contributions to release arrangements. Partnership projects with the local police were effective in managing local high-risk and prolific offenders.
- S46 The demand for resettlement services was high, with around 120 prisoners released each month. There were numerous opportunities for prisoners to identify resettlement needs when they arrived and there was a useful pre-release check of outstanding issues.
- S47 The proportion of prisoners released without settled accommodation had fallen since the appointment of a dedicated accommodation officer. Good links had been established with local providers to secure accommodation and to maintain tenancies.

- S48 Employment, training and education resettlement provision was good, with effective on-site and through-the-gate support. A good employability course and a pre discharge review were offered to all prisoners to identify any support needs.
- S49 Health care discharge planning arrangements were timely and appropriate. Patients with enduring mental health problems were managed using the care programme approach. Resettlement arrangements for prisoners with substance misuse issues were excellent, with effective links with drug intervention programme teams, housing workers and community-based treatment and support.
- S50 Suitable debt and financial advice was available but there was no facility to open bank accounts.
- S51 Children and families work had been enhanced by the reintroduction of family days and an increase in the number of visits places to meet demand. Good support was provided by the Prison Advice and Care Trust (PACT) family and children workers. Visits sessions were well managed and welcoming but prisoners and visitors told us that the booking of visits remained difficult and frustrating.
- S52 Apart from substance misuse programmes, no offending behaviour interventions were provided but the prison was appropriately focused on moving sentenced prisoners to training establishments where such interventions were available.

Main concerns and recommendations

- S53 Concern: The number of recorded violent incidents was high. Not all incidents of bullying and intimidation were investigated or actioned. There was no proper analysis of violence or bullying to identify trends and improve safety.

Recommendation: All incidents of violence and victimisation should be investigated and actioned. All data relating to violence should be collated and analysed to identify trends, and action should be taken to improve safety.
(Repeated recommendation S46)

- S54 Concern: Too many cells were dirty, and had damaged or missing furniture and offensive graffiti. Prisoners had little access to cell cleaning materials and we found an infestation of cockroaches on residential units.

Recommendation: All cells should be clean and free of graffiti, and contain suitable furniture.

- S55 Concern: Prisoners were unable to access basic items. There was too little clothing, bedding and towels to meet the needs of the population. Many items were in a poor condition, torn, inadequately laundered and stained.

Recommendation: All prisoners should have sufficient clothes, bedding and towels and these should be clean and in good condition.

- S56 Concern: Equality and diversity provision was underdeveloped. There was evidence that the needs of prisoners from some minority groups were not being identified or met, and limited data were collected to monitor the equality of their treatment or their access to the regime.

Recommendation: Governance and management oversight of diversity should be prioritised to ensure that the needs of all prisoners with protected

characteristics are identified, assessed and met and that any negative perceptions of particular groups are understood. (Repeated recommendation S49)

- S57 Concern: The learning and skills and work places available were not fully utilised, resulting in too few prisoners being purposefully engaged in activity during the day. Opportunities to recognise work and employment-related skills were missed and the number of prisoners gaining qualifications was low.

Recommendation: The use of learning and skills and work activity should be optimised. Work and employment skills should be recognised and recorded and the number of prisoners gaining qualifications increased. (Repeated recommendation S51)

- S58 Concern: Offender management and planning were inadequate. Too many prisoners were transferred before their needs were assessed and without a sentence plan to inform their move; even when assessments had been completed, they rarely informed the allocation of the prisoner. There was no effective custody planning for unsentenced prisoners and those serving less than 12 months, who comprised nearly three-quarters of the prison population.

Recommendation: Prisoners should have their needs assessed before they are transferred and this should inform their allocation. All unsentenced prisoners and those serving less than 12 months should have a basic custody screen which identifies their needs and how they will be addressed.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Journey times to the prison were reasonably short but prisoners sometimes waited too long in court for transport back there. Most prisoners reported positively about their treatment by escort staff and most said that they had felt safe during their journey.*

I.2 Journey times to the establishment for most prisoners were relatively short, at less than two hours. However, prisoners sometimes waited too long in court for transport back to the prison.

I.3 Escort staff were polite and respectful, and those we spoke to were clearly focused on prisoner safety. Information about prisoners was shared with prison officers in reception, and written escort records were up to date and informative.

I.4 Most prisoners reported a reasonably good experience of transfers to the prison. In our survey, 82% of respondents said that they had felt safe during escorts, 76% that they had been treated well by escort staff and only 21% that they had spent more than two hours in vans.

I.5 There was good use of video links, which reduced the number of prisoners that needed to leave the prison to go to court. This service was used for approximately 160 prisoners a month. Prisoners were not given sufficient notice of transfers out to enable them to inform family and friends.

Recommendation

I.6 **Prisoners should be given adequate notice of transfers out.** (Repeated recommendation I.4)

Early days in custody

Expected outcomes:

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

- 1.7** *The reception area was small and cramped but was clean and well decorated. Effective processing systems helped prisoners to move quickly to the first night centre on D wing. Initial safety screening for all prisoners had improved and was good. Immediate needs were identified and dealt with during private interviews with officers and health services staff. There was also effective collaborative work between first night officers, peer support workers and Listeners. The first night centre provided a good environment but the conditions in some cells used to accommodate prisoners during their first night were poor. Induction had improved but tracking systems to ensure that all prisoners received it were underdeveloped and we were not assured that all prisoners, particularly those on C wing, received a full induction.*
- 1.8** Reception was very busy, with about 70 prisoner movements a day, including 12–15 new arrivals. It was open all day and did not close until the last prisoner had returned from court.
- 1.9** The area was clean and brightly decorated but holding rooms were too small and there was inadequate provision for private interviews. However, this was mitigated by effective processing systems that allowed prisoners to move quickly to the dedicated first night centre. Generally, we saw prisoners spending only 35–45 minutes in reception.
- 1.10** Reception officers' were welcoming and had created a relaxed and friendly atmosphere. They were clearly aware of the potential risks to new prisoners. Prisoners were asked if they understood what had happened to them before transfer and if they had any immediate needs. Searching procedures were carried out sensitively and in private. In our survey, 70% of respondents said that they were treated well or very well in reception, which was better than the comparator of 62% and than at the time of the previous inspection (60%).
- 1.11** First night arrangements had improved considerably. All prisoners, including those allocated to the vulnerable prisoner unit, were taken to the new first night assessment centre. The centre was bright, warm and well decorated. It contained a television and comfortable chairs, and there were pictures on the walls which further helped to soften the environment. Prisoners were greeted by staff and peer supporters and offered food and a hot drink.
- 1.12** All prisoners were seen by health services and prison staff, who interviewed them in private. First night needs were effectively identified and met, and staff were clearly aware of levels of anxiety and associated risks. They took time to ensure that prisoners understood how to access prison services if they needed help during their first night. This was supported by good use of prisoner peer workers, including Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and Insiders (prisoners who introduce new arrivals to prison life). In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection said that they had felt safe on their first night at the establishment (83% versus 73% and 73%, respectively).
- 1.13** From the first night assessment centre, most prisoners were moved to first night accommodation on D wing. Vulnerable prisoners went directly to A wing and those with drug problems were allocated to C wing. Conditions on these wings were generally poor.

Many cells used to house prisoners during their first night were small and cramped, and some were dirty and poorly furnished (see section on residential units).

- I.14 Prisoners on D wing received a good formal induction that began on the morning after their arrival. The session was well presented by induction officers and peer workers. Prisoners were given time for discussion and were encouraged to ask questions. However, not enough information was available in languages other than English.
- I.15 New prisoners located on A and C wings received a less-structured presentation and there was evidence that some relied on other prisoners to find out about rules and regimes. Tracking systems to ensure that all prisoners received a full induction were underdeveloped and there was evidence that some of those on C wing did not undergo the full programme.

Recommendations

- I.16 **Living conditions for prisoners on their first night should be improved.**
- I.17 **All prisoners should receive a full induction.**

Housekeeping point

- I.18 Translated induction information should be equivalent to that available in English. (Repeated recommendation I.16)

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.19 There had been little progress in the management of bullying and violence since the previous inspection. Recorded levels of violence were relatively high and too many prisoners lacked confidence in the management of victimisation. The delivery of safer custody was poor. Violent and bullying incidents were not investigated by the safer custody team unless the victim was hospitalised, and there was an over-reliance on adjudications to address bullying behaviour. Too little was done to keep vulnerable prisoners and some young adults safe. Data collection and analysis were too limited and there was no local strategy to address the issues specific to the establishment.

- I.20 In our survey, 17% of prisoners said that they currently felt unsafe, which was in line with the comparator, but the results for some minority groups were more negative. For example, 64% of prisoners with disabilities, compared with 34% of their counterparts, said that they had felt unsafe at some point during their stay at the prison. Foreign national prisoners also reported far more negatively on this issue (see main recommendation S53).
- I.21 Data supplied by the prison showed that the number of violent incidents had increased sharply and was considerably higher than in similar prisons. Despite this, there had been little progress in the management of violence. Poor data collection continued and not all information was utilised by the safer custody team. Analysis was weak, so the extent and

nature of violent incidents were unclear and there was still no prison-wide strategy to make the prison safer (see main recommendation S53). The safer custody meeting was not always well attended, reports from the wings were not considered as they were often missing, and there was little use made of security information.

- I.22** Identification of bullies and victims was poor and little formal action was taken to protect victims or address bullying behaviour through the incentives and earned privileges (IEP) scheme. The markers on P-Nomis (electronic case notes) used to identify these prisoners were out of date. Wing staff tried to explore allegations of assault and bullying and submitted an incident report to the security department but this was rarely pursued by the safer custody team, who only investigated incidents leading to the hospitalisation of the victim. This meant that most incidents were never formally investigated or actioned, other than through adjudications (see main recommendation S53).
- I.23** A small-scale safer custody survey had been carried which showed that prisoners lacked confidence in reporting; they received responses to bullying and violence incidents but no action had been taken to address these concerns. Our survey results confirmed these issues, as fewer prisoners than at similar prisons (21% versus 33%) said that they had reported their experience of victimisation.
- I.24** A relatively high number of prisoners (one in six) sought protection on A wing. We estimated that less than a third of prisoners were on this wing because of the nature of their offence. Despite this being the vulnerable prisoner and safer custody wing, more prisoners there than on other wings reported victimisation from other prisoners (50% versus 26%). The reasons for the victimisation were widespread and levels of violence were unusually high, yet not enough was being done to make the wing safer (see main recommendation S53). There was still no effective screening process for allocation to A wing and prisoners were often located there without sufficient assessment, and with little thought given to eventual reintegration to another wing.
- I.25** Too little was done to assess the risks posed to young adults being placed on A wing and we found evidence that they were put at preventable risk from sex offenders. In one particular incident, wing staff had raised concerns about the predatory behaviour of an adult towards a vulnerable young adult but the safer custody team had not investigated the concerns, the alleged perpetrator had not been challenged and the potential victim had been left unsupported. We raised our concerns with the establishment and necessary steps were taken to ensure the young adult was supported and safe.

Recommendations

- I.26** **Placement of prisoners on A wing should be subject to a thorough assessment and plans made for reintegration where possible.**
- I.27** **Young adults located on A wing should be thoroughly protected from the risks posed by adult sex offenders.**

Housekeeping point

- I.28** Identification of perpetrators and victims on P-Nomis should be up to date.

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** *There was no local self-harm and suicide prevention strategy but the safer custody team provided oversight of incidents. The Prisons and Probation Ombudsman recommendations were not included in the continuous improvement plan. Those on assessment, care in custody and teamwork (ACCT) documents were positive about the support received. The quality of ACCT documents was variable. Listeners were well supported. Some prisoners were negative about access to Listeners, and those located in the segregation unit could not access one.*
- I.30** There was no local self-harm and suicide prevention strategy to describe pertinent issues at the establishment and direct action, but incidents were monitored at the monthly safer custody meeting. The number of self-harm incidents was the same as at the time of the previous inspection and slightly lower than at other local prisons. A total of 266 assessment, care in custody and teamwork (ACCT) case management documents had been opened in the previous six months and there were 21 open at the start of the inspection.
- I.31** Prisoners on ACCTs that we spoke to were positive about the support they received but we found a lack of multi-agency attendance at reviews. The quality of records was variable, and of care maps was poor. Few ACCTs identified the triggers, and related issues were not always addressed in the care map. One care map set only one objective – for the prisoner concerned to get a job – which did not address the issues. The recording of interactions between staff and prisoners was mixed; some showed evidence of meaningful contact, while others did not.
- I.32** There had been no self-inflicted deaths at the prison since the previous inspection. The Prisons and Probation Ombudsman recommendations from the last death in custody had been taken forward but were not included in the continuous improvement plan, so ongoing review was not assured.
- I.33** There were too few Listeners in post but new recruits were completing their training during the inspection, and this would address the problem. They were well used and fully supported by the Samaritans. At the time of the inspection, Samaritans telephones were being purchased. The Listener suites were in an adequate condition. Prisoners on the segregation unit could not access a Listener.

Recommendations

- I.34** **A safer custody policy, specific to the establishment, should be developed which includes steps to ensure that all assessment, care in custody and teamwork (ACCT) processes are thorough and comprehensively applied.** (Repeated recommendation I.35)
- I.35** **Prisoners in the segregation unit should be able to access a Listener.** (Repeated recommendation I.36)

- I.36 Prisons and Probation Ombudsman recommendations requiring ongoing review should be incorporated into the safer custody continuous improvement plan.**

Safeguarding (protection of adults at risk)

Expected outcomes:

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

- I.37** *An effective safeguarding policy was in place and there were good links with local safeguarding adult teams.*

- I.38** A safeguarding policy was in place, setting out the procedures for making referrals to the adult safeguarding teams in the community. Some appropriate referrals had been made over recent months which had been reviewed by the adult safeguarding team. There was good attendance by the prison at the adult safeguarding board, which promoted effective working links.

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.39** *Procedural security was well managed but safer custody staff did not make sufficiently good use of security information. The management of intelligence was generally good and there were effective links with the local police. Important elements of dynamic security had improved and the supervision of prisoners on the wings was effective. Drug supply reduction initiatives were adapting reasonably well to the presence of spice and buprenorphine as the main drugs of choice. The mandatory drug testing rate was relatively low but was not a reliable indicator of drug use as some drugs could not be detected by current testing methods.*

- I.40** Procedural security was well managed and important elements of dynamic security had strengthened. Relationships between staff and prisoners had greatly improved and engagement was good (see section on staff–prisoner relationships). Supervision was better during periods when prisoners were unlocked and the regime was predictable.
- I.41** Intelligence was managed effectively and security committee meetings were well attended. The standing agenda was appropriate and included a thorough analysis of security-related information received during the month. Security objectives were agreed and reviewed through the appropriate consideration of intelligence. These were communicated quickly to other areas of the prison.

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

- I.42** The security team analysed common patterns in information and monitored the progress of actions generated by information reports. Information from these and other incident reports was collated into a comprehensive intelligence report. This report, which detailed all information received across a number of areas, including violence reduction, disorder and control, and drug issues, was presented to the security committee each month. However, we were not assured that links between the security department and safer custody group were strong enough and we saw examples where important security information was not being used or acted on by the safer custody team.
- I.43** Professional standards issues were given a high priority and remained well managed.
- I.44** During the inspection, we saw no evidence to suggest that the prison was risk averse, in terms of allocating activity spaces to prisoners, although there were some rational restrictions in the areas that higher-risk prisoners could attend.
- I.45** The management of closed visits had improved. The number of prisoners on closed visits had reduced considerably and there were effective systems to ensure that they were reviewed on time. At the time of the inspection, there were six prisoners on closed visits, all because of incidents directly relating to visits.
- I.46** There were effective links with the local police force, and some joint operations within the prison had helped to reduce illicit drug availability. The positive random mandatory drug testing (MDT) rate was relatively low, at 8.6%, but MDT did not detect use of the new psychoactive substance, 'spice'. The supply reduction initiatives were adapting to spice and illicit buprenorphine being the main drugs of choice. In our survey, fewer than at comparator prisons and than at the time of the previous inspection (5% versus 8% and 15%, respectively) said that they had developed a drug problem while at the prison, and 29% said that it was easy to get illegal drugs at the prison, which was less than at the time of the previous inspection (43%) but similar to the comparator. Nevertheless, in the six months to September 2014, there had been seven suspected spice-related emergencies involving transfers to the local hospital.
- I.47** The MDT suite was dirty and not a respectful testing environment.

Housekeeping point

- I.48** The mandatory drug testing suite should be kept clean at all times to maintain a suitable and respectful testing environment.

Incentives and earned privileges³

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 *There was little evidence that the incentives and earned privileges scheme was used to encourage responsible behaviour. The number of prisoners on the enhanced and basic levels was relatively low.*

I.50 Fewer prisoners than we usually see at local prisoners were on the basic or enhanced levels of the IEP scheme. The scheme was not used effectively to manage poor behaviour. Individual behaviour improvement plans were not in place and recorded written behaviour warnings were rare.

I.51 Reviews for the small number of prisoners on the basic level of the scheme took place on time but they were often cursory and rarely focused on relevant issues. However, their regime was reasonable and they were able to attend scheduled activity, along with predictable periods of association. They rarely remained on basic for more than a week.

I.52 The entry level of the scheme was well managed and prisoners were promoted to standard within two weeks.

Recommendation

I.53 **Behavioural improvement plans should be in place and the incentives and earned privileges scheme should be used more effectively to manage poor behaviour and reward good behaviour.**

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.54 *The number of adjudications was high. Charges were appropriate and hearings were conducted fairly. The number of incidents necessitating the use of force was high but the collection and analysis of data to identify patterns or trends were underdeveloped. The number of prisoners segregated over the previous six months was comparatively high but the average length of stay was reasonably short. Relationships between staff and prisoners on the unit were very good but the regime for those segregated for good order was poor. The monitoring of segregation had slipped and information about the number segregated and their length of stay was not analysed sufficiently. The Brunel unit was used to good effect for more complex cases.*

³ 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.

Disciplinary procedures

- I.55** The number of formal adjudications was high, at an average of 143 each month, and had increased. For those we reviewed, hearings were conducted fairly and full investigations of charges took place. Punishments were consistent and there were clear examples where adjudicating governors had dismissed cases for appropriate reasons. Prisoners were given the opportunity to challenge the evidence, put across their version of events and call witnesses.
- I.56** Adjudicators took time to ensure that the prisoner fully understood each stage of the process before moving on and all were offered the opportunity to seek legal advice.

The use of force

- I.57** There had been 76 incidents involving the use of force in the previous six months, which was similar to the number we found at the time of the previous inspection and to that at other local prisons. Records showed that the use of force was justified and proportionate.
- I.58** Spontaneous and planned interventions were well organised, properly carried out and, on the whole, correctly documented. We observed two live incidents where officers dealt with particularly angry prisoners calmly and patiently, which helped to assure us that de-escalation was used to good effect. Proper authority was recorded; senior staff supervised all incidents and planned interventions were video-recorded.
- I.59** However, management oversight in some areas was weak. Information, including the nature of the incident, its location, and the ethnicity and age of the prisoner, was not analysed sufficiently well and there was little to show that it was being used to inform a strategy to reduce the number of uses of force or monitor patterns or trends.

