

Report on an unannounced inspection of

HMP Foston Hall

by HM Chief Inspector of Prisons

13–24 October 2014

Glossary of terms

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Crown copyright 2015

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence/> or email: psi@nationalarchives.gsi.gov.uk

Where we have identified any third party copyright material you will need to obtain permission from the copyright holders concerned.

Any enquiries regarding this publication should be sent to us at the address below or: hmiprisons.enquiries@hmiprisons.gsi.gov.uk

This publication is available for download at: <http://www.justiceinspectorates.gov.uk/hmiprisons/>

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

Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	17
Section 2. Respect	27
Section 3. Purposeful activity	41
Section 4. Resettlement	49
Section 5. Summary of recommendations and housekeeping points	59
Section 6. Appendices	67
Appendix I: Inspection team	67
Appendix II: Prison population profile	69
Appendix III: Summary of prisoner questionnaires and interviews	73

Introduction

HMP Foston Hall is a women's local prison situated near Uttoxeter that serves courts in east, west and central Midlands. Like most other women's local prisons it holds a complicated mix of prisoners, from those recently remanded in custody through to those with lengthy or indeterminate sentences. Levels of need in the population are very high, exemplified by significant mental health and self-harm concerns and nearly a third of women with a disability of some sort. Significant numbers of women reported problems with drugs, and in particular alcohol, and over a half had children under the age of 18. The findings of the inspection need to be seen in this context of diversity, risk and vulnerability.

Many women experienced long delays in courts cells after they had been dealt with and prior to their arrival at the prison. Escorts vehicles continued to be shared with male prisoners. Unlike male prisons, Foston Hall did not have a specific cut off time for new receptions, which meant women often arrived late in the evening because the prison was the last drop off point for escorts. Early days support for new prisoners was reasonable but interview facilities were limited and confidentiality was not always guaranteed. Supervision on the first night remand wing was limited and it was therefore not surprising that more women than we normally see reported feeling unsafe on their first night.

More generally, most women said they felt safe although fewer than at the last full inspection, and more women than we normally see, felt victimised by both staff and other prisoners. This was not reflected in either the number or nature of reported incidents, which were low and usually involved relatively minor disputes. However, some processes designed to keep women safe and follow up investigations were weak. A more proactive safer custody approach was being developed which in time should have a positive impact on these perceptions, and peer support was being introduced. Some good support was provided to the many women vulnerable to self-harm, but the lack of a listener scheme was a notable omission and constant watch facilities on D wing were poorly located. Some good work happened with women who had complex needs but this required better coordination to ensure all such women got the help they needed.

Security arrangements were proportionate but the positive mandatory drug testing rate was higher than we normally see, and women reported particular issues with the diversion of prescribed medications. Continuing vigilance was needed to address these challenges. Support for women with substance misuse issues was mainly good. The segregation unit environment was particularly poor but relationships and care planning were good. Disciplinary procedures were generally well managed and use of force was not high, with de-escalation being used appropriately.

Most residential accommodation was good but D wing was overcrowded and offered a poor environment for those held there. Relationships between staff and prisoners were strong and respectful, although staff felt overstretched which was having a negative impact. It was not coincidental that prisoners were experiencing a number of frustrations in daily living; the regime was being regularly curtailed and the personal officer scheme was not functioning effectively on some wings. Equality and diversity work was unsophisticated, and outcomes for women from minority groups were mixed. This had been recognised by the senior management team which was seeking to address these shortcomings. Health provision was generally good, although many women were negative about the support they received. More needed to be done to address expectations about what was possible. There was high demand for mental health provision, and most needs were being met, although primary mental health services needed to improve.

Too many women were locked up during the core day and regular shut downs of the regime were having a widespread and negative impact on levels of purposeful activity. There were insufficient activity places available, including those offering vocational training; this particularly impacted on those with longer sentences. Not all the available places were being used effectively. Both the quality

of provision and achievement success rates were variable. Access to the good library and gym was too restricted.

Resettlement work was much improved from the last inspection and offender management arrangements were better than we often see, although some elements still needed to improve. Mentoring work through the gate was well developed, but pre-release planning needed to be improved. Work with children and families remained weak, but encouragingly, a new family engagement worker was starting to have a positive impact. Some good offending behaviour programmes were offered and the recently introduced Cameo unit, which addressed personality disorder, was a good and interesting addition, although elements of this were still bedding in.

Overall Foston Hall did a reasonable job in managing its population but it was not yet as effective as some of the better women's prisons we have recently visited. The prison had a relatively new governor and management now seemed to be on a more stable footing. A number of key processes were new and not fully established, but progress was being made in most areas to improve outcomes for prisoners. The governor and her team were realistic about the challenges they faced, and had sensible and well thought out plans which, in the fullness of time, should allow the prison to catch up.

Nick Hardwick
HM Chief Inspector of Prisons

February 2015

Fact page

Task of the establishment

Foston Hall is a local women's closed establishment, which holds remand, unsentenced, short- and long-term young adults (YAs) and adult prisoners, including those serving life sentences.

Prison status

Public

Region

East Midlands

Number held

289 on 14 October 2014

Certified normal accommodation

290

Operational capacity

304

Date of last inspections (full and short follow-up)

19–22 November 2012 (short follow-up)

28 September–2 October 2009 (full follow-up)

Brief history

Foston Hall was the principle residence of five successive families for over 700 years. The hall was built in 1863 and has parts dating back to the previous century. The Prison Service acquired the hall and grounds in 1953. During its Prison Service history Foston Hall was a detention centre, an immigration centre, and finally before its closure in 1996 a satellite of HMP Sudbury. It was re-opened on 31 July 1997, following major refurbishment and building work, as a closed women's prison.

Short description of residential units

A wing – 42 prisoners, a mixture of mainly sentenced YAs and adults. It accommodates many women participating in the CAMEO intervention, part of the national women offenders' personality disorder strategy, designed for women with complex needs and personality disorders.

B wing – 42 prisoners, a mixture of mainly sentenced YAs and adults.

C wing – 41 mainly remanded YAs and adults.

D wing – dormitory accommodation for 42 adult prisoners with less than one year remaining on their sentence.

D wing annex – two gated observation cells accommodating women in crisis, separated from D wing by a locked door.

E wing – low supervision wing accommodating 21 YAs and adult sentenced prisoners, many with enhanced status, mainly in dormitories.

F wing – 52 mainly sentenced YAs and adults.

Remand wing – first night unit for 52 remand and sentenced YAs and adults; detoxification unit.

Name of governor/director

Clare Pearson

Escort contractor

GEOAmey

Health service commissioner and providers

NHS England, Derbyshire and Nottinghamshire area team (commissioner)

Derbyshire Health United (primary care services, including clinical substance misuse)

Derbyshire Healthcare Foundation Trust (secondary care mental health in-reach service)

Phoenix Futures (substance misuse services)

Derbyshire Community Healthcare Services (dental services, podiatry and physiotherapy)

Lloyds Pharmacy (pharmacy delivery and supply service)

AC Stephens (optical services)

Learning and skills providers

Milton Keynes College

Independent Monitoring Board chair

Hilary Campbell

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 inspection follows a short follow-up inspection and does not report directly on progress made against the previous recommendations.

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. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and II respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix III 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** *Women experienced delays when they were moved from court, some arriving at the prison too late in the evening. Some provision during prisoners' early days at the prison needed improvement. Most prisoners felt safe but more than usual reported victimisation. The prison's many vulnerable women generally received good care although those with complex needs required a more consistent approach. Constant watch cells were poorly located. Security was proportionate, but drugs and trading in medication created challenges. Formal disciplinary processes were used when needed but governance needed improvement and the segregation unit was very poor. Nevertheless, some good care was provided in the unit. Substance misuse support was generally sound. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S2** Many women arrived after 7pm following long waits in court, which affected the level of assessment and support that could be provided when they arrived at the prison. Reception staff were caring and friendly, but the main reception and first night interviews were not sufficiently private. Prisoners valued support from 'first nighters' (prisoner peer workers). In our survey fewer than in comparator prisons said they felt safe on their first night. Landings on the remand wing were not supervised continuously and we saw a new arrival giving away tobacco to another prisoner which was suspicious. In our survey fewer than the comparator said induction covered everything they needed to know, but we found it to be comprehensive.
- S3** In our survey, women's perceptions of safety were mostly similar to the comparator. The number of reported violent or antisocial incidents was not excessive, and most consisted of relatively minor disputes and misunderstandings. It was not clear how the different safety strategies related to one another, and this had led to an unacceptably restricted regime in one case. Investigations into incidents were not well documented, and it was not always clear whether the sanctions imposed were appropriate. Some safer custody information could have been used more proactively.
- S4** In our survey more women than in comparator prisons said that prisoners and staff had victimised them. Prisoners said that staff were 'stretched', and often did not have the time to resolve minor concerns. Some good peer support work took place. Perceptions about the value and fairness of the incentives and earned privileges scheme were similar to the comparator.
- S5** Prisoners on assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm, particularly those with more complex issues, were generally well supported, but case managers were rarely consistent. There was no active Listener scheme (through which prisoners trained by the Samaritans provide fellow prisoners with confidential emotional support). Prisoners could access Samaritans telephones, and 'distraction' boxes on wings. The constant supervision facilities in D wing annex, which were stark and unsuitable, were inappropriately located next to the segregation unit, which could be noisy. Reasonable progress was being made to implement recommendations following the Prisons and Probation Ombudsman's investigation into a death in custody in 2012.

- S6 There was no safeguarding policy, and the prison was not represented on the local adult safeguarding board. Multidisciplinary teams had developed individual care plans for some women with complex needs. However, a more consistent and coordinated approach was required to ensure all women with the most complex needs received sufficient support to improve their behaviour.
- S7 Procedural and dynamic security was proportionate and did not have an adverse impact on the regime or environment. Appropriate links had been developed between the security and other departments. Most intelligence related to drugs and trading in prescribed medication but there had been few significant finds. However, the mandatory drug testing rate was above target and in our survey more women said they had developed a problem with tradable medication than the comparator. About 36% of requested suspicion tests were not completed.
- S8 Adjudication hearings were conducted fairly. Use of force was not high, and often took place to prevent self-harm; however, governance arrangements needed to be improved. Planned use of force cases we reviewed were well managed. The segregation environment was poor, particularly the bleak exercise yard, and the location of some cells made supervision difficult. The use of, and average length of stay, in segregation were not high. The regime was basic but care plans were developed for the few problematic women who remained there longer, Relationships between staff and prisoners were good.
- S9 A comprehensive range of substance misuse group interventions was offered, focusing on harm reduction and recovery. However, waiting lists for some groups were too long. The peer support and mentoring scheme was developing well. Outcomes for the large number of women with alcohol problems were good. Clinical drug treatment was delivered in line with local protocols that appropriately focused on safety and individual needs. However, communication with women needed to be improved as many felt that the system was unfair and inconsistent.

Respect

S10 *Most living accommodation was good but D wing remained very poor and overcrowded. Women were frustrated about many aspects of everyday life in the prison. Relationships were generally strong. Some significant gaps in equality and diversity work were identified, but there were signs of improvement. Chaplaincy services were improving. Responses to complaints were reasonable but legal services were underdeveloped. Overall health services met women's needs. Food was reasonable. Women complained about delays in catalogue shop orders. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S11 Most residential accommodation was good. However, women on D wing continued to live in overcrowded rooms; some did not have toilets that were effectively screened or sufficient furniture, and a number contained offensive graffiti. There were shortages of some hygiene items. Most women had good access to hygiene facilities and laundries, but many dryers were broken. The requirement to purchase all clothing via catalogues was unfair particularly for those with limited money to spend. General applications were not available on all wings and could not be tracked. Fewer women than in comparator prisons said they received a fair or prompt response to the applications they made. There were delays in accessing stored property and, some women were frustrated with their experiences of everyday life in the prison.

- S12 In our survey most women said staff treated them respectfully and that they had a member of staff they could turn to for help if they had a problem. This was reflected in what we observed, although many staff said they felt stretched, which affected their ability to respond to prisoners' requests for support. Personal officer work was mixed; it was good on most wings but less so on the remand and D wings.
- S13 The management of equality and diversity was weak, although it had begun to improve. Consultation forums with minority groups rarely took place, but when they were held, some useful interactions took place.
- S14 The prison did not focus sufficiently on the specific needs of black and minority ethnic prisoners or support for foreign national women facing deportation who had no effective access to legal representation. Interpretation services were not always used when they were required. Some foreign national women felt isolated. A number of women with disabilities and older women spoke very well of the support they received. However, others with mobility issues could not attend education or offending behaviour courses because they took place in rooms on a second floor. Arrangements for evacuating women with disabilities in the event of an emergency were inadequate. The approach to managing women in relationships was reasonable. Work with older women and young adults was underdeveloped. A more coordinated and multidisciplinary approach would have improved support for pregnant women but antenatal care was very good.
- S15 The chaplaincy had substantial staffing and management problems, which may have explained some poor survey findings. However, the prison was addressing these difficulties and the service was improving.
- S16 Prisoners lacked confidence in the complaints process and some responses were delayed. However, replies were generally polite and respectful. Quality assurance arrangements were adequate. There was no proactive approach to bail, and legal services were underdeveloped.
- S17 The new health care representatives meeting was a positive development. In our survey, fewer women than the comparator said that access to the nurse or doctor was good. Women we spoke to said they waited too long for appointments; we found this to be true in some cases, but overall women's needs were appropriately prioritised. We observed health professionals interact well with women, although clinical treatment decisions were not always communicated clearly enough. Women with long-term conditions were well managed and antenatal care was excellent. Very few women could have their medicines in possession and too many received their medication late or missed doses; medicines' rounds were not always timed to meet therapeutic intervals. Women who needed simple pain relief overnight did not always get it.
- S18 Dental care was very good with short waiting times and excellent oral health promotion. Mental health needs were high and while the quality of support provided was good, services were stretched and too many women were referred to the in-reach team; women had insufficient access to primary mental health services or talking therapies.
- S19 The food we tasted was good. A large proportion of meals were made on the premises. Portion control on some wings needed better supervision. Women had limited opportunities to eat together or to cater for themselves. The process for ordering goods from the canteen was efficient. However, orders for some catalogue goods were delayed.

Purposeful activity

S20 *Curtailments in the regime had a significant impact on women's time out of cell. Too many women were locked up during the core day and access to outside exercise was poor. Leadership and management of learning and skills were weak but positive steps were being taken to improve them. Not all activity places were used and too many women were unemployed. There were insufficient vocational training opportunities, the quality of provision was mixed and success rates variable. Access to the library and gym was inadequate. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

- S21 With a full regime and staff in place the core day could potentially provide women with a good amount of time out of their cells. However, over the previous two months, there had been frequent curtailments which had reduced this significantly. During our inspection, for example, women were locked up for most of the time from Friday afternoon to Monday morning. Around 22% of women were locked up during core activity periods during the inspection, which was too high. Access to periods of outside exercise was poor.
- S22 The management of learning and skills and work required improvement. Action had been taken to address key issues, although the analysis and use of data to inform improvements was not sufficient. Too often, prisoners could not go to activities because of persistent staff shortages and action to address this had been slow. Self-assessment processes were generally satisfactory although Milton Keynes College's quality improvement plan was insufficiently detailed and lacked measurable outcomes. Operational management of the Offender Learning and Skills Service (OLASS) provision required improvement. Observations of teaching and learning were not carried out across all the provision. Those carried out of the OLASS provision identified staff training and developmental needs, but follow-up was inadequate.
- S23 A reasonable range of activities was available, but there were insufficient activity places for the whole population and far too many prisoners were unemployed. Although suitable procedures were in place to allocate prisoners to activities, the prison did not focus enough on ensuring sentenced prisoners were prioritised for work. The variety of education programmes and vocational training courses was adequate, but there were insufficient progression opportunities, particularly for longer-term prisoners. Not enough work was accredited.
- S24 The quality of teaching, coaching and learning was variable. In the better sessions, tutors used a good variety of teaching methods but resources and facilities for education courses were poor. In weaker sessions teaching was not challenging enough. Additional learning support had only recently been introduced. Although satisfactory, it had not yet had an impact on outcomes for learners. Satisfactory use was made of peer mentors. Good support was in place for prisoners on distance learning and Open University courses.
- S25 Success rates were inconsistent. They were particularly low in mathematics, information technology and textiles, but high in catering, warehousing and industrial cleaning. Prisoners in many vocational areas demonstrated good practical skills. The standard of work in education was mostly good. Attendance and punctuality were good in education. Some vocational training and work areas were disrupted because women had to leave so they could collect their medication.
- S26 The library was pleasant, although access was poor and sessions had been cut due to staff shortages. Prison orderlies supported staff appropriately and could gain a customer service qualification. A suitable range of books and learning materials was available and prisoners

could participate in Storybook Mums (in which prisoners record stories for their children) and Toe by Toe (a mentoring scheme to help prisoners learn to read).

- S27 Prisoners' access to the gym was poor and the system in place did not ensure it was fair or equitable. Staffing issues had also affected access, although this was being addressed. There were no data to record how many prisoners participated regularly. Links with the mental health team were productive, but those with the health care department to address the needs of prisoners who were unfit or required remedial physical education were not yet fully established. Facilities were good and well maintained. A vocational training course had begun but a wider variety of qualifications was required.

Resettlement

S28 *Strategic resettlement work was improving as was the focus on pathway provision. Offender management arrangements were generally reasonable, but some assessments were delayed. Public protection arrangements were generally good, as was support for indeterminate sentence prisoners. Some good mentoring opportunities were offered 'through the gate', but pre-release reviews needed strengthening. Children and families work was limited but improving. Support in the other resettlement pathways was reasonable and some very good programme opportunities were available. **Outcomes for prisoners were reasonably good against this healthy prison test.***

- S29 The prison had a reasonable understanding of the resettlement needs of the population. The reducing reoffending strategy described all pathways and an action plan was updated regularly. However, the strategy did not say how the prison would meet the needs of all groups of prisoners. Too few women could participate in release on temporary licence. Partnership working included some good women-specific services.
- S30 Offender supervisors (OSs) were experienced and knowledgeable but lacked regular casework supervision. The quality of offender management work was satisfactory and there was evidence that OSs had good contact with women. In our survey, prisoners were more positive than the comparator about having an allocated OS and receiving support to achieve targets. Offender assessment system documents were sometimes delayed and OSs were not always promptly notified of prisoners' multi-agency public protection levels. The identification of public protection cases was generally good, but the inter-departmental risk management team meeting did not routinely monitor the full range of issues presented by the population. Lack of access to the police national computer resulted in delays in numerous processes. Indeterminate sentence prisoners received very good support.
- S31 First night staff identified the resettlement needs of all new arrivals across most of the reducing reoffending pathways and OSs made referrals to relevant agencies. There was no systematic pre-release review of all women's resettlement needs. Some good mentoring services were provided 'through the gate'.
- S32 Personal officers provided women with support to maintain contact with their families, although women in the remand and D wings were much less positive in our survey about support. A family engagement worker had started work shortly before the inspection so it was too early judge what impact they were making. There were not enough family days. The visitors' centre was good and visits were reasonably well managed; however, women, particularly those who were pregnant, should not be prevented from accessing a toilet during visits. The number of phones on some wings was not sufficient and in our survey 33% of women said they had trouble accessing phones, more than the comparator.

- S33 Services for women who had experienced domestic violence or who had been involved in prostitution were well advertised, although some aspects of the former were still in development. There was some good input from specialist community based organisations. There was limited understanding of concerns related to human trafficking and better identification and referral mechanisms were needed.
- S34 The number of women released with no fixed accommodation was small. However, we were concerned about the level of supervision and oversight provided for the peer worker responsible for much of this work. Arrangements for resettlement into education, training and work were reasonably good and advice and guidance were good. Links with employers were underdeveloped. Prisoners received some positive assistance with job applications and CV writing.
- S35 Health and substance misuse support on release was appropriate. A group that raised awareness of the effects of addiction on families was facilitated. Help to enable women to maintain benefits and address debt was good. A new initiative was in place to assist women in opening bank accounts.
- S36 Overall, women had good access to offending behaviour programmes and one-to-one work to reduce reoffending and manage the risk of serious harm. The CAMEO Unit provided women with personality disorders with an excellent opportunity to address their risks. However, while integration with mental health services was good, coordination with the wings where women lived needed improvement before it could start to realise its aims.

Main concerns and recommendations

- S37 Concern: Women with complex needs and challenging behaviour who could not be managed in the mainstream prison location were often held in the segregation unit or the adjacent D wing annex. They were unsuitable because they could not provide the more specialist, supportive and caring environment that these women required.

Recommendation: There should be a specialist, therapeutic environment to support the care of all women with complex needs and those at acute risk of suicide and self-harm.

- S38 Concern: Many of the rooms on D wing were overcrowded and conditions were unacceptable.

Recommendation: The population on D wing should be reduced and the environment and facilities improved so that women can live in decent and properly equipped accommodation.

- S39 Concern: Even if all activity places had been used efficiently, there were still not enough to occupy the whole population. Staffing shortages were affecting a number of areas and adding to the shortfall.

Recommendation: The prison should have enough full-time activity places for the population.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Escort arrangements were reasonable overall, but many women waited a long time in court cells and arrived at the prison late.*

I.2 Escort vans were reasonably clean and carried appropriate supplies, but had some offensive graffiti; restraints were used proportionately and journey times were not excessive. However, women routinely travelled in vans with male prisoners, and many waited a long time in court, often arriving at the prison after 7pm, frequently because their vehicle stopped en route to deliver the men to other prisons. Late arrival times affected the level of assessment and support newly arrived prisoners received on their first night.

