

Report on an unannounced inspection of

HMP Nottingham

by HM Chief Inspector of Prisons

8–19 September 2014

Glossary of terms

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Introduction

HMP Nottingham is a local prison holding just over 1,000 adult and young adult prisoners. Dating back to the 19th century, the prison was largely re-built between 2008 and 2010 and all accommodation is now modern. The prison was last fully inspected in 2010, although we did undertake a shorter visit in 2013. On these earlier visits we reported positively about the establishment, but this report is critical and raises significant concerns. Three of the four tests of a healthy prison that we address found outcomes for prisoners were poor, the worst assessment we can give; in the fourth, outcomes were not sufficiently good.

Nottingham is a front line prison receiving prisoners directly from the streets, just short of 100 prisoners a day move through the prison's reception. Processes were slow and despite some helpful peer support we were not confident that arrangements to identify needs or risks of new arrivals were thorough or properly communicated. There was nothing in place to induct new prisoners.

The evidence of our prisoner survey was compelling. Responses on nearly all safety indicators were poor and almost 40% of prisoners reported victimisation by other prisoners. Levels of violence, including assaults on staff and prisoners, were very high, and tensions in the prison were clearly evident with several barricade incidents, a hostage taking and many incidents at height recorded in the months before our arrival. Remedial action in the form of a three day lock down of some wings was deemed necessary in the week before we arrived and while this quite extreme measure had helped, it was indicative of the problems the prison faced. Work to reduce violence and tackle bullying was not effective, although security and intelligence management was good. Use of force was, in keeping with the levels of violence, high, and had increased, and many incidents were serious. Vulnerable prisoners were, despite the problems, kept safe.

The amount of self-harm was similar to other prisons, as was the number of those in crisis requiring case management interventions and support. One prisoner had tragically taken his own life since our last inspection. The quality of case management was poor and had been criticised by the Prisons and Probation Ombudsman following his investigation of the self-inflicted death.

There was a downward trend in drug taking as indicated by mandatory drug testing data, although some months recorded increased spikes of activity and almost half of prisoners in our survey thought it easy to get drugs in the prison. Work to reduce drug supply seemed to be having an impact, and provision for those with substance misuse needs was appropriate.

The prison grounds were bleak and littered, cells were routinely overcrowded, poorly equipped and in a poor decorative state. Cells contained graffiti and showers and toilets were poorly screened and dirty. Prisoners had insufficient access to clean bedding and clothes; access to telephones was unpredictable and they had little confidence in the applications system to deal with minor requests. The management of formal complaints was better. Relationships between staff and prisoners were adequate but deteriorating, and consultation with prisoners was very limited. Arrangements to promote diversity were lacklustre, and work to consult with and support prisoners from most of the protected characteristic groups was insufficient. The quality of health care overall was reasonably good, despite some negative prisoner perceptions and some long waiting times for services.

The amount of time prisoners had out of cell was limited and unpredictable. Staff shortages had caused the imposition of a general restricted routine, and during the working day about half of the prisoners were locked up in their cells doing nothing. Many prisoners could spend up to 21 hours a day confined to their cells. It was not surprising therefore that purposeful activity places were underused. In the previous six months, only half of those enrolled in education attended. Attendance at workshops was similarly very low and much work was unchallenging. Access to vocational training was very limited. Collaborative working between the prison and the education provider was, despite the failings, improving and the quality of teaching was getting better. Prisoner achievement of

qualifications was also reasonably good for those who attended. Library and gym facilities were good but underused because of poor prisoner access.

In our survey of prisoners, 83% suggested that no one was working with them to achieve their sentence plan targets. Offender management was very weak and most offender supervisors were overwhelmed and unable to support and motivate prisoners. Many offender risk assessments and sentence plan updates were incomplete. The risks posed by some potentially dangerous offenders were not properly managed and communication between the prison and community offender managers concerning such cases was not good enough. The resettlement needs of new arrivals were not assessed and there was no meaningful pre-release assessment. Resettlement work in general did not ensure sufficiently effective outcomes for prisoners in their preparation for release.

At the time of our inspection, Nottingham prison was in a very difficult place. The prison faced challenges common to many other prisons, but was failing in most of its core responsibilities. The prison was not safe enough; conditions were not good enough; prisoners were not sufficiently active; and not enough was done to manage risks and reduce the likelihood of reoffending. Since our inspection, the National Offender Management Service (NOMS) has taken action to try to stabilise the prison. A new interim governor is in place, but at the time this report was written it was too early to judge whether the prison's new leadership was making improvements. We will return to the prison much more quickly than usual to assess progress.

Nick Hardwick
HM Chief Inspector of Prisons

February 2015

Fact page

Task of the establishment

Local prison holding young adult and adult males.

Prison status

Public

Region

East Midlands

Number held

8.9.14: 1,042

Certified normal accommodation

723

Operational capacity

1,100

Date of last inspections

Short follow-up inspection: 25-27 February 2013

Full inspection: 15-19 February 2010

Brief history

HMP Nottingham was first opened in 1890. All of the original Victorian prison was demolished in 2008, with only part of the gatehouse and the wall remaining. Work to rebuild an expanded prison was completed in February 2010. Since 1997 the prison has been a category B local establishment serving local courts in Nottingham and Derby.

Short description of residential units

| | |
|--------|--|
| A wing | integrated drug treatment system: 122 cells holding up to 180 |
| B wing | mainly category C prisoners: 160 cells holding up to 226 |
| C wing | first night and induction: 64 cells holding up to 110 |
| D wing | general population: 100 cells holding up to 170 |
| E wing | general population: 100 cells holding up to 170 |
| F wing | lifer and long-term unit: 78 cells holding up to 104, plus six in enhanced care assessment cells (ECA) |
| G wing | vulnerable prisoner unit: 100 cells holding up to 140. |

Name of governor

James F Shanley

Escort contractor

GEOAmey

Health service provider

Nottinghamshire Healthcare Trust

Learning and skills provider

Milton Keynes College

Independent Monitoring Board chair

Deborah White

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** *The process to manage prisoners' early days lacked rigour. Reception interviews were not private and induction was poor. Many prisoners felt unsafe, levels of violence were high and many incidents were serious. Investigations were poor and strategic oversight was lacking. Self-harm prevention processes were not sufficiently good. The security department was well run and effective. Mandatory drug testing positive rates were reducing. Use of force was high and its governance was weak. The segregation unit was well managed and the length of stay was usually short. Prisoners recovering from substance misuse problems received limited support. **Outcomes for prisoners were poor against this healthy prison test.***
- S2** Most prisoners had short journeys to arrive at the prison. Nottingham received a large number of new prisoners every day, which presented operational challenges and risks that were not adequately addressed by the prison's early days procedures. Person escort records were completed well and risk information was available to reception staff, but initial risk assessments did not take place in private. Some prisoners waited too long in reception and a few were located to residential units very late at night. All new arrivals were strip searched, including those who had arrived from other prisons, which was disproportionate. Reception and first night prisoner orderlies provided useful peer support to new arrivals. Not all relevant information was relayed to first night staff who were unaware of some new arrivals. Most prisoners had not received an adequate induction; only 37% of prisoners in our survey said they had had an induction, compared with 92% at the previous full inspection.
- S3** Levels of violence were high for the type of prison, and there had been some very serious incidents. In our survey, far more prisoners than the comparator said they felt unsafe. Almost 40% said they had been victimised by other prisoners, and there was a significant amount of tension and frustration in the prison. Violent incident investigations were often not carried out, and there was no formal support for victims. The safer custody meeting was well attended and discussed a reasonable amount of data, but there was little evidence of subsequent actions. Vulnerable prisoners were kept reasonably safe.
- S4** Levels of self-harm were similar to other local prisons. Case management for prisoners at risk was not sufficiently robust and had been criticised in a recent Prisons and Probation Ombudsman report into the one self-inflicted death since the previous inspection. Care maps were sometimes missing, observational entries were not always completed as required, and many reviews were not multidisciplinary. A restricted regime and limited access to activities had a particularly negative impact on prisoners at risk of self-harm. Access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) was improving as a new cohort of Listeners had just been trained. Links between the Samaritans and the prison were underdeveloped.
- S5** There was an adults safeguarding policy but no one from the prison attended the local safeguarding adults board. We saw some good support from the health care team for prisoners with safeguarding needs. However, the significant social care needs of some men were not adequately met.

- S6 Procedural security was generally well managed and security committee meetings were well attended. The management of intelligence was very good and there were excellent links with the local police. The security department identified and dealt with the more covert forms of organised crime and gang activity. The supervision of prisoners on wings was sometimes inadequate, and there had been many serious incidents in the previous six months. This had contributed to the recent decision to lock down three wings for up to three days, which was a justifiable response to substantial concerns about maintaining control in the prison. In our survey, half the prisoners said that it was easy to get illegal drugs in the prison. Although the mandatory drug testing positive rate was slightly above target, it was reducing as a result of effective actions to stem supply. Despite good intelligence about prisoners who could have been using drugs, the prison had stopped carrying out suspicion drug testing.
- S7 The number of prisoners on the basic level of the incentives and earned privileges scheme was high and their regime was very limited. Behaviour improvement targets were rarely set and reviews were often cursory.
- S8 The number of adjudications was comparatively low and hearings were conducted fairly. Use of force was high and some incidents had involved high level interventions. Batons had been drawn on nine occasions and had been used three times over the previous year. Their use appeared justified in most cases. Governance of baton incidents was very good, but it was much weaker in other areas. Use of force documentation was not always managed properly and some was incomplete, but those that were completed usually suggested that force was used proportionately. The collection and analysis of data to identify patterns or trends was underdeveloped.
- S9 The number of prisoners entering the segregation unit was comparatively high but average stays were usually reasonably short. However, there were some notable exceptions and a few prisoners remained segregated for long periods with little to do. Care planning was developing, and staff-prisoner relations in the unit were reasonable.
- S10 Clinical management of prisoners with substance misuse needs was generally appropriate. Integrated drug treatment system (IDTS) and mental health teams were co-located, contributing to good joint working. However, there was no one-to-one or group work to support prisoners attempting to recover from drug misuse.