Recommendation

- I.60** **The monitoring and analysis of information about the use of force should be improved.**

Segregation

- I.61** The segregation unit was cramped, with narrow corridors, but communal areas and cells were generally clean. Five of the 12 segregation cells were out of use due to damage caused by a small number of disruptive prisoners. The exercise yard was in a reasonable state and contained some fitness equipment.
- I.62** The use of segregation had been high over the previous six months and had increased since the previous inspection, but lengths of stay were comparatively short. In the previous six months, there had been 171 separate cases, representing a rate of about 29 per 100 of the population, which was higher than we usually see at local prisons.
- I.63** Relationships between staff and prisoners on the unit were very good. Officers dealt with difficult individuals patiently and we saw high levels of individual care. However, record keeping had deteriorated and entries in prisoner files often did not reflect much of the good work we saw.
- I.64** The regime on the unit was limited, particularly for those segregated for long periods. Although the basic daily routine included showers, an hour of exercise and access to a

telephone, prisoners spent nearly all of their day locked in cells without anything meaningful to do.

- I.65** Reviews of prisoners segregated for reasons of good order were timely, meetings were clearly focused on the welfare of the prisoner, and the planning to return them to normal location was reasonably good. Most prisoners were sent back to the residential units following a period in segregation, rather than being transferred to other prisons. The Brunel unit was used to good effect as a place for progression for a small number of more complex cases, to enable them gradually to be returned to mainstream accommodation (see also section on health services).
- I.66** The overall monitoring of segregation had slipped since the previous inspection. Segregation management meetings had recently been reintroduced but discussion about the reasons for segregation was not adequately explored and prisoners' length of stay was not analysed sufficiently. For example, the number of prisoners segregated while waiting for adjudication (Prison Rule 53) was consistently higher than we usually see and there was no evidence that this had been identified or discussed.

Recommendations

- I.67** **The regime on the segregation unit should be improved so that prisoners are adequately engaged and motivated.**
- I.68** **Management oversight of segregation should be improved.**

Housekeeping point

- I.69** Interaction with prisoners in the segregation unit, and their issues, should be fully recorded.

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.70 *Clinical and psychosocial services were well integrated and the psychosocial team offered a good balance of harm reduction and recovery-focused interventions. Vulnerable prisoners could not access group programmes. The role of C wing as a treatment unit had been clarified, although the environment was poor and the organisation and supervision of medication queues were deficient, resulting in a loss of privacy and an increased risk of diversion.*

- I.71** Services for prisoners with drug and alcohol needs had improved. Clinical services were provided by Bristol Community Health and psychosocial services by the Avon and Wiltshire Partnership. The psychosocial team offered a good balance of harm reduction and recovery-focused interventions, including one-to-one and group work. Group-based interventions included the 'Inside Recovery' programme, separate Alcoholics Anonymous and Narcotics Anonymous fellowships, and 'Self-Management and Recovery Training' (SMART) groups. In our survey, 81% of prisoners who had received help with a substance use problem had found drug and alcohol interventions useful, which was similar to the comparator but much better

than at the time of the previous inspection (66%). However, vulnerable prisoners on A wing could not access the 'Inside Recovery' programme or any self-help fellowships.

- I.72** A dedicated relapse intervention team responded rapidly to prisoners presenting in crisis and offered a comprehensive care package. Psychosocial services were well integrated with clinical drug services through regular meetings and joint clinical reviews. At the time of the inspection, 146 prisoners were receiving opiate substitution treatment, with 52% on maintenance and 48% on reducing doses. This was an appropriate ratio, given the high turnover at the prison and the number of remand prisoners needing to be maintained to prevent overdose if released. Prisoners receiving treatment told us that they felt well cared for.
- I.73** The role of C wing as a treatment unit rather than a recovery unit had been clarified. However, the monitoring of the number of prisoners not receiving treatment on the unit was not sufficiently robust and these prisoners had the potential to undermine the therapeutic atmosphere. The living environment on C wing was very poor, especially on the stabilisation landing (C3), where newly arrived prisoners were located. This landing was particularly dark, dismal and poorly decorated and maintained (see also section on early days in custody).
- I.74** The organisation and supervision of controlled drugs medication queues on C1 wing were poor, with overcrowding around the medication hatch area resulting in a loss of privacy and an increased risk of diversion.
- I.75** Prisoners who had completed treatment could move to B wing, the prison's nominated drug-free unit. However, the delivery of the compact-based drug testing programme had suffered from staff shortages and was no longer being delivered, so it was difficult to say if it was indeed drug free.

Recommendations

- I.76** **Vulnerable prisoners should have access to the 'Inside Recovery' and self-help fellowship groups.**
- I.77** **The number of prisoners not receiving treatment on C wing should be closely monitored.**
- I.78** **C wing should undergo comprehensive refurbishment to improve the environment as a substance use treatment facility.**
- I.79** **The administration of controlled drugs should be better organised and supervised to improve privacy and minimise the risk of diversion.**

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** *Little investment had been made in the quality of accommodation, and some wings and cells remained below standard. Much of the cell furniture was broken or missing and many in-cell toilets lacked screening. Access to basic items, including clothing, was a struggle. Many prisoners wore ill-fitting or damaged prison clothing, and towels often remained stained after washing. Access to showers was good. The application system required significant improvement and the delay in accessing PIN telephone numbers caused new prisoners unnecessary anxiety. Access to stored property was now adequate.*
- 2.2** Some external areas of the prison were littered after mealtimes, despite considerable efforts to keep them clean. Many communal areas were shabby, grubby and ill equipped. Little investment had been made in the living conditions for prisoners. Some cells had been redecorated, which helped to improve the environment for a few. However, many cells remained below standard, with dirty, stained and damaged walls. Cells had furniture missing, damaged or broken and most did not have a lockable cabinet in which prisoners could store possessions and medication. Too few toilet areas had privacy screening. There was graffiti in some cells and, although the situation had improved since the previous inspection, the offensive display policy was not always fully enforced. There was an infestation of cockroaches on some residential units (see main recommendation S54). Many cells designed for single occupancy held two prisoners, which resulted in cramped conditions.
- 2.3** Our observations during the inspection supported the views of prisoners in our survey about the lack of basic provisions. In our survey, fewer prisoners than at comparator prisons said that they could get enough clean clothes for the week. There was too little prison clothing to go round, with some prisoners being issued with only three sets of underwear for the week. This was compounded by ill-fitting and damaged items, leaving prisoners feeling embarrassed about the clothing they had to wear. Towels were in a very poor condition, many remaining heavily stained after washing. Bedding was in short supply, often in poor condition, and some prisoners did not have a pillow. Staff told us that the regional laundry contract provided a poor service and was a significant factor in these problems. Cell cleaning materials were also in short supply and in our survey only 45% of prisoners, against the 56% comparator, said that they received enough each week (see main recommendation S55).
- 2.4** There was good access to showers but many were poorly maintained, insufficiently private and lacked adequate hot water. B wing had a night sanitation system, whereby prisoners had to use their cell call bell to be let out of their cell to use the communal toilets during periods of lock-up. This system was managed well and prisoners were satisfied with the arrangements
- 2.5** Application forms were not routinely available on the wings and were not tracked. Prisoners lacked confidence in the system and in our survey only 34% prisoners said that replies were received within seven days.

- 2.6** There were sufficient telephones around the prison but there were considerable delays (mainly caused by administrative staff shortages) in prisoners being able to use the telephone on arrival. There was a large backlog in activating prisoners' PIN telephone accounts, leaving many new prisoners waiting a week or more to contact family and friends. This was causing considerable and unnecessary anxiety. The backlog of access to stored property reflected in our survey had been addressed.

Recommendations

- 2.7** Showers should be appropriately screened and maintained, with sufficient hot water.
- 2.8** The application system should be reviewed and improved to ensure that it is easy to make an application and that prisoners receive a timely response.
- 2.9** The delays in accessing PIN telephone numbers should be addressed as a matter of urgency.

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.

2.10 *Significant improvements had been made in staff–prisoner relationships and the quality of relationships was good. Most prisoners said that staff were respectful. We saw good-quality interactions, providing valuable support. More prisoners than at the time of the previous inspection said that they had a personal officer and most found them helpful, although the wing file entries varied in quality and frequency.*

- 2.11** Staff–prisoner relationships had improved considerably. In our survey, more prisoners (81%) than at other local prisons (74%) and than at the time of the previous inspection (67%) said that staff treated them respectfully. However, foreign national prisoners were more negative about this issue (see section on equality and diversity).
- 2.12** We saw consistently positive interactions between staff and prisoners. In our survey, more prisoners than elsewhere and than at the time of the previous inspection said that staff checked on them regularly (33% versus 27% and 23%, respectively) and mixed with them during association (22% versus 17% and 13%, respectively). We saw staff helping prisoners during association and dealing positively with requests and concerns.
- 2.13** Despite recent changes to staff allocation, more prisoners than at the time of the previous inspection said that they had a personal officer, and most found them helpful. Some staff we spoke to demonstrated a good level of knowledge about those allocated to them; however, this was not always reflected in P-Nomis (electronic case notes) entries. Entries were rarely made weekly and not all showed evidence of an introductory meeting. Some reflected a positive interaction with the prisoner but others were limited to wing behaviour or simply reported no problems. We saw few entries that reflected positive progress made and there was no sign of management oversight to provide quality assurance of entries.

- 2.14** The prisoner council ('VOICE') met monthly and was well attended. Minutes evidenced good discussion of issues and resolution of some problems.

Recommendation

- 2.15** **Personal officers should have regular contact with their prisoners (including an initial introduction), and case note entries should be made weekly and give details of prisoners' progress.** (Repeated recommendation 2.22)

Housekeeping point

- 2.16** Managers should review the quality of staff entries in prisoner case notes regularly and feed back to staff when improvements are required.

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 characteristic⁴ 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.

- 2.17** *The strategic management of equality and diversity was weak. Identification of and support for those with some protected characteristics were poor. Some previous good work with foreign national prisoners had lapsed.*

Strategic management

- 2.18** The strategic management of equality and diversity was weak. There had been no needs analysis, there was no overall policy to guide staff, and meetings were sporadic and, until recently, poorly attended (see main recommendation S56).
- 2.19** There were no specific leads for most of the protected characteristics and the part-time officer allocated to equality and diversity was often cross-deployed and used on general duties, further limiting the time available to promote equality and diversity and provide support to prisoners. The diversity officer was supported by prisoner representatives on most wings, who provided first-hand support to prisoners. All prisoner representatives had undergone diversity awareness training provided by the Muslim chaplain.
- 2.20** Monthly monitoring using the equality monitoring tool (EMT) was undertaken and reported at diversity meetings but it was too limited and failed to consider access to regime activities and services for minority groups. Some concerns regarding the behaviour of younger

⁴ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

prisoners had been identified through monthly monitoring but there had yet to be any action taken (see below).

- 2.21** The prison had recently introduced a range of focus groups to reflect all protected characteristics but some of these had been cancelled and too few had been run for us to be able to assess their impact.
- 2.22** The number of discrimination incident report forms submitted each month was similar to that at comparator prisons. Forms were available across the prison and submitted forms were collected each day and appropriately responded to. There was a good system of both internal and external scrutiny.

Protected characteristics

- 2.23** With the exception of a health services staff-led assessment of older prisoners and those with disabilities (see below), there was no opportunity for new receptions to report protected characteristics in confidence, either in reception or during first night and induction processes (see main recommendation S56).
- 2.24** Approximately 23% of prisoners were from a black and minority ethnic background. In our survey, this group reported similarly or more positively than white prisoners across a range of areas, which was better than at the time of the previous inspection. Black and minority ethnic prisoners in our groups were positive about relationships with staff and, although they reported little regarding the promotion of diversity, they did not feel discriminated against.
- 2.25** Our survey identified 5% of prisoners to be from a Gypsy, Romany or Traveller background, and a member of the chaplaincy team had recently run some focus groups to offer support to this group.
- 2.26** Foreign nationals represented around 11% of the population. In our survey, they were much more negative than British nationals about their treatment by staff, with only 55% of foreign national prisoners saying that most staff treated them respectfully versus 84% of British prisoners. At the time of the inspection, two prisoners were being held solely under immigration powers (IS91 forms) beyond their sentence expiry date. Visits from Home Office Immigration and Enforcement staff had recently ceased, so prisoners no longer had access to someone who was managing their case, or to independent immigration advice. There was a system to provide a free international telephone call each month for foreign nationals but none of those we spoke to were aware of this and there had been no such requests in the previous three months. A professional interpreting service was used regularly but not consistently and we found evidence that communication with a prisoner at risk of self-harm and subject to assessment, care in custody and teamwork (ACCT) case management was limited to a 'thumbs up' process, which was unacceptable (see main recommendation S56).
- 2.27** Health services staff had recently introduced a screening process to identify older prisoners and those with disabilities during the reception process. Each was then assessed and seen regularly, according to need. Care plans were drawn up, recorded on the health care electronic records system and reviewed when appropriate but these were not shared with wing staff; none of the staff we spoke to were aware of the care plans or of any social care needs of prisoners. Adaptations had recently been made to some cells but we found a number of prisoners whose needs were not being met; for example, a wheelchair-bound prisoner had to balance his meals on his knees as he returned to his cell, then had to put his meal down onto the floor while he entered his cell. There were no paid carers to assist prisoners with disabilities. In our survey, prisoners declaring themselves to have a disability

reported much more negatively than other prisoners across many indicators, including victimisation and feeling safe (see main recommendations S53 and S56). All those who required help in an emergency had been identified, with notices in wing offices.

- 2.28** At the time of the inspection, there were 69 prisoners over the age of 50, the oldest being 78. There was a weekly remedial gym session for the over-50s and a recently introduced social group meeting was held each week in the education centre, although this was not available to prisoners from the vulnerable prisoner wing. There was no other formal provision of activities for older prisoners or those with disabilities (see main recommendation S56). We found some retired prisoners and some with disabilities locked in their cells during the working day.
- 2.29** The EMT had identified that there were issues surrounding younger prisoners (39 prisoners were aged under 21) and they were above the range for use of force, adjudications and being on the basic level of the incentives and earned privileges scheme. The prison had yet to take any action to investigate these issues, identify their wider needs or implement any regime changes. There was no formal strategy for the management of young adults.
- 2.30** There was no formal support for gay or bisexual prisoners and there was no local policy for the management and care of transgender prisoners (see main recommendation S56).

Recommendations

- 2.31** **Care plans for elderly prisoners and those with disabilities should include social care needs and should be shared with staff on residential units who have responsibility for the prisoner.**
- 2.32** **Retired prisoners and those with disabilities should be left unlocked during the core day.**
- 2.33** **A formal strategy for the management of young adults should be developed.**

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.

2.34 *The chaplaincy was well integrated across the prison. Gaps in provision were being addressed. Access to the chaplaincy's wide range of services and classes had improved and were now reasonable. Faith facilities were adequate.*

- 2.35** The chaplaincy was well integrated across the prison and attended a wide range of meetings. The team catered for most major religions, and contingencies using fee-paid and volunteer staff to fill previous gaps in provision were in place. There was a full programme of faith celebrations throughout the year.
- 2.36** The team provided a wide range of services and study classes to meet the needs of prisoners. However, in our survey only 37% of prisoners (against a comparator of 50%) said that their religious beliefs were respected, 39% (against the 44% comparator) said that it was

easy to attend religious services and only 41% (against the 50% comparator) said that it was easy to speak to a chaplain in private. Despite this, prisoners we spoke to told us that they were generally content with faith arrangements and we were satisfied that access was now reasonable.

- 2.37** The multi-faith facilities were adequate, large enough for each service and clean. Links to external faith groups had been established to support rehabilitation post-release.

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.

- 2.38** *Complaint forms were not always available on the wings. The number of complaints submitted had increased but improvements had been made in the quality of replies. Delays still occurred and there was no dedicated clerk in place.*

- 2.39** Complaint forms were not always available on the wings, and in our survey 45% of prisoners, less than the 54% comparator, said that it was easy to make a complaint. The proportion of prisoners saying that they had been prevented from making a complaint had reduced considerably since the previous inspection.

- 2.40** In the six months to August 2014, 1,123 complaints had been made – an average of 187 per month. This was over twice as many as at the time of the previous inspection. Nearly 25%, the largest number in a single category, had been about access to property. Steps had been taken to address prisoners' access to their stored property (see section on residential units) but property lost during transfer continued to be a significant problem.

- 2.41** The quality of responses had improved, addressing the subject in a respectful manner, but up to a quarter took too long (over seven days) to be dealt with and some were several weeks late. In our survey, only 19%, against the 29% comparator, said that complaints were dealt with quickly. There was good trend analysis and quality checking of responses to complaints.

Recommendation

- 2.42 All complaints should be responded to promptly.**

Housekeeping point

- 2.43** Complaint forms should be readily available on the wings.

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.

2.44 *Legal services were not formally provided. Legal visits provision was good but too few prisoners in our survey said that they were able to access legal books in the library.*

2.45 Legal services were not formally provided in the prison, with the exception of bail information and advice to recalled prisoners by staff from the offender management unit.

2.46 Facilities for legal visits were good. Despite the provision of legal books in the library (see section on the library), in our survey fewer prisoners than at comparator prisons and than at the time of the previous inspection said that they could access them (26% versus 37% and 39%, respectively).

Recommendation

2.47 Prisoners should have access to trained staff who can support them with a full range of legal matters. (Repeated recommendation 2.58)

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.

2.48 *Health service provision had improved considerably and this was reflected in our survey. A wide range of clinics was available, including for chronic diseases. Pharmacy services were good but administration of medicines was not sufficiently well supervised. Access to dental care had improved. High-quality mental health care was delivered, with good use of the Brunel unit.*

Governance arrangements

2.49 There were good relationships with the providers of health services, and the governor was represented at the partnership board. Clinical governance and management meetings informed the board but the head of health care was not a member of the senior management team.

2.50 In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection rated the access to and quality of health care as good or very good, although fewer prisoners with disabilities than their able-bodied counterparts said that access to health services staff was good.

- 2.51** Health care facilities were on the first floor, making it difficult for patients with disabilities to access them. Medicines administration and some minor treatments were carried out in treatment rooms on each of the wings, and all except those on A and C wings had been refurbished to a good standard.
- 2.52** No health needs assessment had been completed since the previous inspection but one was due in November 2014. The department was well staffed, with only two vacancies at the time of the inspection and an active recruitment programme.
- 2.53** Investment had been made in development and training to improve the range and quality of clinics available. Training was well managed and documented clinical supervision was available to all staff. Care was provided 24 hours a day, with two members of health services staff available at night.
- 2.54** Four GPs provided a large number of clinics throughout the week and were also available at the weekends. Out-of-hours cover was provided by the same service as in the local community but was rarely required. Pharmacy services were provided within the main contract and the pharmacy was located outside the prison entrance. Dental services were provided by the Somerset Partnership NHS Foundation Trust and there were six sessions available each week.
- 2.55** Emergency resuscitation equipment, including automated external defibrillators (AEDs) and oxygen, was located on all wings and in the health centre. The equipment was well maintained. A programme of AED training for discipline staff had started and 12 were currently qualified.
- 2.56** The electronic record, SystemOne, was available at all health care locations and was used effectively to manage and document the care of patients. Health services staff kept informed of national guidelines through regular staff meetings and notices.
- 2.57** Prisoners had a dedicated health care forum through which to raise issues about their care and treatment. There were about 10 health care complaints each month and these were dealt with in a sensitive manner.
- 2.58** Health promotion information was available mostly in the health care centre and was supported by a range of events and screening programmes that all prisoners could access.