I.3 Appropriate escort vehicles were generally used to transport women to the prison. However, one pregnant woman who had finished in court by 4pm did not arrive at the prison until 10.30pm, because the escort contractor could not provide a suitable vehicle more promptly.

I.4 Very few women received any information about the prison before they arrived to reassure them about what to expect, and they had not always been given sufficient notice of their transfer.

Recommendations

I.5 **Women should be held in court cells for the minimum possible period and arrive at the prison early enough for their immediate needs to be met and for them to settle in on the first night unit before lock up.**

I.6 **Men and women should be transported separately.**

Housekeeping point

I.7 Women should be given information about the prison before they arrive.

Early days in custody

Expected outcomes:

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

- 1.8** *Reception staff were friendly, but the main reception and first night interviews were not sufficiently private, and some women lacked basic items. Women valued support from prisoner peer workers, but in our survey fewer than in comparator prisons said they felt safe on their first night. Induction was comprehensive, but prisoners' perceptions were poor.*
- 1.9** Reception was clean and bright and staff were caring and friendly. The waiting room had displays of useful information, and women were dealt with promptly. Health care interviews took place in private, but the main reception interview was in an open area where there was no privacy. In addition, the interview and various property processes happened simultaneously so women had to switch their attention between different officers. Reception staff had contact details for social services to help women resolve concerns.
- 1.10** In our survey, women were more negative than those in comparator prisons about access to a meal and basic items on arrival at the prison. Frozen meals were offered in reception but the choice was limited. Women complained repeatedly about a shortage of soap, toilet roll and toothpaste. All women received £1 free telephone credit.
- 1.11** All new arrivals went to the remand wing and had a first night interview with an officer. The interview observed was conducted in the main wing office and there were frequent interruptions. Other interviews were held in the dining area, which was much more suitable. Some of the questions had already been asked in reception, which suggested a lack of coordination. Health care and reception staff, as well as the first night officer, all asked one woman about her children, which she found distressing; this also seemed like unnecessary duplication as well as being insensitive.
- 1.12** 'First nighters' (prisoner peer workers) met each woman before they were locked up for the night to sign them up to compacts and answer questions. They returned the following morning to check on their wellbeing; women appreciated their support.
- 1.13** In our survey, fewer women than in comparator prisons said they felt safe on their first night. The landings on the remand wing were not continuously supervised and women were left unlocked and alone once they had been shown their cell. We saw some women congregating around new arrivals and one giving away some of her tobacco within 10 minutes of her arrival. In our groups, some women reported feeling frightened by mentally ill women and those who self-harmed. All of this might have accounted for the survey result.
- 1.14** Induction was delivered over two days. It usually began on the day after arrival, and included a visit to the library, gym and classroom sessions. In addition, partner agencies arranged appointments with individual women as necessary. In our survey, fewer women than in comparator prisons and compared with the previous full inspection said that induction covered everything they needed to know. We found the programme comprehensive, but saw that the gym visit did not always happen; we also met women who said they had not attended the classroom sessions, despite records to the contrary. Some women with

substance misuse problems might have been attending induction before they were well enough to remember the sessions.

Recommendations

- I.15 All reception and first night interviews should be private, and enquiries should not be duplicated.**
- I.16 Newly arrived prisoners should be carefully supervised so that they do not experience intimidation on their first night.**

Housekeeping points

- I.17** All women should have a personal supply of basic toiletries on arrival.
- I.18** Women with substance misuse problems should only attend the classroom elements of induction when they are well enough to absorb the information offered.

Safe and supportive relationships

Expected outcomes:

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

I.19 *Overall, women's perceptions of safety were mostly similar to comparable prisons. The number of violent and antisocial incidents was not excessive. However, the approach to violence reduction was confusing and had led to an unacceptably restrictive regime in one case. Some investigations needed improvement. More women than in comparator prisons said staff and other prisoners had victimised them. Peer support was developing well. Some prisoners on the basic level of the incentives and earned privileges (IEP) scheme did not receive sufficient reviews.*

- I.20** In our survey, women's perceptions of safety were mostly similar to comparator prisons but poorer than at our previous full inspection. The number of reported violent or antisocial incidents was not excessive and most consisted of relatively minor disputes and misunderstandings, such as name calling and relationship issues.
- I.21** The local approach to violence reduction combined a monitoring system for tackling antisocial behaviour, the IEP scheme and a 'zero tolerance of violence' policy. There was no single up-to-date policy that explained how these systems were connected, and staff were confused. The least intrusive level of monitoring (imposed when staff had concerns about antisocial behaviour, but no firm evidence) prevented women from associating with other prisoners in cells, which was excessively restrictive.
- I.22** We found a woman on the most restrictive level of monitoring who was unemployed and refusing all exercise; she therefore had only 30 minutes out of her cell each day. Her behaviour was very problematic, but a restrictive approach was not likely to change this in the longer term unless she received appropriate support (see also section on safeguarding

(protection of adults at risk) and women with complex needs). Another woman had been on the basic regime and subject to various levels of monitoring for violence over seven months. There was little active management oversight of these decisions, and we were not assured that the restrictions imposed were always proportionate.

- I.23** Wing staff started investigations into incidents, and managers decided whether any further action or monitoring were required. It was not always clear how much investigation had taken place or what sources of evidence had been used. The security team routinely shared information about violent or antisocial incidents, which could have been used more proactively to support investigations and ensure that they took place promptly.
- I.24** In our survey, more women than the comparator said that they had been victimised by staff and other prisoners. These feelings were especially pronounced among black and minority ethnic prisoners and those with disabilities. We did not see any staff behaviour that concerned us, but some women felt the violence reduction monitoring arrangements were sometimes unfair. Women who had been to Foston Hall previously said that the prison was not as stable as it had been and that staff now had less time to resolve minor concerns.
- I.25** A violence reduction prisoner representative visited each wing at least once a week to offer advice and support. She had a level 2 peer mentoring qualification and could resolve some minor matters, dealing with 44 separate issues in August 2014. A second prisoner representative had just been appointed. In addition, a violence reduction exit survey had been reinstated in September 2014. Together, these initiatives might help monitor perceptions and prompt improvements.
- I.26** In our survey, prisoners' perceptions of the IEP scheme were similar to the comparator. There were few appeals and the proportion of prisoners on each level was broadly typical of women's establishments. Most prisoners on the basic regime had weekly reviews which gave them an opportunity to demonstrate how their behaviour had improved, but those on 'zero tolerance' basic automatically spent 28 days on the regime without a routine review.

Recommendations

- I.27** **The local approach to violence reduction should be clear to all staff and prisoners and should be proportionate.**
- I.28** **Prisoners with proven antisocial or violent behaviour should receive support to encourage them to behave acceptably.**
- I.29** **All prisoners on the basic regime should have a weekly review.**

Self-harm and suicide prevention

Expected outcomes:

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

I.30 *Support for women at risk of suicide or self-harm was generally good, and those at greatest risk were well managed. However, too many women on assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm were held in segregation, and the constant supervision cells were stark and inappropriately located. There was no Listener scheme (through which prisoners trained by the Samaritans provide fellow prisoners with confidential emotional support).*

- I.31** The safer custody team met every month; the meeting was well attended and considered an appropriate range of data relating to self-harm, violence and antisocial behaviour. However, data analysis could have been more meaningful. An action plan recorded progress against a variety of external recommendations and was up to date.
- I.32** The number of self-harm incidents was high, but a minority of women harmed themselves repeatedly: in June 2014, there were 62 self-harm incidents, but one woman was responsible for 15 of them. Most incidents involved women cutting themselves, but ligatures were also frequently used.
- I.33** Women on ACCT documents were generally well supported, but case managers were rarely consistent. Overall, most documents showed supportive interactions. Those with more complex issues were managed using an enhanced case management system, involving regular formal multidisciplinary meetings and care plans. In the six months before our inspection, women on ACCT documents had been held in segregation on 16 occasions. We could not always find suitable managerial authorisation explaining the exceptional circumstances that made segregation necessary, and were not satisfied that this was always appropriate.
- I.34** There had been no Listener scheme since 31 July 2014. The governor was working with the local Samaritans to arrange training for new volunteers, but it was not clear when the scheme would be reintroduced. Prisoners continued to have 24-hour access to Samaritans telephones on the wings, and each wing had a 'distraction box' containing puzzles and other activities to relieve distress.
- I.35** The prison had an appropriate constant supervision policy, but the facilities were located in the D wing annex, which was inappropriate. The cells, which were stark, were effectively part of the segregation unit, which could be noisy. Two cells containing cameras elsewhere in the prison were used rarely and only with prisoners' consent.
- I.36** Reasonable progress had been made in implementing Prisons and Probation Ombudsman recommendations following a self-inflicted death in custody in December 2012.

Recommendations

- I.37 Women on open ACCT documents should only be segregated in exceptional circumstances, and when necessary to ensure their own safety or the safety of others.**
- I.38 The prison should have an active Listener scheme.**

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

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.39 *The prison did not have an adult safeguarding policy, staff had little awareness and few measures were in place. Women with complex needs were managed using a multidisciplinary case management approach, but were often held in segregation.*

- I.40** There was no formal adult safeguarding policy, and, except for those in the health care department (see section on health services, governance arrangements), staff had little awareness of this area of work. The prison was not represented on the local adult safeguarding board.
- I.41** There was no longer a regular forum for identifying women with the most complex needs, and a more consistent and coordinated approach was required to ensure that all women received support to improve their behaviour (see section on safe and supportive relationships). However, several women had received care through multidisciplinary teams using an individual case management approach. We attended an enhanced case conference, and felt that good care was offered. One woman with complex needs received support from the National Offender Management Service women's group, and had a dedicated case manager.
- I.42** There was no specialist therapeutic environment for women with complex needs. They were often held either in segregation or in the adjacent constant supervision cells (see section on suicide and self-harm prevention).

Recommendation

- I.43 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes.**

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

Security

Expected outcomes:

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

I.44 *Procedural and dynamic security was proportionate but drugs and trading in medication were a challenge. The security department had good links across a range of policy forums. Dynamic security was good as was the number of security-related information reports submitted. Around a third of tests authorised on suspicion were not completed.*

- I.45** We found no significant anomalies in the physical security of the prison. Procedural security measures were proportionate and did not impact adversely on the regime. Dynamic security was good and contributed to a good flow of intelligence. The atmosphere around the prison was relaxed and did not appear to have been significantly affected by the increasing curtailment of the regime due to staffing problems (see section on time out of cell). General staff-prisoner relationships were friendly and respectful, which supported the security of the prison.
- I.46** The security department, managed effectively by a custodial manager, included a security analyst and collator; a police intelligence officer also provided support. An operational governor had overall responsibility.
- I.47** Monthly security meetings were well attended by a range of staff, who discussed a comprehensive intelligence report and reviewed threat assessments and other supporting reports, including one from the police intelligence officer. The security department had good links with other departments and staff attended a number of policy forums including the drugs strategy group and medicine management meetings.
- I.48** Six roll checks took place each day and movement slips, outlining where prisoners were going, had been introduced to enable them to move around the prison without officer escort. There was also a comprehensive searching strategy. Search dogs were used but were part of an area resource and were not always immediately available. On average, 20 target searches were completed each month; 14 full searches had been authorised in the previous four months. There was sufficient intelligence to justify them and they were appropriately authorised.
- I.49** On average 277 information reports were received every month and information was well managed and in most cases acted on promptly. Almost all searches were based on intelligence reports relating to drugs or trading in prescribed medication; 29% of reports received over the previous six months had been associated with drugs or medication. The prison, through joint work with the police, had identified women suspected of bringing in drugs by secreting them internally, which had gone undetected. In our survey the number who said that it was easy to get illegal drugs was similar to comparator prisons.
- I.50** Six people had been banned from visiting prisoners since January 2014 and four women were subject to closed visits. All related to suspected or confirmed incidents of passing on drugs or other items during visits and were based on sound intelligence or evidence. Women subject to closed visits restrictions had a review every month.

- I.51** Despite the sound approach towards security there had been few significant drug finds. The random mandatory drug testing (MDT) rates varied from 0% to 14.3% over the six months to the end of September 2014. Over two months, rates were above the target of 5%, an average over the period of 6.2%. In our survey more women than in comparator prisons said they had developed a problem with tradable medication. The strategic approach to supply reduction involved good joint working between the prison and local police. Suspicion test rates were not high at 20%, but about 36% of requested tests were not completed.

Recommendation

- I.52** All requested suspicion tests should be carried out promptly.

Discipline

Expected outcomes:

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

- I.53** *Formal disciplinary processes were used when they were required, but governance of the use of force needed improving. The environment in the segregation unit remained very poor, but some good care was nevertheless provided.*

Disciplinary procedures

- I.54** On average 64 adjudications were heard each month, which was relatively high. The adjudications room was stark and located opposite a busy office, which prisoners had to walk through to get to the exercise yard. Adjudication hearings we observed were conducted fairly, and women could challenge evidence, call witnesses or seek legal advice.
- I.55** In most cases, written records demonstrated that sufficient enquiries had been made into the circumstances of the offence. Some cases were adjourned to gather additional information, particularly relating to the women's mental health, and some adjudications were appropriately dismissed.
- I.56** In most cases punishments were in line with the published tariff. An adjudications standardisation meeting took place quarterly to consider trends and monitor common charges and punishments.

The use of force

- I.57** Overall the use of force was not high. In the previous six months it had been used on average in nine occasions per month; 44% of incidents occurred in the segregation unit. Force had been used on a small number of women more than once and was often used to prevent self-harm.
- I.58** Most use of force incidents took place spontaneously. Documentation was monitored to ensure compliance with use of force procedures and the safer custody meeting was provided with monthly reports. While we were told that incidents were discussed, not all were formally reviewed to make sure force had been used as a last resort. A quarterly use of

force committee, which had been established since our last full inspection no longer met, and more robust governance arrangements were needed.

- I.59** On average two incidents per month involved the planned use of force. They were recorded on video and the governor and her deputy reviewed them; the control and restraint coordinator was informed if there were lessons to be learned.
- I.60** Planned use of force cases that inspectors reviewed were well managed and documentation completed to a good standard. Most demonstrated that efforts had been made to de-escalate situations before force was used.

Segregation

- I.61** The segregation unit was clean but the environment was poor. The exercise yard was particularly bleak: it lacked seating, had high fences, and there was nothing to make the environment more reasonable.
- I.62** Some cells were located off the main corridor, which made them difficult to supervise. The unit had five cells with two gated cells in D wing annex, which was effectively part of the segregation unit. Holding potentially disruptive women alongside women who were ill was inappropriate.
- I.63** Segregation was not used frequently and women did not remain there for long. Over the previous nine months, an average of between five to six women per month had served an average of four days in segregation. Seven women each month had received short periods of cellular confinement as punishment, but adjudicating governors sometimes allowed women to serve this in their own cell. Only three women had been held in segregation for their own protection.
- I.64** The regime offered only the basics of a daily shower, exercise and telephone call. Efforts had been made to offer in-cell work to the small number who remained there for protracted periods.
- I.65** Most required segregation documentation was completed, and personal history sheets recorded daily interactions. There was no log to record the number of women who were subject to strip-search when they were segregated. Reviews took place within the required timeframes and care and reintegration plans were developed for the few problematic women who remained there longer.
- I.66** Eight special accommodation forms had been completed for four women in the year up to the inspection. All related to the use of strip-clothing when women were placed in gated cells to prevent self-harm. The log recording the use of special accommodation was incomplete and data on the length of time some prisoners were held there were missing. Of the records available, the longest period in special conditions was 19 hours and the shortest five hours.
- I.67** The unit was staffed mainly by women officers and interactions observed between staff and prisoners were good. Officers had not received any additional mental health training.

Recommendations

- I.68** **The prison should improve the segregation unit and the exercise yard.**

- I.69 The segregation unit regime should be improved and include some purposeful activity.**
- I.70 The prison should maintain a log of strip-searches and use of special accommodation for women in the segregation unit, including details outlining the number involved, reasons and authorisation.**

Substance misuse

Expected outcomes:

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

I.71 *Psychosocial services provided a wide range of well balanced interventions, but group work waiting lists were too long and failure-to-attend rates too high. Outcomes for women with alcohol problems were good. Prescribing was safe but the criteria for continuing opiate substitution prescriptions from the community were not well communicated to women.*

- I.72** Phoenix Futures ran the prison's psychosocial services. The substance misuse service offered a comprehensive range of interventions. Group work programmes that took into account women's release dates consisted of a good balance of harm reduction and recovery-focused subjects. However, waiting lists for some groups were too long and failure-to-attend rates too high. This was partly because daily activity allocation lists allotted some women to education and substance misuse groups at the same time.
- I.73** The peer mentoring and support scheme for all substance misuse service clients were developing well and there was a highly motivated team of nine peers.
- I.74** In our survey, 39% of women, more than the comparator of 29%, said they had arrived with an alcohol problem. Outcomes for these women had improved since the previous full inspection as a result of brief interventions from Alcoholics Anonymous groups and weekly visits from a specialist alcohol worker.
- I.75** Derbyshire Health United provided clinical services. Drug treatment was delivered in line with accepted standards and guidelines, robustly focusing on safety and women's individual needs. Those who arrived having used illicit drugs on top of prescribed opiate substitutes had their opiate substitution dose reduced and then slowly increased again over the following five days, which was at variance with the regime at other establishments. Women told us this was confusing. While we were satisfied that the relatively complex prescribing regime was appropriately based on safety, patients were not informed about the protocols and did not understand them. In particular, the criteria for continuing with prescriptions issued in the community were not well communicated. In our survey, fewer than the comparator (73% against 83%) said they had received help for a drug problem and fewer (68% compared with 84%) said the help received had been useful.

Recommendation

- I.76 Full details and an explanation of the protocols for the prescribing of opiate substitution should be made available to women on arrival at the prison.**

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** *Women were positive about most residential arrangements, but some single cells continued to be used as doubles and D wing accommodation and facilities remained poor. Donated clothing was limited and the requirement to buy clothes from catalogues was unfair. Applications could not be tracked and there was no management oversight of the process. Access to stored property was poor.*
- 2.2** Living arrangements, including cells and association areas were mostly good and women were generally positive about them; most cells and facilities were clean and private. Some cells designed for one continued to be used as doubles; some officers did not knock and wait for a response before entering.
- 2.3** Except for D and E wings, cells contained integrated showers and toilets, which were clean, although mould was evident in some showers. Women in dormitories on E wing were not locked in, and had free access to the facilities at all times.
- 2.4** In our survey, the 42 women on D wing were more negative about some aspects of everyday life than those on other wings. The wing accommodated women in a mix of cramped one-, two-, three-, four- and five-bedded rooms. All of them contained a toilet and sink, some of which were poorly screened with only a curtain and paint was peeling from the ceiling in the first floor showers. Rooms had insufficient light and there was not enough furniture; much of it had offensive graffiti. Women continued to keep personal items in lockers outside rooms, to which they had no access when locked-up.
- 2.5** The 32 women on the ground floor of D wing only had access to three showers and one telephone; another two showers and phone on the top floor were reserved for the 10 women accommodated there.
- 2.6** Most wings had an association room with a TV, board games, books and a pool table, although many had insufficient seating; women associated in each others' rooms. The association room on the remand wing was not available because it was used as a substance misuse information room.
- 2.7** Women could have sufficient quantities of in-cell personal hygiene items but were frustrated by problems obtaining everyday items such as cleaning products; on one day we saw that no protective gloves were available for wing cleaners on D wing. Prisoners and officers confirmed that there was insufficient toothpaste (see also section on early days in custody.)
- 2.8** All wings had a laundry and clothes could be washed at least once a week. A number of dryers were broken and replacements were waiting to be fitted.
- 2.9** Women could receive one parcel of clothing by post or have it brought in during a visit; after that, all clothing had to be purchased from catalogues, which women found expensive and frustrating. Women with insufficient clothing could apply for clean, donated items from the

store, which also stocked baby clothes. The choice was limited and records showed that two women had in the previous month been unable to find clothes in a suitable size.

- 2.10** Application forms were not freely available on all wings and in our survey, fewer prisoners than the comparator said that applications were dealt with fairly (58% against 66%) or promptly (31% compared with 47%). Wing officers recorded applications but not responses and there was no management oversight of the process.
- 2.11** Fewer prisoners than the comparator said they could access stored property and we found over 30 outstanding applications for access in reception, some dated three to four weeks earlier. Some had asked for items from their stored property to hand to visitors during visits that had taken place before they received it.

Recommendations

- 2.12** **Single cells should not be used as doubles.**
- 2.13** **Women should have a range of options to obtain clothing at affordable prices.**

Housekeeping points

- 2.14** Cleaning and toiletry items should be available in reasonable quantities.
- 2.15** The stock of donated clothing should offer a wider choice and a reasonable range of sizes.
- 2.16** Managers should ensure that applications receive a response within the expected timescale.

Staff-prisoner relationships

Expected outcomes:

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

2.17 *In our survey most women said that staff treated them respectfully and that they had a member of staff they could turn to for help. This was reflected in what we observed, although many staff said they felt stretched, affecting their ability to respond to prisoners' requests for support. Personal officer work was mixed.*

- 2.18** Most women in our survey were positive about relationships with staff, the vast majority stating they were respectful. Our observations confirmed this and staff from a variety of disciplines demonstrated good levels of care. However, many felt stretched, which affected their ability to interact with the women and respond promptly to some everyday concerns. Nevertheless, most women said they had a member of staff they could turn to if they had a problem.
- 2.19** Personal officer work was mixed; on most wings it was meaningful and resulted in some good individual support, for example, assistance with family and other resettlement issues. However, the personal officer scheme was not functioning on the remand wing, and was limited on D wing.