Respect

S11 *Many cells were in poor condition. Staff-prisoner relationships had deteriorated. The management of diversity work was inadequate. The chaplaincy provided a generally good service. Complaint responses were appropriate but often late. Health services were generally good but it took too long to see doctors and this created significant risks. Prisoners were very negative about the food.*
Outcomes for prisoners were not sufficiently good against this healthy prison test.

S12 Internal communal areas were reasonably clean but the grounds were bleak and littered. There was significant overcrowding. Many cells had graffiti and were poorly ventilated. Showers and toilets on most residential units were dirty, and in-cell toilets were inadequately screened. Prisoners had insufficient access to clean bedding, and convicted prisoners could not wear their own clothes. Access to telephones was poor for many prisoners. There was very little faith in the application system and no system for checking timeliness of responses.

- S13 In our survey, fewer prisoners than the comparator said they felt respected by most staff or that there was a member of staff they could turn to with problems. The personal officer scheme was ineffective. We saw some good interactions between prisoners and staff, but relationships were mixed overall and affected by the high number of redeployed and detached duty staff who had little knowledge of the prisoners on their units. There were no regular prisoner consultation forums.
- S14 The strategic management of equality work was poor. There was no targeted provision for or consultation with protected groups. The discrimination incident reporting system was poorly managed and very few reports were submitted. In our survey, black and minority ethnic prisoners were more negative than white prisoners about many areas. The prison's own monitoring had also highlighted some disparities, with little evidence of action to address them. Ten immigration detainees were held beyond the end of their sentences in restrictive prison conditions, which was inappropriate. Identification of prisoners with disabilities was good and reasonable adjustments had been made for a few who needed them. Emergency personal evacuation plans were in place, although not always readily available to staff. There were no paid carers.
- S15 Faith facilities were adequate. The chaplaincy provided a wide range of services to meet the needs of most religions, and was prominent in the life of the prison.
- S16 The number of complaints was very high, with the regime, access to property and the prison shop the most prevalent. Prisoners had very little faith in the system. Most responses were respectful and addressed the issues raised, but too many were answered late.
- S17 There were no legal services. The library contained legal books Prison Service Instructions and computers, but many prisoners had poor access to it. Prisoners could not obtain adequate bail support or 'access to justice' laptops to work on their cases.
- S18 Prisoners were generally dissatisfied with the access to health services, and waiting times for most services were excessive. Out-of-hours GP provision was inadequate and created significant risk. Clinical governance and the standard of care were generally good. An enhanced care unit on F wing gave prisoners increased access to nursing support, but was not a sufficiently therapeutic regime or environment. Pharmacy services were good but there were too many opportunities to divert prescribed medication. Dental services were good. The integrated mental health team provided a good service.
- S19 Prisoners were very negative about the quality and quantity of the food, and the catering staff were also unhappy about the quality of the supplies. Meals were routinely served too early, and the meagre breakfast packs were issued the day before consumption.

Purposeful activity

- S20** *Time out of cell was very limited and still not predictable. Activities were regularly cancelled, causing frustration and anger. Strategic management of activities was narrowly focused. There were enough activity places but attendance was poor. The quality of teaching and learning in education was generally good. Most workshops provided unchallenging work. Too few prisoners used the library. There was unacceptably poor access to PE. **Outcomes for prisoners were poor against this healthy prison test.***

- S21 The regime for most prisoners was confusing, unpredictable and a constant source of frustration. The maximum time unlocked of around seven hours a day applied to very few prisoners. Access to association was too limited and cancellations of exercise were not recorded. Our roll checks during the core working day found that around half of prisoners were locked in their cells without purposeful activity. Unemployed prisoners were routinely locked up for around 21 hours a day.
- S22 Managers had made some efforts to offset the impact of the restricted regime. There were more qualifications offered in the education department than at the previous inspection, but not enough in work. Collaborative working between Milton Keynes College and the prison was good and had led to tangible improvements in outcomes for some prisoners. There was an effective focus on improving teaching in education but this did not extend to other areas, such as the kitchen or workshops. Quality assurance and self-assessment were too limited.
- S23 There were enough spaces to provide most prisoners with full- or part-time purposeful activity, but men regularly missed two out of four or five sessions a week. The range of classroom education was appropriate, but not enough was offered in workplaces. An increase in provision of English and maths at entry level was still insufficient to meet the high need. Too much prison work was unchallenging and did not prepare prisoners adequately for the demands of working on release. Allocation to work did not take into account needs identified by the National Careers Service or in sentence plans.
- S24 Much classroom teaching and learning was good and focused on important practical skills, although assessment of prisoners' written work was not good enough. Learning in most workshops was limited, but effective in the kitchen and bistro areas and in industrial cleaning. Prisoners' achievement of qualifications in education was reasonably good, but there was very limited accreditation of skills they developed in workshops. Attendance at learning and work was poor. In the previous six months, only around half of those enrolled on education sessions had attended. Attendance at many workshops was also very low.
- S25 The library was well stocked and actively promoted literacy and reading. However, the number of prisoners who visited was often low. Opening hours were limited and did not extend to evenings or weekends.
- S26 PE facilities were generally good, but access was poor. Too many scheduled sessions were cancelled, and none at all took place during the inspection.

Resettlement

S27 *Strategic management of resettlement was underdeveloped, although there had been some work to prepare for transition to a resettlement prison. The offender management unit was overwhelmed with work and offender supervisor work was very limited. There was a significant offender assessment system (OASys) backlog. Important elements of public protection work were not done. Resettlement needs were poorly assessed. Health and drugs resettlement pathway work was good, but other pathways did not provide enough support to prisoners before release. **Outcomes for prisoners were poor against this healthy prison test.***

S28 Strategic management of resettlement focused exclusively on resettlement pathway provision and did not incorporate offender management. A prisoner needs analysis was useful to a point but limited in what it covered. Prisoners were more negative than the comparators in response to most resettlement questions in our survey. There were some

appropriate plans to make the transition to a resettlement prison and raise the profile of resettlement, including the development of a resettlement hub.

- S29 In our survey, 83% of prisoners said nobody was working with them to achieve their sentence plan targets. Offender management was weak; most offender supervisors were overwhelmed with work and were usually redeployed to the wings, so unable to see prisoners or motivate them to achieve sentence plan targets. There were 110 OASys assessments overdue and sentence planning was routinely late, undermining the management of risk. Communication between offender supervisors and offender managers in the community was often poor. Some lifers had been in the prison for too long and had not been able to progress in their sentence plans. Quarterly lifer days were valued by those who attended.
- S30 Internal risk monitoring arrangements were adequate, but the risk prisoners posed on release was not adequately assessed and communicated. Multi-agency public protection arrangements (MAPPA) were poorly developed, and the risks posed by some potentially dangerous offenders were not effectively managed. Some prisoners potentially subject to MAPPA were due for release without a risk level assigned. Integrated risk management team meetings were not regular, and important information was not recorded on the violent and sexual offenders register (VISOR). When they were completed, MAPPA reports were good.
- S31 New arrivals did not receive an immediate resettlement needs assessment, and there was no meaningful pre-release assessment to identify and address resettlement needs. For a local prison releasing a substantial number of prisoners every day, this was unacceptable. A new through-the-gate mentoring project was promising – providing a link to services in the community and support for prisoners to access them on release – and the prison had good strategic and operational links with integrated offender management teams in the community.
- S32 Accommodation and finance, benefit and debt services did not meet the needs of the population. Around 13% of prisoners had been released with no accommodation in the previous six months, which was high. Accommodation surgeries were often cancelled. There was no support for prisoners who needed help to manage debt, and links with banks to open accounts were inadequate. The Department of Work and Pensions provided useful benefits advice.
- S33 The National Careers Service provided good advice, but there were no links between skills action plans and sentence planning. There were no specific pre-release courses, and pre-release provision was limited mainly to careers advisers working with prisoners on their CVs. The virtual campus (giving prisoners access to community education, training and employment opportunities via the internet) was not used for job search, which was a missed opportunity.
- S34 Pre-release arrangements for prisoners with health and substance misuse needs were effective and included appropriate liaison with community services. The resettlement support for prisoners with mental health issues was exemplary.
- S35 A staffed and properly equipped visitors' centre was open before and after visiting times, but visits often started late because visitors were not taken to the visits hall promptly. There was little provision to support prisoner relationships with family and friends, with the exception of popular extended family visits.

- S36 Despite some identified needs, there were no accredited offending behaviour programmes, and prisoners had not been moved promptly enough to prisons where they could access such courses. A restorative justice programme ran but only 10 prisoners had completed it in the previous year.