Recommendations

- 2.59** **The head of health care should be a member of the senior management team.**
- 2.60** **Access to the health centre for prisoners with disabilities should be improved.**
- 2.61** **The health needs assessment should provide robust analysis that informs services.** (Repeated recommendation 2.67)

Delivery of care (physical health)

- 2.62** Significant changes had taken place in the delivery of GP clinics, resulting in much better access for prisoners. The clinics were now primarily carried out in the health centre and attendance rates were satisfactory. GPs also saw patients on the wings when required. The lead GP had also established NHS health checks for prisoners over the age of 40.

- 2.63** Primary care was led by one of the senior nurses and there was a good skill mix of staff to deliver an appropriate range of clinics, including for chronic diseases and health care screening programmes. There was good access to nurses in the wing treatment rooms.
- 2.64** Initial health care screening was performed in the new health care room in the first night centre, which provided a good area for assessment, with access to all appropriate resources. All prisoners received a useful booklet outlining the health services available and there were good arrangements for providing material in a range of languages. Secondary screening was carried out in the health centre for all prisoners within 48 hours and attendance rates were good. A suitable health care room in the reception area had been retained for the management of prisoners attending court or being released or transferred.
- 2.65** External hospital appointments were well managed by one of the administrators and there were very few cancellations due to the lack of escorting staff. However, there were only nine escort opportunities each week, which was not sufficient to meet demand.

Recommendation

- 2.66** **Escorting opportunities for outside hospital appointments should be increased to meet demand.**

Good practice

- 2.67** *Prisoners over the age of 40 had the opportunity to receive NHS health checks.*

Pharmacy

- 2.68** Medicines were promptly supplied and about 35% of patients received them in-possession; however, there were no lockable cupboards in cells to store these safely (see section on residential units and main recommendation S54). No tradable medicines were given in-possession. Risk assessments were carried out effectively for all in-possession medicines. Prisoners were able to consult the pharmacist to discuss their medicines but this service was not well advertised. There was no pharmacy input into any clinics.
- 2.69** Prescribing was done on SystmOne but administration was recorded on paper charts. A prescribing formulary (a list of medications used to inform prescribing) was in place and used. We saw a number of charts for supervised medicines where the administration or the reason for non-administration had not been recorded, including one chart for a patient on antiepileptic medication. Administration of medicines took place three times a day at therapeutic times, with additional provision for night-time administration if necessary. Medicine queues were not sufficiently well supervised by discipline staff and no identification cards were in use.
- 2.70** The pharmacy was spacious and medicines were stored in an orderly fashion but there was insufficient space and storage available on some wings. Inappropriate measures were used for methadone and diazepam liquid administration. We found a used insulin pen with no date of opening and another, unused insulin pen that was not stored in the refrigerator. Controlled drugs for A, D and G wings were stored on D wing overnight in an ordinary medicine cupboard, contrary to legal requirements. One of the controlled drug cabinets in the pharmacy was not secured according to the regulations. Contrary to legal requirements, on C3 and D wings we saw dual labelling of medicines for out-of-hours use.

- 2.71** Up-to-date protocols and procedures were in place. A medicines and therapeutics committee met every quarter and was well attended; however, a representative from the substance misuse team was not included on the committee.

Recommendations

- 2.72** **All medicine queues should be adequately managed and supervised to prevent the diversion of tradable medicines and allow patient confidentiality to be maintained.**
- 2.73** **All controlled drugs should be stored according to regulations.**
- 2.74** **The dual labelling of medicines should stop and these should be supplied either by a company with the necessary assembly licence or as stock. The out-of-hours policy should be amended accordingly.**

Housekeeping points

- 2.75** The service offered by the pharmacy to provide a review of prisoners' medication should be actively advertised.
- 2.76** All supervised medication should be recorded accurately and in accordance with pharmacy regulations.
- 2.77** Adequate space and storage facilities should be provided in all treatment rooms that are used for the administration of medicines.
- 2.78** British standard glass measures should be used for the measuring of all liquid medicines.
- 2.79** The substance misuse team should be represented at the medicines and therapeutics committee.

Good practice

- 2.80** *There were good procedures to ensure that no tradable medicines were given in-possession.*

Dentistry

- 2.81** In our survey, more prisoners than at the time of the previous inspection rated access to dental services as good, and levels of satisfaction with the quality of the service were similar to those at other local prisons. There were 73 patients on the waiting list, with most being seen within six weeks, and the attendance rate was satisfactory.
- 2.82** The surgery and equipment were in good order. Emergency dental medicines were available and oxygen was located in the surgery. Additional resuscitation equipment was shared with the health centre.
- 2.83** The new contract provided six dental sessions each week and there was adequate cover for leave and sickness. The session that we observed was carried out in a respectful manner, ensuring privacy for the patients.

- 2.84** Clinics were managed using SystemOne, with support from health care administration staff and triaged by the dental nurse. Additional paper records were maintained appropriately in the surgery. Oral health education was provided during treatment and by a dental therapist.

Delivery of care (mental health)

- 2.85** High-quality mental health care was delivered by an integrated team that was sufficiently staffed. The team was located in the health centre, which facilitated good liaison with other providers of health services and enabled easy access to consulting rooms when required. Prisoners also had access to a learning disabilities nurse.
- 2.86** The total caseload averaged 50 patients at any one time and was divided equally between those requiring primary or secondary mental health care. All new patients were triaged initially and those with greater need were seen within 24 hours. Subsequent waiting times were usually up to two weeks following routine referral at the single point referral meeting each Friday. The team operated in a multidisciplinary manner, with regular attendance at security and safer custody meetings. Relationships with prison staff were good.
- 2.87** A range of interventions was available and some patients with enduring mental health problems were located on the Brunel unit, where they stayed for a period of stabilisation before moving back to their wing. On this unit, staff were able to have closer access to prisoners and to run support groups, including mental health well-being, social and relaxation groups, and games. The groups we observed were well structured and targeted.
- 2.88** Patients had good access to a psychiatrist, who visited the prison each week. There were approximately 15 transfers to secure mental health units each year and these were carried out swiftly.
- 2.89** Prisoners had no access to professional counselling services. Discipline staff were not provided with a regular programme of mental health awareness training.

Recommendations

- 2.90** Prisoners should have access to professional counselling services.
- 2.91** A rolling programme of mental health awareness training should be provided for all custody staff.

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.

- 2.92** *Prisoners' views on the quality of the food provided had improved. The supervision of serveries was inconsistent. The kitchen was clean and tidy, apart from the prisoners' changing area. Servery workers did not undergo food safety and hygiene training before starting work.*

- 2.93** In our survey, 22% of prisoners said that the food provided was good or very good, which was similar to the comparator but better than at the time of the previous inspection (13%).
- 2.94** The cooked food we tasted was of a very good quality, with the exception of breakfast packs, which were too small and were issued on the evening before consumption. Special diets were catered for appropriately, and cultural and religious festival menu options were produced regularly.
- 2.95** Portion sizes were good, but the supervision of serveries was often inconsistent and some prisoners took more than they were entitled to, leaving others with smaller portions or no choice. There were no facilities for prisoners to dine in association on the wings.
- 2.96** The kitchen was generally clean and tidy (apart from the prisoners' changing area), with good supervision of the prisoners working there. Kitchen workers could achieve qualifications in food safety and hygiene, and hospitality and catering but wing-based servery workers did not receive any training before taking up their post (see also section on learning and skills and work activities). Hand-washing facilities throughout the kitchen area had improved.
- 2.97** Consultation arrangements were regular, through the prisoner forum, and comments were dealt with appropriately.

Recommendations

- 2.98 Prisoners should be provided with an adequate breakfast on the day it is to be eaten.**
- 2.99 Serveries should be closely supervised at mealtimes, to ensure consistent portion control.**
- 2.100 Servery workers should be trained in food hygiene.** (Repeated recommendation 2.117)

Purchases

Expected outcomes:

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

2.101 *Prisoners' views of the prison shop list had improved but some prisoners could wait nearly two weeks to access the full range of goods.*

- 2.102** In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection said that the prison shop sold a wide enough range of goods to meet their needs (57% versus 47% and 45%, respectively).
- 2.103** Depending on their day of arrival, some prisoners could wait nearly two weeks to access the substantive and full range of shop goods, which increased their risk of debt. They were offered emergency grocery packs and could buy up to two more if the delay was likely to be significant but the content of these packs was very limited.

2.104 Prisoners could order goods from a reasonable range of catalogues, but a 50 pence administration charge was levied.

Recommendations

2.105 Arrangements should be made for new prisoners to access the full range of shop goods within 24 hours of arrival.

2.106 There should be no administration charge for catalogue orders.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁵

- 3.1** *The amount of time out of cell had improved considerably. Access to association and exercise was regular and reliable.*
- 3.2** The amount of time unlocked had improved considerably. Working prisoners could have more than nine hours a day out of cell during the week. For the large number of unemployed prisoners, this was less, at around five hours a day, but this was more than we normally see. During our roll checks, we found around 28% of prisoners locked up, which was much less than at the time of the previous inspection, and we were satisfied that all prisoners were unlocked for a domestic period for part of the day.
- 3.3** All prisoners had regular and reliable access to association periods each afternoon. The exception to this was on the day that prison shop goods were issued, when the afternoon association period was used to distribute prisoners' orders to their cell doors. Prisoners were locked up too early, at around 6pm, and this impacted on their ability to telephone family and friends
- 3.4** Exercise periods were regular, usually lasted for an hour and were rarely cancelled. Exercise yards were generally clean; some were well equipped with fixed exercise equipment (see section on physical education and healthy living) and all had seating.

Recommendations

- 3.5 Prisoners should have access to evening association periods.**
- 3.6 Association should be available when shop orders are delivered.** (Repeated recommendation 3.6)

⁵ 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.

3.7 *The management of learning and skills and work required improvement. There were sufficient purposeful activity places for all prisoners to participate part time but too many were allocated on a full-time basis. The allocation and attendance processes were ineffective and places were underutilised, leaving too many prisoners not participating in purposeful activity. Partnership working between the prison and Weston College had improved and the range of education courses broadly met prisoners' needs, particularly those in the prison for short periods. The range of vocational training was inadequate. The achievements of prisoners and the quality of provision had improved but continued to require further development. The library was adequate but it was only open during the working day. Access was restricted because of insufficient prison staff to escort prisoners.*

3.8 *Ofsted⁶ made the following assessments about the learning and skills and work provision:*

Overall effectiveness of learning and skills and work: requires improvement

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

3.9 The education and vocational training provision, provided by Weston College, required improvement. Senior managers recognised weaknesses in the current learning and skills and work provision and were committed to improving it. The recent appointment of prison learning and skills and activities managers had had a significant impact and progress had been made.

3.10 At the time of the inspection, just over a quarter of prisoners remained on the wings without purposeful activity or employment, but plans were well advanced to reduce this proportion (see main recommendation S57). Joint working between the prison and Weston College had improved and had resulted in changes to the curriculum but more work was needed to develop fully the relationship.

3.11 The self-assessment and quality improvement planning processes were disjointed and had yet to include all areas in a prison-wide approach. The content of the self-assessment report included information from Weston College but was insufficiently evaluative. Staff correctly identified some key strengths and areas for improvement, and quality improvement plans described actions and responsibilities. However, most targets were not specific enough to

⁶ 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>.

ensure that improvements could be measured. Weston College collected accurate overall data on prisoners' participation and achievements but this was not used sufficiently well to identify variations between groups of prisoners.

- 3.12** The Weston College session observation structure and processes were well developed and clearly linked to improving teaching, learning and assessment. However, best practice was not routinely shared – for example, the effective use of individual learning plans (ILPs) in some areas and the good application of information and learning technology by a few tutors.
- 3.13** The processes for allocating prisoners to purposeful activities were not managed effectively. On too many occasions, prisoners were allocated to more than one activity at the same time. The prison had recognised this issue and was focused on changing processes to improve allocation. While there were signs of progress, it was too early to measure their full impact.

Recommendations

- 3.14 A succinct and evaluative self-assessment, including all learning, skills and work, should be developed. It should provide a clear overview of fully evidenced key strengths and areas for improvement and be clearly linked to improvement targets.**
- 3.15 Allocation to activities should be better managed to ensure that prisoners participate fully in purposeful activities.**
- 3.16 Data concerning participation and learners' achievements should be routinely collated, analysed and evaluated to enable accurate and realistic targets for improvement to be set.**

Provision of activities

- 3.17** There were sufficient purposeful activity places for prisoners to participate part time but there were too many full-time places (230), and available places were underutilised (see main recommendation S57). Too many prisoners remained on residential wings during the working day with nothing to do. Plans were well advanced to move to a regime in which all prisoners participated in part-time purposeful activities during the working day.
- 3.18** All prisoners had their immediate needs identified sensitively on arrival by experienced and qualified staff from the National Careers Service contractor, Tribal, and Weston College. All prisoners were given a computer-based initial assessment of their English and mathematics skill levels. This was used effectively by some tutors to plan individual learning and contribute to improvements in prisoners' achievements. At the end of the induction, staff identified prisoners' needs and promptly identified suitable activities but subsequent allocation was not well managed (see section on leadership and management).
- 3.19** Weston College provided approximately 20 full- and 70 part-time education places. Accredited programmes were offered from entry level up to level 2. Many courses were of short duration, to suit short-term prisoners. There was a wide range of programmes, with an emphasis on improving English and mathematics. Additionally, information and communications technology programmes were offered. English for speakers of other languages courses were available when required. Education staff provided a good accredited peer mentor programme. The provision for vulnerable prisoners had improved, with daily

sessions in classrooms on their wing, good individual support on the wings and a period in the main education department, where they had access to the library.

- 3.20** The range of vocational training opportunities was inadequate. Prisoners could access accredited horticulture and catering training at level 1 and cycle repair, and maintenance work was provided and accredited by an external agency. An accredited recycling qualification was introduced during the inspection and plans were well advanced to offer a qualification in painting and decorating and garden furniture assembly. Prisoners working on the wing serveries were given food hygiene training only after they had started working (see recommendation 2.100) and those working as cleaners received no training. At the time of the inspection, the Prison Information and Communications Technology Academy (PICTA) was closed due to national security issues.
- 3.21** Work opportunities included orderlies, wing cleaners, servery workers, peer mentors, Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), clothing exchange store workers and a variety of prisoner representatives. The work for vulnerable prisoners was very limited. The breakfast pack assembly and textile work was repetitive, dull and mundane, and offered insufficient opportunities to develop prisoners' work skills. The many prisoners employed as wing cleaners had too little work to do to keep them busy and promote a good work ethic.

Recommendation

- 3.22** **The amount and range of vocational training provision should be increased to ensure that more prisoners are engaged in purposeful activity that addresses their resettlement needs.**

Quality of provision

- 3.23** Instructors provided good coaching and training to prepare prisoners for work in the contract workshops. The quality of teaching and learning in education classes and vocational training was inconsistent and required improvement.
- 3.24** In the more successful teaching sessions, tutors planned to meet learners' differing needs effectively. They used questioning, discussion and explanation skilfully to extend prisoners' thinking and understanding. As a result, they made good progress and visibly grew in confidence. However, prisoners became distracted easily and lost interest when tutors presented continuous worksheet exercises that failed to challenge them. In these sessions, teachers focused on the task at hand rather than placing sufficient emphasis on teaching prisoners how to develop effective techniques and approaches to solve problems.
- 3.25** For prisoners with significant barriers to learning, tutors managed individual learning support on the residential wings effectively. They made good use of the initial assessment of prisoners' skill levels in English and mathematics to plan individual learning. Learning plans supported and promoted learning well by using realistic and achievable incremental targets. Most of these prisoners made good progress and moved on to achieve a qualification.
- 3.26** The use of ILPs by tutors in formal education and vocational training sessions was too variable. Target setting was frequently too general and feedback to prisoners placed insufficient focus on how prisoners could improve their skills. The use of trained, accredited peer mentors to provide individual support in learning sessions and to promote learning through imaginative presentations on the residential wings was very good.

Recommendations

- 3.27** The standard of teaching and learning in education and vocational training should be raised through effective and more extensive use of the observation of teaching and learning processes and planned staff development.
- 3.28** The number of peer mentors should be increased and they should be used throughout the learning, skills and work provision, to support teaching and learning.
- 3.29** The use of individual learning plans in formal education sessions should be improved so that they provide clear, incremental and individualised targets which are monitored closely for achievement and which reflect fully individual learners' identified goals and aspirations.

Education and vocational achievements

- 3.30** In 2012/13, prisoners' success rates in functional English and mathematics had been low, at 42% and 62%, respectively. In 2013/14 they had significantly improved and were good, at 92% for functional English and 86% for mathematics. Prisoners' progression through skills levels in English and mathematics was good. Many achieved qualifications at least one level higher than their assessed level at entry to the prison, and a few improved by two levels. However, too few prisoners attended education courses and gained qualifications. Achievements of qualifications in vocational training were high but participation in the limited range of vocational training was low. Prisoners' work and employment skills development were still not recognised or recorded (see main recommendation S57).
- 3.31** Prisoners' behaviour in education and vocational training sessions was extremely good. They were motivated, worked hard and clearly enjoyed their learning experience. They displayed high levels of respect for each other and for staff.
- 3.32** Punctuality at all activities was good but attendance was very poor, particularly in education and vocational training sessions, where attendance was often as low as 25%. Many prisoners attended appointments or PE during their purposeful activity time and rarely returned to activities. Attendance in workshops was better but was still low, at approximately 65%. The prison was taking steps to improve attendance. Prisoners' standards of work overall were reasonably good but were variable across education and vocational training.

Recommendations

- 3.33** Prisoners' achievements on all education and vocational training programmes should be maintained and raised further.
- 3.34** Prisoners' attendance at activities should be improved.

Library

- 3.35** Staff from Bristol City Council managed the library, which was only open during the working day. There was a reasonable amount of material to support education and training, a wide range of books for prisoners whose first language was not English and an appropriate range of legal books and Prison Service Orders. There was also a limited range of books on each wing.

- 3.36** There was one full-time librarian and an assistant was due to start. Too often, late movements from the wings to the library wasted learning opportunities and there were frequently insufficient staff to escort prisoners there. The lack of data collation made it difficult to determine the number of prisoners accessing and using the library facilities.
- 3.37** Library orderlies provided good support but there were no opportunities for them to gain accredited qualifications. The librarian coordinated the Shannon Trust Toe by Toe reading scheme and there were currently seven mentors operating across three wings, although few prisoners were participating.
- 3.38** The lighting and accommodation in the library had improved. However, the library was not sufficiently well promoted during prisoners' induction into the prison and there was no access for prisoners using a wheelchair.

Recommendations

- 3.39** Prison managers should ensure that prisoners are able to make use of their scheduled periods in the library by providing escorting staff.
- 3.40** Library staff should collect, analyse and monitor data about prisoners' access to and use of the facilities, to ensure that opening times and resources are meeting prisoners' needs.
- 3.41** Prisoners working in the library should be given the opportunity to gain an accredited qualification.
- 3.42** Suitable means of access to the library for wheelchair users should be provided. (Repeated recommendation 3.45)

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.