Recommendation

- 2.20** The personal officer scheme should function consistently on all wings to ensure women receive individual support with day-to-day issues; it should also focus on resettlement and offender management.

Equality and diversity

Expected outcomes:

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

- 2.21** *The strategic management of equalities was weak but there were signs of improvement. Some women with disabilities and older women spoke well of the support they received but the needs of women across all protected characteristics were not consistently met.*

Strategic management

- 2.22** The strategic management of equalities was weak and although the establishment had begun to address this, for example, through the appointment of an equalities officer earlier in the year, much more needed to be done.
- 2.23** There was no equalities policy. Action planning was poor with no task completion deadlines, and plans did not cover all protected characteristics. Actions were largely generic and not based on a needs assessment. The disability action plan, for example, made no reference to the lack of access to education and offending behaviour courses for some women with disabilities.
- 2.24** The equalities officer was often redeployed to other duties and had insufficient time to undertake equalities work. He had not received any training and there were gaps in his knowledge (see protected characteristics, paragraph 2.30).
- 2.25** The equalities action team had met three times in the six months prior to the inspection. Actions were not always clearly noted in the minutes and we noted that some issues were being raised regularly without being resolved. However, good use was made of data from the new equality monitoring tool.
- 2.26** Twenty-three discrimination incident report forms (DIRFs) had been lodged in the six months preceding the inspection. Record-keeping was poor and many investigations took too long. DIRF responses were checked by the governor and there was evidence of effective interventions as a result. The DIRF responses we sampled appeared adequate although investigations were not documented well enough to help the establishment demonstrate that outcomes were appropriate. There was no external scrutiny of DIRFs.

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

- 2.27** Consultation arrangements required improvement. Very few forums took place as scheduled, and there had been none for some groups, for example, black and minority ethnic women. However, minutes of forums that had taken place revealed some useful interaction with women. The establishment had not developed any links with external support agencies for protected groups.

Recommendation

- 2.28** **The equalities strategy and action planning should be developed through a needs analysis, better consultation with women from protected groups and links with external support agencies.**

Protected characteristics

- 2.29** In our survey black and minority ethnic women were more negative than white women in some areas, for example, they were more likely to feel other women and staff victimised them because of their race or ethnic origin. Regular forums with this group might have helped the establishment identify and address these concerns. Evidence showed that black and minority ethnic women had complained throughout the year that aspects of provision in the hair salon and canteen did not provide for their specific needs; however, the prison failed to resolve this issue.
- 2.30** Support for the 19 foreign national prisoners, most of whom were liable to deportation, was insufficient. The establishment had sought to improve contact with the Home Office, but the equalities officer was unaware of any women having had access to independent immigration legal advice. He was also unaware that some might have been entitled to legal aid and did not know about trafficking indicators or the national referral mechanism (which identifies, protects and supports victims of human trafficking).
- 2.31** Very little information was translated and the prison could only verify three instances in which telephone interpretation was used in the previous six months, although we were told it was used more often. One officer did not know what language a foreign national woman on her wing spoke and staff said they used hand gestures to communicate with a woman who spoke little English. Records also documented the use of 'gesticulation' to communicate with a woman in a medical consultation; during another consultation a prisoner of the same nationality was used to interpret confidential and sensitive medical information.
- 2.32** All foreign national women were entitled to a free monthly five-minute international phone call. Women complained that this was insufficient; it would have had little impact on some women's sense of isolation, particularly those who were held without others of the same nationality and who spoke little English.
- 2.33** Some women with disabilities and older women spoke very well of the support they received and there was evidence of some good outcomes. However, there was no paid carer scheme to assist women with disabilities. We were told there was an informal buddy scheme but none of the disabled woman we spoke to was aware of it. Some disabled and older women could not attend education or offending behaviour courses on the second floor (see also section on strategic management, paragraph 2.23).
- 2.34** Arrangements for the evacuation of women in an emergency were inadequate and required immediate attention. Wing staff did not have access to personal emergency and evacuation plans and notices in wing offices of women who required assistance in an emergency were

inaccurate. Disabled and retired older prisoners were inappropriately and unnecessarily locked in their cells during the day.

- 2.35** Over a quarter of women in our survey said they were gay or bisexual, but only one forum had been held in the year to date. There were no links with any external support groups. Nonetheless, the establishment's approach to managing relationships was appropriate.
- 2.36** Children's charity Spurgeons provided those under 24 with one-to-one mentoring (see section on reintegration planning). Otherwise, provision for both younger and older women was underdeveloped, especially in relation to dedicated activities.
- 2.37** Three mother and baby liaison officers provided pregnant women with support, particularly if they wanted to apply for a transfer to a dedicated mother and baby unit in another prison, or separate from their child at birth. Support was generally adequate, but a more coordinated multidisciplinary approach to care planning was required.
- 2.38** Antenatal care for pregnant women was very good. However, not all their day-to-day needs were met. Some said they had been told to make a formal application for orthopaedic mattresses and extra pillows, which was inappropriate.

Recommendations

- 2.39** **Provision of telephone interpreting and translated materials for foreign national women should be improved and foreign national women facing deportation should have access to independent legal advice.**
- 2.40** **Staff should receive training to identify and address the needs of isolated foreign national women, particularly those who do not speak English.**
- 2.41** **All disabled and older prisoners should have equitable access to education and offending behaviour programmes, and where necessary, be provided with a paid carer.**
- 2.42** **Staff should have access to up-to-date information on evacuation plans.**

Faith and religious activity

Expected outcomes:

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

2.43 *The chaplaincy had substantial staffing and management problems, which were reflected in some poor survey findings. However, they were being addressed and the service was improving.*

- 2.44** At the start of the year, the chaplaincy had no managing chaplain, consisted only of a small team of sessional workers and had a number of vacancies. The team struggled to provide women with adequate faith provision and essential statutory services, such as corporate worship, sometimes had to be cancelled.

- 2.45** In our survey, only 41% of women said they had access to a chaplain when they arrived, compared with 54% of women in similar prisons, while 48% of women said their religious beliefs were respected against a comparator of 60%.
- 2.46** A managing chaplain had been appointed in April 2014 and all budgeted sessional vacancies were now filled. Throughout the inspection, chaplains could be seen on the wings. A chaplain now spoke to all women on their arrival and the chaplaincy undertook other functions, such as visiting women in the segregation unit. Corporate worship was well advertised and took place as scheduled. The chapel was small, but pleasant; the multi-faith room was being refurbished during the inspection.
- 2.47** The chaplaincy journal highlighted some good examples of chaplains interacting on a one-to-one basis with women. A number of at risk women who were retired and who had disabilities and a foreign national prisoner were positive about the support they received.
- 2.48** Despite improvements, the range of services was limited, for example, the provision of classes could have been improved and the chaplaincy more involved in assessment, care in custody and teamwork (ACCT) case management reviews for prisoners at risk of suicide or self-harm and resettlement work. The prison had applied to the National Offender Management Service for a half-time Anglican chaplain post.

Recommendation

- 2.49** **There should be faith based classes.**

Housekeeping point

- 2.50** The team should routinely participate in ACCT reviews.

Complaints

Expected outcomes:

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

- 2.51** *Fewer prisoners than the comparator said complaints were dealt with fairly or quickly. Women were not well informed about different complaint processes. Quality control was adequate.*

- 2.52** In our survey, fewer women than the comparator said complaints were dealt with fairly (34% against 46%) or promptly (31% compared with 44%). In the six months to September 2014, 559 complaints had been made. While forms were readily available on wings, we found that some women were not well informed about the differences between ordinary complaints and confidential access complaints. This had delayed some final replies because some confidential access forms were returned to the complainant so they could be resubmitted on the correct form. An average of just over 4% of complaints were not dealt with within seven days. Nevertheless, replies were generally polite and respectful. Quality assurance arrangements were adequate, and a senior manager sampled 10% of complaints and gave the prisoner concerned feedback.

Legal rights

Expected outcomes:

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

2.53 *There was no proactive approach to bail. Women recalled to prison were seen promptly and arrangements for legal visits were good.*

2.54 First night officers asked prisoners about any outstanding legal issues, fines, charges or the need for legal representation. There was, however, no proactive approach to bail and no designated legal services or bail officers. Remanded women were not asked if a bail application had been considered. Only 12% of women said that it was easy to get bail information compared to 24% in comparator prisons. Bail information was included during induction, and offender supervisors (OSs) answered legal representatives' queries on the matter. Women recalled to prison were identified and seen by OSs who explained the procedures. Legal visit arrangements were good and although a policy existed about Access to Justice laptops, which provide eligible prisoners with laptop facilities to progress legal proceedings, none were available.

Recommendation

2.55 **On arrival women remanded in custody should be asked about their prospects for bail, bail information reports should be prepared in appropriate cases and contact made with legal representatives.**

Housekeeping point

2.56 Arrangements should be in place to provide women with Access to Justice laptops in accordance with the prison's Access to Justice policy 2014.

Health services

Expected outcomes:

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

2.57 *Health services were reasonable but compromised by the lack of in-possession medicines and primary mental health care. Women could see a GP or nurse promptly and care was good. Women with long-term conditions were cared for well. Antenatal care was very good and there were plans to introduce a visiting consultant. Some women missed medication doses because administration sessions clashed with work and education and women found it difficult to obtain pain relief overnight. Waiting times for the dentist were short and oral health promotion was excellent. The mental health in-reach team provided a good service, but was filling the gap left by the prison's lack of primary mental health provision; this meant women had to wait a long time to start interventions.*

Governance arrangements

- 2.58** Representation at a quarterly partnership board meeting was appropriate and included the local authority. The health needs assessment was out of date and a new one was underway. There were plans to re-tender health services in 2015. Internal governance meetings provided assurance on safe clinical services and included key stakeholders.
- 2.59** Complaints were handled well and women could make them in confidence. Clinical and serious incidents were regularly reported, and causes addressed exceptionally well.
- 2.60** Policies and protocols were up to date and included the safeguarding of adults at risk. Links with the local authority adult safeguarding board were being developed. The primary care nursing team had a good range of skills and included nurse practitioners and prescribers but there was a lack of primary mental health nurses (see section on delivery of care (mental health)). Staff training was appropriate and included the Sex Workers in Prison course. Formal clinical supervision and support was reasonable, but did not extend to all health staff.
- 2.61** The new health care representatives' meeting was a positive development and enabled women to influence health services.
- 2.62** Emergency response arrangements were reasonable. Resuscitation kits were kept in the main health care office and the remand treatment room and included an automated external defibrillator. We did not see the completed checklists but we were assured that equipment was checked twice a day and counter checked by a senior nurse every week. Health care staff had up-to-date training in basic resuscitation and the use of the defibrillator; too few prison staff had received resuscitation skills training and had no access to the equipment without a nurse being present.
- 2.63** The environment was adequate, although the reception health care room was too small. Cleaning arrangements for clinical areas were reasonable. An infection control audit had been completed and there was an action plan to address issues raised.

Recommendations

- 2.64** The health needs assessment should reflect the health requirements of the population, including their mental health needs, and be used to inform service provision.
- 2.65** Clinical supervision and support should be available to all health staff to enable them to work effectively with this demanding population.

Housekeeping point

- 2.66** Resuscitation kit should be checked regularly; checks should be logged and action taken where required.

Good practice

- 2.67** *The availability of nurse practitioners enabled women to have faster access to clinical care and a limited range of medication.*
- 2.68** *The new health care representatives' meeting was a positive development; it promoted cooperation between women and health care staff and was run in a flexible but structured way.*

Delivery of care (physical health)

- 2.69** In our survey, fewer women than in comparator prisons said it was easy to see the GP or nurse and that the quality of the GP service was good.
- 2.70** Some women waited too long to see a nurse or GP but the women's clinical needs were properly prioritised and we observed positive, respectful relationships with women and good clinical care. However, staff did not always inform women clearly enough of the reasons for their clinical and treatment decisions.
- 2.71** The regular GP was female but some locums were male. The prison planned to increase the number of GPs visiting the prison to improve waiting times and introduce a regular clinical meeting to ensure consistency.
- 2.72** Reception screening on arrival and follow-up secondary health assessments were thorough and mental health and substance use issues were identified well.
- 2.73** The internal appointment system enabled most women to make and attend their health appointments independently. Care for women with long-term conditions was good and included regular screenings and reviews. It was not always clear from records whether the risks for women who repeatedly missed appointments had been fully assessed.
- 2.74** Antenatal care was excellent – women had weekly access to a community midwife with substance use expertise and women spoke highly of their experience. However, we noted one woman on a residential wing who was not referred to hospital promptly enough when she reported pains. There were plans to introduce a visiting consultant service in conjunction with the local maternity unit.
- 2.75** A good range of primary care services included podiatry, physiotherapy and an optician. Waiting times were reasonable. Good opportunistic screening took place for sexually

transmitted diseases and blood borne viruses; women could attend a specialist sexual health clinic and there was a visiting hepatitis C service.

- 2.76** Health staff told us they used telephone interpretation when they were dealing with women with little or no spoken English. We reviewed the clinical records of one foreign national woman with some significant health issues, where both telephone and face-to-face interpretation had been used. However, on several occasions staff used a fellow prisoner to interpret, as well as web translation and hand gestures to communicate with one woman (see section on equality and diversity, recommendation 2.39).
- 2.77** External hospital appointments were not usually cancelled.

Recommendations

- 2.78 Repeated missed appointments should trigger a review and risk assessment.**
- 2.79 Pregnant women displaying any indication of labour or distress should be referred promptly to the local maternity unit for advice and possible transfer.**

Pharmacy

- 2.80** A pharmacist supervised and visited every week, supported by a lead technician and two other technicians. Medicines were administered from both the remand wing and main health care department. Registered technicians gave out both supervised and in-possession medicines. Staff confirmed women's identity, but officers' supervision was impeded by two simultaneous queues at the hatches and women congregating in a small space.
- 2.81** Very few women received their medication in possession. A 'special sick' policy (to provide immediate health treatment without an appointment) enabled nurses to give patients a limited range of simple remedies; nurse practitioners could prescribe a limited range of medication. Documents outlining patient group directions (PGDs) (which enable nurses to supply and administer prescription-only medicine) were unsigned and unauthorised. During the normal working day women could obtain simple pain relief medication, such as paracetamol under the special sick policy but they could not keep any over the counter pain relief medication in possession.
- 2.82** The timing of medication rounds meant therapeutic dose intervals were frequently not adhered to. We noted paracetamol being prescribed three times a day (where the therapeutic dose was four times a day) and night time medicine being administered too early. One patient, who was prescribed a medicine for respiratory disease that required a 12-hour dose interval, was regularly given the medicine within approximately nine hours.
- 2.83** Community prescriptions were used to ensure women had their medication covered after their release. However, we saw escort staff hold loose strips of medication unboxed in an envelope for one woman to use in court, despite her having a community prescription ready for her release. We were told that all wings had lockable cupboards and patients were responsible for the key.
- 2.84** All prescribing was for named patients on SystmOne (the electronic clinical information system) and printed copies were generated for dispensing and administration. There were some gaps in administration recording. Repeat prescriptions were well managed and patients were invited for routine reviews.

- 2.85** Stock management was reasonable and named patient medicines were appropriately stored in lockable cupboards except for some loose foils of tablets and capsules. Apart from insulin, where we noted handwritten labels, medication was correctly labelled. Fridge temperatures were not always recorded every day.
- 2.86** The controlled drug (CD) cabinet in the main pharmacy room was not fixed with rag-bolts. Medicines were transported around the prison safely and securely. A community formulary (medications used to inform prescribing) was available and protocols and procedures were up to date.
- 2.87** The medicines management meeting did not meet regularly and had been merged with the drug strategy meeting; it failed to provide appropriate clinical assurance. Systems for processing drug alerts were good and highlighted possible drug interactions. Prescribing data were reviewed regularly and some helpful audits of benzodiazepines and patients' non-attendance at medicines administration had been completed.

Recommendations

- 2.88** **Women should be appropriately risk assessed and as many as possible should have their medicines in possession.**
- 2.89** **Women should have access to appropriate pain relief during and outside health service hours.**
- 2.90** **All supervised medicines should be administered at times that reflect therapeutic dose intervals and safe administration; this should include suitable arrangements for women going to court.**
- 2.91** **The medicines management meeting should meet regularly and provide all stakeholders with assurance on all aspects of the management of medicines.**

Housekeeping points

- 2.92** Documentation outlining PGDs should be completed and signed by authorised personnel.
- 2.93** Administration charts should reflect missed doses, including the reasons.
- 2.94** All medicines should be stored in their properly labelled boxes or containers.
- 2.95** Fridge temperatures should be checked regularly and recorded.
- 2.96** CD cabinets should be fixed with rag-bolts in line with Safe Custody Regulations 1973.

Dentistry

- 2.97** Dental services were very good. A dentist visited twice a week with two dental nurses. A dental nurse triage service supported high quality referrals and nurses also provided an excellent weekly oral health promotion session. Waiting times for an initial assessment were short and treatment began within a reasonable period. Only 12 women were waiting for their first treatment appointment. The range of treatment was equivalent to the local community. The dental suite was a standalone unit with good clinical space and separate decontamination facilities. We were told that regular checks, including those carried out by

the radiological protection adviser, were up to date, but current documentation was not readily available.

Good practice

- 2.98** *Excellent dental triage and oral health promotion enabled women to have prompt clinical care and understand better their own oral and dental health.*

Delivery of care (mental health)

- 2.99** In our survey, more women than in comparator prisons (70% against 55%) said they had an emotional or mental health problem; this was also much higher than previously (36%). Primary mental health services were inadequate: one mental health nurse provided both the primary mental health and substance use services and women waited too long for interventions. An otherwise good counselling service was compromised by long waits to start therapy.
- 2.100** A pilot learning disability service provided screening for women identified as having a potential or existing learning disability, a brain injury or other neuro-developmental disorder; the specialist nurse provided education and supported staff.
- 2.101** Care for women with severe and enduring illnesses was provided by an in-reach team, including community psychiatric nurses, an occupational therapist, psychologist and psychiatrist. The quality of care was good.
- 2.102** Routine initial assessments were completed within a week and urgent referrals were prioritised within 24 hours. Initial assessments were carried out thoughtfully taking into account women's history, including disclosed trauma. Women were positive in a recent service satisfaction survey.
- 2.103** Links with the gym provided therapeutic gym sessions and women we spoke to said it really improved their wellbeing. However, women with predominantly primary care needs who did not meet the community threshold for referral were being seen by the team due to the lack of primary care services.
- 2.104** An audit of clinical diagnoses for women on the caseload between February 2013 and February 2014 showed that approximately 56% of women had a diagnosis of personality disorder, with the potential to display both self-harming and challenging behaviour. An average of 25 to 30 women were on the in-reach team caseload.
- 2.105** There was some overlap between the women seen by the in-reach team and those attending the CAMEO Unit (see section on the CAMEO Unit) and working links between the in-reach team and CAMEO staff were very good.
- 2.106** There had been four delayed Mental Health Act transfers to hospital between April 2013 and March 2014; we noted that one woman had already waited three months for a transfer.

Recommendations

- 2.107** **Primary mental health services should reflect women's needs, including ensuring that women with anxiety and depression can access talking therapies promptly.**

2.108 Transfers to hospital should be expedited to ensure women with mental health problems are cared for in an appropriate setting.

Good practice

2.109 *The pilot learning disability service meant prisoners had their learning disability needs properly identified, while staff received supported to work with the women.*

Catering

Expected outcomes:

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

2.110 *A similar number of women to the comparator said the food was good or very good. Meal times were acceptable. Portion control needed greater supervision. The kitchen was clean and the working environment for kitchen workers was excellent.*

2.111 In our survey, a similar number of women to the comparator said food was good or very good. The food we tasted was good and a large amount of it was freshly prepared on the premises.

2.112 A four-week menu cycle was supplemented with meals to celebrate a range of cultural and religious festivals. Each unit had facilities for women to eat out of their cells; however, there was not enough space on the remand wing for all to be seated at once. Supervision of the servery on this wing was variable, and women complained of inconsistent portion sizes.

2.113 Meal times were appropriate during the week: women had a sandwich for lunch at midday and the hot evening meal was served between 5.30pm and 5.45pm. At weekends the evening meal was served too early at 4pm. Breakfast packs were issued with the previous day's lunch.

2.114 Wing serveries and the kitchen were clean and suitably equipped. The working environment for the team of 18 kitchen workers was excellent. Catering staff were skilled and demonstrated a caring attitude towards prisoners working in the kitchen. Women we spoke to said they felt that the kitchen was a therapeutic environment as well as a workplace. Women with special dietary needs were well catered for and liaison between the kitchen and health care staff was effective.

Recommendation

2.115 Serveries should be adequately supervised at all mealtimes to ensure equitable portion control.

Purchases

Expected outcomes:

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

2.116 *The process for ordering goods from the canteen was efficient. However, there were lengthy delays in some catalogue orders.*

2.117 The arrangements for ordering goods and ensuring women knew how much money they had in their account were reasonably efficient. Women made canteen orders every Thursday and goods were delivered on the following Tuesday. Women arriving on a Friday could place a full late canteen order and those arriving after then could purchase a basic interim reception pack.

2.118 In addition to the canteen list, goods could be ordered from a number of catalogues. Women told us there could be considerable delays in these purchases. Staff confirmed that orders could take four to six weeks to be delivered, mainly due to internal delays.

2.119 Only 29% of black and minority ethnic prisoners said the shop sold a wide enough range of goods to meet their needs compared with 59% of white prisoners and consultation with this group required improvement (see also section on equality and diversity).