Main concerns and recommendations

- S37 Concern: Reception and first night procedures were weak and failed to provide adequate support to prisoners during their vulnerable early days in prison. The reception process was often slow and some prisoners were located to residential units very late at night. Night staff had little information about new arrivals and were sometimes completely unaware of them. Few prisoners had received an adequate induction.

Recommendation: Reception and first night processes should ensure a speedy and efficient reception. First night staff should be well informed about all new arrivals, including their personal circumstances and risk factors, and all prisoners should receive a full induction within a week of arrival.

- S38 Concern: There was no meaningful consultation with any prisoners and no specific support groups for prisoners with protected characteristics.

Recommendation: Effective prison-wide prisoner consultation, discussion and support forums should be developed, including some for groups with protected characteristics.

- S39 Concern: Levels of violence were high and a high proportion of prisoners felt unsafe. Violent incidents were often not investigated and there was no system for supporting victims. Strategic management of violence reduction was weak.

Recommendation: All violent incidents should be fully investigated and systematic action taken to address bullying and support victims. The safer custody committee should ensure rigorous and prompt remedial action in response to emergent concerns about violence.

- S40 Concern: Overall living conditions were poor for too many prisoners. Many cells were crowded, had graffiti and poorly screened toilets. Showers and toilets were dirty and prisoners had poor access to clean bedding. There were significant amounts of accumulated rubbish.

Recommendation: Prison cells and the general environment should provide clean, safe and decent living conditions for all prisoners.

- S41 Concern: Time out cell was very limited and the core day was not delivered consistently, causing considerable tension and frustration. Association was limited, and the ability to attend work and education was poor. Prisoners had virtually no PE at all during the inspection.

Recommendation: The prison should deliver a predictable and equitable regime that allows prisoners to have significant time out of cell, complete domestic tasks, and engage in scheduled learning and skills activities, work and PE.

S42 Concern: The risks posed by some potentially dangerous offenders were not effectively managed. Communication between the prison and external offender managers about prisoners subject to multi-agency public protection arrangements (MAPPA) was often poor. Not all relevant cases were identified and referred to external offender managers to assess the appropriate MAPPA risk level before release. Inter-departmental risk management meetings were rarely convened.

Recommendation: Prisoners subject to multi-agency public protection arrangements (MAPPA) should be correctly identified, and there should be appropriate contact with external offender managers. An inter-departmental risk management meeting should meet regularly to ensure all MAPPA nominal and high risk cases are fully considered six months before release.

S43 Concern: Initial and pre-release resettlement needs assessments were generally poor or absent, and resettlement pathway support was often weak. Too many prisoners were released without accommodation and without sufficient advice on finance, benefit or debt. For a local prison releasing a large number of people into the community, this was a significant shortcoming.

Recommendation: All prisoners should be given an immediate needs assessment on their arrival covering all resettlement pathways, and this should be reviewed in sufficient time before their release to address outstanding needs.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Most prisoners had short journeys. Person escort records were completed well with risk information passed on.*

I.2 The prison received a high number of new prisoners every day, usually from nearby courts, and journey times were generally short. Although we observed some queuing of escort vehicles outside reception, prisoners were generally content with the escort experience. In our survey, about two-thirds of respondents said they had been treated well by escort staff. Person escort records, including risk information, were completed well.

Early days in custody

Expected outcomes:

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

I.3 *Reception was a busy environment. Reception and first night risk assessments were not always carried out in private and were often delayed, and new arrivals waited too long in reception. All prisoners were strip searched, which was disproportionate. First night staff did not know of all new arrivals or have relevant risk information. There was good prisoner peer support from reception and first night orderlies. There was no structured or regular induction.*

I.4 Reception was busy, with between 75 and 90 movements a day. It was clean and had adequate holding rooms. Initial risk assessments took place at the main reception desk and were not in private. All new arrivals, including those transferred from other prisons, were strip searched on arrival, which was disproportionate. Vulnerable prisoners were held in separate reception holding rooms. In our survey, only 19% of prisoners said they had been in reception for less than two hours, against the 43% comparator. We observed some prisoners waiting in reception for more than five hours, only reaching their residential units after 10pm (see main recommendation S37).

I.5 Four prisoner orderlies provided useful peer support to new arrivals, including written and verbal information about prison rules and regulations, entitlement to visits and telephone access, as well as drinks and hot food. All new arrivals could have a free telephone call, and in our survey 72% of prisoners, against the comparator of 58%, said that they had been offered this. All new arrivals received a health care check and cell sharing risk assessment (CSRA) before they moved on to the first night unit.

- 1.6** Prisoner orderlies on the first night unit helped new arrivals to complete basic forms to ensure prompt access to telephone calls and visits. First night unit staff did not always assess the individual circumstances and specific needs of new arrivals adequately. In our survey, 80% of prisoners said they arrived with problems but only 19% said they received help or support from staff in dealing with them. Only 21% said they were offered support for people feeling depressed or suicidal compared with 62% in 2010 and the 42% comparator. During our night visit, we observed that not all relevant risk information about new arrivals had been relayed to night staff on the first night unit. First night unit staff were unaware of some new arrivals (see main recommendation S37).
- 1.7** There was no structured, comprehensive, multidisciplinary induction for new arrivals. No inductions took place during the inspection, and there were no records available listing prisoner attendance. In our survey, only 37% of prisoners said that they had been on a prison induction programme, compared with 92% in 2010 and the 77% comparator (see main recommendation S37).

Recommendation

- 1.8 Prisoners should only be strip searched following an individual risk assessment.**

Housekeeping point

- 1.9** All risk interviews with new arrivals should take place in private.

Bullying and violence reduction

Expected outcomes:

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

- 1.10** *Most prisoners said they felt unsafe. Levels of violence were very high and had peaked during a recent period of instability. There was no strategic oversight of violence reduction, processes to manage violence were underdeveloped and there was no formal support for victims.*

- 1.11** The prison had recently been through a difficult period of instability (see paragraph 1.36) and, following remedial action, had introduced measures to re-establish control and improve general safety. In our survey, responses on all safety indicators were very poor and showed that the majority of prisoners did not feel safe at Nottingham. Almost 40% reported victimisation by other prisoners.

- 1.12** Levels of violence were very high for the type of prison, especially assaults on staff and on prisoners. Strategic management was weak, with no current violence reduction strategy to guide staff. The safer custody policy essentially contained only definitions. A new draft policy had yet to be published. Safer custody meetings were only held bimonthly and, although attendance was reasonable and sufficient data were presented, they did not always run and there was little evidence that they identified any actions (see main recommendation S39).

- I.13** Prisoners committing, or suspected of committing, acts of violence were reduced to the basic regime for a minimum of 21 days. Documentation to record this was poor; it was too often incomplete, almost never focused on behaviour improvement, and objectives were generic, such as, 'conform to the regime'. Investigations into incidents often did not take place. Where they were completed, some investigations failed to show sufficient enquiry or evidence to justify the actions that were subsequently taken against suspected perpetrators. There was no support for victims of violence or victimisation, who either opted to remain in their cells or, in a few cases, moved to the vulnerable prisoner wing (see main recommendation S39).
- I.14** G wing was the designated vulnerable prisoner wing and, for most, provided a reasonably safe and stable environment. Prisoners in our groups spoke well of the support they received from G wing staff but said this was inconsistent because of the regular cross-deployment of staff. The prison made a good job of protecting prisoners on this wing and had changed routines to reduce their contact with other prisoners. However, regime facilities were minimal and consisted of a single workshop, two small classrooms and access to the main education block one day a fortnight.

Recommendation

- I.15** **The regime activities for vulnerable prisoners should match the opportunities available to the rest of the population.**

Self-harm and suicide prevention

Expected outcomes:

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

I.16 *Self-harm figures were similar to other prisons but there were fewer prisoners subject to suicide and self-harm case management. The restricted regime disproportionately affected prisoners in crisis. Case management procedures were insufficiently robust. Listeners were positive about their role. Links between the Samaritans and the prison were underdeveloped.*

- I.17** In the previous six months, 93 prisoners had self-harmed, some more than once, giving a total of 128 self-harm incidents, which was in line with other local prisons. In the previous six months, 274 prisoners were supported through assessment, care in custody and teamwork (ACCT) case management for risk of suicide or self-harm, fewer than at similar prisons. During our inspection, 24 prisoners were subject to ACCT. Since our last inspection in 2013, one prisoner had committed suicide.
- I.18** Prisoners on ACCTs told us they were frustrated by the restricted regime they were held under (see paragraph 3.3 and main recommendation S41). The long periods of lock up affected their well-being disproportionately and little obvious account was taken of this.
- I.19** ACCT procedures were insufficiently robust, and did not always record self-harm triggers and next of kin details accurately. Assessments varied in quality: some were very good while others lacked detail. Care maps were sometimes missing and observations were not always completed within the required timescale. During the extended lockdown period just before

our inspection one prisoner threatened to kill himself and required hourly observations, but staff did not check on him for four hours and 45 minutes on one day. Although mental health nurses attended many reviews, too many reviews did not include staff from other disciplines, and post-closure reviews were rare. Management checks did not pick up all these deficiencies. The Prisons and Probation Ombudsman investigation into the self-inflicted death that occurred since our last inspection had criticised the prison for not following ACCT procedures adequately.