3.43 *The quality of recreational PE provision was good. Too many prisoners attended PE during their allocated education, work or training sessions. Reduced staff levels and frequent redeployment of PE staff to other regime activities reduced and disrupted the amount of recreational PE available. Prisoners were unable to gain accredited vocational training qualifications.*

- 3.44** PE facilities were well managed and provided an adequate range of activities. Too many prisoners were allowed to attend during their allocated education, work or training sessions, which disrupted attendance at purposeful activities. PE provision was advertised on wing noticeboards effectively and the facilities were well used. There was also good use of orderlies to tell prisoners about PE provision.
- 3.45** The current timetable enabled prisoners to use the facilities at least twice a week but PE staff were frequently redeployed to other regime activities, resulting in disruptions to the timetable and a reduction in the number of hours available for recreational PE.

- 3.46** The PE facilities were well maintained and consisted of a sports hall, cardiovascular equipment, weights room and a new artificial-surface outside pitch. Additional exercise equipment was located in an outside prisoner exercise area and was used frequently. The responsibility for this equipment and its use was unclear. The main PE shower facilities were clean, decent and well maintained.
- 3.47** The use of data to monitor the use of PE facilities by different groups of prisoners, to ensure equality of access, was poor (see also section on equality and diversity), although specific times and programmes were run for prisoners aged over 50. At the time of the inspection, there were no specific gym qualifications offered, despite staff being trained and qualifications previously being offered. There were no opportunities for prisoners to record their individual progress and achievements, such as fitness levels.

Recommendations

- 3.48** The published PE timetable should be adhered to.
- 3.49** Accurate data should be collated, analysed and monitored to ensure equality of access and participation.
- 3.50** A range of accredited vocational training qualifications aimed at meeting prisoners' resettlement needs should be provided.

Housekeeping point

- 3.51** The responsibility for maintaining and ensuring the proper use of outdoor exercise equipment on exercise yards should be clarified.

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 draft strategy on reducing reoffending was well constructed but a needs analysis had not been completed. There were new structures to provide oversight of resettlement, and these included external providers.*

4.2 In preparation for the establishment's future role as a resettlement prison, there was a new draft reducing reoffending strategy, which was well constructed, addressing the need to continue developing links with community organisations in the area to support prisoners on release. There was an action plan, which included relevant objectives, allocated to appropriate staff to take them forward.

4.3 The population profile was undergoing substantial change (see section on offender management and planning) and there was no current needs analysis, which was reasonable as the prison population had yet to settle from the reconfiguration process taking place.

4.4 Since the previous inspection, a management group for reducing reoffending had been constituted and had met once. It included representation from appropriate prison departments and was complemented by a separate meeting with community agencies working in the prison. It was too early to judge the effectiveness of this management structure in overseeing and developing effective resettlement services and offender management.

Recommendation

4.5 **The resettlement needs analysis should be completed and the reducing reoffending strategy should reflect the findings.**

Offender management and planning

Expected outcomes:

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

- 4.6** *Offender management and planning had deteriorated owing to the reconfiguration of the department and the demands of population management. Too many sentenced prisoners were transferred without a sentence plan and there was no custody planning for those sentenced to less than 12 months and unsentenced prisoners. Home detention curfew arrangements were not consistently provided. Public protection arrangements were reasonable but there were significant shortcomings in the management of multiagency public protection arrangements (MAPPA) cases.*
- 4.7** Since the previous inspection, disruption of the offender management unit (OMU), by removal of experienced staff and their replacement with officers new to the role, and reconfiguration of the prison estate had contributed to a decline in the effectiveness of offender management.
- 4.8** Demands on the prison to transfer sentenced prisoners swiftly to establishments identified by sentence length rather than offender management need had intensified. A range of indicators showed that the throughput of prisoners was high, with few sentenced prisoners staying long enough for assessment and planning to take place. At the time of the inspection, 74% of sentenced prisoners had been at the prison for less than three months, and between April and August 2014, 1,354 of the 1,634 prisoners received had been transferred to other establishments or released.
- 4.9** Although OMU staff tried to prioritise their work, they were unable to affect the rate of movement of prisoners waiting for assessment and planning. The number of prisoners transferred without an assessment was not recorded but managers and offender supervisors alike assured us that prisoners were often moved while undergoing the assessment process or even before their case could be allocated. As part of the ongoing reconfiguration of the prison estate, staff working in the offender categorisation and allocation department had been instructed to send prisoners to a restricted range of establishments according to their length of sentence; therefore, even when there had been an assessment of offending-related need, it rarely informed the allocation of the prisoner. The outcome for sentenced prisoners was that there was little effective offender management. In our survey, only 20% of prisoners said that they had a sentence plan, which was far worse than the 36% comparator, and only 21%, against the 29% comparator, said that they had a named offender supervisor in the prison (see main recommendation S58).
- 4.10** Prisoners sentenced to less than 12 months were being retained at the prison, so the population was being reconfigured to comprise mostly of unsentenced and short-term sentenced prisoners. Even though these two groups comprised more than 71% of the population, no custody planning was taking place to assess and meet their resettlement and offending-related needs (see main recommendation S58).
- 4.11** There had been a significant change in the staffing of the OMU, with the transition from seconded probation staff to newly recruited Prison Service offender supervisors. The Prison Service offender supervisors had been in post less than 12 months and had received appropriate training. They told us that they were well supported by the senior probation officer but were still not fully confident in the role. They were also frustrated by being

regularly redeployed to residential duties, which aggravated the difficulty in completing assessments on sentenced prisoners before transfer.

- 4.12** The quality of assessments which had been completed was mostly reasonable but in some sentence plans the objectives were unspecific (such as ‘maintain good behaviour and comply with the regime’) and too many were limited to what could be achieved at the establishment rather than identifying interventions related to their risk and likelihood of offending which might have been available at other establishments or in the community.
- 4.13** Many prisoners who were eligible for home detention curfew (HDC) were not considered. A lack of staff resources and delays in the administration of HDC meant that applications were not processed in time. In the previous five months, 88 applications had been started and 37 had not been considered. Of those granted during this period, only one had been within the eligibility date.

Recommendation

- 4.14 All prisoners eligible for home detention curfew should be offered the opportunity to apply for it, and decisions on applications should be made before their eligibility date.**

Public protection

- 4.15** The dedicated public protection team was responsible for identifying prisoners who required monitoring. Identification procedures were robust and the team interviewed prisoners identified promptly, to explain restrictions, how to challenge them and how to apply for child contact.
- 4.16** The recording of prisoners subject to multiagency public protection arrangements (MAPPA) in the community was not well managed. The system of alerts on P-Nomis (electronic case notes) was not routinely updated, and the prison was unclear about which prisoners were subject to MAPPA and the level at which they were to be managed. There was no transparent process for ensuring that all relevant cases were recorded in a timely manner. It was the responsibility of community-based offender managers to determine and notify the level at which the prisoner was managed on release but this process did not always take place and offender supervisors were not sufficiently proactive in prompting offender managers who had failed to fulfil this responsibility. This meant that although the prison met its responsibility in submitting information, prisoners subject to MAPPA arrangements were being released without adequate exchange of information or contribution to release planning from the prison.
- 4.17** The monthly interdepartmental risk management team (IRMT) meetings had appropriate representation from public protection, OMU and other departments. Mail and telephone monitoring was reviewed thoroughly. The IRMT meeting we observed gave due consideration to child protection issues and contact with community public protection agencies, including the police and social services.
- 4.18** There was good cooperative working with the police and local agencies to manage high-risk and prolific offenders through the IRIS and IMPACT schemes, respectively.

Recommendation

- 4.19** Multiagency public protection arrangements (MAPPA) information should be kept up to date and offender supervisors should ensure that they are apprised of all relevant information, especially regarding risk levels, and that they contribute to release arrangements.

Categorisation

- 4.20** Categorisation was undertaken promptly after sentence and few prisoners remained long enough for a review to be required. Category C prisoners were moved on soon after sentence, and the small number of category D prisoners comprised recent returns from open establishments and those who had been waiting a short time for a place in open conditions. No category D prisoners were being held inappropriately.

Indeterminate sentence prisoners

- 4.21** At the time of the inspection, the prison held 25 life-sentenced prisoners and seven serving indeterminate sentences for public protection, and none were being held inappropriately. One life-sentenced prisoner was undergoing assessment after sentence to determine allocation, while the remainder had been returned from closed conditions or were being held while parole reports were being completed.
- 4.22** There was a dedicated team of offender supervisors to manage indeterminate-sentenced prisoners (ISPs), and parole reports were up to date. Newly sentenced ISPs were interviewed soon after arrival and their sentences were explained to them. However, unsentenced prisoners likely to be given an indeterminate sentence were not contacted by an offender supervisor to prepare them for their possible sentence.

Housekeeping point

- 4.23** Unsentenced prisoners charged with offences likely to result in an indeterminate sentence on conviction should be contacted by an offender supervisor to discuss possible outcomes.

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.

4.24 *The demand for resettlement support was high. Screening for resettlement needs had improved and discharge procedures were efficient. Accommodation support had developed well. Education, training and employment provision was good, with effective support, including through-the-gate provision. A good employability course was available. Health care discharge planning arrangements were timely and appropriate. Those with enduring mental health problems were managed using the care programme approach. Resettlement support for those with substance misuse problems was excellent, with good links to drug intervention programme teams, and housing and other community-based treatment and support. Debt and benefit advice was available but there was a lack of financial education. Children and family support services were improving. More visits were available and conditions in visits sessions were good but booking continued to be a major problem. No offending behaviour programmes were provided for the short-term prisoners who remained at the establishment.*

4.25 An average of 120 prisoners were released a month, which led to a high demand for resettlement services. Prisoners were made aware of resettlement services through induction and publicity in residential areas.

4.26 There was no planning process to identify and monitor the delivery of a prisoner's individual resettlement plan but a basic screening process provided the opportunity for new arrivals to identify any resettlement needs, which then led to referrals to supporting services. This was followed by an assessment with the National Careers Service, which also covered resettlement needs. Up to five weeks before release, a weekly pre-discharge review was offered to all prisoners to identify any outstanding issues. Referrals to resettlement services were also made by residential and substance misuse service staff as well as from prisoner applications.

Accommodation

4.27 Accommodation services had been recently taken over by a full-time administrative member of staff, who had developed a comprehensive service. The average proportion of prisoners leaving without settled accommodation over the previous six months was 14% but the impact of the new arrangements was demonstrated by the fall in monthly figures, from 22% in April to 13% in August and 5% in September 2014.

4.28 Procedures had been established to maintain tenancies and housing benefit payments, and help with closing down tenancies and securing property was provided.

4.29 Good links with community accommodation providers and local authorities had been developed, especially in Bristol but also in Bath and Plymouth. St Mungo's Prison Outreach team visited every week to support prisoners due for release who were difficult to place in accommodation.

4.30 The outcomes of the service were recorded but there was not yet a process for reporting and analysing the data to identify improvements.

Recommendation

- 4.31 Accommodation outcomes data should be provided in a report to the reducing reoffending management group for analysis and appropriate action taken to address any identified issues.**

Education, training and employment

- 4.32** The quality of the National Careers Service, provided by Tribal, was good and there were sufficient staff to carry out individual interviews during induction. The quality of the skills action plans was good and they provided clear and comprehensive information, including reference to levels of English and mathematics skills, and provided realistic goals and targets.
- 4.33** Weston College had recently implemented an employability course to help prisoners with job search and developing or improving interview skills. It was too early to measure the impact of this programme.
- 4.34** Prisoners received good support with finding jobs and were directed to other pathways designed to meet their needs – for example, accommodation and finance. A through-the-gate initiative was successfully supporting prisoners into employment or further education and training on release. However, we were not assured about the validity of data relating to prisoners entering employment as it was based on self-reporting.
- 4.35** The contract with Tribal finished on 30 September 2014 and the new provider, Prospects, started on 1 October 2014. Tribal staff worked diligently and ensured that a good and supportive service was provided during the change to the new contractor.

Recommendation

- 4.36 Valid data about prisoners entering education, training or employment following release should be collected, analysed and used to inform a needs analysis and resettlement strategy.**

Health care

- 4.37** There were good and timely pre-discharge health care arrangements. Patients with enduring mental health problems were managed using the care programme approach and there were arrangements with community mental health teams. Policies and procedures were available for palliative care but were rarely used.

Drugs and alcohol

- 4.38** Resettlement arrangements for those with substance misuse issues were excellent. The psychosocial team linked prisoners with drug intervention programme teams, housing workers and community-based treatment and support in their release areas. Information sharing with the OMU was also effective.
- 4.39** The prison continued to participate in a national naloxone pilot scheme, training prisoners to treat opiate overdose on release. The 'N-ALIVE' study had been recruiting participants since January 2013 and 340 prisoners had joined in the study.

Good practice

- 4.40** *A naloxone opiate antidote training and distribution programme had been delivered by the psychosocial team.*

Finance, benefit and debt

- 4.41** Help was available for prisoners with debt and other financial problems through the Money Advice service and Citizens Advice, and staff from both organisations visited the prison weekly. However, in our survey fewer prisoners than at comparator establishments knew where to go for help with finances. Jobcentre Plus staff provided advice on benefits and set up claims before release.
- 4.42** A pilot scheme to set up bank accounts had lapsed because procedures took too long and many prisoners were discharged or transferred before the process was complete. No money management course or specific financial education was provided.

Recommendation

- 4.43** **Financial education and support with opening bank accounts should be developed to meet the needs of the short-term population.**

Children, families and contact with the outside world

- 4.44** Family support had improved, and in our survey 33% of prisoners (compared with 26% at the time of the previous inspection) said that staff had helped them to maintain contact with family and friends.
- 4.45** The Prison Advice and Care Trust (PACT) provided family support services. They staffed visits services, and a family engagement worker provided individual support and advice to prisoners with family problems, such as child contact.
- 4.46** The visitors centre was welcoming and well equipped, providing a wide range of family advice, and had links with a local family centre to which they could direct parents.
- 4.47** Social visits were provided every day. Prisoners and visitors we spoke to told us of continuing difficulty in booking visits by telephone, although email booking was more reliable. The capacity of the telephone booking system was inadequate and at times it had been left without cover because of staff shortages.
- 4.48** The number of visits places had been increased with the provision of new tables. When we enquired, we found that, although weekend visits booked up quickly, there were weekday places available the next day.
- 4.49** Visits staff were welcoming and friendly, and supervised sessions effectively, without being intrusive or over-restrictive. The visits hall was bright and comfortable, with a supervised children's play area and a good refreshment bar providing hot food. Visits sessions were for up to two hours and prisoners were no longer required to wear identifying bibs. PACT had reintroduced family visits during school holidays but these were only available to enhanced prisoners.

Recommendations

4.50 Visitors should be able to book visits without delays.

4.51 Family visits should be available to all prisoners.

Attitudes, thinking and behaviour

4.52 Apart from substance misuse programmes (see section on substance misuse), no offending behaviour interventions were provided. However, the prison was appropriately focused on moving sentenced prisoners to training establishments where such interventions were available.

4.53 Appropriate interventions for short-term prisoners who remained at the prison had not been developed but funding had been secured to develop a short-duration programme to address domestic violence.

Recommendation

4.54 A range of interventions to address offending behaviour should be developed which is suitable for the prison's short-term population.

Section 5. Summary of recommendations and housekeeping points

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

Main recommendations

To the governor

- 5.1** All incidents of violence and victimisation should be investigated and actioned. All data relating to violence should be collated and analysed to identify trends, and action should be taken to improve safety. (S53, repeated recommendation S46)
- 5.2** All cells should be clean and free of graffiti, and contain suitable furniture. (S54)
- 5.3** All prisoners should have sufficient clothes, bedding and towels and these should be clean and in good condition. (S55)
- 5.4** Governance and management oversight of diversity should be prioritised to ensure that the needs of all prisoners with protected characteristics are identified, assessed and met and that any negative perceptions of particular groups are understood. (S56, repeated recommendation S49)
- 5.5** The use of learning and skills and work activity should be optimised. Work and employment skills should be recognised and recorded and the number of prisoners gaining qualifications increased. (S57, repeated recommendation S51)
- 5.6** Prisoners should have their needs assessed before they are transferred and this should inform their allocation. All unsentenced prisoners and those serving less than 12 months should have a basic custody screen which identifies their needs and how they will be addressed. (S58)

Recommendations

To the governor

Courts, escort and transfers

- 5.7** Prisoners should be given adequate notice of transfers out. (1.6, repeated recommendation 1.4)

Early days in custody

- 5.8** Living conditions for prisoners on their first night should be improved. (1.16)
- 5.9** All prisoners should receive a full induction. (1.17)

Bullying and violence reduction

- 5.10** Placement of prisoners on A wing should be subject to a thorough assessment and plans made for reintegration where possible. (1.26)
- 5.11** Young adults located on A wing should be thoroughly protected from the risks posed by adult sex offenders. (1.27)

Self-harm and suicide

- 5.12** A safer custody policy, specific to the establishment, should be developed which includes steps to ensure that all assessment, care in custody and teamwork (ACCT) processes are thorough and comprehensively applied. (1.34, repeated recommendation 1.35)
- 5.13** Prisoners in the segregation unit should be able to access a Listener. (1.35, repeated recommendation 1.36)
- 5.14** Prisons and Probation Ombudsman recommendations requiring ongoing review should be incorporated into the safer custody continuous improvement plan. (1.36)

Incentives and earned privileges

- 5.15** Behavioural improvement plans should be in place and the incentives and earned privileges scheme should be used more effectively to manage poor behaviour and reward good behaviour. (1.53)

Discipline

- 5.16** The monitoring and analysis of information about the use of force should be improved. (1.60)
- 5.17** The regime on the segregation unit should be improved so that prisoners are adequately engaged and motivated. (1.67)
- 5.18** Management oversight of segregation should be improved. (1.68)

Substance misuse

- 5.19** Vulnerable prisoners should have access to the 'Inside Recovery' and self-help fellowship groups. (1.76)
- 5.20** The number of prisoners not receiving treatment on C wing should be closely monitored. (1.77)
- 5.21** C wing should undergo comprehensive refurbishment to improve the environment as a substance use treatment facility. (1.78)
- 5.22** The administration of controlled drugs should be better organised and supervised to improve privacy and minimise the risk of diversion. (1.79)

Residential units

- 5.23** Showers should be appropriately screened and maintained, with sufficient hot water. (2.7)

- 5.24** The application system should be reviewed and improved to ensure that it is easy to make an application and that prisoners receive a timely response. (2.8)
- 5.25** The delays in accessing PIN telephone numbers should be addressed as a matter of urgency. (2.9)

Staff-prisoner relationships

- 5.26** Personal officers should have regular contact with their prisoners (including an initial introduction), and case note entries should be made weekly and give details of prisoners' progress. (2.15, repeated recommendation 2.22)

Equality and diversity

- 5.27** Care plans for elderly prisoners and those with disabilities should include social care needs and should be shared with staff on residential units who have responsibility for the prisoner. (2.31)
- 5.28** Retired prisoners and those with disabilities should be left unlocked during the core day. (2.32)
- 5.29** A formal strategy for the management of young adults should be developed. (2.33)

Complaints

- 5.30** All complaints should be responded to promptly. (2.42)

Legal rights

- 5.31** Prisoners should have access to trained staff who can support them with a full range of legal matters. (2.47, repeated recommendation 2.58)