Recommendation

2.120 **Goods ordered through catalogues should be delivered promptly.**

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

Women are able, and expected, to engage in activity⁴ that is likely to benefit them.

- 3.1** *Recent curtailments in the regime had a significant impact on women's time out of cell. Too many women were locked up during the core day and access to outside exercise was poor.*
- 3.2** With a full regime and staff in place the core day had the potential to offer women a good amount of time out of their cell, an estimated average of over 10 hours across seven days, according to the prison. However, throughout the year, but more significantly over the previous two months, frequent curtailments had reduced this substantially. During our inspection, for example, women were locked up for most of the period from Friday afternoon to Monday morning.
- 3.3** The reasons for the curtailments were recorded and largely attributed to staff shortages. A rota was used when deciding which wings could not have association and some efforts were made to notify women in advance of the curtailment. During our checks around 22% of women were locked up during core activity periods, which was high.
- 3.4** Access to outside exercise was poor and was not included in the core day timetable; women said it was not offered frequently and our survey results reflected this.

Recommendations

- 3.5** **Time out of cell should be improved. Women who are willing to participate in activities, but for whom there are no places available, should be unlocked during core day activity periods.**
- 3.6** **A period of exercise outside should be included in the core day and offered consistently.**

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

Learning and skills and work activities

Expected outcomes:

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

3.7 *Leadership and management of learning and skills were weak but steps were being taken to improve it. Not all activity places were used and too many women were unemployed. Some good quality work was not accredited. The quality of provision was mixed and success rates were variable. The library provided some good opportunities but access was inadequate.*

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

<i>Overall effectiveness of learning and skills and work:</i>	<i>Requires improvement</i>
<i>Achievements of prisoners engaged in learning and skills and work:</i>	<i>Requires improvement</i>
<i>Quality of learning and skills and work provision:</i>	<i>Requires improvement</i>
<i>Leadership and management of learning and skills and work:</i>	<i>Requires improvement</i>

Management of learning and skills and work

3.9 Learning and skills and work provision was appropriately informed by a detailed needs analysis. The introduction in September 2014 of a comprehensive learning and skills strategy had prompted senior staff to focus more effectively on improving the provision. However, the management of learning and skills and work required improvement, as did the education and vocational training provision provided by Milton Keynes College.

3.10 The prison's analysis and use of data to inform improvements continued to be poor. On too many occasions, prisoners were unable to access activities due to persistent staff shortages. Arrangements to address this had been slow, but several new staff had now been appointed.

3.11 Action to improve mathematics, information and communications technology (ICT) and some English modules, including the appointment of a full-time mathematics tutor, were appropriate. However, they had not yet led to better outcomes for learners.

3.12 Self-assessment processes were generally satisfactory, although the prison self-assessment report had not made sufficient judgements on the impact of the quality of provision or outcomes for prisoners. Milton Keynes College's report on its own provision was clearly written and appropriately evaluated the service, but the quality improvement plan was insufficiently detailed and lacked measurable outcomes.

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

- 3.13** Milton Keynes College's lesson observation process was well developed and clearly identified improvements that were required in teaching learning and assessment, although these had not always been followed-up or addressed.
- 3.14** Good teaching, learning and assessment practice was routinely shared at regular standardisation and team meetings, but had failed to provide consistently good teaching and learning. Observations of teaching, learning and assessment were not carried out across all the provision.
- 3.15** The quality improvement group had not met over the previous six months, although the governor and senior managers were keen to restart meetings. Minutes from previous meetings showed that there had been an insufficient focus on improving the quality of provision and too much emphasis on operational issues.
- 3.16** Pay rates were clearly matched to roles and responsibilities and did not disadvantage prisoners attending courses. Promotion of safeguarding learners at risk, and equality and diversity were reasonable and staff had been appropriately trained. A potential health and safety issue identified during the inspection was swiftly addressed. Respect and rapport between tutors, instructors and learners were very good.

Recommendations

- 3.17** **Managers should ensure that accurate data are collected, effectively analysed and used to identify trends and emerging issues to inform improvements.**
- 3.18** **The prison self-assessment report should better identify strengths and areas for improvement.**
- 3.19** **Observations of teaching and learning should be undertaken across all provision.**
- 3.20** **The quality improvement group should be re-established and should monitor and manage effectively improvements in the quality of learning and skills.**

Provision of activities

- 3.21** Approximately 160 prisoners were enrolled on education and/or vocational training courses, the majority of which were part time. There were too few full-time activity places for the population and a large proportion of prisoners (around 14%), most of them sentenced women, were unemployed.
- 3.22** Prisoners were allocated to work and activities in line with their sentence plans and induction information, but sentenced prisoners were not sufficiently prioritised for work. Although the majority of prisoners were promptly allocated to activities, a small proportion of existing places were not filled.
- 3.23** The range and quality of accredited vocational training was satisfactory. The introduction of shorter modular courses provided short-term prisoners and women on remand with good opportunities. However, there were too few options for more able prisoners or those with long-term sentences, as most education and training courses were limited to level 1, and a small proportion to level 2.

- 3.24** Job-related courses were provided in industrial cleaning, hairdressing, beauty therapy, retail, customer service, horticulture and waste management and take-up of places was good. A good introductory course in catering was offered, but there was no accreditation for prisoners who displayed high quality food production skills in the main kitchen and the Fosta Coffee shop, and good animal husbandry skills in the animal sanctuary.
- 3.25** An appropriate variety of education courses were provided with qualifications available in subjects such as art, information technology (IT), English for speakers of other languages (ESOL), and English and mathematics. Access to education courses for the small proportion of prisoners with restricted mobility was poor. Although those affected could be provided with education in their cell, this had not taken place due to staff shortages (see section on equality and diversity, recommendation 2.41).

Recommendations

- 3.26** **A more suitable range of learning opportunities should be developed for more able and longer-term prisoners and sentenced prisoners should be prioritised.**
- 3.27** **Job-related courses should be introduced in work areas where no vocational qualifications are currently available.**

Quality of provision

- 3.28** The quality of teaching, learning and assessment was mixed, although no inadequate teaching was observed. Teaching staff were appropriately qualified but resources and classroom facilities in education were poor, with, for example, some broken electronic whiteboards.
- 3.29** In the better sessions teachers used a wide variety of teaching methods to suit learners' needs and abilities; in weaker sessions teaching was not challenging enough. However, insufficient use was made of IT to stimulate learning, and in a small number of sessions learners' work was not effectively marked. Resources for vocational training courses were generally good.
- 3.30** Additional learning support had only been introduced within the previous month and included support in English and mathematics for learners on education courses; while it was satisfactory, it had not yet had an impact on outcomes for learners. Prisoners on the wings and those in work or vocational training received insufficient support. The approximately 20 learners on Open University and distance learning courses received good support from staff from Milton Keynes College and the library. Satisfactory use was made of peer mentors.
- 3.31** Induction to learning and skills was satisfactory and staff from Milton Keynes College saw most women on time. Staff from the National Careers Service (NCS) provided prisoners with good advice and guidance during induction and prior to being discharged.
- 3.32** The initial assessment of prisoners' English and mathematics support needs were thorough and, along with clear action plans, were used appropriately to inform prisoners' placement at activities.

Recommendations

- 3.33 Teaching, learning and assessment should be consistently good and teachers should have access to better resources and facilities.**
- 3.34 Prisoners on wings, at work and on vocational training courses should receive appropriate additional learning support.**

Education and vocational achievements

- 3.35** Outcomes for learners were not consistently good on all courses. Success rates were high on most vocational courses, including catering, warehousing and industrial cleaning. However, in education they were more variable: on some courses they were high, but on others, such as in mathematics, ICT, textiles and creative crafts, they were low. Achievements on English courses were reasonable overall but low on some modules.
- 3.36** Learners used safe working practices and made good progress in vocational training, developing practical skills, and the standard of work in education was mostly good. Punctuality and attendance were also mostly good but vocational training and work areas were often disrupted because prisoners needed to leave so they could collect their medication. The prison was working to ensure appointments were timetabled more appropriately where possible.

Recommendation

- 3.37 Success rates on courses should be improved where necessary.**

Housekeeping point

- 3.38** Arrangements for prisoners to collect medication should be changed to reduce disruptions in vocational training and work.

Library

- 3.39** The library was pleasant and spacious, had adequate seating areas and tables for study and access to computers. A part-time librarian and three part-time library assistants employed by Derbyshire County Council ran the facilities; three prisoner library orderlies had all completed customer service qualifications.
- 3.40** Staffing hours over the previous two years had been reduced, which had affected prisoners' access to the library. Delays in filling vacant library assistant posts had further cut women's access, and the library was closed on Wednesdays and most weekends. An out-of-date paper-based system was used for issuing loans to prisoners, which meant insufficient data were collected and used to monitor access for all prisoner groups.
- 3.41** The range of learning materials was good. Current legal textbooks and Prison Service Instructions were displayed prominently. Links with the national library lending service were good and the book stock was changed regularly; there was also an appropriate library loan service for requested books. A wide variety of easy-read texts was available, and the proportion of foreign language and vocational books was adequate for the population.

- 3.42** The education department regularly used the library for project work. Storybook Mums (in which prisoners record stories for their children) and the Toe by Toe mentoring scheme to help prisoners learn to read were also available. Prisoners on Open University and distance learning courses could participate in study skills sessions, which took place in the library (see section on quality of provision, paragraph 3.30).

Recommendation

- 3.43** Prisoners should have better access to the library.

Physical education and healthy living

Expected outcomes:

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

3.44 *Induction to physical education (PE) was thorough and there were good, productive links with the mental health team. However, severe staff shortages meant many sessions were cancelled and access to PE was poor and inequitable. Links with health care for remedial PE had not been developed. Promotion of healthy living was adequate. Prison orderlies were used appropriately to assist at induction and support recreational PE but vocational training was limited.*

- 3.45** A reasonable variety of recreational PE was available, including some team sports, spin classes, cardiovascular training and activities for older women. However, PE sessions were often cancelled when the facility's only PE instructor was on leave. The prison had been slow to address this severe staff shortage but a new full-time instructor started during the week of the inspection. The prison was currently advertising for a female member of staff.
- 3.46** Access to recreational PE was poorly managed. The allocation process was based on a first-come first-served basis which was open to abuse and could have led to inequality. The provision appeared to be poorly used. No data were available on the proportion of prisoners who regularly accessed the gym, although in our survey only 9% said that they went to the gym three or more times a week against a comparator of 24%.
- 3.47** Facilities were good and included a well equipped cardiovascular suite, sports hall, and outside pitches. There was also a small weights area. PE equipment was appropriately maintained. The changing room and showers were adequate but most women changed and showered on the accommodation wings. Appropriate PE kit and trainers were available for prisoners who needed it although most wore their own.
- 3.48** Women who were identified as having health problems received reasonable remedial support, although links with the health care department had not been developed. Links with the mental health team were strong and joint courses helped improve prisoners' wellbeing (see also section on delivery of care (mental health)). The few injuries that occurred were appropriately dealt with and clearly recorded.
- 3.49** Vocational courses in PE were extremely limited. Eight women were completing a level 2 qualification in nutrition and health. The PE instructor and the new member of staff were well qualified and recognised the need to introduce a range of vocational PE qualifications. Four prison orderlies were employed in the gym, although only one was qualified as a gym instructor. Prisoners received a thorough introduction to PE during their first week.

Recommendations

- 3.50** Recreational PE arrangements should be improved to ensure fair and equal access.
- 3.51** PE staff should establish stronger links with the health care department to ensure all prisoners' remedial support needs are clearly identified and met.
- 3.52** A wider variety of appropriate PE courses should be introduced to increase prisoners' opportunities for employment on release.

Housekeeping point

- 3.53** Timetabling of PE staff should be better planned to ensure minimal curtailment of recreational PE sessions.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

Women are prepared for their release back into the community and effectively helped to reduce the likelihood of reoffending. Planning for a prisoner's release or transfer starts on her arrival at the prison. Resettlement underpins the work of the whole prison, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need. Good planning ensures a seamless transition into the community.

4.1 *The strategic management of resettlement was improving. The reducing reoffending strategy did not address the needs of all groups of prisoners and was not informed by a local needs analysis. Release on temporary licence (ROTL) was underused. There were some effective links with external services, including some specifically for women.*

4.2 The prison had a reasonable understanding of the resettlement needs of the population, and the strategic management of resettlement was improving following the appointment in May 2014 of a head of reducing reoffending. The reducing reoffending strategy, published in June 2014, described the services available across all pathways and an action plan was regularly updated. Each pathway had a named lead staff member.

4.3 The strategy did not describe how the prison planned to address the needs of all groups of prisoners, and was not informed by findings from the prison's needs analysis undertaken in 2012–2013; a new survey had been completed and was awaiting analysis.

4.4 Although the prison had published a ROTL policy in April 2014, the reducing reoffending strategy did not describe how it would be used for resettlement purposes. ROTL was significantly underused. In the previous six months, a total of 153 licences had been granted for only two women, of which 151 were for working in the visitors' centre. Apart from this, one licence had been used for opening a bank account and another for enrolling at college.

4.5 Staff from partnership agencies attended monthly reducing reoffending meetings, but some key prison departments, including security, health care and the chaplaincy, were not represented.

4.6 There were some effective links with external services including services specifically for women, such as Women in Prison and Anawim (see section on reintegration planning). Outcomes for women following release were not formally monitored.

4.7 In our survey 53% of women, similar to the comparator, said they had done something, or something had happened to them to make them less likely to offend in future.

Recommendations

4.8 **The reducing reoffending strategy should be informed by a local needs analysis.**

4.9 **Resettlement ROTL should be a key part of the resettlement strategy, and appropriate use significantly increased.**

Housekeeping point

- 4.10** All key prison departments should be represented at reducing reoffending meetings.

Offender management and planning

Expected outcomes:

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

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

4.11 *All offender supervisors (OSs) were seconded from the National Probation Service. They were experienced but lacked formal casework supervision. Women were motivated to achieve sentence plan objectives. Offender assessment system (OASys) documents were generally satisfactory but further improvements were needed. The lack of direct access to the police national computer (PNC) caused delays. The inter-departmental risk management team (IDRMT) did not monitor all multi-agency public protection arrangement (MAPPA) and high risk of harm cases. Women were generally able to make progressive moves. New support services had recently been introduced for indeterminate sentence prisoners, which many appreciated.*

- 4.12** The National Probation Service seconded six OSs to the offender management unit (OMU) – two probation officers and four probation service officers. Probation officers were responsible for all lifers and prisoners on indeterminate sentences for public protection. A uniformed prison officer covered a vacant OS role, although redeployment reduced his effectiveness.
- 4.13** Supervisors were experienced and knowledgeable, but lacked effective casework supervision. The number of experienced case administrators had been cut from four to two during the year resulting in heavy workloads.
- 4.14** All women were allocated to an OS, but remanded women were seen on application only. Comments in P-Nomis (the Prison Service IT system) demonstrated that OSs, psychologists and other prison staff worked well with the women on their sentence plans, and women were well motivated. In our survey, women were more positive than the comparator about having an allocated supervisor and receiving support to achieve their sentence plan objectives.
- 4.15** Sixty-eight per cent of women in our survey said they had an offender manager, similar to the comparator. In response to the government's Transforming Rehabilitation programme, (which is changing the way offenders are managed in the community) many cases had been transferred from one offender manager in the community to another and OMU staff had difficulty identifying which offender manager was responsible for which prisoner.
- 4.16** There were 17 outstanding OASys assessments, for which the prison was responsible, which was lower than in April 2014.
- 4.17** Offender management work and OASys documents were generally satisfactory. However, the assessment of prisoners' likelihood of reoffending needed improvement and only three (25%) of the 12 cases sampled had received a prompt or sufficient assessment. The prison did not have direct access to the PNC to obtain information on previous convictions, and relied on HMP Nottingham, with whom it had an agreement, to supply it, causing delays. Case samples contained no Crown Prosecution Service papers, which meant that, without

victim or witness statements, OASys documents lacked sufficient analysis. Some aspects of the serious risk of harm screening needed to be improved.

- 4.18** Half the sentence plans included measures to address prisoners' offending-related behaviour and risk of harm and too few set outcome-focused objectives with clear review timescales. However, sentence plans written by OSs were better than those produced by offender managers in the community. Victim awareness work was carried out sufficiently in most cases.
- 4.19** In the previous six months, 27 (20.9%) of 129 home detention curfew (HDC) applications had been approved. Decisions were based on a good range of information collected from relevant sources. Figures showed that eight women (29.6%) had been released on their eligibility date and a further four within four days. Five women had been released over a month after their eligibility date, in most cases due to delays receiving information from offender managers.

Recommendations

- 4.20 All eligible prisoners should receive a prompt and sufficient assessment of their likelihood of reoffending.**
- 4.21 The establishment should have direct access to the PNC.**
- 4.22 Sentence plans should identify outcome-focused objectives to address offending and reduce prisoners' risk of serious harm.**

Housekeeping points

- 4.23** OSs should receive case management supervision.
- 4.24** Women approved for release on HDC should be discharged on or as close as possible to their eligibility date.

Public protection

- 4.25** The prison had a robust process in place to check new arrivals for public protection issues. Those posing a potential risk to children were automatically prevented from seeing or contacting children until the facts had been checked. OSs explained restrictions to prisoners.
- 4.26** Seventy-one women were classed as MAPPA nominals (those potentially subject to MAPPA arrangements on release), 23 at MAPPA level 1 (the lowest risk level), four at MAPPA level 2 (requiring the active involvement of one or more agency) and four at MAPPA level 3 (the highest risk level).
- 4.27** Twenty-five women were identified as a risk to children and monitored under child contact restrictions. Additionally, six were identified as sex offenders and 10 were subject to harassment procedures.
- 4.28** Monthly IDRMT meetings considered risks posed by new arrivals and reviewed those subject to monitoring. However, contrary to the OMU and public protection policies, MAPPA and high risk of harm cases were not automatically discussed, even when prisoners entered the parole window or when they were six months away from release.

- 4.29** The system of alerts relating to MAPPA cases on P-Nomis was inaccurate and some were either not identified or management levels were inconsistent. Some MAPPA levels were not set despite women having six months or less to serve before their release. Although the identification of MAPPA levels was the responsibility of offender managers, the prison was also responsible for chasing them up.
- 4.30** The reports that supervisors produced for MAPPA meetings were good.

Recommendation

- 4.31** **IDRMT meetings should monitor and consider all MAPPA and high risk of harm cases, and where necessary prompt external probation offender managers about MAPPA levels pre-release.**

Housekeeping point

- 4.32** Alerts on P-Nomis should be reviewed to ensure accuracy.

Allocation

- 4.33** Initial categorisation assessments were based on offence information and details from security and OSs if they were previously known to the prison. Lack of access to the PNC for pre-convictions caused delays (see paragraph 4.17). An observation, classification and allocation (OCA) officer interviewed new arrivals; they were told verbally about their categorisation, but no information was provided in writing.
- 4.34** Re-categorisation reviews took place every six months for women with sentences of less than four years and every 12 months for those serving more than four years. Decisions were based on an appropriate range of information from relevant sources.
- 4.35** Women could make progressive moves; 16 had been transferred to HMP Askham Grange open prison during the year and transfers to other establishments to undertake programmes not available at Foston Hall were also possible. Women could generally transfer to prisons in their home area pre-release, although we were told that HMP Styal had been full in September. Staff informed us that foreign national women who were facing deportation were 'unlikely' to be considered for open conditions.

Recommendation

- 4.36** **Foreign national women should be considered for open conditions whether or not they face deportation.**

Housekeeping point

- 4.37** Categorisation and allocation information should be provided in writing.

Indeterminate sentence prisoners

- 4.38** Fifty-three women were serving life sentences, while 13 were on indeterminate sentences for public protection. The prison had introduced services specifically for this group and a policy on indeterminate sentence prisoners had been published in June 2014. The prison had a lifer manager, seven lifer officers and six lifer prisoner buddies. Awareness training was underway for lifer officers.
- 4.39** All indeterminate sentence and remanded women likely to receive an indeterminate sentence were allocated to an OS, lifer officer and lifer buddy. Officers and buddies provided verbal support and information about the sentence, but nothing in writing. A lifer family day and forum had been held the previous summer and more were planned. Many women were positive about the support available, but some complained they needed additional opportunities to progress once they had completed all necessary interventions. Parole assessments were up to date.

Reintegration planning

Expected outcomes:

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

4.40 *Women's needs were identified on arrival across most pathways. There was no custody planning for remanded women and no formal discharge board to address prisoners' unmet needs. Children and families work was limited but improving. Some support services for women with experience of abuse were available and more were in development; staff awareness of human trafficking was limited. The work of the housing orderly was effective but more oversight was needed. Careers advice and guidance were good; links with employers were weak but improving. Women received medication and a summary of their health record on release, but there was no discharge clinic to provide health advice. A wide range of substance misuse services were available and finance, benefit and debt services were good. Interventions were not based on an up-to-date needs analysis but their availability was good overall.*

- 4.41** First night officers identified the needs of all new arrivals across most pathways. Details were recorded and forwarded to OSs who made referrals to pathway providers. Remanded women had no custody plans, were not informed of referrals and there was no follow-up.
- 4.42** OSs met sentenced women to complete a full OASys screening for those sentenced to more than 12 months and an OASys basic custody screening for those serving less than this. Sentenced women received a copy of referrals made. Although staff from some partnership agencies saw women before their release, there was no formal discharge board to address any unmet needs.
- 4.43** Good 'through the gate' support specifically for women was provided by charities Spurgeons and Women in Prison.