- I.20** In our survey, fewer prisoners than the comparator (34% against 55%) said that they were able to speak to a Listener (prisoners trained by the Samaritans to provide confidential emotional support) at any time. A new cohort of Listeners completed their training during our inspection. We spoke to a group of Listeners and Samaritans who were positive about their role in supporting prisoners in crisis. However, the Samaritans and the safer custody manager did not meet regularly to discuss problems. Only two out of six Samaritans telephones for prisoners were working. Each wing had a Listener suite, but some were untidy, dirty and not fit for purpose.

Recommendations

- I.21 All prisoners at risk of self-harm should have access to sufficient support and activities. Assessment, care in custody and teamwork (ACCT) procedures and documentation should be significantly improved.**
- I.22 Prisoners should be able to access a working Samaritans telephone.**

Housekeeping points

- I.23** The safer custody manager should meet the Samaritans regularly.
- I.24** The Listener suites should be clean, tidy and fit for purpose.

Safeguarding (protection of adults at risk)

Expected outcomes:

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

- I.25** *Safeguarding procedures were generally weak. There was no named safeguarding lead. An outreach worker in the health care team supported at-risk prisoners.*

- I.26** Other than some good work by the health care team, safeguarding procedures were weak. There was a safeguarding policy but no individual named as a safeguarding lead, and no one from the prison attended the local safeguarding adults board. Some prisoners had very significant social care needs and could not look after themselves alone. Despite this, there was no formal carers' scheme and these men often relied on the goodwill of other prisoners

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).

to meet their needs. An outreach worker from the Rethink Mental Illness charity was based in the health care team, and did some excellent work in resettling prisoners with safeguarding needs by liaising with social services and the NHS. However, wing staff were not aware of this work as Rethink did not share information on the prison IT system, P-Nomis.

Recommendations

- I.27** There should be a single named safeguarding lead member of staff who should attend the local safeguarding adults board.
- I.28** There should be a formal carers' scheme to support prisoners who cannot look after themselves.
- I.29** Work to meet the safeguarding needs of individual prisoners should be shared across the prison and with wing staff.

Security

Expected outcomes:

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

I.30 *Procedural security was generally well managed and security committee meetings were well attended. The management of intelligence was good, with excellent links with the local police. The security department identified and dealt with the more covert forms of organised crime and gang activity. Important elements of dynamic security were in place but the regime remained unpredictable and caused tension among prisoners. The supervision of prisoners on wings was sometimes inadequate, and there had been a very high number of serious incidents.*

- I.31** The small security department was effectively managed by a senior manager supported by a custody manager and a small group of trained security analysts and collators. The physical security of the prison was generally sound and we found no obvious weaknesses or anomalies.
- I.32** Procedural security was generally well managed but a few practices, such as strip searching in reception (see also paragraph I.4) and the routine inclusion of all prisoners found in possession of a mobile phone on the escape risk list (the E list) without a detailed assessment of the overall and immediate threat, were disproportionate. Cell searching was proportionate, and there were regular checks and routine searches of perimeter fences and walls, as well as searches of communal areas and activities buildings.
- I.33** Intelligence was very well managed and security committee meetings were well attended. The standing agenda was appropriate and included a thorough analysis of information reports received during the month. Security objectives were agreed and reviewed through the appropriate consideration of intelligence, and were communicated quickly to other areas of the prison. The security team analysed common patterns in information and monitored the progress of actions generated by information reports. Intelligence information was collated into a comprehensive report, which was discussed at a monthly security committee meeting.

- I.34** The security department also managed complex intelligence systems to identify and deal with the more sophisticated and covert forms of organised crime, possible staff corruption and terrorist activities. Information from security information reports, custodial history records and police reports was used to inform interventions. There were excellent links with the local police, particularly on operations to deal with organised crime and gang-related issues. Two police intelligence officers and a part-time investigations officer collated information, particularly on criminal issues and concerns, and pursued investigations in the prison.
- I.35** Certain elements of dynamic security were clearly in place and the flow of information into the security department from residential areas was good. However, the daily prison regime was unpredictable (see paragraph 3.3) and caused tension among prisoners, and supervision on wings was sometimes inadequate
- I.36** There had been some serious incidents in recent months. For example, in the six months to the end of August 2014, there had been several barricades on residential units, a hostage incident, high numbers of assaults on staff (some very serious), and at least 63 recorded incidents at height. The week before our inspection, B, D and E wings had been locked down for three days, because of what the governor described as continued prisoner ill-discipline, to enable the transfer of about 30 prisoners identified by security intelligence as problematic. Given the scale of the immediate threat to the order and control of the prison, this was a proportionate measure that was managed reasonably. The governor had distributed newsletters explaining changes to the regime, and there had been two prisoner groups to discuss the changes.
- I.37** In our survey, half the respondents said that it was easy to get drugs in the prison (against the comparator of about a third). There was a drug supply and reduction strategy and an allied supply reduction action plan, reviewed by a bimonthly, well-attended, multi-departmental substance misuse group meeting. There was also a weekly meeting between prison drug strategy and health care managers where delivery of services was well coordinated. Trends were monitored appropriately. From April to July 2014, there had been 54 random drug tests a month, but only one test as a result of suspicion – and there had been no suspicion tests at all from January to July 2014.
- I.38** The mandatory drug testing (MDT) positive rate in 2013/14 was 11.8% against a target of 10.5%, and this trend continued in 2014/15 with an average of 11.6% to date. Prisoners testing positive were referred to the integrated drug treatment system (IDTS). Spikes in the MDT rate every three to five months related to the availability of opiates and cannabis, but there was a downward trend following effective actions to stem supply. The most common entry routes for illicit substances were reception and packages thrown over the perimeter wall; B wing exercise yard had been closed to manage the risk. Very occasionally hooch (illicit alcohol) was found on site.

Recommendations

- I.39** **The routine inclusion of all prisoners found in possession of a mobile phone on to the escape risk list (the E list) without a detailed assessment of the overall and immediate threat should end.**
- I.40** **Suspicion drug testing should be completed within the stipulated timescale.**

Incentives and earned privileges

Expected outcomes:

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

I.41 *The number of prisoners on the basic level was higher than we usually see and their regime was punitive, while comparatively few were on enhanced status. Many prisoners were negative about the scheme, and only a minority said that it was fair or had encouraged them to change their behaviour.*

I.42 Most prisoners, about 69%, were on the standard level of the incentives and earned privileges (IEP) scheme, 17% were on entry level and 7% were on enhanced. About 6% were on basic, which was higher than we usually see at local prisons.

I.43 There was little evidence that the IEP scheme had been explained to prisoners on their arrival (see paragraph I.7). The scheme offered the standard differentials in access to private cash, visits and some extra time out of cell. However, the number of prisoners on enhanced was lower than we usually see, and many prisoners said that they were unaware about what they needed to do to reach the top level. We were not convinced that progression to the enhanced level relied on prisoners demonstrating a commitment to their rehabilitation. In our survey, only under a third of respondents, against the comparator of 43%, said that the scheme had encouraged them to change their behaviour and only 29%, against 41%, said that it was applied fairly.

I.44 The regime for prisoners on the basic level was very poor and overly punitive. Many basic-level prisoners were not employed so did not attend any daily activities. They received about 30-minutes exercise a day and were restricted to about 15 minutes out of cell on weekdays for a short domestic period. They were allowed a further one hour's association during the weekend. Their visits were restricted to 30 minutes. Behaviour improvement documents were drawn up for most prisoners on basic but there were no support structures to help them address issues behind their poor behaviour. There was little evidence that good behaviour was encouraged, praised or rewarded, and behaviour improvement targets were rare.

Recommendations

I.45 **The incentives and earned privileges (IEP) scheme should be properly managed and offer support to help individuals deal with the issues behind their poor behaviour, and should be well advertised and fully explained to prisoners.**

I.46 **The regime for prisoners on basic should be improved.**

Discipline

Expected outcomes:

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

I.47 *The number of adjudications was lower than we usually find but too many were not dealt with because they were out of time. Use of force was high and some incidents involved high level interventions. Its governance was weak in some important areas, the collection and analysis of data to identify patterns or trends was underdeveloped, and documentation was sometimes incomplete and not always processed properly. However, force appeared to be used proportionately. The number of prisoners in segregation was comparatively high, although their stays were usually reasonably short. Relationships between unit staff and prisoners were good. Care planning was developing but the regime was poor and segregated prisoners had little to do.*

Disciplinary procedures

- I.48** The number of formal adjudications was comparatively low for the type of prison at about 796 in the previous six months. The most common charges were disobeying lawful orders, and possession of unauthorised articles. Most records of hearings we examined showed that proceedings were conducted fairly and that prisoners were given the opportunity to explain fully their version of events.
- I.49** Monthly statistics on the number and nature of adjudications were presented to the senior management team but there was little evidence that these were noted, categorised or used to identify and address trends.
- I.50** Punishments were generally fair and there were clear examples where adjudicating governors had dismissed cases due to a lack of evidence or anomalies in process. However it was unusual to find that a large number of opened adjudications – around 70 between March and August 2014 – were not proceeded with because timescales had not been met. Officers said this was due to staff shortages.

Recommendation

- I.51 All disciplinary hearings should be heard and dealt with on time.**

The use of force

- I.52** Use of force was high and had increased since the last full inspection. In the previous six months, there had been 172 incidents involving the use of force, a rate of about 17 per 100 of the population compared with the 11 per 100 at a similar period before the last full inspection. Many incidents were serious and involved full planned control and restraint intervention (see also paragraphs I.11 and I.36). Batons had been drawn nine times in the previous year and used on three occasions during particularly violent incidents. Although extreme, these measures appeared justified given the circumstances in which they were used. There had been no uses of special accommodation in the previous six months.