Health services

- 5.32** The head of health care should be a member of the senior management team. (2.59)
- 5.33** Access to the health centre for prisoners with disabilities should be improved. (2.60)
- 5.34** The health needs assessment should provide robust analysis that informs services. (2.61, repeated recommendation 2.67)
- 5.35** Escorting opportunities for outside hospital appointments should be increased to meet demand. (2.66)
- 5.36** All medicine queues should be adequately managed and supervised to prevent the diversion of tradable medicines and allow patient confidentiality to be maintained. (2.72)
- 5.37** All controlled drugs should be stored according to regulations. (2.73)
- 5.38** The dual labelling of medicines should stop and these should be supplied either by a company with the necessary assembly licence or as stock. The out-of-hours policy should be amended accordingly. (2.74)

- 5.39** Prisoners should have access to professional counselling services. (2.90)
- 5.40** A rolling programme of mental health awareness training should be provided for all custody staff. (2.91)

Catering

- 5.41** Prisoners should be provided with an adequate breakfast on the day it is to be eaten. (2.98)
- 5.42** Serveries should be closely supervised at mealtimes, to ensure consistent portion control. (2.99)
- 5.43** Servery workers should be trained in food hygiene. (2.100, repeated recommendation 2.117)

Purchases

- 5.44** Arrangements should be made for new prisoners to access the full range of shop goods within 24 hours of arrival. (2.105)
- 5.45** There should be no administration charge for catalogue orders. (2.106)

Time out of cell

- 5.46** Prisoners should have access to evening association periods. (3.5)
- 5.47** Association should be available when shop orders are delivered. (3.6, repeated recommendation 3.6)

Learning and skills and work activities

- 5.48** A succinct and evaluative self-assessment, including all learning, skills and work, should be developed. It should provide a clear overview of fully evidenced key strengths and areas for improvement and be clearly linked to improvement targets. (3.14)
- 5.49** Allocation to activities should be better managed to ensure that prisoners participate fully in purposeful activities. (3.15)
- 5.50** Data concerning participation and learners' achievements should be routinely collated, analysed and evaluated to enable accurate and realistic targets for improvement to be set. (3.16)
- 5.51** The amount and range of vocational training provision should be increased to ensure that more prisoners are engaged in purposeful activity that addresses their resettlement needs. (3.22)
- 5.52** The standard of teaching and learning in education and vocational training should be raised through effective and more extensive use of the observation of teaching and learning processes and planned staff development. (3.27)
- 5.53** The number of peer mentors should be increased and they should be used throughout the learning, skills and work provision, to support teaching and learning. (3.28)

- 5.54** The use of individual learning plans in formal education sessions should be improved so that they provide clear, incremental and individualised targets which are monitored closely for achievement and which reflect fully individual learners' identified goals and aspirations. (3.29)
- 5.55** Prisoners' achievements on all education and vocational training programmes should be maintained and raised further. (3.33)
- 5.56** Prisoners' attendance at activities should be improved. (3.34)
- 5.57** Prison managers should ensure that prisoners are able to make use of their scheduled periods in the library by providing escorting staff. (3.39)
- 5.58** Library staff should collect, analyse and monitor data about prisoners' access to and use of the facilities, to ensure that opening times and resources are meeting prisoners' needs. (3.40)
- 5.59** Prisoners working in the library should be given the opportunity to gain an accredited qualification. (3.41)
- 5.60** Suitable means of access to the library for wheelchair users should be provided. (3.42, repeated recommendation 3.45)

Physical education and healthy living

- 5.61** The published PE timetable should be adhered to (3.48)
- 5.62** Accurate data should be collated, analysed and monitored to ensure equality of access and participation. (3.49)
- 5.63** A range of accredited vocational training qualifications aimed at meeting prisoners' resettlement needs should be provided. (3.50)

Strategic management of resettlement

- 5.64** The resettlement needs analysis should be completed and the reducing reoffending strategy should reflect the findings. (4.5)

Offender management and planning

- 5.65** All prisoners eligible for home detention curfew should be offered the opportunity to apply for it, and decisions on applications should be made before their eligibility date. (4.14)
- 5.66** Multi-agency public protection arrangements (MAPPA) information should be kept up to date and offender supervisors should ensure that they are apprised of all relevant information, especially regarding risk levels, and that they contribute to release arrangements. (4.19)

Reintegration planning

- 5.67** Accommodation outcomes data should be provided in a report to the reducing reoffending management group for analysis and appropriate action taken to address any identified issues. (4.31)

- 5.68** Valid data about prisoners entering education, training or employment following release should be collected, analysed and used to inform a needs analysis and resettlement strategy. (4.36)
- 5.69** Financial education and support with opening bank accounts should be developed to meet the needs of the short-term population. (4.43)
- 5.70** Visitors should be able to book visits without delays. (4.50)
- 5.71** Family visits should be available to all prisoners. (4.51)
- 5.72** A range of interventions to address offending behaviour should be developed which is suitable for the prison's short-term population. (4.54)

Housekeeping points

Early days in custody

- 5.73** Translated induction information should be equivalent to that available in English. (1.18, repeated recommendation 1.16)

Bullying and violence reduction

- 5.74** Identification of perpetrators and victims on P-Nomis should be up to date. (1.28)

Security

- 5.75** The mandatory drug testing suite should be kept clean at all times to maintain a suitable and respectful testing environment. (1.48)

Discipline

- 5.76** Interaction with prisoners in the segregation unit, and their issues, should be fully recorded. (1.69)

Staff-prisoner relationships

- 5.77** Managers should review the quality of staff entries in prisoner case notes regularly and feed back to staff when improvements are required. (2.16)

Complaints

- 5.78** Complaint forms should be readily available on the wings. (2.43)

Health services

- 5.79** The service offered by the pharmacy to provide a review of prisoners' medication should be actively advertised. (2.75)
- 5.80** All supervised medication should be recorded accurately and in accordance with pharmacy regulations. (2.76)

- 5.81** Adequate space and storage facilities should be provided in all treatment rooms that are used for the administration of medicines. (2.77)
- 5.82** British standard glass measures should be used for the measuring of all liquid medicines. (2.78)
- 5.83** The substance misuse team should be represented at the medicines and therapeutics committee. (2.79)

Physical education and healthy living

- 5.84** The responsibility for maintaining and ensuring the proper use of outdoor exercise equipment on exercise yards should be clarified. (3.51)

Offender management and planning

- 5.85** Unsentenced prisoners charged with offences likely to result in an indeterminate sentence on conviction should be contacted by an offender supervisor to discuss possible outcomes. (4.23)

Examples of good practice

Health services

- 5.86** Prisoners over the age of 40 had the opportunity to receive NHS health checks. (2.67)
- 5.87** There were good procedures to ensure that no tradable medicines were given in-possession. (2.80)
- 5.88** A naloxone opiate antidote training and distribution programme had been delivered by the psychosocial team (4.40)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief Inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Andrew Rooke	Inspector
Paul Rowlands	Inspector
Gordon Riach	Inspector
Rachel Prime	Researcher
Lucy Higgins	Researcher
Njilan Morris-Jarra	Researcher

Specialist inspectors

Paul Roberts	Substance misuse inspector
Michael Bowen	Health services inspector
Deborah Hylands	Pharmacist
Huw Jenkins	CQC inspector
Bob Cowdrey	Ofsted inspector
Charles Clark	Ofsted inspector
Matt Vaughn	Ofsted inspector
Tony Rolley	Offender management inspector
Jo Dowling	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, the reception environment had improved but it remained very busy and cramped at times, and prisoners waited too long there. First night safety and risk assessments were poor. First night accommodation and support was very good but too few prisoners benefited from it. Induction was inconsistently delivered. More prisoners than at similar prisons felt unsafe. Supervision by staff in some areas was poor and levels of bullying and intimidation were high. Arrangements to identify and analyse violent incidents and improve safety had deteriorated. Suicide and self-harm procedures were reasonable and prisoners generally felt well cared for. Security arrangements were generally proportionate to the risks posed. Use of force was not high and governance was good. Segregation was well managed. Drug availability and use were relatively high. Drug treatment arrangements were reasonably good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

All incidents of violence and victimisation should be investigated and actioned. All data relating to violence should be collated and analysed to identify trends and action should be taken to improve safety. (S46)

Not achieved (recommendation repeated, S53)

Recommendations

Prisoners should be given adequate notice of transfers out. (1.4)

Not achieved (recommendation repeated, 1.6)

Prisoners should be allowed a free telephone call to inform their families of impending transfers, subject to a security assessment. (1.5)

Achieved

Cell sharing risk assessment interviews should be conducted sensitively and in private. (1.12)

Achieved

All prisoners, irrespective of having spent time at the establishment before, should receive first night support, including access to Listeners, and information. (1.13)

Achieved

All prisoners should be offered a shower on their first night. (1.14)

Achieved

All prisoners should undergo an induction programme and it should be of sufficient quality to ensure they have the key information. (I.15)

Partially achieved

Translated induction information should be equivalent to that available in English. (I.16)

Not achieved (recommendation repeated as a housekeeping point, I.18)

The safer custody team meeting should explore and analyse unexplained injuries to identify trends and issues. (I.24)

Partially achieved

Placement of prisoners on D wing should be subject to a thorough assessment and plans made for reintegration where possible. (I.25)

Not achieved

A formal strategy for the management of young adults should be developed, including an assessment of their vulnerabilities and risks from other prisoners. (I.26)

Not achieved

A safer custody policy, specific to the establishment, should be developed which includes steps to ensure that all assessment, care in custody and teamwork (ACCT) processes are thorough and comprehensively applied. (I.35)

Not achieved (recommendation repeated, I.34)

Prisoners in the segregation unit should be able to access a Listener. (I.36)

Not achieved (recommendation repeated, I.35)

Staff supervision of residential units should be improved. (I.52)

Achieved

Prisoners should only be subject to closed visits when there is evidence of illicit activity related to visits, and should not remain subject to closed visits if further intelligence is not received. (I.53)

Achieved

The incentives and earned privileges (IEP) scheme should be applied consistently across the prison and the monitoring of its fairness should be improved. (I.60)

Partially achieved

The regime for prisoners on the basic level of the IEP scheme should be improved. (I.61)

Achieved

IEP boards should set individual improvement targets and prisoners should be invited to attend. (I.62).

Not achieved

The prison should closely monitor the number and location of prisoners receiving opiate substitute treatment and review the role and function of C-wing. (I.84)

Partially achieved

Clinical and psychosocial substance misuse services should improve joint work and provide fully integrated care. (I.85)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, the quality and cleanliness of accommodation was variable but too often unacceptable. Access to suitable and clean bedding, clothing and cleaning materials was problematic. Too few prisoners said that staff treated them with respect and we saw some poor staff behaviour. Applications were not tracked. Insufficient attention was given to diversity issues, and provision had deteriorated. Faith provision was adequate. Many complaints, including complaints against staff, were not addressed. There were some significant gaps in physical health service provision. Mental health services were good. The food provided was reasonable. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

Sub-standard cells should not be occupied. All cells should have complete windows, be clean and free of graffiti, and contain suitable furniture. (S47)

Not achieved

The reasons for prisoners' poor perception of staff should be explored and formal complaints about poor behaviour should be investigated and acted on. (S48)

Achieved

Governance and management oversight of diversity should be prioritised to ensure that the needs of all prisoners with protected characteristics are identified, assessed and met and that any negative perceptions of particular groups are understood. (S49)

Not achieved (recommendation repeated, S56)

Recommendations

Sufficient good quality prison-issue bedding and clothing should be issued to meet the needs of prisoners. (2.10)

Not achieved

Prisoners should be able to access stored property within seven days of application. (2.11)

Achieved

The hot water system should be upgraded to provide sufficient hot water. (2.12)

Not achieved

Showers should be appropriately maintained and screened. (2.13)

Not achieved

The application system should be able to track replies to applications. (2.14)

Not achieved

All prisoners should have equitable access to telephones. (2.15)

Achieved

Personal officers should have regular contact with their prisoners (including an initial introduction), and case note entries should be made weekly and give details of prisoners' progress. (2.22)

Not achieved (recommendation repeated, 2.15)

The quality of responses to discrimination incident report forms should be assured through internal and independent external monitoring. (2.29)

Achieved

Foreign national prisoners should be reliably provided with free monthly telephone calls. (2.40)

Not achieved

Interpreting services should be used in all instances where prisoners require information in their own language and written information should be provided in the most needed languages. (2.41)

Partially achieved

Prisoners who require support to access the regime and activities should have a care plan devised and regularly reviewed, with formal peer supporters assigned where required. (2.42)

Partially achieved

Older prisoners and those with disabilities who do not work should have access to a range of regime activities. (2.43)

Not achieved

Prisoners should not have to apply in advance to attend services or other religious activities. (2.48)

Achieved

Links should be made with faith communities outside the prison to meet prisoners' individual needs. (2.49)

Achieved

Replies to complaints should be courteous and deal with the issue raised. (2.53)

Achieved

Prisoners should have access to trained staff who can support them with a full range of legal matters. (2.58)

Not achieved (recommendation repeated, 2.47)

The health needs assessment should provide robust analysis that informs services. (2.67)

Not achieved (recommendation repeated, 2.61)

A palliative care policy identifying links with specialist community services should inform the care of prisoners with life-limiting conditions, and the management of such conditions should reflect best community practice. (2.68)

Achieved

Health care information should be made available in a range of languages appropriate for the prison population. (2.69)

Achieved

All prisoners should have access to a dedicated health care forum. (2.70)

Achieved

GP clinics should have appropriate privacy and access to equipment. (2.79)

Achieved

Escorts for internal appointments and booked external hospital appointments should be provided to ensure that clinical care is not compromised. (2.80)

Achieved

The holding rooms in the health care centre should be refurbished to provide a satisfactory environment for patients waiting for appointments. (2.81)

Achieved

Secondary health assessments should be completed within 72 hours of arrival. (2.82)

Achieved

The pharmacy should be registered with the General Pharmaceutical Council. (2.91)

Achieved

There should be pharmacy-led medicines use reviews and clinics. (2.92)

Partially achieved

The medicines and therapeutics committee should introduce further patient group directions to enable the supply of more potent medication by the pharmacist and/or nurse, to avoid unnecessary consultations with the doctor. (2.93)

Partially achieved

Controlled drugs should be administered, stored and secured separately and properly in line with legislation, regulations and professional guidance, and access should be subject to a clear audit trail. (2.94)

Not achieved

The reasons for failures to attend dental appointments should be investigated and remedial action taken. (2.102)

Achieved

Mealtimes should be reviewed to reduce the time between the evening meal and breakfast, and lunch should be served later and from the serveries. (2.115)

Achieved

The prisoner changing area in the kitchen should be expanded to provide adequate washing, changing and toilet facilities. (2.116)

No longer relevant

Servery workers should be trained in food hygiene. (2.117)

Not achieved (recommendation repeated, 2.100)

Purposeful activity

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

At the last inspection, in 2013, time out of cell for much of the population was poor. Too many prisoners were locked up during the day and opportunities for association were very limited. Learning and skills and work were suitably aimed at the needs of the short-term population but management was inadequate. There were too few activity places and not all of these were utilised. Not enough teaching and learning was of good quality. Achievements in education were inadequate, although vocational training was good. Opportunities to accredit work skills were missed. Library facilities were poor. PE provision was good but there was too little access for unemployed prisoners. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

The core day should be reviewed to reduce long periods of lock-up. All prisoners should be able have daily association. (S50)

Achieved

The amount of learning and skills and work activity should be increased and its use optimised. Work and employment skills should be recognised and recorded and the number of prisoners gaining qualifications increased. (S51)

Not achieved (recommendation repeated, S57)

Recommendations

Association should be available when shop orders are delivered. (3.6)

Not achieved (recommendation repeated, 3.6)

Association equipment should be replaced where necessary. (3.7)

Achieved

There should be sufficient specialist expertise to manage learning and skills and work effectively. (3.15)

Partially achieved

Managers and staff at all levels should monitor learners' achievements regularly to identify any gaps in performance between particular groups. (3.16)

Partially achieved

Managers and staff at all levels should ensure that timely and accurate data on learners' achievements are routinely available and used effectively. (3.17)

Partially achieved

Self-assessment should be suitably critical and lead to effective actions which improve learning and skills and work activity. (3.18)

Partially achieved

The quality of teaching and learning in education classes should be improved. (3.29)

Partially achieved

The timetabling of literacy and numeracy sessions should be changed, to improve the effectiveness of learning. (3.30)

Achieved

The quality of education classrooms should be improved and the quality and availability of teaching and learning resources should be increased. (3.31)

Partially achieved

Goals in individual learning plans should be sufficiently specific to help learners to improve and understand their progress. (3.32)

Partially achieved

All literacy and numeracy learners should work at levels which are higher than those they have already attained and be sufficiently challenged to develop their skills further. (3.39)

Achieved

Library accommodation should be improved and its facilities extended to provide computers and suitable study space. (3.43)

No longer relevant

The proportion of prisoners who visit the library regularly should be increased. (3.44)

Not achieved

Suitable means of access to the library for wheelchair users should be provided. (3.45)

Not achieved (recommendation repeated, 3.42)

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 2013, the resettlement strategy was supported by a good needs analysis but lacked sufficient oversight. Offender management provision largely met the needs of the short-term population but plans were disrupted for some by overcrowding drafts. The timeliness and quality of sentence plans was good. Home detention curfew, categorisation and public protection arrangements were sound. Too few prisoners knew where to go for support with resettlement during their sentence. Resettlement pathway provision was generally effective. Accommodation, debt and drugs advice were particularly good but provision for family contact was not good enough. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Oversight and monitoring of delivery of the reducing reoffending strategy should be through a body which encourages sharing of information and approaches between all managers and providers. (4.5)

Achieved

Evidence of the outcomes of the reducing reoffending strategy, including prisoners' views, should be obtained and used to guide developments. (4.6)

No longer relevant

Applications for contact with the public should be dealt with promptly. (4.16)

Achieved

The initial needs assessment should be completed on all prisoners on their first night in the prison. (4.25)

Achieved

Information about resettlement services and how to access them should be well publicised in the prison. (4.26)

Achieved

Resettlement staff should monitor the use of their service, and outcomes. (4.29)

Partially achieved

Support for prisoners to maintain contact with their family members and friends should be prioritised and better family pathway provision developed, including family visits. (4.43)

Partially achieved

The number of visits available should be increased to meet demand. (4.44)

Achieved

Prisoners should not be required to wear high-visibility vests during visits. (4.45)

Achieved

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	9	223	38.3
Recall	3	64	11.1
Convicted unsentenced	7	109	19.1
Remand	20	165	30.5
Civil prisoners	0	0	0.0
Detainees	0	2	0.3
Other	0	4	0.7
Total	39	567	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	30	288	52.5
Less than six months	3	82	14.0
six months to less than 12 months	1	34	5.8
12 months to less than 2 years	3	35	6.3
2 years to less than 4 years	2	49	8.5
4 years to less than 10 years	0	41	6.8
10 years and over (not life)	0	6	1.0
ISPP (indeterminate sentence for public protection)	0	25	5.3
Life	0	7	1.2
Total	39	567	100

Age	Number of prisoners	%
Please state minimum age here: 18	-	
Under 21 years	39	6.4
21 years to 29 years	223	36.8
30 years to 39 years	171	28.2
40 years to 49 years	104	17.2
50 years to 59 years	46	7.6
60 years to 69 years	15	2.5
70 plus years	8	1.3
Please state maximum age here: 78		
Total	606	100

Nationality	18–20-year-olds	21 and over	%
British	35	504	88.9
Foreign nationals	4	63	11.1
Total	39	567	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	27	248	45.4
Uncategorised sentenced	4	38	7.0
Category A	0	0	0.0
Category B	0	44	7.3
Category C	0	221	36.5
Category D	0	15	2.5
Other	39	287	53.9
Total	39	567	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	21	421	72.9
Irish	1	4	0.8
Gypsy/Irish Traveller	0	4	0.7
Other white	1	21	3.6
	23	450	78.0
Mixed			
White and black Caribbean	4	17	3.5
White and black African	0	1	0.2
White and Asian	1	0	0.2
Other mixed	1	6	1.2
	6	24	5.0
Asian or Asian British			
Indian	1	5	1.0
Pakistani	0	4	0.7
Bangladeshi	1	0	0.2
Chinese	0	0	0.0
Other Asian	0	7	1.2
	2	16	2.6
Black or black British			
Caribbean	5	37	6.9
African	3	19	3.6
Other black	0	16	2.6
	8	72	13.0
Other ethnic group			
Arab	0	1	0.2
Other ethnic group	0	1	0.2
	0	2	0.5
Not stated	0	3	0.5
Total	39	567	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0.0
Church of England	5	54	9.7
Roman Catholic	5	57	10.2
Other Christian denominations	5	70	12.4
Muslim	5	52	9.4
Sikh	0	6	1.0
Hindu	0	0	0.0
Buddhist	0	8	1.3
Jewish	0	0	0.0
Other	0	10	1.7
No religion	19	310	54.3
Total	39	567	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)	Not supplied		
Total			

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	6	1.0	118	19.5
1 month to 3 months	2	0.3	81	13.4
3 months to six months	0	0.0	43	7.1
six months to 1 year	1	0.2	31	5.1
1 year to 2 years	0	0.0	6	1.0
2 years to 4 years	0	0.0	0	0.0
4 years or more	0	0.0	0	0.0
Total	9	1.5	279	46

Sentenced prisoners only

	18–20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0.0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	3	102	17.3
Total	3	102	17.3

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	11	1.8	99	16.3
1 month to 3 months	10	1.7	97	16.0
3 months to six months	6	1.0	58	9.6
six months to 1 year	3	0.5	28	4.6
1 year to 2 years	0	0.0	6	1.0
2 years to 4 years	0	0.0	0	0.0
4 years or more	0	0.0	0	0.0
Total	30	5.0	288	47.5

Main offence	18–20-year-olds	21 and over	%
Violence against the person	Information not currently available		
Sexual offences			
Burglary			
Robbery			
Theft and handling			
Fraud and forgery			
Drugs offences			
Other offences			
Civil offences			
Offence not recorded /holding warrant			
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 15 September 2014 the prisoner population at HMP Bristol was 579. Using the method described above, questionnaires were distributed to a sample of 193 prisoners.