Recommendations

- 4.44** The resettlement needs of remanded women should be identified on arrival. Referrals should be made to relevant agencies and followed up to ensure action is taken.
- 4.45** The resettlement needs of all prisoners should be reviewed shortly prior to release to ensure they have been met.

Children, families and contact with the outside world

- 4.46** Until the appointment of a family engagement worker in October 2014, women received limited help to maintain contact with their families. Personal officers provided some with good support, but women on remand and on D wing were much less positive about receiving assistance in our survey. The family engagement worker took on more complex work such as mediation to rebuild broken family relationships and the work already undertaken was promising. The prison's parenting courses were good, but provision for family relationships work and counselling was limited.
- 4.47** There had only been one lifer family day and three family days for other women in the year to date. Take-up was low and women suggested that eligibility requirements were too strict; although they had been revised shortly before the inspection, it was too soon to assess the impact. Women on the basic level of the incentives and earned privileges (IEP) scheme were excluded from family days which was not in the best interests of their children.
- 4.48** The visitors' centre provided a positive experience and visits were reasonably well managed. However, women complained about not being allowed to use the toilet during visits. One woman we spoke to had a two-hour visit curtailed after 45 minutes because she needed to use the toilet.
- 4.49** Some wings had insufficient phones and in our survey 33% of women said they had trouble accessing them, more than the comparator. However, the women we spoke to said it was easy to book visits.

Recommendations

- 4.50** The number of family days should be increased and all women, irrespective of their IEP status, should be able to attend them.
- 4.51** Women should have access to the toilet during visits.
- 4.52** There should be sufficient phones on all wings to meet women's needs.

Victimisation, abuse and vulnerability

- 4.53** Notices on most wings advertised services for women who had suffered abuse, domestic violence or been involved in prostitution. Women received a letter on reception inviting them to seek support; the nominated lead officer offered women support and made referrals.

- 4.54** Services for women who had suffered domestic violence were developing and there were plans to deliver the Freedom programme in 2015, in partnership with a local third sector organisation, which also provided supported housing.
- 4.55** Women involved in prostitution from the West Midlands could attend weekly surgeries managed by the women's charity Anawim, but there was no equivalent service for women from other parts of the country. The charity Women in Prison managed the Reach course designed to encourage women to enter employment or training, some of whom also attended the X-it course, helping them leave prostitution.
- 4.56** Few officers had an awareness of human trafficking, and there was no nominated contact person who had specialist knowledge. The prison did not have a policy on trafficking (see section on equality and diversity, paragraph 2.30).

Recommendation

- 4.57** **The prison should establish specialist services to support women who have been victims of domestic violence or human trafficking.**

Accommodation

- 4.58** A housing orderly saw all new receptions during induction, completing housing referral forms as well as consent forms, which allowed staff to disclose information to housing providers; this included personal details about their offences and health. The orderly had no formal training but agency staff from the information advice and guidance office provided her with good support. She had established links with local providers, knew the provision well and appeared to be providing an effective service. Over the previous six months, 40 women had secured an address before their release and 7% were recorded as having been released without a fixed address, which was low. However, we were concerned about levels of staff supervision and oversight of the orderly's work.

Recommendation

- 4.59** **There should be greater supervision and oversight of the housing orderly's work and a review undertaken of the personal details she collates.**

Education, training and employment

- 4.60** Arrangements for women's resettlement into education, training and work were generally good, as was the quality of the National Careers Service provided by Derbyshire County Council and Nottingham District Council through their agent Futures. Staff from the National Careers Service and Jobcentre Plus provided good careers advice and guidance, including help with CV writing and job applications.
- 4.61** Links with a small number of local employers had not yet delivered any work opportunities. The virtual campus (internet access for prisoners to community education, training and employment opportunities) was not operational and prisoners had no job search facilities or access to other employment information. There were no accurate data indicating what proportion of prisoners had entered into employment, education or training on release. The Reach course encouraged women to enter sustainable employment or training on release (see section on victimisation, abuse and vulnerability).

Recommendations

- 4.62** Links with an appropriate range of employers should be improved to ensure prisoners have a wide range of work opportunities on release.
- 4.63** The virtual campus should be re-installed and accessible to all prisoners.

Health care

- 4.64** Women received a summary of their health record and at least a seven-day supply of prescribed medications on discharge or transfer. There was no designated discharge clinic where health advice could have been provided. Effective release preparations were made for women with severe and enduring mental health needs and subject to the care programme approach (mental health services for individuals diagnosed with a mental illness) through links with local community mental health teams.

Recommendation

- 4.65** Women should be able to obtain advice and information about community health services and women's health issues to better prepare them for release.

Drugs and alcohol

- 4.66** A good range of pre-release substance misuse services included one-to-one sessions with substance misuse workers and access to a group raising awareness of the effects of addiction on families. Links with local community agencies were good.

Finance, benefit and debt

- 4.67** South Derbyshire Citizens Advice Bureau provided advice and guidance on debts, more complex housing issues and mortgage problems. Staff had produced a range of standard letters to creditors and utility companies that women could complete, with assistance if necessary, and which were sent on their behalf. The housing orderly supplied standard letters for local councils, so women could retain housing benefit entitlements.
- 4.68** A Jobcentre Plus employment and benefits adviser saw all new receptions during induction and offered appointments two to three weeks pre-release to offer advice on benefits and other related issues and to set up benefit claims. An initiative was being developed through charity Women in Prison to open bank accounts.

Attitudes, thinking and behaviour

- 4.69** Interventions were not based on an up-to-date needs assessment, but overall a good range of programmes was available and women had access to one-to-one work.
- 4.70** Twenty-seven women, the target number, had completed the Thinking Skills Programme (TSP) in the year up to April 2014; 17 had participated in the TSP since then. Managers said it was increasingly difficult to find women suitable for the programme.

- 4.71** Twenty-three women had completed the Choices, Actions, Relationships, Emotions (CARE) programme in the year up to April 2014, exceeding the target by two; a further 16 had completed it since. Delivered by a multidisciplinary team consisting of probation, mental health and psychology staff, it included advocacy support pre- and post-release for up to two years through links with mentors from Women in Prison. The CARE programme was open to women from other establishments and women on the CAMEO intervention also participated (see also section on the CAMEO personality disorder treatment unit).
- 4.72** Psychologists and offender supervisors offered one-to-one interventions where group work was not appropriate or available. There was no victim awareness course but OSs undertook work on an individual basis using victim awareness workbooks. They also used Targets for Effective Change worksheets, published by the National Probation Service, addressing a variety of issues, including managing conflict. Several supervisors and psychologists were trained to deliver the women's sex offender intervention.
- 4.73** Some women were precluded from undertaking programmes because of the length of their sentence and some supervisors felt that more short courses would have benefited more women.

Recommendation

- 4.74** **A needs analysis should be undertaken to assess the suitability of current interventions.**

The CAMEO personality disorder treatment unit

- 4.75** The CAMEO unit, designed specifically for women with complex needs provided those with personality disorders with an excellent opportunity to address their risks. The new initiative was part of the national women offenders' personality disorder strategy. Established in February 2014 and in its current location since April 2014, the unit was run by Birmingham and Solihull Mental Health NHS Trust and supported by the prison and staff from women's charity Anawim. The unit's team also included clinical psychologists, a psychiatrist, occupational therapist and nurse practitioners and specially selected discipline staff. There were reasonable links with other parts of the prison including the in-reach team, safer custody and the OMU.
- 4.76** Anawim staff offered a range of 'enrichment' activities, including drama, art and quizzes, which were available to women involved in the CAMEO intervention living on A wing as well as to other women on the wing who were not involved.
- 4.77** The unit worked with three cohorts of women who were at different stages in the programme. All women referred to the unit had met referral criteria and entered the programme voluntarily. They attended therapeutic sessions during the day while continuing with their work or educational activities. They returned to their residential wings in the evening.
- 4.78** Early indications showed that the unit was starting to make a difference but there had been some teething problems, notably a spike in self-harm during the trauma module of the programme. A lack of continuity between the clinical treatment elements and the enrichment regime on the wings where the women lived might have contributed to this. There were not yet enough trained officers on the residential wings, and those that were trained were not yet fully integrated into the treatment regime. This was compounded by the women being dispersed throughout the prison, which made robust continuity of treatment challenging.

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** There should be a specialist, therapeutic environment to support the care of all women with complex needs and those at acute risk of suicide and self-harm. (S37)
- 5.2** The population on D wing should be reduced and the environment and facilities improved so that women can live in decent and properly equipped accommodation. (S38)
- 5.3** The prison should have enough full-time activity places for the population. (S39)

Recommendations

To the governor

Courts, escort and transfers

- 5.4** Women should be held in court cells for the minimum possible period and arrive at the prison early enough for their immediate needs to be met and for them to settle in on the first night unit before lock up. (1.5)
- 5.5** Men and women should be transported separately. (1.6)

Early days in custody

- 5.6** All reception and first night interviews should be private, and enquiries should not be duplicated. (1.15)
- 5.7** Newly arrived prisoners should be carefully supervised so that they do not experience intimidation on their first night. (1.16)

Safe and supportive relationships

- 5.8** The local approach to violence reduction should be clear to all staff and prisoners and should be proportionate. (1.27)
- 5.9** Prisoners with proven antisocial or violent behaviour should receive support to encourage them to behave acceptably. (1.28)
- 5.10** All prisoners on the basic regime should have a weekly review. (1.29)

Self-harm and suicide prevention

- 5.11** Women on open ACCT documents should only be segregated in exceptional circumstances, and when necessary to ensure their own safety or the safety of others. (1.37)
- 5.12** The prison should have an active Listener scheme. (1.38)

Safeguarding

- 5.13** The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.43)

Security

- 5.14** All requested suspicion tests should be carried out promptly. (1.52)

Discipline

- 5.15** The prison should improve the segregation unit and the exercise yard. (1.68)
- 5.16** The segregation unit regime should be improved and include some purposeful activity. (1.69)
- 5.17** The prison should maintain a log of strip-searches and use of special accommodation for women in the segregation unit, including details outlining the number involved, reasons and authorisation. (1.70)

Substance misuse

- 5.18** Full details and an explanation of the protocols for the prescribing of opiate substitution should be made available to women on arrival at the prison. (1.76)

Residential units

- 5.19** Single cells should not be used as doubles. (2.12)
- 5.20** Women should have a range of options to obtain clothing at affordable prices. (2.13)

Staff-prisoner relationships

- 5.21** The personal officer scheme should function consistently on all wings to ensure women receive individual support with day-to-day issues; it should also focus on resettlement and offender management. (2.20)

Equality and diversity

- 5.22** The equalities strategy and action planning should be developed through a needs analysis, better consultation with women from protected groups and links with external support agencies. (2.28)
- 5.23** Provision of telephone interpreting and translated materials for foreign national women should be improved and foreign national women facing deportation should have access to independent legal advice. (2.39)

- 5.24** Staff should receive training to identify and address the needs of isolated foreign national women, particularly those who do not speak English. (2.40)
- 5.25** All disabled and older prisoners should have equitable access to education and offending behaviour programmes, and where necessary, be provided with a paid carer. (2.41)
- 5.26** Staff should have access to up-to-date information on evacuation plans. (2.42)

Faith and religious activity

- 5.27** There should be faith based classes. (2.49)

Legal rights

- 5.28** On arrival women remanded in custody should be asked about their prospects for bail, bail information reports should be prepared in appropriate cases and contact made with legal representatives. (2.55)

Health services

- 5.29** The health needs assessment should reflect the health requirements of the population, including their mental health needs, and be used to inform service provision. (2.64)
- 5.30** Clinical supervision and support should be available to all health staff to enable them to work effectively with this demanding population. (2.65)
- 5.31** Repeated missed appointments should trigger a review and risk assessment. (2.78)
- 5.32** Pregnant women displaying any indication of labour or distress should be referred promptly to the local maternity unit for advice and possible transfer. (2.79)
- 5.33** Women should be appropriately risk assessed and as many as possible should have their medicines in possession. (2.88)
- 5.34** Women should have access to appropriate pain relief during and outside health service hours. (2.89)
- 5.35** All supervised medicines should be administered at times that reflect therapeutic dose intervals and safe administration; this should include suitable arrangements for women going to court. (2.90)
- 5.36** The medicines management meeting should meet regularly and provide all stakeholders with assurance on all aspects of the management of medicines. (2.91)
- 5.37** Primary mental health services should reflect women's needs, including ensuring that women with anxiety and depression can access talking therapies promptly. (2.107)
- 5.38** Transfers to hospital should be expedited to ensure women with mental health problems are cared for in an appropriate setting. (2.108)

Catering

- 5.39** Serveries should be adequately supervised at all mealtimes to ensure equitable portion control. (2.115)

Purchases

5.40 Goods ordered through catalogues should be delivered promptly. (2.120)

Time out of cell

5.41 Time out of cell should be improved. Women who are willing to participate in activities, but for whom there are no places available, should be unlocked during core day activity periods. (3.5)

5.42 A period of exercise outside should be included in the core day and offered consistently. (3.6)

Learning and skills and work activities

5.43 Managers should ensure that accurate data are collected, effectively analysed and used to identify trends and emerging issues to inform improvements. (3.17)

5.44 The prison self-assessment report should better identify strengths and areas for improvement. (3.18)

5.45 Observations of teaching and learning should be undertaken across all provision. (3.19)

5.46 The quality improvement group should be re-established and should monitor and manage effectively improvements in the quality of learning and skills. (3.20)

5.47 A more suitable range of learning opportunities should be developed for more able and longer-term prisoners and sentenced prisoners should be prioritised. (3.26)

5.48 Job-related courses should be introduced in work areas where no vocational qualifications are currently available. (3.27)

5.49 Teaching, learning and assessment should be consistently good and teachers should have access to better resources and facilities. (3.33)

5.50 Prisoners on wings, at work and on vocational training courses should receive appropriate additional learning support. (3.34)

5.51 Success rates on courses should be improved where necessary. (3.37)

5.52 Prisoners should have better access to the library. (3.43)

Physical education and healthy living

5.53 Recreational PE arrangements should be improved to ensure fair and equal access. (3.50)

5.54 PE staff should establish stronger links with the health care department to ensure all prisoners' remedial support needs are clearly identified and met. (3.51)

5.55 A wider variety of appropriate PE courses should be introduced to increase prisoners' opportunities for employment on release. (3.52)

Strategic management of resettlement

- 5.56** The reducing reoffending strategy should be informed by a local needs analysis. (4.8)
- 5.57** Resettlement ROTL should be a key part of the resettlement strategy, and appropriate use significantly increased. (4.9)

Offender management and planning

- 5.58** All eligible prisoners should receive a prompt and sufficient assessment of their likelihood of reoffending. (4.20)
- 5.59** The establishment should have direct access to the PNC. (4.21)
- 5.60** Sentence plans should identify outcome-focused objectives to address offending and reduce prisoners' risk of serious harm. (4.22)
- 5.61** IDRMT meetings should monitor and consider all MAPPA and high risk of harm cases, and where necessary prompt external probation offender managers about MAPPA levels pre-release. (4.31)
- 5.62** Foreign national women should be considered for open conditions whether or not they face deportation. (4.36)

Reintegration planning

- 5.63** The resettlement needs of remanded women should be identified on arrival. Referrals should be made to relevant agencies and followed up to ensure action is taken. (4.44)
- 5.64** The resettlement needs of all prisoners should be reviewed shortly prior to release to ensure they have been met. (4.45)
- 5.65** The number of family days should be increased and all women, irrespective of their IEP status, should be able to attend them. (4.50)
- 5.66** Women should have access to the toilet during visits. (4.51)
- 5.67** There should be sufficient phones on all wings to meet women's needs. (4.52)
- 5.68** The prison should establish specialist services to support women who have been victims of domestic violence or human trafficking. (4.57)
- 5.69** There should be greater supervision and oversight of the housing orderly's work and a review undertaken of the personal details she collates. (4.59)
- 5.70** Links with an appropriate range of employers should be improved to ensure prisoners have a wide range of work opportunities on release. (4.62)
- 5.71** The virtual campus should be re-installed and accessible to all prisoners. (4.63)
- 5.72** Women should be able to obtain advice and information about community health services and women's health issues to better prepare them for release. (4.65)
- 5.73** A needs analysis should be undertaken to assess the suitability of current interventions. (4.74)

Housekeeping points

Courts, escorts and transfers

5.74 Women should be given information about the prison before they arrive. (1.7)

Early days in custody

5.75 All women should have a personal supply of basic toiletries on arrival. (1.17)

5.76 Women with substance misuse problems should only attend the classroom elements of induction when they are well enough to absorb the information offered. (1.18)

Residential units

5.77 Cleaning and toiletry items should be available in reasonable quantities. (2.14)

5.78 The stock of donated clothing should offer a wider choice and a reasonable range of sizes. (2.15)

5.79 Managers should ensure that applications receive a response within the expected timescale. (2.16)

Faith and religious activity

5.80 The team should routinely participate in ACCT reviews. (2.50)

Legal rights

5.81 Arrangements should be in place to provide women with Access to Justice laptops in accordance with the prison's Access to Justice policy 2014. (2.56)

Health services

5.82 Resuscitation kit should be checked regularly; checks should be logged and action taken where required. (2.66)

5.83 Documentation outlining PGDs should be completed and signed by authorised personnel. (2.92)

5.84 Administration charts should reflect missed doses, including the reasons. (2.93)

5.85 All medicines should be stored in their properly labelled boxes or containers. (2.94)

5.86 Fridge temperatures should be checked regularly and recorded. (2.95)

5.87 CD cabinets should be fixed with rag-bolts in line with Safe Custody Regulations 1973. (2.96)

Learning and skills and work activities

5.88 Arrangements for prisoners to collect medication should be changed to reduce disruptions in vocational training and work. (3.38)

Physical education and healthy living

- 5.89** Timetabling of PE staff should be better planned to ensure minimal curtailment of recreational PE sessions. (3.53)

Strategic management of resettlement

- 5.90** All key prison departments should be represented at reducing reoffending meetings. (4.10)

Offender management and planning

- 5.91** OSs should receive case management supervision. (4.23)
- 5.92** Women approved for release on HDC should be discharged on or as close as possible to their eligibility date. (4.24)
- 5.93** Alerts on P-Nomis should be reviewed to ensure accuracy. (4.32)
- 5.94** Categorisation and allocation information should be provided in writing. (4.37)

Examples of good practice

- 5.95** The availability of nurse practitioners enabled women to have faster access to clinical care and a limited range of medication. (2.67)
- 5.96** The new health care representatives' meeting was a positive development; it promoted cooperation between women and health care staff and was run in a flexible but structured way. (2.68)
- 5.97** Excellent dental triage and oral health promotion enabled women to have prompt clinical care and understand better their own oral and dental health. (2.98)
- 5.98** The pilot learning disability service meant prisoners had their learning disability needs properly identified, while staff received supported to work with the women. (2.109)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Sean Sullivan	Team leader
Joss Crosbie	Inspector
Paul Fenning	Inspector
Jeanette Hall	Inspector
Deri Hughes-Roberts	Inspector
Jessica Kelly	Research officer
Alissa Redmond	Research officer
Colette Daoud	Research trainee

Specialist inspectors

Paul Roberts	Substance misuse inspector
Maureen Jamieson	Health services inspector
Nicola Rabjohns	Health services inspector
Nicola Carlisle	Pharmacist
Sue Melvin	Pharmacist
Peter Gibbs	Pharmacist
Karena Reed	Care Quality Commission inspector
Neil Edwards	Ofsted inspector
Mark Shackleton	Ofsted inspector
Charles Searle	Ofsted inspector
Jenny Daly	Offender management inspector
Nicola McCloskey	Offender management inspector
Tony Rolley	Offender management inspector

Appendix II: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	6	201	72.4
Recall	2	16	6.3
Convicted unsentenced	2	26	9.8
Remand	3	28	10.8
Civil prisoners	0	2	0.7
Detainees	0	0	0
Total	13	273	100

Sentence	18–20 yr olds	21 and over	%
Unsentenced	5	59	22.4
Less than 6 months	1	41	14.7
6 months to less than 12 months	2	13	5.2
12 months to less than 2 years	3	27	10.5
2 years to less than 4 years	2	36	13.3
4 years to less than 10 years	0	23	8
10 years and over (not life)	0	7	2.4
ISPP (indeterminate sentence for public protection)	0	14	4.9
Life	0	53	23.4
Total	13	273	100

Age	Number of prisoners	%
Please state minimum age here: 18		
Under 21 years	13	4.5
21 years to 29 years	76	26.6
30 years to 39 years	99	34.6
40 years to 49 years	65	22.7
50 years to 59 years	30	10.5
60 years to 69 years	3	1.0
70 plus years	0	0
Please state maximum age here: 65		
Total	286	100

Nationality	18–20 yr olds	21 and over	%
British	13	254	93
Foreign nationals	0	19	7
Total	13	273	100

Security category	18–20 yr olds	21 and over	%
Fem Closed	1	195	68.5
Fem Open	0	9	3.1
Unclassified	1	1	0.7
Unsentenced	5	67	25.2
YOI Closed	5	1	2.1
YOI Open	1	0	0.3
Other	0	0	0
Total	13	273	100

Ethnicity	18–20 yr olds	21 and over	%
White			
British	10	216	79
Irish	0	1	0.3
Gypsy/Irish Traveller	0	1	0.3
Other white	0	6	2.1
Mixed			
White and black Caribbean	1	10	3.8
White and black African	0	0	0
White and Asian	0	2	0.7
Other mixed	0	1	0.3
Asian or Asian British			
Indian	0	5	1.7
Pakistani	0	5	1.7
Bangladeshi	0	1	0.3
Chinese	0	1	0.3
Other Asian	0	2	0.7
Black or black British			
Caribbean	2	9	3.8
African	0	3	1.0
Other black	0	9	3.1
Other ethnic group			
Arab	0	0	0
Other ethnic group	0	1	0.3
Not stated	0	0	0
Total	13	273	100

Religion	18–20 yr olds	21 and over	%
Baptist	0	0	0
Church of England	1	65	23.1
Roman Catholic	1	38	13.6
Other Christian denominations	2	28	10.5
Muslim	1	22	8.0
Sikh	0	3	1.0
Hindu	0	2	0.7
Buddhist	0	6	2.1
Jewish	0	0	0
Other	0	4	1.4
No religion	0	105	39.5
Total	13	273	100

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

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	3	1	44	15.4
1 month to 3 months	4	1.4	56	19.6
3 months to 6 months	0	0	25	8.7
6 months to 1 year	1	0.3	27	9.4
1 year to 2 years	0	0	20	7.0
2 years to 4 years	0	0	29	10.1
4 years or more	0	0	13	4.5
Total	8	2.8	214	74.8

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	2	28	10
Total	2	28	10

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	2	0.7	26	9.1
1 month to 3 months	0	0	13	4.5
3 months to 6 months	3	1	12	4.2
6 months to 1 year	0	0	6	2.1
1 year to 2 years	0	0	2	0.7
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
Total	5	1.7	59	20.6

The prison was unable to complete the following

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

Appendix III: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

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 establishment⁶. Respondents were then randomly selected from a P-NOMIS prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 13 October 2014 the prisoner population at HMP Foston Hall 285. Using the method described above, questionnaires were distributed to a sample of 164 prisoners.