- I.53** Management and monitoring of the use of force were weak in some important areas. Links to violence reduction, the security committee and the senior management team were underdeveloped, and a dedicated use of force committee to oversee processes and provide governance had been abandoned in January 2014. Monthly information was collated, including the nature of the incident, its location, and the ethnicity and age of the prisoner, but it was not used to inform a strategy to reduce numbers or deal with trends.
- I.54** Important use of force documentation had not been processed properly. Some was incomplete and important parts, such as written accounts from officers and accident reports from health care staff, were missing altogether in too many cases. Nonetheless, the completed documentation we examined was reasonably good and helped assure us that spontaneous incidents were usually managed appropriately, and that minimum force was used for short periods. We also saw examples where de-escalation techniques had been used well. The video recordings of planned incidents we saw showed well-managed and correctly conducted interventions, although the prison did not view recordings for any learning points.

Recommendation

- I.55** **Governance of the use of force should be rigorous, and information about trends and patterns should be used strategically to help reduce its use.**

Segregation

- I.56** The environment in the segregation unit was reasonably good; the two communal landings were clean, brightly decorated and well lit, although the two caged exercise yards were bleak. Cells were clean and well furnished but we found some graffiti on the plastic windows and a few dirty toilets.
- I.57** Use of segregation was high and had increased since the last full inspection but lengths of stay were comparatively short. Managers told us that this was due to the high number of serious incidents in the prison (see also paragraphs I.11 and I.40). There had been 261 prisoners segregated in the previous six months, with the average stay about six days. Although this hid the fact that a smaller but significant number of prisoners had been segregated for longer, it was rare for prisoners to remain in the segregation unit for longer than six weeks.
- I.58** At the time of our inspection, nine prisoners were in segregation, all held under prison rule 45 for good order or discipline. Although the basic daily routine included showers, one-hour exercise period and access to a telephone, prisoners spent nearly all of their day locked in cells without anything meaningful to do. This was particularly concerning for longer stay prisoners
- I.59** Planning to return longer stay prisoners to normal prison location was being developed. Individual prisoner management plans had been drawn up for the smaller number of complex cases, and behaviour improvement targets had been set in a few. Relationships between staff and prisoners on the unit were very good. However, record-keeping was poor and staff entries in prisoner files did not reflect much of the progressive work that we observed.
- I.60** Monitoring of segregation was also underdeveloped. Segregation management meetings did not take place, and information about the level of segregation and length of stay was not analysed sufficiently.

Recommendation

- 1.61** The regime in the segregation unit for longer stay prisoners should be improved and include purposeful activities to help prevent psychological deterioration.

Housekeeping points

- 1.62** The quality of staff entries in prisoners' segregation files should be improved.
- 1.63** The analysis of information to monitor levels of segregation should be developed.

Substance misuse

Expected outcomes:

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

- 1.64** *Psychosocial interventions for prisoners with substance misuse needs required improvement. Clinical management was generally good.*

- 1.65** Nottinghamshire Healthcare provided drug and alcohol services for prisoners with substance misuse needs. The strategy was good and a new needs analysis was being undertaken. All new arrivals were screened for substance misuse needs at reception, although those arriving in the afternoon had to wait until 7pm to see a doctor, which was unacceptable. Prisoners needing support were transferred to A wing, the integrated drug treatment system (IDTS) unit, as soon as possible.
- 1.66** IDTS workers and mental health personnel were co-located and worked in an integrated way. There were regular joint management meetings and participation in joint clinical reviews, although 13-week reviews of clinical treatment were not consistent and not all were attended by GPs. A registered mental health nurse (RMN) advised on dual diagnosis for prisoners with both mental health and substance misuse issues. Care and treatment information was shared, as appropriate, via SystemOne (the clinical IT system).
- 1.67** There was no forum for service user consultation or feedback. There were no systematic displays promoting health, harm minimisation and screening for blood-borne viruses.
- 1.68** There were 350 prisoners receiving psychosocial support, but the focus on recovery was very limited as individual psychotherapeutic opportunities and group work had been curtailed. IDTS staff told us they had to concentrate on 'the beginning and the end' of a prisoner's stay due to staffing shortages. This situation was unacceptable.
- 1.69** At the time of inspection, 202 prisoners were in clinical treatment. Only about 30 (15%) were on reducing regimes, but as 80% of prisoners were on remand or had sentences of six months or less, this limited the scope for treatment. The administration of opiate substitution therapy was generally appropriate and prisoners had opportunities for confidential consultations, and there were some opportunities for diversion (see paragraph 2.64).

- I.70** The health care department offered 24-hour nursing care for prisoners undergoing detoxification on the enhanced care assessment (ECA) unit, and E wing was designated as a drug-free area, although in the absence of compact-based drug testing, the ability to support and motivate those attempting sustained abstinence was limited.

Recommendations

- I.71** General practitioners should be available to assess new arrivals with substance misuse issues promptly.
- I.72** There should be a forum to consult and take feedback from substance misuse service users.
- I.73** The integrated drug treatment system (IDTS) service should be recovery-focused with an appropriate mix of psychotherapeutic opportunities.
- I.74** Compact-based drug testing should be available to prisoners who choose abstinence.

Housekeeping points

- I.75** Reviews of treatment should be at the frequency stipulated by national guidance and be multidisciplinary.
- I.76** There should be systematic promotion of health, harm minimisation and protection against blood-borne viruses.

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** *Most internal communal areas were clean, but outside areas were bleak and there was a large amount of accumulated litter beneath cell windows. Much of the living accommodation was in poor condition, with dirty toilets and widespread graffiti. Prisoners had insufficient access to clean bedding. Prisoner access to telephones was unpredictable, and they had little faith in the applications system.*
- 2.2** Most internal communal areas, including corridors and landings, were reasonably clean and well decorated. However, the grounds surrounding the residential units were bleak with few green spaces and no access to any gardens. There was a persistent problem of litter outside the residential units. This was usually dropped from cell windows and accumulated throughout the day. Bags of rubbish were also piled up next to large industrial bins outside wings D and E. Many cell windows were covered by grilles, which we were told were about to be removed. In the mean time, large amounts of rubbish regularly accumulated between the windows and grilles (see main recommendation S40).
- 2.3** Cells designed for one prisoner were routinely used for two, and had no room for a second chair. There were no waste bins in cells. Cells were in poor decorative order, and many had offensive and gang-related graffiti. Prisoners complained that the accommodation was very cold in the winter and too hot in the summer. In-cell toilets on A, B and C wings did not have lids, were stained, unhygienic and inadequately screened by a fabric curtain, which was often torn and soiled (see main recommendation S40).
- 2.4** Only enhanced and remand prisoners were permitted to wear their own clothes. Some of the prison-issue clothing did not fit well and was in poor condition. Prisoners had insufficient access to clean bedding; in our survey, only 58% said they received clean sheets every week, compared with 91% at the last full inspection. Many showers were dirty, untidy and had litter (see main recommendation S40).
- 2.5** Prisoners' access to telephones was unpredictable. Prisoners with jobs were particularly disadvantaged as wing telephones were switched off at 4pm, and reported limited access to telephones in workshops. This affected their ability to maintain contact with their families and friends. The daily switch-off times for the telephones on residential units had changed at short notice, and prisoners were unable to predict when they could make their calls.
- 2.6** The applications system was not working effectively and prisoners had little faith in the formal process. In our survey, only 32% of those who had made an application felt it had been dealt with fairly, against the comparator of 53%. There was no tracking system to monitor the timeliness of responses, and in our survey only 14% of prisoners said their applications were dealt with quickly (within seven days).

Recommendations

- 2.7 Prisoners should have regular and predictable access to telephones to maintain family contact.**
- 2.8 Applications procedures should be improved and monitored to ensure that responses are timely and appropriate.**

Staff-prisoner relationships

Expected outcomes:

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

2.9 *We saw some positive staff-prisoner interactions, but a recent redeployment of staff from other establishments had resulted in a deterioration of relationships. The personal officer scheme did not function properly, and there was no regular or meaningful consultation with prisoners.*

- 2.10** In our survey, fewer prisoners than the comparator, 70% compared with 74%, felt that most staff treated them with respect. While we saw some positive interactions between staff and prisoners, a recent redeployment of staff from other establishments had resulted in a lack of consistency and knowledge about prisoners. Many staff routinely addressed prisoners by their surnames, and we observed generally low levels of engagement between staff and prisoners.
- 2.11** There was no effective personal officer scheme, and staff were often unaware of the personal circumstances of the prisoners they were supervising. In our survey, only 18% of prisoners, against the comparator of 28%, said that a member of staff had checked on their welfare in the previous week, and only 61%, against 71%, said there was a member of staff they could turn to if they had a problem.
- 2.12** There were no regular wing consultation meetings where prisoners could raise their concerns, and there were no regular prisoner forums to promote dialogue, either for the general population or specific minority groups (see paragraph 2.18).

Recommendation

- 2.13 Each prisoner should be checked on regularly by a named member of staff who should be aware of the prisoner's individual needs, provide support and encourage family contact. A good quality record of contact should be maintained. (See main recommendation S38.)**

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 and age.