We received a total of 162 completed questionnaires, a response rate of 84%. This included three questionnaires completed via interview. Six respondents refused to complete a questionnaire, 17 questionnaires were not returned and eight were returned blank.

Wing/Unit	Number of completed survey returns
A	30
B	23
C	41
D	35
F	2
G	29

Health care	
Segregation unit	

Presentation of survey results and analyses

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

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 has been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from HMP Bristol 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 33 local prisons since April 2008
- The current survey responses from HMP Bristol in 2014 compared with the responses of prisoners surveyed at HMP Bristol in 2013.
- 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 prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2014 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2014 survey between the VP wing (Wing A) and the rest of the establishment.

Survey summary

Section I: About You

Q1.2	How old are you?	
	<i>Under 21</i>	10 (6%)
	<i>21 - 29</i>	62 (39%)
	<i>30 - 39</i>	49 (30%)
	<i>40 - 49</i>	23 (14%)
	<i>50 - 59</i>	11 (7%)
	<i>60 - 69</i>	5 (3%)
	<i>70 and over</i>	1 (1%)
Q1.3	Are you sentenced?	
	<i>Yes</i>	55 (34%)
	<i>Yes - on recall</i>	24 (15%)
	<i>No - awaiting trial</i>	49 (31%)
	<i>No - awaiting sentence</i>	32 (20%)
	<i>No - awaiting deportation</i>	0 (0%)
Q1.4	How long is your sentence?	
	<i>Not sentenced</i>	81 (53%)
	<i>Less than 6 months</i>	20 (13%)
	<i>6 months to less than 1 year</i>	12 (8%)
	<i>1 year to less than 2 years</i>	7 (5%)
	<i>2 years to less than 4 years</i>	12 (8%)
	<i>4 years to less than 10 years</i>	11 (7%)
	<i>10 years or more</i>	3 (2%)
	<i>IPP (indeterminate sentence for public protection)</i>	2 (1%)
	<i>Life</i>	6 (4%)
Q1.5	Are you a foreign national? (i.e. do not have UK citizenship)	
	<i>Yes</i>	19 (12%)
	<i>No</i>	141 (88%)
Q1.6	Do you understand spoken English?	
	<i>Yes</i>	158 (99%)
	<i>No</i>	2 (1%)
Q1.7	Do you understand written English?	
	<i>Yes</i>	159 (99%)
	<i>No</i>	1 (1%)

Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	115 (71%)	<i>Asian or Asian British - Chinese</i> 1 (1%)
	<i>White - Irish</i>	3 (2%)	<i>Asian or Asian British - other</i> 0 (0%)
	<i>White - other</i>	7 (4%)	<i>Mixed race - white and black Caribbean</i> 9 (6%)
	<i>Black or black British - Caribbean</i>	14 (9%)	<i>Mixed race - white and black African</i> 0 (0%)
	<i>Black or black British - African</i>	5 (3%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	1 (1%)	<i>Mixed race - other</i> 0 (0%)
	<i>Asian or Asian British - Indian</i>	0 (0%)	<i>Arab</i> 0 (0%)
	<i>Asian or Asian British - Pakistani</i>	2 (1%)	<i>Other ethnic group</i> 3 (2%)
	<i>Asian or Asian British - Bangladeshi</i>	1 (1%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	<i>Yes</i>		8 (5%)
	<i>No</i>		151 (95%)
Q1.10	What is your religion?		
	<i>None</i>	67 (41%)	<i>Hindu</i> 0 (0%)
	<i>Church of England</i>	37 (23%)	<i>Jewish</i> 0 (0%)
	<i>Catholic</i>	21 (13%)	<i>Muslim</i> 16 (10%)
	<i>Protestant</i>	1 (1%)	<i>Sikh</i> 0 (0%)
	<i>Other Christian denomination</i>	10 (6%)	<i>Other</i> 9 (6%)
	<i>Buddhist</i>	1 (1%)	
Q1.11	How would you describe your sexual orientation?		
	<i>Heterosexual/ Straight</i>		154 (99%)
	<i>Homosexual/Gay</i>		0 (0%)
	<i>Bisexual</i>		2 (1%)
Q1.12	Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs.)		
	<i>Yes</i>		40 (25%)
	<i>No</i>		121 (75%)
Q1.13	Are you a veteran (ex- armed services)?		
	<i>Yes</i>		8 (5%)
	<i>No</i>		151 (95%)
Q1.14	Is this your first time in prison?		
	<i>Yes</i>		52 (32%)
	<i>No</i>		110 (68%)
Q1.15	Do you have children under the age of 18?		
	<i>Yes</i>		87 (54%)
	<i>No</i>		75 (46%)

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>	120 (75%)
	<i>2 hours or longer</i>	33 (20%)
	<i>Don't remember</i>	8 (5%)

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>	120 (75%)
	Yes	19 (12%)
	No	18 (11%)
	Don't remember	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>	120 (75%)
	Yes	4 (2%)
	No	36 (22%)
	Don't remember	1 (1%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	105 (65%)
	No	40 (25%)
	Don't remember	16 (10%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	131 (82%)
	No	22 (14%)
	Don't remember	7 (4%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well	41 (25%)
	Well	82 (51%)
	Neither	25 (15%)
	Badly	7 (4%)
	Very badly	3 (2%)
	Don't remember	4 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (please tick all that applies to you.)	
	Yes, someone told me	119 (73%)
	Yes, I received written information	4 (2%)
	No, I was not told anything	32 (20%)
	Don't remember	7 (4%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	129 (80%)
	No	25 (16%)
	Don't remember	7 (4%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	64 (40%)
	<i>2 hours or longer</i>	90 (56%)
	Don't remember	8 (5%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	126 (78%)
	No	28 (17%)
	Don't remember	7 (4%)

Q3.3	Overall, how were you treated in reception?		
	<i>Very well</i>		33 (20%)
	<i>Well</i>		81 (50%)
	<i>Neither</i>		30 (19%)
	<i>Badly</i>		12 (7%)
	<i>Very badly</i>		4 (2%)
	<i>Don't remember</i>		2 (1%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that applies to you.)		
	<i>Loss of property</i>	38 (24%)	<i>Physical health</i> 26 (16%)
	<i>Housing problems</i>	32 (20%)	<i>Mental health</i> 42 (26%)
	<i>Contacting employers</i>	6 (4%)	<i>Needing protection from other prisoners</i> 8 (5%)
	<i>Contacting family</i>	71 (44%)	<i>Getting phone numbers</i> 51 (32%)
	<i>Childcare</i>	6 (4%)	<i>Other</i> 13 (8%)
	<i>Money worries</i>	43 (27%)	<i>Did not have any problems</i> 36 (22%)
	<i>Feeling depressed or suicidal</i>	36 (22%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	<i>Yes</i>		37 (23%)
	<i>No</i>		87 (54%)
	<i>Did not have any problems</i>		36 (23%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that applies to you.)		
	<i>Tobacco</i>		114 (71%)
	<i>A shower</i>		26 (16%)
	<i>A free telephone call</i>		46 (29%)
	<i>Something to eat</i>		111 (69%)
	<i>PIN phone credit</i>		68 (42%)
	<i>Toiletries/ basic items</i>		97 (60%)
	<i>Did not receive anything</i>		13 (8%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that applies to you.)		
	<i>Chaplain</i>		51 (33%)
	<i>Someone from health services</i>		92 (60%)
	<i>A Listener/Samaritans</i>		51 (33%)
	<i>Prison shop/ canteen</i>		27 (18%)
	<i>Did not have access to any of these</i>		38 (25%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that applies to you.)		
	<i>What was going to happen to you</i>		67 (43%)
	<i>What support was available for people feeling depressed or suicidal</i>		55 (35%)
	<i>How to make routine requests (applications)</i>		53 (34%)
	<i>Your entitlement to visits</i>		49 (32%)
	<i>Health services</i>		66 (43%)
	<i>Chaplaincy</i>		53 (34%)
	<i>Not offered any information</i>		54 (35%)
Q3.9	Did you feel safe on your first night here?		
	<i>Yes</i>		133 (83%)
	<i>No</i>		24 (15%)
	<i>Don't remember</i>		3 (2%)

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	44 (28%)
	<i>Within the first week</i>	45 (28%)
	<i>More than a week</i>	58 (36%)
	<i>Don't remember</i>	12 (8%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	44 (28%)
	<i>Yes</i>	59 (38%)
	<i>No</i>	40 (26%)
	<i>Don't remember</i>	13 (8%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	50 (33%)
	<i>Within the first week</i>	24 (16%)
	<i>More than a week</i>	68 (44%)
	<i>Don't remember</i>	11 (7%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i> N/A
	<i>Communicate with your solicitor or legal representative?</i>	16 (10%)	47 (30%)	22 (14%)	33 (21%)	23 (15%) 14 (9%)
	<i>Attend legal visits?</i>	19 (14%)	66 (47%)	21 (15%)	5 (4%)	8 (6%) 21 (15%)
	<i>Get bail information?</i>	7 (5%)	24 (17%)	27 (20%)	18 (13%)	26 (19%) 36 (26%)
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>					24 (15%)
	<i>Yes</i>					53 (34%)
	<i>No</i>					79 (51%)
Q4.3	Can you get legal books in the library?					
	<i>Yes</i>					41 (26%)
	<i>No</i>					16 (10%)
	<i>Don't know</i>					101 (64%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	65 (42%)	88 (57%)	2 (1%)		
	<i>Are you normally able to have a shower every day?</i>	135 (85%)	24 (15%)	0 (0%)		
	<i>Do you normally receive clean sheets every week?</i>	112 (74%)	33 (22%)	7 (5%)		
	<i>Do you normally get cell cleaning materials every week?</i>	71 (45%)	77 (49%)	10 (6%)		
	<i>Is your cell call bell normally answered within five minutes?</i>	25 (16%)	116 (75%)	14 (9%)		
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	86 (55%)	71 (45%)	0 (0%)		
	<i>If you need to, can you normally get your stored property?</i>	27 (17%)	86 (54%)	46 (29%)		
Q4.5	What is the food like here?					
	<i>Very good</i>					5 (3%)
	<i>Good</i>					29 (18%)
	<i>Neither</i>					35 (22%)
	<i>Bad</i>					55 (35%)
	<i>Very bad</i>					34 (22%)

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>	18 (11%)
	Yes	90 (57%)
	No	49 (31%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	78 (49%)
	No	12 (8%)
	<i>Don't know</i>	68 (43%)
Q4.8	Are your religious beliefs respected?	
	Yes	58 (37%)
	No	12 (8%)
	<i>Don't know/ N/A</i>	87 (55%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	65 (41%)
	No	10 (6%)
	<i>Don't know/ N/A</i>	83 (53%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	35 (22%)
	Very easy	22 (14%)
	Easy	39 (25%)
	Neither	16 (10%)
	Difficult	6 (4%)
	Very difficult	2 (1%)
	<i>Don't know</i>	38 (24%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?	
	Yes	107 (69%)
	No	37 (24%)
	<i>Don't know</i>	11 (7%)
Q5.2	Please answer the following questions about applications (<i>If you have not made an application please tick the 'not made one' option.</i>)	
		Not made one Yes No
	Are <i>applications</i> dealt with fairly?	17 (12%) 64 (44%) 64 (44%)
	Are <i>applications</i> dealt with quickly (within seven days)?	17 (12%) 42 (30%) 83 (58%)
Q5.3	Is it easy to make a complaint?	
	Yes	68 (45%)
	No	30 (20%)
	<i>Don't know</i>	52 (35%)
Q5.4	Please answer the following questions about complaints (<i>If you have not made a complaint please tick the 'not made one' option.</i>)	
		Not made one Yes No
	Are <i>complaints</i> dealt with fairly?	84 (58%) 16 (11%) 44 (31%)
	Are <i>complaints</i> dealt with quickly (within seven days)?	84 (57%) 12 (8%) 52 (35%)
Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	21 (15%)
	No	120 (85%)

Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?	
	<i>Don't know who they are</i>	77 (51%)
	<i>Very easy</i>	12 (8%)
	<i>Easy</i>	16 (11%)
	<i>Neither</i>	22 (15%)
	<i>Difficult</i>	11 (7%)
	<i>Very difficult</i>	12 (8%)

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.)	
	<i>Don't know what the IEP scheme is</i>	23 (15%)
	<i>Yes</i>	61 (40%)
	<i>No</i>	34 (22%)
	<i>Don't know</i>	36 (23%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)	
	<i>Don't know what the IEP scheme is</i>	23 (15%)
	<i>Yes</i>	59 (39%)
	<i>No</i>	44 (29%)
	<i>Don't know</i>	24 (16%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	<i>Yes</i>	15 (10%)
	<i>No</i>	137 (90%)
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>I have not been to segregation in the last 6 months</i>	132 (87%)
	<i>Very well</i>	2 (1%)
	<i>Well</i>	5 (3%)
	<i>Neither</i>	1 (1%)
	<i>Badly</i>	0 (0%)
	<i>Very badly</i>	12 (8%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	<i>Yes</i>	124 (81%)
	<i>No</i>	30 (19%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	<i>Yes</i>	103 (69%)
	<i>No</i>	47 (31%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	<i>Yes</i>	51 (33%)
	<i>No</i>	103 (67%)

Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	14 (9%)
	<i>Never</i>	28 (18%)
	<i>Rarely</i>	35 (23%)
	<i>Some of the time</i>	42 (27%)
	<i>Most of the time</i>	27 (18%)
	<i>All of the time</i>	7 (5%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	89 (57%)
	<i>In the first week</i>	37 (24%)
	<i>More than a week</i>	13 (8%)
	<i>Don't remember</i>	16 (10%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	89 (57%)
	<i>Very helpful</i>	18 (12%)
	<i>Helpful</i>	35 (22%)
	<i>Neither</i>	5 (3%)
	<i>Not very helpful</i>	4 (3%)
	<i>Not at all helpful</i>	5 (3%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	<i>Yes</i>	63 (41%)		
	<i>No</i>	92 (59%)		
Q8.2	Do you feel unsafe now?			
	<i>Yes</i>	25 (17%)		
	<i>No</i>	126 (83%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that applies to you.)			
	<i>Never felt unsafe</i>	92 (61%)	<i>At meal times</i>	9 (6%)
	<i>Everywhere</i>	17 (11%)	<i>At health services</i>	7 (5%)
	<i>Segregation unit</i>	11 (7%)	<i>Visits area</i>	13 (9%)
	<i>Association areas</i>	16 (11%)	<i>In wing showers</i>	16 (11%)
	<i>Reception area</i>	9 (6%)	<i>In gym showers</i>	6 (4%)
	<i>At the gym</i>	5 (3%)	<i>In corridors/stairwells</i>	13 (9%)
	<i>In an exercise yard</i>	17 (11%)	<i>On your landing/wing</i>	22 (15%)
	<i>At work</i>	7 (5%)	<i>In your cell</i>	13 (9%)
	<i>During movement</i>	16 (11%)	<i>At religious services</i>	1 (1%)
	<i>At education</i>	6 (4%)		
Q8.4	Have you been victimised by other prisoners here?			
	<i>Yes</i>	49 (31%)		
	<i>No</i>	107 (69%)		

Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that applies to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	17 (11%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	11 (7%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	21 (13%)
	<i>Having your canteen/property taken</i>	14 (9%)
	<i>Medication</i>	7 (4%)
	<i>Debt</i>	5 (3%)
	<i>Drugs</i>	5 (3%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	5 (3%)
	<i>Your nationality</i>	4 (3%)
	<i>You are from a different part of the country than others</i>	8 (5%)
	<i>You are from a traveller community</i>	4 (3%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	6 (4%)
	<i>You have a disability</i>	9 (6%)
	<i>You were new here</i>	12 (8%)
	<i>Your offence/ crime</i>	9 (6%)
	<i>Gang related issues</i>	11 (7%)
Q8.6	Have you been victimised by staff here?	
	Yes	43 (27%)
	No	114 (73%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that applies to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	19 (12%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	6 (4%)
	<i>Sexual abuse</i>	3 (2%)
	<i>Feeling threatened or intimidated</i>	10 (6%)
	<i>Medication</i>	7 (4%)
	<i>Debt</i>	3 (2%)
	<i>Drugs</i>	5 (3%)
	<i>Your race or ethnic origin</i>	4 (3%)
	<i>Your religion/religious beliefs</i>	3 (2%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	10 (6%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	1 (1%)
	<i>Your age</i>	6 (4%)
	<i>You have a disability</i>	6 (4%)
	<i>You were new here</i>	10 (6%)
	<i>Your offence/ crime</i>	8 (5%)
	<i>Gang related issues</i>	4 (3%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	92 (66%)
	Yes	10 (7%)
	No	37 (27%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	21 (14%)	16 (11%)	40 (27%)	11 (7%)	39 (26%)	22 (15%)
	The nurse	15 (10%)	34 (23%)	64 (44%)	11 (8%)	19 (13%)	3 (2%)
	The dentist	36 (24%)	7 (5%)	11 (7%)	6 (4%)	28 (19%)	59 (40%)
Q9.2	What do you think of the quality of the health service from the following people?						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	28 (19%)	19 (13%)	45 (30%)	15 (10%)	26 (17%)	17 (11%)
	The nurse	22 (15%)	28 (19%)	61 (41%)	17 (11%)	13 (9%)	7 (5%)
	The dentist	64 (45%)	9 (6%)	14 (10%)	13 (9%)	22 (15%)	21 (15%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						19 (13%)
	<i>Very good</i>						11 (7%)
	<i>Good</i>						52 (35%)
	<i>Neither</i>						21 (14%)
	<i>Bad</i>						33 (22%)
	<i>Very bad</i>						13 (9%)
Q9.4	Are you currently taking medication?						
	<i>Yes</i>						87 (57%)
	<i>No</i>						65 (43%)
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>						65 (43%)
	<i>Yes, all my meds</i>						12 (8%)
	<i>Yes, some of my meds</i>						18 (12%)
	<i>No</i>						57 (38%)
Q9.6	Do you have any emotional or mental health problems?						
	<i>Yes</i>						63 (43%)
	<i>No</i>						85 (57%)
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>						85 (57%)
	<i>Yes</i>						16 (11%)
	<i>No</i>						49 (33%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	<i>Yes</i>	47 (31%)
	<i>No</i>	106 (69%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	<i>Yes</i>	35 (24%)
	<i>No</i>	113 (76%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	25 (17%)
	Easy	18 (12%)
	Neither	11 (7%)
	Difficult	9 (6%)
	Very difficult	8 (5%)
	Don't know	80 (53%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	9 (6%)
	Easy	9 (6%)
	Neither	9 (6%)
	Difficult	13 (9%)
	Very difficult	17 (11%)
	Don't know	94 (62%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	8 (5%)
	No	142 (95%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	9 (6%)
	No	142 (94%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	97 (65%)
	Yes	33 (22%)
	No	19 (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>	113 (76%)
	Yes	22 (15%)
	No	13 (9%)
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>	106 (74%)
	Yes	30 (21%)
	No	7 (5%)

Section 11: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	23 (15%)	14 (9%)	46 (30%)	14 (9%)	36 (24%)	18 (12%)
	Vocational or skills training	53 (37%)	7 (5%)	32 (22%)	13 (9%)	26 (18%)	13 (9%)
	Education (including basic skills)	39 (27%)	16 (11%)	46 (32%)	15 (10%)	17 (12%)	13 (9%)
	Offending behaviour programmes	67 (46%)	5 (3%)	20 (14%)	16 (11%)	17 (12%)	20 (14%)
Q11.2	Are you currently involved in the following? (Please tick all that applies to you.)						
	<i>Not involved in any of these</i>					59 (41%)	
	Prison job					73 (51%)	
	Vocational or skills training					8 (6%)	
	Education (including basic skills)					25 (17%)	
	Offending behaviour programmes					5 (3%)	

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	44 (34%)	33 (26%)	34 (26%)	18 (14%)
	Vocational or skills training	63 (55%)	22 (19%)	16 (14%)	14 (12%)
	Education (including basic skills)	58 (47%)	36 (29%)	16 (13%)	13 (11%)
	Offending behaviour programmes	63 (58%)	16 (15%)	17 (16%)	13 (12%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				28 (19%)
	<i>Never</i>				41 (28%)
	<i>Less than once a week</i>				40 (27%)
	<i>About once a week</i>				34 (23%)
	<i>More than once a week</i>				4 (3%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				59 (41%)
	<i>Yes</i>				48 (33%)
	<i>No</i>				38 (26%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				30 (20%)
	<i>0</i>				38 (26%)
	<i>1 to 2</i>				34 (23%)
	<i>3 to 5</i>				39 (27%)
	<i>More than 5</i>				6 (4%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				21 (14%)
	<i>0</i>				16 (11%)
	<i>1 to 2</i>				38 (25%)
	<i>3 to 5</i>				40 (27%)
	<i>More than 5</i>				35 (23%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				7 (5%)
	<i>0</i>				7 (5%)
	<i>1 to 2</i>				42 (29%)
	<i>3 to 5</i>				53 (37%)
	<i>More than 5</i>				36 (25%)
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>				36 (25%)
	<i>2 to less than 4 hours</i>				36 (25%)
	<i>4 to less than 6 hours</i>				22 (15%)
	<i>6 to less than 8 hours</i>				20 (14%)
	<i>8 to less than 10 hours</i>				10 (7%)
	<i>10 hours or more</i>				13 (9%)
	<i>Don't know</i>				9 (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?	
	Yes	48 (33%)
	No	96 (67%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	82 (57%)
	No	62 (43%)
Q12.3	Have you had any problems getting access to the telephones?	
	Yes	50 (34%)
	No	95 (66%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	32 (22%)
	<i>Very easy</i>	20 (14%)
	<i>Easy</i>	37 (26%)
	<i>Neither</i>	12 (8%)
	<i>Difficult</i>	15 (10%)
	<i>Very difficult</i>	25 (17%)
	<i>Don't know</i>	4 (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>	81 (52%)
	Yes	39 (25%)
	No	36 (23%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (please tick all that applies to you.)	
	<i>Not sentenced/ NA</i>	117 (75%)
	<i>No contact</i>	17 (11%)
	<i>Letter</i>	11 (7%)
	<i>Phone</i>	5 (3%)
	<i>Visit</i>	13 (8%)
Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	29 (21%)
	No	112 (79%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	81 (52%)
	Yes	15 (10%)
	No	59 (38%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	140 (89%)
	<i>Very involved</i>	3 (2%)
	<i>Involved</i>	6 (4%)
	<i>Neither</i>	3 (2%)
	<i>Not very involved</i>	2 (1%)
	<i>Not at all involved</i>	3 (2%)

Q13.6	Who is working with you to achieve your sentence plan targets? (please tick all that applies to you.)			
	<i>Do not have a sentence plan/ not sentenced</i>			140 (90%)
	<i>Nobody</i>			4 (3%)
	<i>Offender supervisor</i>			5 (3%)
	<i>Offender manager</i>			4 (3%)
	<i>Named/ personal officer</i>			1 (1%)
	<i>Staff from other departments</i>			4 (3%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?			
	<i>Do not have a sentence plan/ not sentenced</i>			140 (90%)
	<i>Yes</i>			5 (3%)
	<i>No</i>			4 (3%)
	<i>Don't know</i>			7 (4%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?			
	<i>Do not have a sentence plan/ not sentenced</i>			140 (89%)
	<i>Yes</i>			4 (3%)
	<i>No</i>			4 (3%)
	<i>Don't know</i>			9 (6%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?			
	<i>Do not have a sentence plan/ not sentenced</i>			140 (89%)
	<i>Yes</i>			3 (2%)
	<i>No</i>			4 (3%)
	<i>Don't know</i>			10 (6%)
Q13.10	Do you have a needs based custody plan?			
	<i>Yes</i>			12 (8%)
	<i>No</i>			58 (40%)
	<i>Don't know</i>			75 (52%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?			
	<i>Yes</i>			14 (10%)
	<i>No</i>			125 (90%)
Q13.12	Do you know of anyone in this prison who can help you with the following on release? (please tick all that applies to you.)			
		<i>Do not need help</i>	<i>Yes</i>	<i>No</i>
	Employment	41 (30%)	24 (17%)	73 (53%)
	Accommodation	41 (29%)	34 (24%)	66 (47%)
	Benefits	36 (26%)	35 (25%)	67 (49%)
	Finances	43 (33%)	13 (10%)	75 (57%)
	Education	46 (35%)	17 (13%)	69 (52%)
	Drugs and alcohol	53 (39%)	38 (28%)	44 (33%)
Q13.13	Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?			
	<i>Not sentenced</i>			81 (54%)
	<i>Yes</i>			30 (20%)
	<i>No</i>			38 (26%)

Main comparator and comparator to last time



Prisoner survey responses HMP Bristol 2014

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

Key to tables

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Number of completed questionnaires returned		162	5788	162	177
SECTION 1: General information					
1.2	Are you under 21 years of age?	6%	6%	6%	7%
1.3	Are you sentenced?	49%	67%	49%	57%
1.3	Are you on recall?	15%	9%	15%	11%
1.4	Is your sentence less than 12 months?	21%	20%	21%	21%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	3%	1%	2%
1.5	Are you a foreign national?	12%	13%	12%	11%
1.6	Do you understand spoken English?	99%	97%	99%	99%
1.7	Do you understand written English?	99%	96%	99%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	23%	24%	23%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	5%	5%	8%
1.1	Are you Muslim?	10%	11%	10%	8%
1.11	Are you homosexual/gay or bisexual?	1%	3%	1%	2%
1.12	Do you consider yourself to have a disability?	25%	23%	25%	28%
1.13	Are you a veteran (ex-armed services)?	5%	5%	5%	6%
1.14	Is this your first time in prison?	32%	32%	32%	31%
1.15	Do you have any children under the age of 18?	54%	54%	54%	52%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	21%	21%	21%	19%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	46%	37%	46%	42%
2.3	Were you offered a toilet break?	10%	9%	10%	16%
2.4	Was the van clean?	65%	57%	65%	65%
2.5	Did you feel safe?	82%	74%	82%	80%
2.6	Were you treated well/very well by the escort staff?	76%	66%	76%	74%
2.7	Before you arrived here were you told that you were coming here?	73%	65%	73%	58%
2.7	Before you arrived here did you receive any written information about coming here?	2%	3%	2%	6%
2.8	When you first arrived here did your property arrive at the same time as you?	80%	80%	80%	77%
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	39%	42%	39%	36%
3.2	When you were searched in reception, was this carried out in a respectful way?	78%	77%	78%	77%

Main comparator and comparator to last time

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3.3	Were you treated well/very well in reception?	70%	62%	70%	60%
	When you first arrived:				
3.4	Did you have any problems?	78%	75%	78%	84%
3.4	Did you have any problems with loss of property?	24%	15%	24%	21%
3.4	Did you have any housing problems?	20%	20%	20%	22%
3.4	Did you have any problems contacting employers?	4%	5%	4%	5%
3.4	Did you have any problems contacting family?	44%	32%	44%	40%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	3%	4%	4%
3.4	Did you have any money worries?	27%	23%	27%	29%
3.4	Did you have any problems with feeling depressed or suicidal?	22%	22%	22%	22%
3.4	Did you have any physical health problems?	16%	18%	16%	18%
3.4	Did you have any mental health problems?	26%	22%	26%	23%
3.4	Did you have any problems with needing protection from other prisoners?	5%	8%	5%	9%
3.4	Did you have problems accessing phone numbers?	32%	31%	32%	36%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	30%	33%	30%	31%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	71%	82%	71%	71%
3.6	A shower?	16%	32%	16%	20%
3.6	A free telephone call?	29%	59%	29%	29%
3.6	Something to eat?	69%	73%	69%	65%
3.6	PIN phone credit?	42%	55%	42%	47%
3.6	Toiletries/ basic items?	60%	60%	60%	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?	33%	45%	33%	29%
3.7	Someone from health services?	60%	69%	60%	65%
3.7	A Listener/Samaritans?	33%	33%	33%	30%
3.7	Prison shop/ canteen?	18%	20%	18%	18%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	43%	44%	43%	35%
3.8	Support was available for people feeling depressed or suicidal?	35%	41%	35%	34%
3.8	How to make routine requests?	34%	38%	34%	34%
3.8	Your entitlement to visits?	32%	39%	32%	29%
3.8	Health services?	43%	47%	43%	45%
3.8	The chaplaincy?	34%	41%	34%	34%
3.9	Did you feel safe on your first night here?	83%	73%	83%	73%
3.10	Have you been on an induction course?	72%	76%	72%	70%

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	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	53%	53%	53%	51%
3.12	Did you receive an education (skills for life) assessment?	67%	73%	67%	69%
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%	39%	41%	42%
4.1	Attend legal visits?	61%	54%	61%	61%
4.1	Get bail information?	23%	19%	23%	20%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	34%	41%	34%	42%
4.3	Can you get legal books in the library?	26%	37%	26%	39%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	42%	53%	42%	42%
4.4	Are you normally able to have a shower every day?	85%	76%	85%	77%
4.4	Do you normally receive clean sheets every week?	74%	75%	74%	81%
4.4	Do you normally get cell cleaning materials every week?	45%	56%	45%	42%
4.4	Is your cell call bell normally answered within five minutes?	16%	30%	16%	20%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	55%	62%	55%	56%
4.4	Can you normally get your stored property, if you need to?	17%	22%	17%	14%
4.5	Is the food in this prison good/very good?	22%	21%	22%	13%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	57%	47%	57%	45%
4.7	Are you able to speak to a Listener at any time, if you want to?	49%	54%	49%	55%
4.8	Are your religious beliefs are respected?	37%	50%	37%	39%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	41%	50%	41%	41%
4.10	Is it easy/very easy to attend religious services?	39%	44%	39%	34%
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	69%	74%	69%	72%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	50%	53%	50%	35%
5.2	Do you feel applications are dealt with quickly (within seven days)?	34%	39%	34%	32%
5.3	Is it easy to make a complaint?	45%	51%	45%	47%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	27%	31%	27%	23%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	19%	29%	19%	23%
5.5	Have you ever been prevented from making a complaint when you wanted to?	15%	20%	15%	30%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	19%	20%	19%	17%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	41%	40%	42%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	43%	39%	38%

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6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	8%	10%	13%
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?	35%	36%	35%	30%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	81%	74%	81%	67%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	69%	71%	69%	65%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	33%	27%	33%	23%
7.4	Do staff normally speak to you most of the time/all of the time during association?	22%	17%	22%	13%
7.5	Do you have a personal officer?	43%	40%	43%	31%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	79%	67%	79%	65%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	41%	42%	41%	44%
8.2	Do you feel unsafe now?	17%	18%	17%	21%
8.4	Have you been victimised by other prisoners here?	31%	28%	31%	30%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	11%	12%	11%	14%
8.5	Hit, kicked or assaulted you?	7%	8%	7%	12%
8.5	Sexually abused you?	1%	2%	1%	1%
8.5	Threatened or intimidated you?	14%	15%	14%	19%
8.5	Taken your canteen/property?	9%	7%	9%	9%
8.5	Victimised you because of medication?	5%	6%	5%	6%
8.5	Victimised you because of debt?	3%	4%	3%	2%
8.5	Victimised you because of drugs?	3%	4%	3%	4%
8.5	Victimised you because of your race or ethnic origin?	4%	3%	4%	5%
8.5	Victimised you because of your religion/religious beliefs?	3%	3%	3%	5%
8.5	Victimised you because of your nationality?	3%	3%	3%	4%
8.5	Victimised you because you were from a different part of the country?	5%	4%	5%	7%
8.5	Victimised you because you are from a Traveller community?	3%	1%	3%	2%
8.5	Victimised you because of your sexual orientation?	0%	1%	0%	2%
8.5	Victimised you because of your age?	4%	2%	4%	2%
8.5	Victimised you because you have a disability?	6%	3%	6%	5%
8.5	Victimised you because you were new here?	8%	6%	8%	4%
8.5	Victimised you because of your offence/crime?	6%	6%	6%	5%
8.5	Victimised you because of gang related issues?	7%	5%	7%	4%
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	28%	30%	28%	43%
	Since you have been here, have staff:				

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8.7	Made insulting remarks about you, your family or friends?	12%	11%	12%	14%
8.7	Hit, kicked or assaulted you?	4%	5%	4%	6%
8.7	Sexually abused you?	2%	1%	2%	1%
8.7	Threatened or intimidated you?	6%	12%	6%	17%
8.7	Victimised you because of medication?	5%	5%	5%	11%
8.7	Victimised you because of debt?	2%	2%	2%	2%
8.7	Victimised you because of drugs?	3%	3%	3%	5%
8.7	Victimised you because of your race or ethnic origin?	3%	4%	3%	8%
8.7	Victimised you because of your religion/religious beliefs?	2%	4%	2%	6%
8.7	Victimised you because of your nationality?	2%	3%	2%	6%
8.7	Victimised you because you were from a different part of the country?	6%	3%	6%	4%
8.7	Victimised you because you are from a Traveller community?	1%	2%	1%	3%
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.7	Victimised you because of your age?	4%	2%	4%	3%
8.7	Victimised you because you have a disability?	4%	3%	4%	6%
8.7	Victimised you because you were new here?	6%	5%	6%	3%
8.7	Victimised you because of your offence/crime?	5%	5%	5%	4%
8.7	Victimised you because of gang related issues?	3%	3%	3%	3%
For those who have been victimised by staff or other prisoners:					
8.8	Did you report any victimisation that you have experienced?	21%	33%	21%	30%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	38%	22%	38%	27%
9.1	Is it easy/very easy to see the nurse?	67%	45%	67%	63%
9.1	Is it easy/very easy to see the dentist?	12%	9%	12%	7%
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?	52%	40%	52%	34%
9.2	The nurse?	71%	52%	71%	64%
9.2	The dentist?	29%	30%	29%	23%
9.3	The overall quality of health services?	49%	36%	49%	32%
9.4	Are you currently taking medication?	57%	51%	57%	55%
For those currently taking medication:					
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	35%	60%	35%	38%
9.6	Do you have any emotional well being or mental health problems?	43%	37%	43%	40%
For those who have problems:					
9.7	Are you being helped or supported by anyone in this prison?	25%	44%	25%	40%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	31%	34%	31%	37%

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10.2	Did you have a problem with alcohol when you came into this prison?	24%	23%	24%	24%
10.3	Is it easy/very easy to get illegal drugs in this prison?	29%	32%	29%	43%
10.4	Is it easy/very easy to get alcohol in this prison?	12%	14%	12%	17%
10.5	Have you developed a problem with drugs since you have been in this prison?	5%	8%	5%	15%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	6%	9%	6%	14%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	63%	61%	63%	60%
10.8	Have you received any support or help with your alcohol problem while in this prison?	63%	57%	63%	68%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	81%	76%	81%	66%
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	40%	30%	40%	20%
11.1	Vocational or skills training?	27%	29%	27%	21%
11.1	Education (including basic skills)?	42%	44%	42%	26%
11.1	Offending behaviour programmes?	17%	18%	17%	16%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	51%	44%	51%	34%
11.2	Vocational or skills training?	6%	9%	6%	9%
11.2	Education (including basic skills)?	18%	25%	18%	14%
11.2	Offending behaviour programmes?	4%	7%	4%	6%
11.3	Have you had a job while in this prison?	66%	69%	66%	64%
	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%	40%	39%	46%
11.3	Have you been involved in vocational or skills training while in this prison?	45%	56%	45%	56%
	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?	43%	47%	43%	51%
11.3	Have you been involved in education while in this prison?	53%	67%	53%	59%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	55%	52%	55%	53%
11.3	Have you been involved in offending behaviour programmes while in this prison?	42%	53%	42%	49%
	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?	35%	44%	35%	43%
11.4	Do you go to the library at least once a week?	26%	30%	26%	26%
11.5	Does the library have a wide enough range of materials to meet your needs?	33%	33%	33%	32%
11.6	Do you go to the gym three or more times a week?	31%	26%	31%	14%
11.7	Do you go outside for exercise three or more times a week?	50%	39%	50%	61%
11.8	Do you go on association more than five times each week?	25%	47%	25%	12%
11.9	Do you spend ten or more hours out of your cell on a weekday?	9%	10%	9%	8%