We received a total of 92 completed questionnaires, a response rate of 99%. One respondent returned their questionnaire blank.

Wing/Unit	Number of completed survey returns
A	24
B	22
C	23
D	21
E	10

⁶ 95% confidence interval with a sampling error of 3%. The formula assumes an 80% response rate (70% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

F	25
R	24
Segregation Unit	1

Presentation of survey results and analyses

Over the following pages we present the survey results for HMP Foston Hall.

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 significant⁷ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Foston Hall in 2014 compared with responses from prisoners surveyed in all other women's local prisons. This comparator is based on all responses from prisoner surveys carried out in 7 women's local prisons since April 2011.
- The current survey responses from HMP Foston Hall in 2014 compared with the responses of prisoners surveyed at HMP Foston Hall in 2009.
- A comparison within the 2014 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2014 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2014 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2014 survey between responses of prisoners who consider themselves to be homosexual, bisexual or other and those who consider themselves to be heterosexual.
- A comparison within the 2014 survey between D wing and the rest of the establishment.
- A comparison within the 2014 survey between R wing and the rest of the establishment.

⁷ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

Survey summary

Section I: About You

Q1.2	How old are you?		
	Under 21	8 (5%)	
	21 - 29.....	38 (26%)	
	30 - 39.....	51 (34%)	
	40 - 49.....	34 (23%)	
	50 - 59.....	14 (9%)	
	60 - 69.....	3 (2%)	
	70 and over	0 (0%)	
Q1.3	Are you sentenced?		
	Yes	111 (75%)	
	Yes - on recall.....	9 (6%)	
	No - awaiting trial.....	12 (8%)	
	No - awaiting sentence	16 (11%)	
	No - awaiting deportation.....	0 (0%)	
Q1.4	How long is your sentence?		
	Not sentenced	28 (19%)	
	Less than 6 months	26 (18%)	
	6 months to less than 1 year	15 (10%)	
	1 year to less than 2 years	14 (10%)	
	2 years to less than 4 years	12 (8%)	
	4 years to less than 10 years	10 (7%)	
	10 years or more	8 (6%)	
	IPP (indeterminate sentence for public protection)	8 (6%)	
	Life.....	24 (17%)	
Q1.5	Are you a foreign national? (i.e. do not have UK citizenship.)		
	Yes	6 (4%)	
	No.....	141 (96%)	
Q1.6	Do you understand spoken English?		
	Yes	147 (99%)	
	No.....	1 (1%)	
Q1.7	Do you understand written English?		
	Yes	147 (99%)	
	No.....	2 (1%)	
Q1.8	What is your ethnic origin?		
	White - British (English/ Welsh/ Scottish/ Northern Irish).....	105 (71%)	Asian or Asian British - Chinese
	White - Irish	4 (3%)	Asian or Asian British - other
	White - other.....	9 (6%)	Mixed race - white and black Caribbean. 5 (3%)
	Black or black British - Caribbean.....	6 (4%)	Mixed race - white and black African
	Black or black British - African	2 (1%)	Mixed race - white and Asian
	Black or black British - other	3 (2%)	Mixed race - other.....
	Asian or Asian British - Indian	0 (0%)	Arab.....
	Asian or Asian British - Pakistani.....	3 (2%)	Other ethnic group
	Asian or Asian British - Bangladeshi.....	0 (0%)	

Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes		2 (1%)
	No.....		142 (99%)
Q1.10	What is your religion?		
	None.....	40 (28%)	Hindu
	Church of England	55 (38%)	Jewish
	Catholic	24 (17%)	Muslim
	Protestant.....	0 (0%)	Sikh
	Other Christian denomination	3 (2%)	Other.....
	Buddhist.....	5 (3%)	
Q1.11	How would you describe your sexual orientation?		
	Heterosexual/ Straight		104 (73%)
	Homosexual/Gay.....		12 (8%)
	Bisexual.....		26 (18%)
Q1.12	Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs.)		
	Yes		48 (32%)
	No.....		100 (68%)
Q1.13	Are you a veteran (ex- armed services)?		
	Yes		3 (2%)
	No.....		144 (98%)
Q1.14	Is this your first time in prison?		
	Yes		73 (49%)
	No.....		75 (51%)
Q1.15	Do you have children under the age of 18?		
	Yes		81 (55%)
	No.....		66 (45%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?		
	Less than 2 hours		84 (57%)
	2 hours or longer		50 (34%)
	Don't remember		14 (9%)
Q2.2	On your most recent journey here, were you offered anything to eat or drink?		
	My journey was less than two hours		84 (57%)
	Yes		29 (20%)
	No.....		29 (20%)
	Don't remember		5 (3%)
Q2.3	On your most recent journey here, were you offered a toilet break?		
	My journey was less than two hours		84 (57%)
	Yes		8 (5%)
	No.....		51 (35%)
	Don't remember		4 (3%)
Q2.4	On your most recent journey here, was the van clean?		
	Yes		87 (60%)
	No.....		46 (32%)
	Don't remember		12 (8%)

Q2.5	On your most recent journey here, did you feel safe?	
	Yes	105 (72%)
	No.....	34 (23%)
	Don't remember	7 (5%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well.....	42 (29%)
	Well.....	76 (52%)
	Neither	21 (14%)
	Badly.....	3 (2%)
	Very badly	2 (1%)
	Don't remember	3 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here?(please tick all that applies to you.)	
	Yes, someone told me	112 (76%)
	Yes, I received written information	8 (5%)
	No, I was not told anything	25 (17%)
	Don't remember	7 (5%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	122 (83%)
	No.....	21 (14%)
	Don't remember	4 (3%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?			
	Less than 2 hours	101 (69%)		
	2 hours or longer	24 (16%)		
	Don't remember	21 (14%)		
Q3.2	When you were searched, was this carried out in a respectful way?			
	Yes	133 (92%)		
	No	6 (4%)		
	Don't remember	5 (3%)		
Q3.3	Overall, how were you treated in reception?			
	Very well.....	41 (28%)		
	Well.....	73 (50%)		
	Neither	18 (12%)		
	Badly.....	4 (3%)		
	Very badly	6 (4%)		
	Don't remember	4 (3%)		
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that applies to you.)			
	Loss of property	12 (8%)	Physical health	40 (27%)
	Housing problems.....	31 (21%)	Mental health	56 (38%)
	Contacting employers	3 (2%)	Needing protection from other prisoners	10 (7%)
	Contacting family	40 (27%)	Getting phone numbers.....	32 (22%)
	Childcare	7 (5%)	Other	13 (9%)
	Money worries.....	29 (20%)	Did not have any problems.....	33 (23%)
	Feeling depressed or suicidal	63 (43%)		

Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?	
	Yes	45 (31%)
	No.....	67 (46%)
	Did not have any problems	33 (23%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that applies to you.)	
	Tobacco.....	117 (80%)
	A shower	69 (47%)
	A free telephone call.....	68 (46%)
	Something to eat.....	107 (73%)
	PIN phone credit.....	104 (71%)
	Toiletries/ basic items	90 (61%)
	Did not receive anything	9 (6%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that applies to you.)	
	Chaplain	60 (41%)
	Someone from health services.....	109 (75%)
	A Listener/Samaritans	49 (34%)
	Prison shop/canteen.....	28 (19%)
	Did not have access to any of these.....	26 (18%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that applies to you.)	
	What was going to happen to you	70 (50%)
	What support was available for people feeling depressed or suicidal.....	65 (46%)
	How to make routine requests (applications)	52 (37%)
	Your entitlement to visits.....	48 (34%)
	Health services	69 (49%)
	Chaplaincy	55 (39%)
	Not offered any information.....	43 (30%)
Q3.9	Did you feel safe on your first night here?	
	Yes	93 (63%)
	No.....	38 (26%)
	Don't remember	16 (11%)
Q3.10	How soon after you arrived here did you go on an induction course?	
	Have not been on an induction course	17 (12%)
	Within the first week.....	63 (44%)
	More than a week.....	49 (35%)
	Don't remember	13 (9%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	Have not been on an induction course	17 (12%)
	Yes	56 (39%)
	No.....	53 (37%)
	Don't remember	16 (11%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment.....	44 (31%)
	Within the first week.....	26 (18%)
	More than a week.....	52 (37%)
	Don't remember	20 (14%)

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>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	12(8%)	42 (29%)	21 (15%)	31 (22%)	17 (12%)	20 (14%)
	<i>Attend legal visits?</i>	18 (13%)	52 (38%)	16 (12%)	13 (9%)	7 (5%)	31 (23%)
	<i>Get bail information?</i>	5 (4%)	11(9%)	16 (13%)	15 (12%)	17 (13%)	63 (50%)
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>						18 (13%)
	<i>Yes.....</i>						64 (45%)
	<i>No.....</i>						61 (43%)
Q4.3	Can you get legal books in the library?						
	<i>Yes.....</i>						55 (39%)
	<i>No.....</i>						8 (6%)
	<i>Don't know.....</i>						79 (56%)
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>	98 (69%)	44 (31%)	0 (0%)			
	<i>Are you normally able to have a shower every day?</i>	134 (92%)	12(8%)	0 (0%)			
	<i>Do you normally receive clean sheets every week?</i>	120 (85%)	19 (13%)	3 (2%)			
	<i>Do you normally get cell cleaning materials every week?</i>	120 (85%)	19 (13%)	3 (2%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	59 (42%)	67 (48%)	14 (10%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	98 (70%)	41 (29%)	1 (1%)			
	<i>If you need to, can you normally get your stored property?</i>	23 (16%)	73 (50%)	49 (34%)			
Q4.5	What is the food like here?						
	<i>Very good.....</i>						3 (2%)
	<i>Good.....</i>						40 (27%)
	<i>Neither.....</i>						48 (32%)
	<i>Bad.....</i>						37 (25%)
	<i>Very bad.....</i>						21 (14%)
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>						6 (4%)
	<i>Yes.....</i>						75 (52%)
	<i>No.....</i>						62 (43%)
Q4.7	Can you speak to a Listener at any time, if you want to?						
	<i>Yes.....</i>						52 (35%)
	<i>No.....</i>						61 (41%)
	<i>Don't know.....</i>						34 (23%)
Q4.8	Are your religious beliefs respected?						
	<i>Yes.....</i>						70 (48%)
	<i>No.....</i>						20 (14%)
	<i>Don't know/ N/A.....</i>						56 (38%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?						
	<i>Yes.....</i>						96 (65%)
	<i>No.....</i>						13 (9%)
	<i>Don't know/ N/A.....</i>						38 (26%)

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

<i>I don't want to attend</i>	35 (24%)
<i>Very easy</i>	27 (18%)
<i>Easy</i>	31 (21%)
<i>Neither</i>	12 (8%)
<i>Difficult</i>	14 (10%)
<i>Very difficult</i>	7 (5%)
<i>Don't know</i>	20 (14%)

Section 5: Applications and complaints**Q5.1 Is it easy to make an application?**

<i>Yes</i>	123 (86%)
<i>No</i>	15 (10%)
<i>Don't know</i>	5 (3%)

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

	<i>Not made one</i>	<i>Yes</i>	<i>No</i>
<i>Are applications dealt with fairly?</i>	6 (4%)	75 (56%)	54 (40%)
<i>Are applications dealt with quickly (within seven days)?</i>	6 (5%)	38 (30%)	84 (66%)

Q5.3 Is it easy to make a complaint?

<i>Yes</i>	83 (59%)
<i>No</i>	19 (14%)
<i>Don't know</i>	38 (27%)

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

	<i>Not made one</i>	<i>Yes</i>	<i>No</i>
<i>Are complaints dealt with fairly?</i>	56 (42%)	26 (20%)	51 (38%)
<i>Are complaints dealt with quickly (within seven days)?</i>	56 (42%)	24 (18%)	53 (40%)

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

<i>Yes</i>	27 (20%)
<i>No</i>	109 (80%)

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>	42 (30%)
<i>Very easy</i>	15 (11%)
<i>Easy</i>	36 (26%)
<i>Neither</i>	29 (21%)
<i>Difficult</i>	11 (8%)
<i>Very difficult</i>	6 (4%)

Section 6: Incentive and earned privileges scheme**Q6.1 Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)**

<i>Don't know what the IEP scheme is</i>	14 (10%)
<i>Yes</i>	70 (49%)
<i>No</i>	45 (31%)
<i>Don't know</i>	15 (10%)

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>	14 (10%)
	<i>Yes</i>	59 (44%)
	<i>No</i>	49 (36%)
	<i>Don't know</i>	13 (10%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	<i>Yes</i>	6 (4%)
	<i>No</i>	135 (96%)
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>	111 (82%)
	<i>Very well</i>	5 (4%)
	<i>Well</i>	8 (6%)
	<i>Neither</i>	6 (4%)
	<i>Badly</i>	2 (1%)
	<i>Very badly</i>	4 (3%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	<i>Yes</i>	118 (81%)
	<i>No</i>	27 (19%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	<i>Yes</i>	115 (78%)
	<i>No</i>	33 (22%)
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>	56 (38%)
	<i>No</i>	91 (62%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	4 (3%)
	<i>Never</i>	26 (18%)
	<i>Rarely</i>	44 (30%)
	<i>Some of the time</i>	43 (29%)
	<i>Most of the time</i>	18 (12%)
	<i>All of the time</i>	11 (8%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	47 (33%)
	<i>In the first week</i>	41 (28%)
	<i>More than a week</i>	41 (28%)
	<i>Don't remember</i>	15 (10%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	47 (33%)
	<i>Very helpful</i>	24 (17%)
	<i>Helpful</i>	32 (23%)
	<i>Neither</i>	17 (12%)
	<i>Not very helpful</i>	13 (9%)
	<i>Not at all helpful</i>	8 (6%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?		
	Yes	63 (44%)	
	No.....	81 (56%)	
Q8.2	Do you feel unsafe now?		
	Yes	25 (18%)	
	No.....	111 (82%)	
Q8.3	In which areas have you felt unsafe? (Please tick all that applies to you.)		
	Never felt unsafe	81 (58%)	At meal times..... 11 (8%)
	Everywhere	21 (15%)	At health services..... 10 (7%)
	Segregation unit	3 (2%)	Visits area
	Association areas	22 (16%)	In wing showers
	Reception area	5 (4%)	In gym showers
	At the gym	4 (3%)	In corridors/stairwells..... 19 (14%)
	In an exercise yard	7 (5%)	On your landing/wing
	At work.....	9 (6%)	In your cell
	During movement.....	16 (12%)	At religious services..... 3 (2%)
	At education	8 (6%)	
Q8.4	Have you been victimised by other prisoners here?		
	Yes	65 (45%)	
	No.....	80 (55%)	
Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that applies to you.)		
	Insulting remarks (about you or your family or friends)	32 (22%)	
	Physical abuse (being hit, kicked or assaulted)	16 (11%)	
	Sexual abuse	1 (1%)	
	Feeling threatened or intimidated	42 (29%)	
	Having your canteen/property taken.....	11 (8%)	
	Medication.....	8 (6%)	
	Debt	0 (0%)	
	Drugs.....	2 (1%)	
	Your race or ethnic origin.....	7 (5%)	
	Your religion/religious beliefs	3 (2%)	
	Your nationality	3 (2%)	
	You are from a different part of the country than others.....	5 (3%)	
	You are from a traveller community	1 (1%)	
	Your sexual orientation	5 (3%)	
	Your age.....	10 (7%)	
	You have a disability.....	9 (6%)	
	You were new here.....	20 (14%)	
	Your offence/ crime	17 (12%)	
	Gang related issues.....	3 (2%)	
Q8.6	Have you been victimised by staff here?		
	Yes	53 (37%)	
	No.....	90 (63%)	

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

Insulting remarks (about you or your family or friends)	19 (13%)
Physical abuse (being hit, kicked or assaulted)	6 (4%)
Sexual abuse	0 (0%)
Feeling threatened or intimidated	25 (17%)
Medication	8 (6%)
Debt	0 (0%)
Drugs	2 (1%)
Your race or ethnic origin	4 (3%)
Your religion/religious beliefs	5 (3%)
Your nationality	3 (2%)
You are from a different part of the country than others	4 (3%)
You are from a traveller community	1 (1%)
Your sexual orientation	2 (1%)
Your age	5 (3%)
You have a disability	8 (6%)
You were new here	6 (4%)
Your offence/ crime	9 (6%)
Gang related issues	0 (0%)

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

Not been victimised	65 (49%)
Yes	37 (28%)
No	31 (23%)

Section 9: Health services

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

	Don't know	Very easy	Easy	Neither	Difficult	Very difficult
The doctor	9 (6%)	5 (3%)	27 (19%)	23 (16%)	50 (35%)	29 (20%)
The nurse	8 (6%)	10 (7%)	52 (37%)	24 (17%)	33 (24%)	13 (9%)
The dentist	13 (9%)	6 (4%)	19 (14%)	18 (13%)	39 (28%)	44 (32%)

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

	Not been	Very good	Good	Neither	Bad	Very bad
The doctor	14 (10%)	13 (9%)	37 (26%)	18 (13%)	26 (18%)	36 (25%)
The nurse	9 (6%)	23 (17%)	55 (40%)	16 (12%)	21 (15%)	15 (11%)
The dentist	27 (20%)	21 (16%)	29 (22%)	21 (16%)	16 (12%)	19 (14%)

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

Not been	4 (3%)
Very good	9 (6%)
Good	40 (29%)
Neither	22 (16%)
Bad	26 (19%)
Very bad	38 (27%)

Q9.4 Are you currently taking medication?