2.14 *The management of equality and diversity work was inadequate, and equality guidance required updating. Procedures to investigate discrimination reports were weak. There was no consultation or targeted provision for protected groups. Too many immigration detainees were held and there was no foreign national officer. Identification of prisoners with disabilities was good and some reasonable adjustments had been made. There was little provision for older prisoners and none for younger or gay, bisexual or transgender prisoners.*

Strategic management

- 2.15** Equality guidance, published in 2012, was not tailored to the specifics of the prison. Equality issues were discussed at the bimonthly community cohesion and equality committee meetings, although some had been cancelled. Meetings were chaired by the governor, and there was an action plan. Monitoring data highlighted disparities but there was little evidence of subsequent action. For example, black and minority ethnic prisoners had worse outcomes in complaints, the IEP scheme and segregation, but this had not resulted in any investigation.
- 2.16** New arrivals completed a questionnaire where they could disclose a disability and their sexual orientation. This information was recorded on the P-Nomis prison IT system, but there were data gaps for some protected groups (see below).
- 2.17** The number of reported incidents had decreased significantly from 95 in 2013 to 13. We were not assured that this was simply because there were fewer incidents. Some discrimination incident report forms had gone missing after they were passed to custodial managers to investigate. Investigations were insufficiently robust and reasons for conclusions were unclear.
- 2.18** The two prisoner equality representatives did little to promote equality in the prison and there were no forums or other consultation for protected groups or any support or targeted provision for any protected group. There was no celebration or promotion of diversity; for example, black history month (October) was not marked (see main recommendation S38).

Recommendation

- 2.19 Strategic management of equality should be improved and include consideration of all protected groups. Managers should specifically ensure that disparities**

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

emerging from equality monitoring data are acted upon, discrimination reports are thoroughly investigated, and respect for diversity is appropriately promoted.

Protected characteristics

- 2.20** Black and minority ethnic prisoners formed about 15% of the population, and their perceptions of their treatment were mixed. In our survey, the proportion who said that most staff treated them with respect was similar to white prisoners, but 40%, against 27% of white prisoners, said that they currently felt unsafe, 26% against 13% said that they had felt intimidated by staff. In our group discussions, black and minority ethnic prisoners said that they had not experienced direct discrimination, but felt that staff often stereotyped them.
- 2.21** There were 89 foreign nationals held during our inspection (9% of the population), of whom 10 were held beyond the end of their sentences. Although they were treated in the same way as remand prisoners, their conditions were too restrictive, given that they were no longer serving criminal sentences. Officers from the Home Office's immigration enforcement directorate attended the prison once a month to see specific prisoners, and prisoners could also request to see them. Independent organisations did not attend the prison regularly to offer legal advice. There was no member of staff dedicated to foreign nationals care and support. The library stocked a wide range of foreign language newspapers and books, although limited translated material was displayed throughout the prison.
- 2.22** In 2013, the prison carried out work on the experiences of Muslim prisoners (who made up 7% of the population), and interviewed and surveyed Muslims on their perceptions of prison life. Some useful learning points were identified but not all of the report's recommendations had been implemented.
- 2.23** Identification of prisoners with disabilities was good, with 278 prisoners identified. Health care staff worked with the equality adviser to meet the needs of those with severe disabilities and some reasonable adjustments were made. Those who required help in an emergency had personal emergency evacuation plans, although they were not always readily accessible to wing staff. There was no formal carer scheme (see also paragraph 1.26 and recommendation 1.28).
- 2.24** The prison held 72 prisoners under the age of 21 (7% of the population) but did not provide any targeted support for them. Twenty prisoners were over 60 and six were over 70; the oldest was 77. Many older prisoners were located on F and G wings. Apart from a specific weekly gym session, there was no provision for this group.
- 2.25** There was no targeted provision for gay and bisexual prisoners or help from outside support groups. Our survey suggested that about 20 prisoners were gay or bisexual and the prison had identified 14. There were data gaps on sexual orientation in the records for 139.

Recommendations

- 2.26** **Immigration detainees should not be held in prisons other than in exceptional circumstances following risk assessment.**
- 2.27** **External support groups and networks for all protected groups should be promoted and prisoners helped to make contact with them.**

Faith and religious activity

Expected outcomes:

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

2.28 *The chaplaincy was well integrated into the life of the prison. Gaps in provision were being addressed. The restricted regime meant that not all prisoners could easily access the chaplaincy's wide range of services and classes. Faith facilities were adequate.*

2.29 Prisoners were reasonably positive about the chaplaincy. The chaplaincy attended a wide range of meetings. The team catered for most major religions, and recruitment was under way to fill some gaps in provision. The team provided a wide range of services and study classes to meet the needs of prisoners, but the restricted regime meant that prisoners were unable to get to the multi-faith areas easily. In our survey, only 27% of prisoners said that it was easy to attend religious services, against the comparator of 44%, and only 31%, against 51%, said that it was easy to speak to a chaplain in private. Faith facilities were generally adequate, large enough and clean. Arrangements for Ramadan had been good.

Recommendation

2.30 **All prisoners should be able to see a chaplain in private and attend religious services.**

Complaints

Expected outcomes:

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

2.31 *The level of complaints was very high. Most responses were generally respectful and appropriate but far too many were late. Quality assurance had recently improved but prisoners still had little faith in the process.*

2.32 The number of complaints, averaging 400 a month, was very high for the type of prison. While most of those we sampled responded to the issues raised appropriately, the prison's own data showed that almost 25% had been returned late during the past six months. The main subject areas were the regime, access to property and the prison shop.

2.33 Complaint forms were not always readily available on the wings. The complaints clerk emptied the complaints boxes daily. Although there had been a recent improvement in quality assurance, prisoners had little faith in the process. Our survey results on complaints were poor, and in our groups prisoners said they were dissatisfied with the quality and promptness of responses. There was little analysis of data to identify and address areas of highest or emerging concern.

Recommendation

- 2.34** Complaints should be investigated and responded to promptly, and monitoring should ensure that concerns are systematically identified and addressed.

Legal rights

Expected outcomes:

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

2.35 *Legal services were poor. There was no dedicated provision. The library contained some legal textbooks and Prison Service Instructions but access to the library was poor for many. Prisoners could not use 'access to justice' laptops or gain help with bail applications.*

- 2.36** Prisoners were not supported to exercise their legal rights. There was no legal services officer or support for prisoners with legal queries. The library contained some legal books and Prison Service Instructions but prisoners could not easily visit it (see paragraph 3.42). Prisoners could use two personal computers in the library to write letters but the prison did not participate in the 'access to justice' scheme (where prisoners could apply for a restricted laptop to work on their cases). Although a local prison with 22% of the population on remand, there was no assistance for prisoners who wanted to apply for bail.

Recommendation

- 2.37** Prisoners should be supported to exercise their legal rights, including help and advice from trained advisers when applying for bail and the use of an 'access to justice' scheme laptop.

Health services

Expected outcomes:

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

2.38 *Prisoners were dissatisfied with access to most health services, but health care was reasonably good overall. Clinical governance was good, but staff shortages had affected service provision and development. Waiting times for most primary care services were excessive. Pharmacy services were good, but there were too many opportunities for medication diversion. Dental services were appropriate. The integrated mental health team provided a good and improving service.*

Governance arrangements

- 2.39** NHS England (East Midlands) commissioned Nottinghamshire Healthcare NHS Trust to provide health services. Working relationships between the commissioners, prison and provider were very good. Well-attended clinical governance and partnership board meetings covered all essential areas. The 2011 health needs assessment was out of date, but a new needs assessment had started. Learning from serious incidents, complaints, service user feedback and audits was shared with health staff and informed service delivery.
- 2.40** An experienced nurse manager led service delivery and improvement, but staff vacancies had affected provision and waiting times. A core group of flexible and well-motivated staff, supported by regular agency staff, and primary mental health nurses covered all essential activities. Nurses were available 24 hours a day.
- 2.41** Health staff had good access to training, appraisal and clinical supervision. Improved delivery, including a pain nurse specialist and advanced nurse practitioners, was being developed. Health staff were clearly identifiable and the health interactions we observed were very good. Clinical records and care plans were good. Health staff used an appropriate range of policies, including communicable disease management and safeguarding.
- 2.42** Older prisoners were offered well man checks. An identified nurse worked with equality staff to develop support plans for prisoners with disabilities. Prisoners who needed additional support with daily living received it from health staff. Access to mobility and health aids was satisfactory.
- 2.43** The main health care centre was clean, with good facilities and a large open waiting area, but the holding rooms for G wing prisoners and new arrivals were small and stark. None of the wing treatment rooms fully complied with infection control standards.
- 2.44** The confidential health complaints system was poorly advertised on the wings and complaint forms were not easily accessible everywhere. There had been 221 complaints and six compliments in the four months to July 2014. Several of the responses to complaints we sampled did not address all the issues raised, and some were delayed.
- 2.45** There was no whole-prison health promotion action group. There were reasonable health promotion displays and literature in health care, but not on the wings. New arrivals received information on health services but there was limited information available on the wings. Prisoners had good access to smoking cessation services, immunisations and screening for blood-borne viruses. Barrier protection was available from health staff, but its availability was not advertised.
- 2.46** There was suitable well-checked emergency equipment in all clinical areas. Some discipline staff were first aid trained and further training was planned. Custodial staff had access to prison external defibrillators but checks were not completed regularly – one defibrillator had not received a recorded check since December 2013 and had no pads, so was unusable. Ambulances were called promptly in emergencies.