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SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	33%	32%	33%	26%
12.2	Have you had any problems with sending or receiving mail?	57%	48%	57%	63%
12.3	Have you had any problems getting access to the telephones?	35%	34%	35%	45%
12.4	Is it easy/ very easy for your friends and family to get here?	39%	37%	39%	41%
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?	52%	60%	52%	59%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	44%	42%	44%	54%
13.2	Contact by letter?	28%	29%	28%	22%
13.2	Contact by phone?	13%	13%	13%	7%
13.2	Contact by visit?	33%	36%	33%	25%
13.3	Do you have a named offender supervisor in this prison?	21%	29%	21%	21%
For those who are sentenced:					
13.4	Do you have a sentence plan?	20%	36%	20%	23%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	53%	56%	53%	45%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	25%	45%	25%	62%
13.6	Offender supervisor?	32%	31%	32%	23%
13.6	Offender manager?	25%	27%	25%	14%
13.6	Named/ personal officer?	7%	10%	7%	0%
13.6	Staff from other departments?	25%	17%	25%	14%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	33%	56%	33%	43%
13.8	Are there plans for you to achieve any of your targets in another prison?	23%	26%	23%	52%
13.9	Are there plans for you to achieve any of your targets in the community?	18%	33%	18%	38%
13.10	Do you have a needs based custody plan?	8%	7%	8%	9%
13.11	Do you feel that any member of staff has helped you to prepare for release?	10%	12%	10%	10%
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	25%	29%	25%	21%
13.12	Accommodation?	34%	36%	34%	24%
13.12	Benefits?	34%	39%	34%	26%
13.12	Finances?	15%	24%	15%	18%
13.12	Education?	20%	29%	20%	24%
13.12	Drugs and alcohol?	46%	44%	46%	41%
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?	44%	47%	44%	47%

Diversity analysis



Key question responses (ethnicity, foreign national) HMP Bristol 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
	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		37	125	19	141
1.3	Are you sentenced?	49%	50%	69%	47%
1.5	Are you a foreign national?	25%	8%		
1.6	Do you understand spoken English?	100%	98%	90%	100%
1.7	Do you understand written English?	100%	99%	94%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			47%	19%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	7%	21%	3%
1.1	Are you Muslim?	38%	2%	16%	9%
1.12	Do you consider yourself to have a disability?	16%	27%	17%	26%
1.13	Are you a veteran (ex-armed services)?	0%	7%	6%	5%
1.14	Is this your first time in prison?	49%	27%	43%	31%
2.6	Were you treated well/very well by the escort staff?	73%	77%	74%	76%
2.7	Before you arrived here were you told that you were coming here?	67%	75%	57%	75%
3.2	When you were searched in reception, was this carried out in a respectful way?	72%	80%	67%	79%
3.3	Were you treated well/very well in reception?	73%	70%	79%	69%
3.4	Did you have any problems when you first arrived?	71%	80%	72%	78%
3.7	Did you have access to someone from health care when you first arrived here?	67%	57%	59%	59%
3.9	Did you feel safe on your first night here?	84%	83%	89%	82%
3.10	Have you been on an induction course?	91%	67%	83%	71%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	66%	33%	67%	36%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	46%	41%	50%	41%
4.4	Are you normally able to have a shower every day?	89%	84%	90%	84%
4.4	Is your cell call bell normally answered within five minutes?	20%	15%	17%	16%
4.5	Is the food in this prison good/very good?	19%	22%	6%	23%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	46%	61%	55%	57%
4.7	Are you able to speak to a Listener at any time, if you want to?	45%	51%	45%	50%
4.8	Do you feel your religious beliefs are respected?	56%	32%	33%	37%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	43%	41%	50%	39%
5.1	Is it easy to make an application?	71%	69%	50%	71%
5.3	Is it easy to make a complaint?	35%	48%	53%	44%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	35%	41%	28%	41%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	40%	13%	42%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	15%	9%	25%	8%
7.1	Do most staff, in this prison, treat you with respect?	74%	82%	55%	84%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	82%	65%	64%	69%
7.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	26%	21%	7%	24%
7.4	Do you have a personal officer?	54%	39%	50%	42%
8.1	Have you ever felt unsafe here?	37%	42%	59%	39%
8.2	Do you feel unsafe now?	17%	16%	35%	14%
8.3	Have you been victimised by other prisoners?	23%	34%	41%	31%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	9%	15%	7%	15%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	11%	2%	7%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	3%	0%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	3%	7%	2%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	7%	7%	6%
8.6	Have you been victimised by a member of staff?	26%	28%	27%	28%
8.7	Have you ever felt threatened or intimidated by staff here?	6%	7%	0%	7%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	1%	6%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	9%	0%	6%	1%
8.7	Have you been victimised because of your nationality? (By staff)	6%	1%	6%	1%
8.7	Have you been victimised because you have a disability? (By staff)	0%	5%	6%	4%
9.1	Is it easy/very easy to see the doctor?	32%	39%	22%	40%
9.1	Is it easy/ very easy to see the nurse?	74%	65%	83%	65%
9.4	Are you currently taking medication?	39%	62%	28%	61%
9.6	Do you feel you have any emotional well being/mental health issues?	38%	44%	32%	45%
10.3	Is it easy/very easy to get illegal drugs in this prison?	6%	34%	32%	29%
11.2	Are you currently working in the prison?	55%	50%	54%	50%
11.2	Are you currently undertaking vocational or skills training?	17%	3%	15%	5%
11.2	Are you currently in education (including basic skills)?	28%	15%	23%	17%
11.2	Are you currently taking part in an offending behaviour programme?	11%	2%	0%	4%
11.4	Do you go to the library at least once a week?	24%	26%	26%	26%
11.6	Do you go to the gym three or more times a week?	47%	27%	33%	30%
11.7	Do you go outside for exercise three or more times a week?	50%	50%	46%	50%
11.8	On average, do you go on association more than five times each week?	28%	24%	13%	26%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	17%	7%	13%	9%
12.2	Have you had any problems sending or receiving mail?	57%	57%	60%	58%
12.3	Have you had any problems getting access to the telephones?	25%	37%	22%	36%

Diversity Analysis



Key question responses (disability, age over 50) HMP Bristol 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		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better					
	Any percentage highlighted in blue is significantly worse					
	Any percentage highlighted in orange shows a significant difference in prisoners' background details					
	Percentages which are not highlighted show there is no significant difference					
Number of completed questionnaires returned		40	121		17	144
1.3	Are you sentenced?	50%	49%		53%	49%
1.5	Are you a foreign national?	8%	13%		0%	13%
1.6	Do you understand spoken English?	97%	99%		100%	99%
1.7	Do you understand written English?	100%	99%		100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	15%	25%		12%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	13%	3%		7%	5%
1.1	Are you Muslim?	5%	12%		7%	11%
1.12	Do you consider yourself to have a disability?				30%	25%
1.13	Are you a veteran (ex-armed services)?	10%	3%		12%	4%
1.14	Is this your first time in prison?	20%	36%		41%	31%
2.6	Were you treated well/very well by the escort staff?	65%	79%		77%	76%
2.7	Before you arrived here were you told that you were coming here?	65%	76%		53%	76%
3.2	When you were searched in reception, was this carried out in a respectful way?	65%	83%		82%	78%
3.3	Were you treated well/very well in reception?	57%	74%		89%	68%
3.4	Did you have any problems when you first arrived?	95%	73%		77%	78%
3.7	Did you have access to someone from health care when you first arrived here?	53%	62%		56%	60%
3.9	Did you feel safe on your first night here?	67%	88%		81%	83%
3.10	Have you been on an induction course?	55%	78%		88%	70%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	24%	45%		19%	43%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	22%	48%	68%	39%
4.4	Are you normally able to have a shower every day?	71%	89%	93%	84%
4.4	Is your cell call bell normally answered within five minutes?	3%	20%	18%	15%
4.5	Is the food in this prison good/very good?	16%	22%	44%	19%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	54%	58%	56%	57%
4.7	Are you able to speak to a Listener at any time, if you want to?	39%	52%	75%	46%
4.8	Do you feel your religious beliefs are respected?	30%	39%	56%	34%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	41%	41%	50%	40%
5.1	Is it easy to make an application?	65%	71%	56%	70%
5.3	Is it easy to make a complaint?	47%	44%	56%	44%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	23%	45%	32%	40%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	23%	44%	37%	39%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	19%	7%	0%	10%
7.1	Do most staff, in this prison, treat you with respect?	75%	82%	93%	79%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	66%	70%	87%	66%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	19%	23%	19%	22%
7.4	Do you have a personal officer?	41%	43%	56%	41%
8.1	Have you ever felt unsafe here?	64%	34%	32%	42%
8.2	Do you feel unsafe now?	24%	15%	19%	17%
8.3	Have you been victimised by other prisoners?	49%	26%	32%	32%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	27%	9%	25%	12%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	3%	0%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	8%	2%	7%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	3%	12%	1%
8.5	Have you been victimised because of your age? (By prisoners)	8%	3%	12%	3%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.5	Have you been victimised because you have a disability? (By prisoners)	24%	0%	12%	5%
8.6	Have you been victimised by a member of staff?	42%	23%	7%	30%
8.7	Have you ever felt threatened or intimidated by staff here?	14%	4%	7%	6%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	3%	0%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	3%	0%	2%
8.7	Have you been victimised because of your nationality? (By staff)	3%	2%	7%	1%
8.7	Have you been victimised because of your age? (By staff)	3%	4%	0%	4%
8.7	Have you been victimised because you have a disability? (By staff)	16%	0%	7%	4%
9.1	Is it easy/very easy to see the doctor?	20%	43%	44%	36%
9.1	Is it easy/ very easy to see the nurse?	54%	71%	72%	67%
9.4	Are you currently taking medication?	86%	49%	81%	54%
9.6	Do you feel you have any emotional well being/mental health issues?	79%	32%	37%	44%
10.3	Is it easy/very easy to get illegal drugs in this prison?	43%	24%	12%	31%
11.2	Are you currently working in the prison?	39%	55%	50%	51%
11.2	Are you currently undertaking vocational or skills training?	0%	7%	12%	5%
11.2	Are you currently in education (including basic skills)?	6%	21%	37%	15%
11.2	Are you currently taking part in an offending behaviour programme?	6%	3%	0%	4%
11.4	Do you go to the library at least once a week?	25%	26%	50%	23%
11.6	Do you go to the gym three or more times a week?	17%	35%	13%	32%
11.7	Do you go outside for exercise three or more times a week?	47%	51%	32%	52%
11.8	On average, do you go on association more than five times each week?	26%	25%	19%	26%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	6%	10%	7%	9%
12.2	Have you had any problems sending or receiving mail?	60%	56%	56%	58%
12.3	Have you had any problems getting access to the telephones?	53%	29%	26%	36%



Prisoner survey responses HMP Bristol 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

		Vulnerable Prisoners wing (A)	All other wings (B, C, D, E, G)
	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		30	130
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	7%
1.3	Are you sentenced?	53%	48%
1.3	Are you on recall?	13%	16%
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)?	0%	2%
1.5	Are you a foreign national?	20%	9%
1.6	Do you understand spoken English?	96%	99%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	13%	25%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	6%
1.1	Are you Muslim?	13%	9%
1.11	Are you homosexual/gay or bisexual?	4%	1%
1.12	Do you consider yourself to have a disability?	34%	23%
1.13	Are you a veteran (ex-armed services)?	14%	3%
1.14	Is this your first time in prison?	43%	29%
1.15	Do you have any children under the age of 18?	43%	57%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	17%	22%
2.5	Did you feel safe?	87%	81%
2.6	Were you treated well/very well by the escort staff?	73%	76%
2.7	Before you arrived here were you told that you were coming here?	57%	77%
2.8	When you first arrived here did your property arrive at the same time as you?	80%	80%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	43%	39%
3.2	When you were searched in reception, was this carried out in a respectful way?	64%	81%
3.3	Were you treated well/very well in reception?	77%	69%
When you first arrived:			
3.4	Did you have any problems?	86%	76%
3.4	Did you have any problems with loss of property?	28%	23%
3.4	Did you have any housing problems?	24%	19%
3.4	Did you have any problems contacting employers?	4%	4%

Key to tables

	Any percentage highlighted in green is significantly better	Vulnerable Prisoners wing (A)	All other wings (B, C, D, F, G)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.4	Did you have any problems contacting family?	59%	41%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	5%
3.4	Did you have any money worries?	24%	27%
3.4	Did you have any problems with feeling depressed or suicidal?	41%	19%
3.4	Did you have any physical health problems?	14%	17%
3.4	Did you have any mental health problems?	38%	24%
3.4	Did you have any problems with needing protection from other prisoners?	14%	3%
3.4	Did you have problems accessing phone numbers?	48%	28%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	50%	75%
3.6	A shower?	10%	17%
3.6	A free telephone call?	30%	27%
3.6	Something to eat?	60%	71%
3.6	PIN phone credit?	34%	43%
3.6	Toiletries/ basic items?	66%	58%
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?	30%	34%
3.7	Someone from health services?	47%	62%
3.7	A Listener/Samaritans?	27%	34%
3.7	Prison shop/ canteen?	13%	19%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	41%	44%
3.8	Support was available for people feeling depressed or suicidal?	35%	35%
3.8	How to make routine requests?	28%	35%
3.8	Your entitlement to visits?	28%	32%
3.8	Health services?	38%	44%
3.8	The chaplaincy?	31%	35%
3.9	Did you feel safe on your first night here?	73%	85%
3.10	Have you been on an induction course?	77%	71%
3.12	Did you receive an education (skills for life) assessment?	77%	64%
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%
4.1	Attend legal visits?	61%	60%
4.1	Get bail information?	31%	21%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	53%	30%
4.3	Can you get legal books in the library?	27%	25%

Key to tables

	Any percentage highlighted in green is significantly better	Vulnerable Prisoners wing (A)	All other wings (B, C, D, F, G)
	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 the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	57%	38%
4.4	Are you normally able to have a shower every day?	90%	84%
4.4	Do you normally receive clean sheets every week?	75%	73%
4.4	Do you normally get cell cleaning materials every week?	64%	40%
4.4	Is your cell call bell normally answered within five minutes?	17%	16%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	35%	59%
4.4	Can you normally get your stored property, if you need to?	23%	15%
4.5	Is the food in this prison good/very good?	30%	20%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	59%	56%
4.7	Are you able to speak to a Listener at any time, if you want to?	66%	46%
4.8	Are your religious beliefs are respected?	40%	35%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	60%	37%
4.10	Is it easy/very easy to attend religious services?	34%	39%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	60%	71%
5.3	Is it easy to make a complaint?	59%	42%
5.5	Have you ever been prevented from making a complaint when you wanted to?	18%	14%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	32%	15%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	35%	41%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	31%	41%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	18%	7%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	77%	81%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	83%	66%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	45%	30%
7.4	Do staff normally speak to you most of the time/all of the time during association?	27%	21%
7.5	Do you have a personal officer?	70%	36%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	55%	37%
8.2	Do you feel unsafe now?	14%	17%
8.4	Have you been victimised by other prisoners here?	50%	26%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	20%	8%
8.5	Hit, kicked or assaulted you?	13%	5%
8.5	Sexually abused you?	4%	1%
8.5	Threatened or intimidated you?	27%	10%

Key to tables

	Any percentage highlighted in green is significantly better	Vulnerable Prisoners wing (A)	All other wings (B, C, D, E, G)
	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	Taken your canteen/property?	17%	7%
8.5	Victimised you because of medication?	10%	3%
8.5	Victimised you because of debt?	4%	3%
8.5	Victimised you because of drugs?	0%	4%
8.5	Victimised you because of your race or ethnic origin?	0%	4%
8.5	Victimised you because of your religion/religious beliefs?	10%	2%
8.5	Victimised you because of your nationality?	4%	3%
8.5	Victimised you because you were from a different part of the country?	10%	4%
8.5	Victimised you because you are from a traveller community?	4%	3%
8.5	Victimised you because of your sexual orientation?	0%	0%
8.5	Victimised you because of your age?	10%	2%
8.5	Victimised you because you have a disability?	17%	3%
8.5	Victimised you because you were new here?	13%	7%
8.5	Victimised you because of your offence/crime?	17%	3%
8.5	Victimised you because of gang related issues?	7%	7%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	30%	27%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	23%	10%
8.7	Hit, kicked or assaulted you?	4%	3%
8.7	Sexually abused you?	0%	3%
8.7	Threatened or intimidated you?	7%	6%
8.7	Victimised you because of medication?	4%	5%
8.7	Victimised you because of debt?	0%	3%
8.7	Victimised you because of drugs?	0%	4%
8.7	Victimised you because of your race or ethnic origin?	4%	3%
8.7	Victimised you because of your religion/religious beliefs?	4%	2%
8.7	Victimised you because of your nationality?	7%	1%
8.7	Victimised you because you were from a different part of the country?	10%	5%
8.7	Victimised you because you are from a traveller community?	0%	2%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	4%	3%
8.7	Victimised you because you have a disability?	4%	4%
8.7	Victimised you because you were new here?	4%	7%
8.7	Victimised you because of your offence/crime?	13%	3%
8.7	Victimised you because of gang related issues?	4%	3%

Key to tables

	Any percentage highlighted in green is significantly better	Vulnerable Prisoners wing (A)	All other wings (B, C, D, F, G)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	39%	36%
9.1	Is it easy/very easy to see the nurse?	67%	67%
9.1	Is it easy/very easy to see the dentist?	19%	10%
9.4	Are you currently taking medication?	68%	56%
9.6	Do you have any emotional well being or mental health problems?	54%	41%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	18%	33%
10.2	Did you have a problem with alcohol when you came into this prison?	22%	25%
10.3	Is it easy/very easy to get illegal drugs in this prison?	32%	28%
10.4	Is it easy/very easy to get alcohol in this prison?	21%	10%
10.5	Have you developed a problem with drugs since you have been in this prison?	7%	5%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	11%	5%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	50%	36%
11.1	Vocational or skills training?	24%	27%
11.1	Education (including basic skills)?	30%	45%
11.1	Offending Behaviour Programmes?	19%	16%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	58%	50%
11.2	Vocational or skills training?	4%	6%
11.2	Education (including basic skills)?	15%	18%
11.2	Offending Behaviour Programmes?	4%	3%
11.4	Do you go to the library at least once a week?	36%	23%
11.5	Does the library have a wide enough range of materials to meet your needs?	39%	31%
11.6	Do you go to the gym three or more times a week?	31%	30%
11.7	Do you go outside for exercise three or more times a week?	30%	54%
11.8	Do you go on association more than five times each week?	48%	20%
11.9	Do you spend ten or more hours out of your cell on a weekday?	15%	7%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	34%
12.2	Have you had any problems with sending or receiving mail?	66%	55%
12.3	Have you had any problems getting access to the telephones?	42%	33%
12.4	Is it easy/ very easy for your friends and family to get here?	46%	39%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	27%	19%
13.10	Do you have a needs based custody plan?	7%	9%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	9%