Yes	108 (76%)
No	35 (24%)

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

Not taking medication	35 (24%)
Yes, all my meds	8 (5%)
Yes, some of my meds	13 (9%)
No	90 (62%)

Q9.6	Do you have any emotional or mental health problems?	
	Yes	101 (70%)
	No.....	43 (30%)
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>	43 (31%)
	Yes	47 (34%)
	No.....	48 (35%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	53 (38%)
	No.....	88 (62%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	56 (39%)
	No.....	86 (61%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy.....	24 (17%)
	Easy	14 (10%)
	Neither	15 (11%)
	Difficult.....	6 (4%)
	Very difficult.....	9 (6%)
	Don't know	71 (51%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	0 (0%)
	Easy	1 (1%)
	Neither	8 (6%)
	Difficult.....	13 (9%)
	Very difficult.....	28 (20%)
	Don't know	92 (65%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	4 (3%)
	No.....	137 (97%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	15 (11%)
	No.....	125 (89%)
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>	80 (58%)
	Yes	42 (31%)
	No.....	15 (11%)
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>	86 (61%)
	Yes	44 (31%)
	No.....	12 (8%)

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

<i>Did not have a problem/ did not receive help</i>	53 (39%)
Yes	56 (41%)
No.....	27 (20%)

Section II: 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	11 (8%)	13 (9%)	46 (33%)	24(17%)	31(22%)	15 (11%)
Vocational or skills training	29 (22%)	13 (10%)	37 (28%)	26(19%)	18(13%)	11 (8%)
Education (including basic skills)	19 (14%)	18 (13%)	58 (42%)	21(15%)	12 (9%)	10 (7%)
Offending behaviour programmes	38 (28%)	12 (9%)	26 (19%)	30(22%)	19(14%)	11 (8%)

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

<i>Not involved in any of these</i>	18 (13%)
Prison job.....	91 (66%)
Vocational or skills training.....	12 (9%)
Education (including basic skills).....	44 (32%)
Offending behaviour programmes	30 (22%)

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	17 (14%)	48 (40%)	39 (32%)	17 (14%)
Vocational or skills training	27 (28%)	41 (43%)	14 (15%)	14 (15%)
Education (including basic skills)	24 (21%)	54 (48%)	18 (16%)	17 (15%)
Offending behaviour programmes	27 (26%)	50 (49%)	17 (17%)	8 (8%)

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

<i>Don't want to go</i>	10 (7%)
<i>Never</i>	35 (25%)
<i>Less than once a week</i>	40 (28%)
<i>About once a week</i>	51 (36%)
<i>More than once a week</i>	6 (4%)

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

<i>Don't use it</i>	32 (23%)
Yes	58 (42%)
No.....	47 (34%)

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

<i>Don't want to go</i>	33 (24%)
0	69 (51%)
1 to 2	22 (16%)
3 to 5	9 (7%)
More than 5	3 (2%)

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

<i>Don't want to go</i>	9 (7%)
0	48 (35%)
1 to 2	46 (34%)
3 to 5	22 (16%)
More than 5	11 (8%)

Q11.8	How many times do you usually have association each week?	
	<i>Don't want to go</i>	9 (7%)
	<i>0</i>	9 (7%)
	<i>1 to 2</i>	12 (9%)
	<i>3 to 5</i>	47 (34%)
	<i>More than 5</i>	60 (44%)
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>	14 (10%)
	<i>2 to less than 4 hours</i>	24 (17%)
	<i>4 to less than 6 hours</i>	24 (17%)
	<i>6 to less than 8 hours</i>	29 (21%)
	<i>8 to less than 10 hours</i>	18 (13%)
	<i>10 hours or more</i>	16 (12%)
	<i>Don't know</i>	13 (9%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	53 (39%)
	<i>No</i>	84 (61%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	62 (44%)
	<i>No</i>	79 (56%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	46 (33%)
	<i>No</i>	92 (67%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	34 (24%)
	<i>Very easy</i>	9 (6%)
	<i>Easy</i>	25 (18%)
	<i>Neither</i>	18 (13%)
	<i>Difficult</i>	30 (21%)
	<i>Very difficult</i>	24 (17%)
	<i>Don't know</i>	2 (1%)

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>	28 (20%)
	<i>Yes</i>	76 (54%)
	<i>No</i>	36 (26%)
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>	64 (45%)
	<i>No contact</i>	27 (19%)
	<i>Letter</i>	29 (20%)
	<i>Phone</i>	11 (8%)
	<i>Visit</i>	29 (20%)

Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	78 (57%)
	No.....	60 (43%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	28 (20%)
	Yes	53 (38%)
	No.....	58 (42%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/not sentenced	86 (61%)
	Very involved.....	16 (11%)
	Involved	18 (13%)
	Neither	6 (4%)
	Not very involved	8 (6%)
	Not at all involved.....	7 (5%)
Q13.6	Who is working with you to achieve your sentence plan targets? (please tick all that applies to you.)	
	Do not have a sentence plan/not sentenced	86 (62%)
	Nobody.....	12 (9%)
	Offender supervisor	31 (22%)
	Offender manager	19 (14%)
	Named/ personal officer	20 (14%)
	Staff from other departments	16 (12%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/not sentenced	86 (62%)
	Yes	35 (25%)
	No.....	10 (7%)
	Don't know	7 (5%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	Do not have a sentence plan/not sentenced	86 (62%)
	Yes	15 (11%)
	No.....	22 (16%)
	Don't know	15 (11%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	Do not have a sentence plan/not sentenced	86 (61%)
	Yes	17 (12%)
	No.....	11 (8%)
	Don't know	26 (19%)
Q13.10	Do you have a needs based custody plan?	
	Yes	3 (2%)
	No.....	50 (38%)
	Don't know	78 (60%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes	28 (22%)
	No.....	102 (78%)

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>	Yes	No
Employment	23 (20%)	39 (33%)	55 (47%)
Accommodation	25 (20%)	48 (38%)	52 (42%)
Benefits	19 (15%)	60 (48%)	47 (37%)
Finances	27 (24%)	30 (27%)	56 (50%)
Education	22 (19%)	39 (34%)	54 (47%)
Drugs and alcohol	25 (21%)	56 (46%)	40 (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>	28 (21%)
Yes.....	56 (42%)
No.....	49 (37%)

Main comparator and comparator to last time



Prisoner survey responses HMP Foston Hall 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

		HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	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		150	1059	150	101
SECTION 1: General information					
1.2	Are you under 21 years of age?	5%	8%	5%	2%
1.3	Are you sentenced?	81%	77%	81%	83%
1.3	Are you on recall?	6%	5%	6%	5%
1.4	Is your sentence less than 12 months?	28%	24%	28%	18%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	2%	6%	1%
1.5	Are you a foreign national?	4%	13%	4%	3%
1.6	Do you understand spoken English?	99%	97%	99%	
1.7	Do you understand written English?	99%	96%	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.)	20%	20%	20%	14%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	7%	2%	4%
1.1	Are you Muslim?	10%	5%	10%	10%
1.11	Are you homosexual/gay or bisexual?	27%	24%	27%	42%
1.12	Do you consider yourself to have a disability?	32%	29%	32%	19%
1.13	Are you a veteran (ex-armed services)?	2%	1%	2%	
1.14	Is this your first time in prison?	49%	49%	49%	47%
1.15	Do you have any children under the age of 18?	55%	55%	55%	51%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	34%	37%	34%	54%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	46%	46%	46%	
2.3	Were you offered a toilet break?	13%	12%	13%	
2.4	Was the van clean?	60%	62%	60%	
2.5	Did you feel safe?	72%	79%	72%	
2.6	Were you treated well/very well by the escort staff?	80%	76%	80%	74%
2.7	Before you arrived here were you told that you were coming here?	76%	76%	76%	
2.7	Before you arrived here did you receive any written information about coming here?	5%	5%	5%	
2.8	When you first arrived here did your property arrive at the same time as you?	83%	80%	83%	90%
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	69%	51%	69%	
3.2	When you were searched in reception, was this carried out in a respectful way?	92%	89%	92%	76%

Main comparator and comparator to last time

Key to tables

		HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
3.3	Were you treated well/very well in reception?	78%	77%	78%	67%
	When you first arrived:				
3.4	Did you have any problems?	77%	77%	77%	70%
3.4	Did you have any problems with loss of property?	8%	13%	8%	12%
3.4	Did you have any housing problems?	21%	27%	21%	18%
3.4	Did you have any problems contacting employers?	2%	2%	2%	4%
3.4	Did you have any problems contacting family?	27%	29%	27%	31%
3.4	Did you have any problems ensuring dependants were being looked after?	5%	6%	5%	7%
3.4	Did you have any money worries?	20%	25%	20%	12%
3.4	Did you have any problems with feeling depressed or suicidal?	43%	35%	43%	39%
3.4	Did you have any physical health problems?	27%	23%	27%	
3.4	Did you have any mental health problems?	38%	32%	38%	
3.4	Did you have any problems with needing protection from other prisoners?	7%	5%	7%	7%
3.4	Did you have problems accessing phone numbers?	22%	27%	22%	20%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	40%	51%	40%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	80%	83%	80%	83%
3.6	A shower?	47%	46%	47%	52%
3.6	A free telephone call?	46%	81%	46%	74%
3.6	Something to eat?	73%	82%	73%	69%
3.6	PIN phone credit?	71%	57%	71%	
3.6	Toiletries/ basic items?	61%	76%	61%	
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?	41%	54%	41%	
3.7	Someone from health services?	75%	71%	75%	
3.7	A Listener/Samaritans?	34%	45%	34%	
3.7	Prison shop/ canteen?	19%	28%	19%	5%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	50%	51%	50%	48%
3.8	Support was available for people feeling depressed or suicidal?	46%	51%	46%	60%
3.8	How to make routine requests?	37%	40%	37%	44%
3.8	Your entitlement to visits?	34%	40%	34%	45%
3.8	Health services?	49%	51%	49%	56%
3.8	The chaplaincy?	39%	49%	39%	51%
3.9	Did you feel safe on your first night here?	63%	74%	63%	66%
3.10	Have you been on an induction course?	88%	87%	88%	84%

Main comparator and comparator to last time

Key to tables

		HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	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				
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	45%	58%	45%	64%
3.12	Did you receive an education (skills for life) assessment?	69%	81%	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?	38%	43%	38%	59%
4.1	Attend legal visits?	51%	60%	51%	67%
4.1	Get bail information?	12%	24%	12%	45%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	45%	39%	45%	47%
4.3	Can you get legal books in the library?	39%	46%	39%	
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	69%	72%	69%	73%
4.4	Are you normally able to have a shower every day?	92%	91%	92%	100%
4.4	Do you normally receive clean sheets every week?	84%	91%	84%	85%
4.4	Do you normally get cell cleaning materials every week?	84%	83%	84%	93%
4.4	Is your cell call bell normally answered within five minutes?	42%	47%	42%	64%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	70%	67%	70%	72%
4.4	Can you normally get your stored property, if you need to?	16%	31%	16%	44%
4.5	Is the food in this prison good/very good?	29%	27%	29%	26%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	53%	49%	53%	50%
4.7	Are you able to speak to a Listener at any time, if you want to?	35%	69%	35%	88%
4.8	Are your religious beliefs are respected?	48%	60%	48%	64%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	66%	65%	71%
4.10	Is it easy/very easy to attend religious services?	40%	54%	40%	
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	86%	84%	86%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	58%	66%	58%	76%
5.2	Do you feel applications are dealt with quickly (within seven days)?	31%	47%	31%	50%
5.3	Is it easy to make a complaint?	59%	65%	59%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	34%	46%	34%	64%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	31%	44%	31%	55%
5.5	Have you ever been prevented from making a complaint when you wanted to?	20%	17%	20%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	37%	36%	37%	34%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	49%	52%	49%	49%

Main comparator and comparator to last time

Key to tables

		HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	44%	50%	44%	51%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	4%	5%	4%	2%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	52%	56%	52%	
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	82%	80%	82%	79%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	78%	81%	78%	84%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	38%	44%	38%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	20%	25%	20%	27%
7.5	Do you have a personal officer?	67%	59%	67%	79%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	60%	74%	60%	70%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	44%	41%	44%	33%
8.2	Do you feel unsafe now?	19%	14%	19%	10%
8.4	Have you been victimised by other prisoners here?	45%	35%	45%	33%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	23%	17%	23%	19%
8.5	Hit, kicked or assaulted you?	11%	7%	11%	5%
8.5	Sexually abused you?	1%	2%	1%	1%
8.5	Threatened or intimidated you?	30%	23%	30%	
8.5	Taken your canteen/property?	8%	7%	8%	3%
8.5	Victimised you because of medication?	6%	6%	6%	
8.5	Victimised you because of debt?	0%	2%	0%	
8.5	Victimised you because of drugs?	2%	3%	2%	3%
8.5	Victimised you because of your race or ethnic origin?	5%	4%	5%	5%
8.5	Victimised you because of your religion/religious beliefs?	2%	2%	2%	4%
8.5	Victimised you because of your nationality?	2%	4%	2%	
8.5	Victimised you because you were from a different part of the country?	4%	3%	4%	2%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.5	Victimised you because of your sexual orientation?	4%	2%	4%	0%
8.5	Victimised you because of your age?	7%	3%	7%	3%
8.5	Victimised you because you have a disability?	6%	4%	6%	4%
8.5	Victimised you because you were new here?	14%	9%	14%	3%
8.5	Victimised you because of your offence/crime?	12%	8%	12%	4%
8.5	Victimised you because of gang related issues?	2%	3%	2%	1%
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	37%	26%	37%	18%

Main comparator and comparator to last time

Key to tables

		HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	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				
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	13%	10%	13%	3%
8.7	Hit, kicked or assaulted you?	4%	2%	4%	1%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	18%	12%	18%	
8.7	Victimised you because of medication?	6%	6%	6%	
8.7	Victimised you because of debt?	0%	1%	0%	
8.7	Victimised you because of drugs?	2%	3%	2%	1%
8.7	Victimised you because of your race or ethnic origin?	3%	2%	3%	3%
8.7	Victimised you because of your religion/religious beliefs?	4%	2%	4%	2%
8.7	Victimised you because of your nationality?	2%	2%	2%	
8.7	Victimised you because you were from a different part of the country?	3%	2%	3%	1%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	
8.7	Victimised you because of your sexual orientation?	2%	2%	2%	3%
8.7	Victimised you because of your age?	4%	2%	4%	2%
8.7	Victimised you because you have a disability?	6%	3%	6%	0%
8.7	Victimised you because you were new here?	4%	4%	4%	3%
8.7	Victimised you because of your offence/crime?	6%	4%	6%	0%
8.7	Victimised you because of gang related issues?	0%	2%	0%	0%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	54%	53%	54%	64%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	22%	30%	22%	51%
9.1	Is it easy/very easy to see the nurse?	44%	56%	44%	75%
9.1	Is it easy/very easy to see the dentist?	18%	16%	18%	20%
	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?	39%	49%	39%	67%
9.2	The nurse?	60%	61%	60%	76%
9.2	The dentist?	47%	44%	47%	45%
9.3	The overall quality of health services?	36%	42%	36%	66%
9.4	Are you currently taking medication?	75%	73%	75%	80%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	19%	50%	19%	
9.6	Do you have any emotional well being or mental health problems?	70%	55%	70%	36%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	49%	59%	49%	
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	38%	41%	38%	44%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	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				
10.2	Did you have a problem with alcohol when you came into this prison?	39%	29%	39%	32%
10.3	Is it easy/very easy to get illegal drugs in this prison?	27%	27%	27%	17%
10.4	Is it easy/very easy to get alcohol in this prison?	1%	3%	1%	
10.5	Have you developed a problem with drugs since you have been in this prison?	3%	5%	3%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	11%	7%	11%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	73%	83%	73%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	79%	76%	79%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	68%	84%	68%	90%
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	42%	49%	42%	
11.1	Vocational or skills training?	37%	43%	37%	
11.1	Education (including basic skills)?	55%	57%	55%	
11.1	Offending behaviour programmes?	28%	32%	28%	
	Are you currently involved in any of the following activities:				
11.2	A prison job?	66%	54%	66%	68%
11.2	Vocational or skills training?	9%	14%	9%	19%
11.2	Education (including basic skills)?	32%	34%	32%	47%
11.2	Offending behaviour programmes?	22%	15%	22%	22%
11.3	Have you had a job while in this prison?	86%	79%	86%	79%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	46%	54%	46%	64%
11.3	Have you been involved in vocational or skills training while in this prison?	72%	69%	72%	44%
	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?	60%	58%	60%	78%
11.3	Have you been involved in education while in this prison?	79%	79%	79%	74%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	61%	67%	61%	90%
11.3	Have you been involved in offending behaviour programmes while in this prison?	74%	65%	74%	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?	66%	60%	66%	79%
11.4	Do you go to the library at least once a week?	40%	49%	40%	57%
11.5	Does the library have a wide enough range of materials to meet your needs?	42%	53%	42%	
11.6	Do you go to the gym three or more times a week?	9%	24%	9%	16%
11.7	Do you go outside for exercise three or more times a week?	24%	37%	24%	45%
11.8	Do you go on association more than five times each week?	44%	55%	44%	69%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	16%	12%	17%

Main comparator and comparator to last time

Key to tables

		HMP Foston Hall 2014	Local prisons comparator	HMP Foston Hall 2014	HMP Foston Hall 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	39%	54%	39%	64%
12.2	Have you had any problems with sending or receiving mail?	44%	39%	44%	26%
12.3	Have you had any problems getting access to the telephones?	33%	21%	33%	12%
12.4	Is it easy/ very easy for your friends and family to get here?	24%	32%	24%	
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?	68%	65%	68%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	35%	36%	35%	
13.2	Contact by letter?	37%	29%	37%	
13.2	Contact by phone?	14%	12%	14%	
13.2	Contact by visit?	37%	43%	37%	
13.3	Do you have a named offender supervisor in this prison?	57%	48%	57%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	48%	53%	48%	61%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	62%	67%	62%	79%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	23%	32%	23%	
13.6	Offender supervisor?	60%	37%	60%	
13.6	Offender manager?	36%	28%	36%	
13.6	Named/ personal officer?	38%	18%	38%	
13.6	Staff from other departments?	31%	25%	31%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	68%	72%	68%	93%
13.8	Are there plans for you to achieve any of your targets in another prison?	29%	20%	29%	
13.9	Are there plans for you to achieve any of your targets in the community?	31%	33%	31%	
13.10	Do you have a needs based custody plan?	2%	9%	2%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	22%	21%	22%	31%
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?	41%	46%	41%	
13.12	Accommodation?	48%	57%	48%	
13.12	Benefits?	56%	62%	56%	
13.12	Finances?	35%	39%	35%	
13.12	Education?	42%	48%	42%	
13.12	Drugs and alcohol?	58%	67%	58%	
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?	53%	59%	53%	57%

Diversity analysis



Key question responses (ethnicity) HMP Foston Hall 2014

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

Key to tables

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		29	118
1.3	Are you sentenced?	72%	83%
1.5	Are you a foreign national?	11%	3%
1.6	Do you understand spoken English?	96%	100%
1.7	Do you understand written English?	93%	100%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	2%
1.1	Are you Muslim?	42%	3%
1.12	Do you consider yourself to have a disability?	32%	32%
1.13	Are you a veteran (ex-armed services)?	0%	3%
1.14	Is this your first time in prison?	58%	47%
2.6	Were you treated well/very well by the escort staff?	72%	83%
2.7	Before you arrived here were you told that you were coming here?	68%	77%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	94%
3.3	Were you treated well/very well in reception?	68%	81%
3.4	Did you have any problems when you first arrived?	85%	75%
3.7	Did you have access to someone from health care when you first arrived here?	57%	81%
3.9	Did you feel safe on your first night here?	57%	66%
3.10	Have you been on an induction course?	89%	87%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	36%	39%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	78%	67%
4.4	Are you normally able to have a shower every day?	93%	91%
4.4	Is your cell call bell normally answered within five minutes?	50%	41%
4.5	Is the food in this prison good/very good?	20%	31%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	29%	59%
4.7	Are you able to speak to a Listener at any time, if you want to?	29%	36%
4.8	Do you feel your religious beliefs are respected?	50%	47%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	66%
5.1	Is it easy to make an application?	89%	85%
5.3	Is it easy to make a complaint?	60%	59%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	51%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	12%	3%
7.1	Do most staff, in this prison, treat you with respect?	79%	83%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	71%	79%
7.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	22%	20%
7.4	Do you have a personal officer?	56%	69%
8.1	Have you ever felt unsafe here?	46%	44%
8.2	Do you feel unsafe now?	19%	18%
8.3	Have you been victimised by other prisoners?	50%	44%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	26%	31%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	22%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	8%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	4%	2%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.5	Have you been victimised because you have a disability? (By prisoners)	8%	6%
8.6	Have you been victimised by a member of staff?	55%	32%
8.7	Have you ever felt threatened or intimidated by staff here?	20%	17%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	0%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	7%	3%
8.7	Have you been victimised because of your nationality? (By staff)	4%	2%
8.7	Have you been victimised because you have a disability? (By staff)	7%	5%
9.1	Is it easy/very easy to see the doctor?	36%	19%
9.1	Is it easy/ very easy to see the nurse?	54%	41%
9.4	Are you currently taking medication?	76%	77%
9.6	Do you feel you have any emotional well being/mental health issues?	56%	75%
10.3	Is it easy/very easy to get illegal drugs in this prison?	22%	29%
11.2	Are you currently working in the prison?	56%	69%
11.2	Are you currently undertaking vocational or skills training?	19%	6%
11.2	Are you currently in education (including basic skills)?	33%	30%
11.2	Are you currently taking part in an offending behaviour programme?	19%	23%
11.4	Do you go to the library at least once a week?	50%	36%
11.6	Do you go to the gym three or more times a week?	13%	7%
11.7	Do you go outside for exercise three or more times a week?	13%	26%
11.8	On average, do you go on association more than five times each week?	28%	47%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	8%	12%
12.2	Have you had any problems sending or receiving mail?	27%	47%
12.3	Have you had any problems getting access to the telephones?	37%	33%

Diversity Analysis



Key question responses (disability; and age over 50) HMP Foston Hall 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		48	100	17	131
1.3	Are you sentenced?	81%	82%	88%	80%
1.5	Are you a foreign national?	4%	4%	0%	5%
1.6	Do you understand spoken English?	100%	99%	100%	99%
1.7	Do you understand written English?	100%	98%	100%	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.)	19%	19%	13%	21%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	1%	0%	2%
1.1	Are you Muslim?	11%	9%	6%	10%
1.12	Do you consider yourself to have a disability?			47%	31%
1.13	Are you a veteran (ex-armed services)?	7%	0%	0%	2%
1.14	Is this your first time in prison?	40%	54%	66%	48%
2.6	Were you treated well/very well by the escort staff?	81%	81%	87%	80%
2.7	Before you arrived here were you told that you were coming here?	76%	75%	74%	76%
3.2	When you were searched in reception, was this carried out in a respectful way?	93%	92%	94%	93%
3.3	Were you treated well/very well in reception?	83%	77%	94%	77%
3.4	Did you have any problems when you first arrived?	93%	69%	79%	77%
3.7	Did you have access to someone from health care when you first arrived here?	72%	78%	86%	73%
3.9	Did you feel safe on your first night here?	67%	63%	61%	64%
3.10	Have you been on an induction course?	85%	90%	93%	88%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	38%	39%	37%	38%