Recommendations

- 2.47 All clinical areas should fully comply with current infection control standards, and all waiting areas should be equivalent to those in community services.**
- 2.48 There should be systematic health promotion throughout the prison, overseen by a prison health promotion action group.**

Housekeeping points

- 2.49** Prisoners should be able to complain about health services through a well-publicised system, and all responses to complaints should be prompt and fully address all the issues raised.
- 2.50** Barrier protection should be easily available through a well-advertised confidential system.
- 2.51** All external defibrillators available to custodial staff should receive daily recorded checks and be ready for use.

Delivery of care (physical health)

- 2.52** Nurses saw all new arrivals for an initial assessment, although the high volume of receptions and delays meant some prisoners had long waits to be seen (see early days in custody section). Appropriate follow-up referrals were made and excellent community liaison ensured continuity of care. Follow-up comprehensive assessments were offered but too many were delayed and the non-attendance rate was very high.
- 2.53** A local GP practice provided eight morning and two afternoon clinics on weekdays and had provided all out-of-hours cover until May 2014. A new provider had since been commissioned to provide telephone support only from 6pm to 6am on weekdays and throughout the weekend. Locum GPs attended evenings and weekends to see new arrivals. Consequently there were significant periods without GP access, and even when advice was available, face-to-face assessment was not possible. As a result, prisoners with an urgent need to see a GP were not seen promptly or sent inappropriately to hospital to be assessed. In our survey, only 13% of respondents, against the comparator of 22%, said it was easy to see the doctor and only 25%, against 46%, to see the nurse.
- 2.54** Prisoners requested health services by application and, despite the high volume, all received a response, which was impressive. A good range of primary care services was available, but waiting times for most were too long due to high demand, high non-attendance rates and staffing shortages. Most services were provided from the health care department, and health staff prioritised GP, dental and visiting specialist appointments when discipline officer availability for escorts was severely restricted. We were also told that some prisoners went to other activities instead of health appointments because of the restricted regime, which contributed to the non-attendance rate. In our survey, although there was a similar response to the comparator of 36% of prisoners satisfied with the overall quality of health services, this was a reduction from 57% at the last full inspection.
- 2.55** Appropriately trained and supported staff provided a full range of lifelong condition clinics. Nurse triage clinics ran daily but there were no agreed triage algorithms to ensure consistent decision-making.
- 2.56** There was no inpatient unit but prisoners requiring additional nursing could be located in one of six enhanced care area cells on F wing. Admission was based appropriately on clinical need. The environment and regime were little different from a normal wing and not sufficiently therapeutic, but an adjacent room was being refurbished to provide some day care activities. There were good arrangements for continuity of care when patients returned to normal location.
- 2.57** External hospital appointments were very well managed and were rarely cancelled by the prison.

Recommendations

- 2.58** All new arrivals should receive a comprehensive secondary assessment within 72 hours.
- 2.59** Prisoners should have 24-hour access to a GP for advice and face-to-face assessment.
- 2.60** Prisoners should be able to access all primary care services within a reasonable timescale.
- 2.61** There should be triage algorithms for nurse assessment clinics to ensure consistent decision making.
- 2.62** The enhanced care area should provide an adequate therapeutic environment and regime.

Pharmacy

- 2.63** Medicines were supplied promptly by external pharmacy providers. A team of well-trained pharmacy technicians effectively managed stock and general prescription flow, including ordering repeat prescriptions. There was adequate access to medicines out of hours. A pharmacist visited fortnightly to complete some governance checks but did not audit prescriptions. Prisoners could not see a pharmacist for advice or medicine use reviews.
- 2.64** All prescribing was recorded on SystmOne (the clinical IT system), although paper-based prescriptions were used for administration. We saw several incomplete administration records. Medicines were administered three times a day from wing treatment rooms, and night medicines were administered separately at around 8pm. The medication administration we observed was respectful and confirmed the prisoner's identity, but staff told us, and we observed, inconsistency in the availability of officers to oversee medication administration, which created opportunities for diversion. There was no gate or hatch for the clinical room in the health care centre. Prisoners requiring medication before discharge were therefore able to enter the medication room, including at times when no officers were present.
- 2.65** There was an in-possession medicines policy and in-possession risk assessments were completed appropriately, but some medication that was high risk for diversion was given weekly in possession. The range of medicines that nurses and pharmacy technicians could administer without a GP prescription was too limited.
- 2.66** Medicines were generally stored well, and stock was date checked and rotated appropriately, although we found some loose tablets in one area and an inadequately labelled inhaler. The management of controlled drugs was satisfactory, with good key security for drug cabinets.
- 2.67** The drugs and therapeutics committee had reconvened in April 2014 following a prolonged gap. The meetings were well attended and discussed an appropriate agenda.

Recommendations

- 2.68** Prisoners should be able to see a pharmacist for medicines use advice and review.

- 2.69 Medication administration should always be safe and secure with consistent supervision by discipline staff.**
- 2.70 The in-possession policy should follow current best practice guidance on the prescribing of highly tradable medicines.**
- 2.71 A wider range of medicines should be available for nurses and pharmacy staff to administer without a prescription when clinically appropriate.**

Housekeeping points

- 2.72** There should be regular auditing of prescriptions by a pharmacist.
- 2.73** All medicines should be properly and clearly labelled before supply to patients.
- 2.74** All medication administration records should be complete, and appropriate action taken for any prisoner non-attendance.

Dentistry

- 2.75** The dental provider, Time for Teeth, provided four dentist and two additional dental nurse triage sessions weekly. Dental appointments were prioritised and waiting times were reasonable at six weeks. Appointments were allocated appropriately on clinical need. A full range of NHS-equivalent dental treatment was available. The dental consultation and clinical records we saw were good. Effective oral health promotion was provided. The dental surgery met all infection control standards, all equipment was appropriately maintained, and dental waste was disposed professionally.

Delivery of care (mental health)

- 2.76** The integrated mental health team included a reasonable skill mix of mental health nurses, a social worker, learning disability nurse and psychiatrists. There was no clinical psychology but a training programme was under way to enable all team members to provide psychologically informed interventions. Waiting times for the visiting counsellor were long, but increased provision was being explored.
- 2.77** In our survey, 44% of prisoners, against the comparator of 37% and 36% in 2010, said they had emotional well-being or mental health problems although similar numbers to the comparator said they had been helped with these. New arrivals were screened for mental health issues and appropriate referrals made. Prisoners could also self-refer or be referred by staff. The team received about 200 referrals a month. Waiting times were very short for secondary assessment and were reasonable for primary mental health, despite the reduction in clinics due to primary care staffing shortages.
- 2.78** During our inspection, the team was supporting 203 prisoners, including 72 with severe and enduring mental health problems. Care planning was generally good. Community and family liaison was very good and there was impressive consideration of safeguarding needs. Working relationships between prison and mental health staff were effective. A third of custodial staff had attended mental health awareness training in the previous three years.

- 2.79** The prison received a significant number of transfers from a local high secure NHS mental health facility. These were generally managed well but the lack of inpatient facility meant that these prisoners were routinely located on the segregation unit, which was not an ideal environment. However, unit officers provided good care within the limitations and received adequate support from the mental health team, although most unit staff had not received recent mental health awareness training.
- 2.80** Most of the 14 patients transferred to NHS mental health facilities in the six months to June 2014 were transferred promptly, and we saw examples of rapid section and transfer when clinically indicated.

Recommendation

- 2.81 All discipline staff should have regular mental health awareness training to recognise and take appropriate action when a prisoner has mental health problems, with segregation unit staff prioritised for this.**

Catering

Expected outcomes:

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

2.82 *Prisoners were very negative about the food. There was some opportunity for prisoners to dine out of cell but no self-catering facilities.*

- 2.83** Prisoners in our groups, and especially in our survey, were negative about the food quality and quantity. Catering staff confirmed that the quality was often not good enough and that they had made complaints to suppliers. The food that we tasted and the portions were reasonable.
- 2.84** Meals were scheduled to be served far too early (around 4.30pm for the evening meal) and we observed even earlier serving times. Breakfast packs were very meagre and were issued the day before. Some prisoners could dine out of cell but there was no provision for self-catering on any wing.
- 2.85** The small kitchen was clean and generally in good order. A few prisoners working there were taking national vocational qualifications, and all were trained in basic food hygiene. Most serveries were clean and tidy and food management was generally good, but there was no evidence of temperature management. On B wing, we were not satisfied that separate utensils were used to serve halal meals. There was no effective servery in reception, and the food service area was too small and doubled as a staff dining/rest room.
- 2.86** With the exception of a survey awaiting analysis, there was no consultation with prisoners about the food, and we were unable to locate any food comments books.

Recommendation

- 2.87** The quality of food should be improved in consultation with prisoners. Food comment books should be regularly monitored by the catering manager, with appropriate responses recorded and action taken where required.

Purchases

Expected outcomes:

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

2.88 *Delivery arrangements for shop orders were adequate. There were many complaints about the shop and consultation arrangements were inadequate. Prisoners could shop from catalogues.*

- 2.89** Survey responses about the range of goods available in the prison shop were similar to the comparators, although this was not the case for black and minority ethnic prisoners. The delivery arrangements for shop orders were reasonable, and had been appropriately changed in response to concerns about debt and bullying. New arrivals could order an 'induction canteen pack' in addition to smoker's packs to carry them over to their first delivery. Newspapers and other periodicals could be ordered from a local newsagent, and prisoners could shop from a range of catalogues, although they had to pay a 50p administration fee for orders.
- 2.90** The prison shop was a regular cause for prisoner complaints, usually because orders had not followed on from inter-prison transfers and internal moves. There was no consultation about the shop and its goods, and no evidence of prisoner input into the choice of items available.