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?	56%	75%	74%	69%
4.4	Are you normally able to have a shower every day?	91%	92%	94%	92%
4.4	Is your cell call bell normally answered within five minutes?	44%	41%	43%	42%
4.5	Is the food in this prison good/very good?	34%	27%	43%	27%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	54%	53%	37%	55%
4.7	Are you able to speak to a Listener at any time, if you want to?	32%	37%	47%	34%
4.8	Do you feel your religious beliefs are respected?	63%	40%	66%	47%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	69%	65%	66%	65%
5.1	Is it easy to make an application?	87%	85%	86%	87%
5.3	Is it easy to make a complaint?	58%	60%	50%	60%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	53%	48%	39%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	46%	42%	44%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	2%	0%	5%
7.1	Do most staff, in this prison, treat you with respect?	76%	84%	88%	81%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	84%	75%	94%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	21%	20%	30%	19%
7.4	Do you have a personal officer?	65%	69%	82%	65%
8.1	Have you ever felt unsafe here?	54%	39%	59%	41%
8.2	Do you feel unsafe now?	25%	16%	21%	18%
8.3	Have you been victimised by other prisoners?	54%	41%	47%	44%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	33%	29%	41%	28%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	6%	0%	6%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	2%	2%	6%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	2%	2%	0%	2%
8.5	Have you been victimised because of your age? (By prisoners)	11%	6%	18%	6%

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)	15%	2%	12%	5%
8.6	Have you been victimised by a member of staff?	46%	32%	47%	35%
8.7	Have you ever felt threatened or intimidated by staff here?	25%	14%	34%	14%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	4%	1%	0%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	4%	3%	6%	3%
8.7	Have you been victimised because of your nationality? (By staff)	2%	2%	0%	2%
8.7	Have you been victimised because of your age? (By staff)	7%	2%	12%	3%
8.7	Have you been victimised because you have a disability? (By staff)	12%	2%	12%	4%
9.1	Is it easy/very easy to see the doctor?	26%	21%	50%	19%
9.1	Is it easy/ very easy to see the nurse?	51%	42%	68%	42%
9.4	Are you currently taking medication?	85%	73%	88%	74%
9.6	Do you feel you have any emotional well being/mental health issues?	93%	60%	53%	72%
10.3	Is it easy/very easy to get illegal drugs in this prison?	30%	27%	19%	29%
11.2	Are you currently working in the prison?	62%	69%	78%	64%
11.2	Are you currently undertaking vocational or skills training?	3%	12%	0%	10%
11.2	Are you currently in education (including basic skills)?	29%	33%	22%	33%
11.2	Are you currently taking part in an offending behaviour programme?	19%	24%	22%	21%
11.4	Do you go to the library at least once a week?	44%	38%	50%	39%
11.6	Do you go to the gym three or more times a week?	2%	12%	14%	8%
11.7	Do you go outside for exercise three or more times a week?	16%	28%	54%	21%
11.8	On average, do you go on association more than five times each week?	44%	43%	39%	45%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	15%	9%	14%	12%
12.2	Have you had any problems sending or receiving mail?	50%	41%	32%	45%
12.3	Have you had any problems getting access to the telephones?	41%	30%	19%	35%

Diversity analysis



Key question responses (sexual orientation) HMP Foston Hall 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

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		38	104
1.3	Are you sentenced?	94%	77%
1.5	Are you a foreign national?	0%	4%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	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.)	15%	19%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	2%
1.1	Are you Muslim?	11%	7%
1.12	Do you consider yourself to have a disability?	32%	33%
1.13	Are you a veteran (ex-armed services)?	0%	3%
1.14	Is this your first time in prison?	47%	50%
2.6	Were you treated well/very well by the escort staff?	86%	79%
2.7	Before you arrived here were you told that you were coming here?	92%	69%
3.2	When you were searched in reception, was this carried out in a respectful way?	91%	93%
3.3	Were you treated well/very well in reception?	81%	78%
3.4	Did you have any problems when you first arrived?	76%	79%
3.7	Did you have access to someone from health care when you first arrived here?	76%	76%
3.9	Did you feel safe on your first night here?	68%	63%
3.10	Have you been on an induction course?	89%	87%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	37%	39%

Key to tables

Diversity analysis

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	68%	68%
4.4	Are you normally able to have a shower every day?	92%	92%
4.4	Is your cell call bell normally answered within five minutes?	35%	45%
4.5	Is the food in this prison good/very good?	34%	25%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	55%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	29%	39%
4.8	Do you feel your religious beliefs are respected?	59%	42%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	73%	63%
5.1	Is it easy to make an application?	91%	85%
5.3	Is it easy to make a complaint?	76%	53%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	46%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	2%
7.1	Do most staff, in this prison, treat you with respect?	85%	82%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	85%	75%
7.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	15%	23%
7.4	Do you have a personal officer?	71%	66%
8.1	Have you ever felt unsafe here?	54%	39%
8.2	Do you feel unsafe now?	22%	18%
8.3	Have you been victimised by other prisoners?	57%	43%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	42%	26%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	2%
8.5	Have you been victimised because of your sexual orientation? (By prisoners)	15%	0%
8.5	Have you been victimised because of your age? (By prisoners)	9%	7%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	7%
8.6	Have you been victimised by a member of staff?	44%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	22%	14%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	3%
8.7	Have you been victimised because of your sexual orientation? (By staff)	6%	0%
8.7	Have you been victimised because of your age? (By staff)	3%	4%
8.7	Have you been victimised because you have a disability? (By staff)	3%	6%
9.1	Is it easy/very easy to see the doctor?	24%	21%
9.1	Is it easy/ very easy to see the nurse?	35%	47%
9.4	Are you currently taking medication?	81%	77%
9.6	Do you feel you have any emotional well being/mental health issues?	84%	67%
10.3	Is it easy/very easy to get illegal drugs in this prison?	30%	25%
11.2	Are you currently working in the prison?	75%	65%
11.2	Are you currently undertaking vocational or skills training?	9%	8%
11.2	Are you currently in education (including basic skills)?	30%	32%
11.2	Are you currently taking part in an offending behaviour programme?	39%	16%
11.4	Do you go to the library at least once a week?	30%	42%
11.6	do you go to the gym three or more times a week?	12%	7%
11.7	Do you go outside for exercise three or more times a week?	16%	25%
11.8	On average, do you go on association more than five times each week?	46%	43%
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%	14%
12.2	Have you had any problems sending or receiving mail?	46%	44%
12.3	Have you had any problems getting access to the telephones?	39%	31%



Prisoner survey responses HMP Foston Hall 2014 (D wing compared with all other wings)

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

		D Wing	All Other Wings (A, B, C, E, F and R)
	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		21	128
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	6%
1.3	Are you sentenced?	79%	81%
1.3	Are you on recall?	5%	6%
1.4	Is your sentence less than 12 months?	58%	24%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	6%
1.5	Are you a foreign national?	5%	4%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	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.)	20%	19%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	2%
1.1	Are you Muslim?	10%	9%
1.11	Are you homosexual/gay or bisexual?	28%	27%
1.12	Do you consider yourself to have a disability?	38%	31%
1.13	Are you a veteran (ex-armed services)?	5%	2%
1.14	Is this your first time in prison?	20%	54%
1.15	Do you have any children under the age of 18?	80%	51%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	33%	33%
2.5	Did you feel safe?	75%	72%
2.6	Were you treated well/very well by the escort staff?	79%	81%
2.7	Before you arrived here were you told that you were coming here?	68%	78%
2.8	When you first arrived here did your property arrive at the same time as you?	80%	84%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	78%	68%
3.2	When you were searched in reception, was this carried out in a respectful way?	88%	94%
3.3	Were you treated well/very well in reception?	61%	82%
When you first arrived:			
3.4	Did you have any problems?	90%	75%
3.4	Did you have any problems with loss of property?	5%	8%
3.4	Did you have any housing problems?	26%	21%
3.4	Did you have any problems contacting employers?	5%	2%

Key to tables

	Any percentage highlighted in green is significantly better	D Wing	All Other Wings (A, B, C, E, F and R)
	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?	34%	26%
3.4	Did you have any problems ensuring dependants were being looked after?	11%	4%
3.4	Did you have any money worries?	29%	19%
3.4	Did you have any problems with feeling depressed or suicidal?	40%	43%
3.4	Did you have any physical health problems?	45%	24%
3.4	Did you have any mental health problems?	50%	36%
3.4	Did you have any problems with needing protection from other prisoners?	5%	7%
3.4	Did you have problems accessing phone numbers?	29%	20%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	95%	78%
3.6	A shower?	48%	47%
3.6	A free telephone call?	38%	48%
3.6	Something to eat?	63%	75%
3.6	PIN phone credit?	80%	70%
3.6	Toiletries/ basic items?	58%	62%
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%	43%
3.7	Someone from health services?	58%	79%
3.7	A Listener/Samaritans?	20%	37%
3.7	Prison shop/ canteen?	10%	21%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	48%	50%
3.8	Support was available for people feeling depressed or suicidal?	33%	49%
3.8	How to make routine requests?	33%	38%
3.8	Your entitlement to visits?	38%	34%
3.8	Health services?	53%	49%
3.8	The chaplaincy?	38%	39%
3.9	Did you feel safe on your first night here?	73%	62%
3.10	Have you been on an induction course?	78%	89%
3.12	Did you receive an education (skills for life) assessment?	66%	70%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	42%	37%
4.1	Attend legal visits?	64%	50%
4.1	Get bail information?	29%	10%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	50%	44%
4.3	Can you get legal books in the library?	47%	38%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	55%	71%

Key to tables

	Any percentage highlighted in green is significantly better	D Wing	All Other Wings (A, B, C, E, F and R)
	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 able to have a shower every day?	66%	97%
4.4	Do you normally receive clean sheets every week?	83%	85%
4.4	Do you normally get cell cleaning materials every week?	71%	87%
4.4	Is your cell call bell normally answered within five minutes?	40%	43%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	36%	76%
4.4	Can you normally get your stored property, if you need to?	11%	17%
4.5	Is the food in this prison good/very good?	20%	31%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	55%
4.7	Are you able to speak to a Listener at any time, if you want to?	29%	36%
4.8	Are your religious beliefs are respected?	58%	47%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	73%	65%
4.10	Is it easy/very easy to attend religious services?	43%	39%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	84%	87%
5.3	Is it easy to make a complaint?	66%	59%
5.5	Have you ever been prevented from making a complaint when you wanted to?	26%	18%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	50%	35%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	32%	46%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	6%	4%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	73%	84%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	68%	80%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	28%	40%
7.4	Do staff normally speak to you most of the time/all of the time during association?	15%	21%
7.5	Do you have a personal officer?	34%	73%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	53%	42%
8.2	Do you feel unsafe now?	32%	16%
8.4	Have you been victimised by other prisoners here?	53%	43%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	29%	21%
8.5	Hit, kicked or assaulted you?	17%	11%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	32%	29%

Key to tables

	Any percentage highlighted in green is significantly better	D Wing	All Other Wings (A, B, C, E, F and R)
	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?	6%	8%
8.5	Victimised you because of medication?	6%	6%
8.5	Victimised you because of debt?	0%	0%
8.5	Victimised you because of drugs?	0%	2%
8.5	Victimised you because of your race or ethnic origin?	0%	5%
8.5	Victimised you because of your religion/religious beliefs?	0%	2%
8.5	Victimised you because of your nationality?	6%	1%
8.5	Victimised you because you were from a different part of the country?	6%	3%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	6%	3%
8.5	Victimised you because of your age?	0%	8%
8.5	Victimised you because you have a disability?	6%	6%
8.5	Victimised you because you were new here?	23%	13%
8.5	Victimised you because of your offence/crime?	12%	12%
8.5	Victimised you because of gang related issues?	0%	2%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	47%	35%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	22%	12%
8.7	Hit, kicked or assaulted you?	11%	3%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	22%	16%
8.7	Victimised you because of medication?	11%	5%
8.7	Victimised you because of debt?	0%	0%
8.7	Victimised you because of drugs?	0%	2%
8.7	Victimised you because of your race or ethnic origin?	0%	3%
8.7	Victimised you because of your religion/religious beliefs?	0%	3%
8.7	Victimised you because of your nationality?	6%	1%
8.7	Victimised you because you were from a different part of the country?	6%	2%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	0%	4%
8.7	Victimised you because you have a disability?	6%	5%
8.7	Victimised you because you were new here?	6%	4%
8.7	Victimised you because of your offence/crime?	0%	7%
8.7	Victimised you because of gang related issues?	0%	0%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	22%	23%

Key to tables

	Any percentage highlighted in green is significantly better	D Wing	All Other Wings (A, B, C, E, F and R)
	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		
9.1	Is it easy/very easy to see the nurse?	36%	46%
9.1	Is it easy/very easy to see the dentist?	22%	18%
9.4	Are you currently taking medication?	83%	74%
9.6	Do you have any emotional well being or mental health problems?	83%	68%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	58%	35%
10.2	Did you have a problem with alcohol when you came into this prison?	27%	42%
10.3	Is it easy/very easy to get illegal drugs in this prison?	23%	28%
10.4	Is it easy/very easy to get alcohol in this prison?	0%	1%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	22%	9%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	38%	43%
11.1	Vocational or skills training?	41%	37%
11.1	Education (including basic skills)?	68%	54%
11.1	Offending Behaviour Programmes?	32%	27%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	76%	65%
11.2	Vocational or skills training?	24%	7%
11.2	Education (including basic skills)?	24%	33%
11.2	Offending Behaviour Programmes?	12%	23%
11.4	Do you go to the library at least once a week?	42%	40%
11.5	Does the library have a wide enough range of materials to meet your needs?	50%	42%
11.6	Do you go to the gym three or more times a week?	6%	9%
11.7	Do you go outside for exercise three or more times a week?	0%	28%
11.8	Do you go on association more than five times each week?	47%	44%
11.9	Do you spend ten or more hours out of your cell on a weekday?	11%	12%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	22%	42%
12.2	Have you had any problems with sending or receiving mail?	64%	40%
12.3	Have you had any problems getting access to the telephones?	56%	30%
12.4	Is it easy/ very easy for your friends and family to get here?	11%	26%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	36%	60%
13.10	Do you have a needs based custody plan?	0%	3%
13.11	Do you feel that any member of staff has helped you to prepare for release?	17%	23%



Prisoner survey responses HMP Foston Hall 2014 (R wing compared with all other wings)

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

		R Wing	All Other Wings (A, B, C, D, E and F Wings)
	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		24	125
SECTION 1: General information			
1.2	Are you under 21 years of age?	9%	5%
1.3	Are you sentenced?	61%	85%
1.3	Are you on recall?	0%	7%
1.4	Is your sentence less than 12 months?	55%	24%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	6%
1.5	Are you a foreign national?	0%	5%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	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.)	17%	20%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	1%
1.1	Are you Muslim?	5%	10%
1.11	Are you homosexual/gay or bisexual?	22%	28%
1.12	Do you consider yourself to have a disability?	29%	33%
1.13	Are you a veteran (ex-armed services)?	0%	3%
1.14	Is this your first time in prison?	29%	53%
1.15	Do you have any children under the age of 18?	71%	53%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	17%	37%
2.5	Did you feel safe?	78%	71%
2.6	Were you treated well/very well by the escort staff?	78%	81%
2.7	Before you arrived here were you told that you were coming here?	91%	73%
2.8	When you first arrived here did your property arrive at the same time as you?	87%	83%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	78%	68%
3.2	When you were searched in reception, was this carried out in a respectful way?	96%	93%
3.3	Were you treated well/very well in reception?	91%	76%
When you first arrived:			
3.4	Did you have any problems?	83%	76%
3.4	Did you have any problems with loss of property?	9%	7%
3.4	Did you have any housing problems?	37%	18%

Key to tables

	Any percentage highlighted in green is significantly better	R Wing	All Other Wings (A, B, C, D, E and F Wings)
	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 employers?	4%	2%
3.4	Did you have any problems contacting family?	33%	26%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	5%
3.4	Did you have any money worries?	33%	17%
3.4	Did you have any problems with feeling depressed or suicidal?	37%	44%
3.4	Did you have any physical health problems?	33%	26%
3.4	Did you have any mental health problems?	46%	37%
3.4	Did you have any problems with needing protection from other prisoners?	4%	7%
3.4	Did you have problems accessing phone numbers?	22%	21%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	96%	77%
3.6	A shower?	71%	43%
3.6	A free telephone call?	54%	45%
3.6	Something to eat?	78%	72%
3.6	PIN phone credit?	87%	68%
3.6	Toiletries/ basic items?	71%	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?	61%	38%
3.7	Someone from health services?	86%	74%
3.7	A Listener/Samaritans?	34%	34%
3.7	Prison shop/ canteen?	23%	19%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	60%	48%
3.8	Support was available for people feeling depressed or suicidal?	64%	43%
3.8	How to make routine requests?	55%	34%
3.8	Your entitlement to visits?	45%	32%
3.8	Health services?	64%	47%
3.8	The chaplaincy?	41%	39%
3.9	Did you feel safe on your first night here?	77%	61%
3.10	Have you been on an induction course?	78%	90%
3.12	Did you receive an education (skills for life) assessment?	61%	70%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	10%	43%
4.1	Attend legal visits?	25%	57%
4.1	Get bail information?	5%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	30%	47%
4.3	Can you get legal books in the library?	34%	40%

Key to tables

	Any percentage highlighted in green is significantly better	R Wing	All Other Wings (A, B, C, D, E and F Wings)
	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?	50%	72%
4.4	Are you normally able to have a shower every day?	86%	94%
4.4	Do you normally receive clean sheets every week?	69%	87%
4.4	Do you normally get cell cleaning materials every week?	81%	86%
4.4	Is your cell call bell normally answered within five minutes?	30%	45%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	38%	76%
4.4	Can you normally get your stored property, if you need to?	14%	17%
4.5	Is the food in this prison good/very good?	33%	28%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	60%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	41%	35%
4.8	Are your religious beliefs are respected?	39%	50%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	61%	67%
4.10	Is it easy/very easy to attend religious services?	23%	44%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	76%	89%
5.3	Is it easy to make a complaint?	43%	63%
5.5	Have you ever been prevented from making a complaint when you wanted to?	34%	17%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	14%	41%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	50%	49%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	50%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	4%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	75%	83%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	74%	79%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	39%	38%
7.4	Do staff normally speak to you most of the time/all of the time during association?	24%	20%
7.5	Do you have a personal officer?	26%	76%
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	45%	43%
8.2	Do you feel unsafe now?	26%	17%
8.4	Have you been victimised by other prisoners here?	61%	41%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	24%	22%
8.5	Hit, kicked or assaulted you?	14%	11%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	36%	28%

Key to tables

	Any percentage highlighted in green is significantly better	R Wing	All Other Wings (A, B, C, D, E and F Wings)
	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?	19%	6%
8.5	Victimised you because of medication?	10%	5%
8.5	Victimised you because of debt?	0%	0%
8.5	Victimised you because of drugs?	5%	1%
8.5	Victimised you because of your race or ethnic origin?	14%	3%
8.5	Victimised you because of your religion/religious beliefs?	0%	2%
8.5	Victimised you because of your nationality?	5%	1%
8.5	Victimised you because you were from a different part of the country?	0%	4%
8.5	Victimised you because you are from a traveller community?	5%	0%
8.5	Victimised you because of your sexual orientation?	0%	4%
8.5	Victimised you because of your age?	14%	6%
8.5	Victimised you because you have a disability?	5%	6%
8.5	Victimised you because you were new here?	19%	13%
8.5	Victimised you because of your offence/crime?	0%	14%
8.5	Victimised you because of gang related issues?	5%	1%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	39%	36%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	14%	13%
8.7	Hit, kicked or assaulted you?	0%	4%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	9%	19%
8.7	Victimised you because of medication?	5%	6%
8.7	Victimised you because of debt?	0%	0%
8.7	Victimised you because of drugs?	5%	1%
8.7	Victimised you because of your race or ethnic origin?	0%	3%
8.7	Victimised you because of your religion/religious beliefs?	5%	3%
8.7	Victimised you because of your nationality?	5%	1%
8.7	Victimised you because you were from a different part of the country?	0%	3%
8.7	Victimised you because you are from a traveller community?	5%	0%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	9%	3%
8.7	Victimised you because you have a disability?	9%	4%
8.7	Victimised you because you were new here?	9%	4%
8.7	Victimised you because of your offence/crime?	5%	7%
8.7	Victimised you because of gang related issues?	0%	0%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	19%	23%

Key to tables

	Any percentage highlighted in green is significantly better	R Wing	All Other Wings (A, B, C, D, E and F Wings)
	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		
9.1	Is it easy/very easy to see the nurse?	45%	44%
9.1	Is it easy/very easy to see the dentist?	10%	20%
9.4	Are you currently taking medication?	91%	72%
9.6	Do you have any emotional well being or mental health problems?	70%	70%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	60%	34%
10.2	Did you have a problem with alcohol when you came into this prison?	48%	38%
10.3	Is it easy/very easy to get illegal drugs in this prison?	24%	28%
10.4	Is it easy/very easy to get alcohol in this prison?	0%	1%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	14%	10%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	14%	48%
11.1	Vocational or skills training?	10%	43%
11.1	Education (including basic skills)?	27%	61%
11.1	Offending Behaviour Programmes?	10%	32%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	43%	71%
11.2	Vocational or skills training?	0%	10%
11.2	Education (including basic skills)?	20%	35%
11.2	Offending Behaviour Programmes?	5%	25%
11.4	Do you go to the library at least once a week?	19%	45%
11.5	Does the library have a wide enough range of materials to meet your needs?	39%	43%
11.6	Do you go to the gym three or more times a week?	5%	10%
11.7	Do you go outside for exercise three or more times a week?	10%	27%
11.8	Do you go on association more than five times each week?	27%	48%
11.9	Do you spend ten or more hours out of your cell on a weekday?	0%	14%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	21%	42%
12.2	Have you had any problems with sending or receiving mail?	41%	44%
12.3	Have you had any problems getting access to the telephones?	33%	33%
12.4	Is it easy/ very easy for your friends and family to get here?	19%	25%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	28%	62%
13.10	Do you have a needs based custody plan?	0%	3%
13.11	Do you feel that any member of staff has helped you to prepare for release?	0%	26%