Recommendation

- 2.91** Prisoners should not have to pay an administration fee for shop orders.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁴

3.1 *Time out of cell was generally poor and too many prisoners were locked up during the working day. Access to association was inadequate.*

3.2 The prison was operating a 'normal restricted regime' for operational reasons, which meant a significant increase in prisoner lock up compared with the planned core day. Time out of cell was inadequate for a local prison, with as little as three hours a day out of cell for many prisoners, especially those unemployed (who were routinely locked up for around 21 hours a day), and only one hour for those on the basic level. A few (mostly wing workers) could achieve around seven hours. During our roll checks we found almost half the population locked in their cells, and the prison's scheduled core day included long periods of lock-down (see main recommendation S41).

3.3 The regime had been revised many times within a short period, and the current version (imposed to effect stability) was confusing, inconsistently applied and a constant source of frustration for both prisoners and staff. Association only took place at weekends, and then only in the daytime, creating difficulties for many in contacting families and friends and having access to a daily shower. In our survey, only 8% of prisoners said that they went on association five or more times a week, against the comparator of 48% and the response of 25% at the last full inspection (see main recommendation S41). Cancellations of exercise periods were not recorded.

Learning and skills and work activities

Expected outcomes:

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

3.4 *The prison had developed education provision appropriately but did not place sufficient emphasis on skills gained in prison work, which was often at a low level. There were sufficient places in learning and skills and work activity. Attendance was poor. The quality of teaching and learning in education was generally good. Prisoners' achievement of qualifications required improvement. The library was well stocked but not used by enough prisoners.*

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

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.

| | |
|---|-----------------------------|
| <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

- 3.6** There was currently poor attendance at purposeful activity because of the restricted regime in operation, but the prison had taken a strategic approach to improving this. Prisoners with essential jobs, such as in the kitchens, were able attend work regularly, and a recent initiative enabled prisoners to attend all their scheduled education classes, including those held when their wing was locked down. This approach was due to be extended to prisoners with jobs in workshops (see main recommendation S41).
- 3.7** The prison had successfully increased the range and number of qualifications offered in the education department over the previous two years. Plans for improving and extending learning and skills and work provision made appropriate use of prisoners' views about their needs, and analyses of local labour markets. However, the plans were too narrowly focused on Offenders' Learning and Skills Service (OLASS)-funded education provision and did not sufficiently prioritise work and its role in developing prisoners' skills.
- 3.8** Collaborative working between Milton Keynes College (MKC) and the prison was good and had resulted in significant improvements, such as an increase in the range of education provision for vulnerable prisoners. Effective liaison between MKC and the library ensured it stocked suitable books to support education courses.
- 3.9** MKC made effective use of data on qualification achievement to analyse education performance overall, but did not use it sufficiently well to identify clearly any differences in performance by different groups.
- 3.10** MKC's arrangements to improve quality had been effective in raising standards of teaching in education classes. However, this approach did not extend to areas such as instruction in the kitchen or workshops. Quality assurance of key processes, such as initial assessment, was too limited. A quality improvement group met regularly but focused too much on operational matters, rather than on improving areas of underperformance.
- 3.11** The prison's self-assessment report evaluated thoroughly what MKC and the National Careers Service offered, but did not sufficiently cover work or other provision. Accompanying improvement plans were too sparse, and did not sufficiently detail actions the prison planned to take or clearly identify the impact expected. MKC's self-assessment report and action plans were mainly adequate, but did not sufficiently explain variations between the quality of different courses. Judgements in both the prison and MKC self-assessments reports were often overgenerous. The education and vocational training provided by Milton Keynes College required improvement.

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>.

Recommendations

- 3.12 The prison should routinely evaluate the performance of different groups of prisoners in learning and work to ensure all achieve at equally high levels.**
- 3.13 The scope and accuracy of self-assessment, quality assurance and improvement planning should be extended, and include all areas of learning and skills and work.**

Provision of activities

- 3.14** The prison had enough activity spaces to provide most prisoners with a full- or part-time place in work or education, but they were underused. In the previous six months, only around half of those enrolled on education sessions attended, and attendance at many workshops was also very low. Men regularly missed two out of four or five sessions a week (see main recommendation S41).
- 3.15** The range of classroom-based education provision was generally appropriate, but not enough was offered in the workplaces and elsewhere in the prison. Despite an increase, provision of English and mathematics at entry level was not sufficient to meet the needs of the population.
- 3.16** Too much prison work was at a low level – for example, in textile and packing workshops and on residential wings – and did not sufficiently prepare prisoners for the demands of working on release. There were plans to accredit the employability skills that prisoners developed in workshops, such as teamwork, but they had not yet been introduced. The kitchen and bistro (the staff canteen) offered valuable vocational qualifications but few prisoners were enrolled on them. The vocational skills developed in bicycle workshops and recycling were not yet accredited.
- 3.17** Allocation to work was efficient, but did not take into account the needs of individual prisoners identified by the National Careers Service or in sentence plans.

Recommendations

- 3.18 Entry-level provision in English and mathematics should be extended to cater adequately for the prison population.**
- 3.19 The work available should be suitable to prepare prisoners for employment on release. Greater priority should be given to developing employability and vocational skills.**
- 3.20 Allocation of prisoners to work should take into account needs identified in sentence plans and National Careers Service individual action plans.**

Quality of provision

- 3.21** Much classroom teaching and learning was good. Well-chosen activities maintained prisoners' interest effectively. Teachers used learning resources, such as interactive whiteboards, confidently and to good effect to enliven sessions, and they managed prisoners' behaviour well. Many sessions helped prisoners develop important practical skills for employment, such as budgeting. Teachers often supported prisoners well in applying English

and mathematics in the context of their vocational subjects. For example, in business studies, prisoners successfully calculated profit and loss accounts.

- 3.22** Assessment of prisoners' written work was not good enough. While much feedback to prisoners was positive and encouraging, tutors' marking did not always give them sufficient guidance on how they could improve their work.
- 3.23** Arrangements to meet the needs of prisoners who needed extra help in classes were mainly effective and ensured most made the progress expected of them. However, the allocation of staff to support these prisoners did not consistently prioritise those with greatest need. The use of prisoners as peer mentors was rare.
- 3.24** Prison instructors provided effective supervision in many of the workshops, but opportunities to learn and develop new skills were too limited. Prisoners in packing and textile areas worked enthusiastically but the work provided little challenge. In the kitchen and bistro, as well as in industrial cleaning training, prisoners learned effectively, often from their more experienced peers. Assessment practice for national vocational qualifications (NVQs) was sound.
- 3.25** Induction to education needed improvement. Staff did not plan it well enough to ensure all prisoners clearly understood their options for learning and work. Assessments to identify prisoners' levels of English and mathematics were not always sufficiently well organised.

Recommendations

- 3.26 Additional learning support should be given to prisoners with the greatest need, and there should be more use of peer mentors to support learning.**
- 3.27 Education induction should ensure that all prisoners understand the work and learning available to them, and initial assessments should accurately identify all those who need to improve their English and mathematics skills.**

Housekeeping point

- 3.28** Teachers' feedback and marking should give prisoners clear guidance on how to improve their written work.

Education and vocational achievements

- 3.29** The achievement of qualifications by prisoners following education courses or working towards vocational accreditation was good in 2012/13, but had declined slightly in 2013/14. Prisoners achieved well on most courses, including in art and design, entry level English and level 1 mathematics. However, success rates were low on a significant minority of courses, including those that were employment-related.
- 3.30** The standard of most prisoners' work on education courses was good. Prisoners following a radio production course had received a national award in recognition of high standards. Much of what prisoners produced in art classes was very proficient. On education courses, prisoners presented their written work clearly, contributed very well to class discussion, listened to each other's points of view and were able to challenge these appropriately. Behaviour in classes was good.

- 3.31** Prisoners working in the bistro and the kitchens acquired good skills in food preparation. However, not enough of those in prison jobs achieved qualifications. A high proportion worked without gaining any accreditation or other recognition for the vocational or employability skills they acquired.

Recommendations

- 3.32** **The prison should raise achievement rates on educational and vocational courses so that they are consistently good.**
- 3.33** **Prisoners in workshops and other prison jobs should routinely have opportunities to gain qualifications or other recognition for the skills they acquire.**

Library

- 3.34** The library, provided by Nottingham City Council, was welcoming and effectively run. It offered a range of well-displayed fiction and non-fiction, including easy readers and a small selection in foreign languages. It also loaned DVDs. Facilities for private study and research were suitable and included four stand-alone computers.
- 3.35** The library actively promoted literacy and reading through participation in ventures such as the Six Book Challenge and World Book Night. In a useful joint project, prison health care professionals ‘prescribed’ carefully selected books to help prisoners improve their physical or mental health.
- 3.36** Induction to the library was routine for new arrivals and around half registered as members. Prisoners on each residential wing could visit the library twice a week, but take-up was often low, and while a good proportion of vulnerable prisoners visited regularly, there were often few from other wings. Library opening hours did not extend to evenings or weekends, restricting visits from prisoners with full-time jobs, and the library could accommodate no more than 20 prisoners at a time. In our survey, only 12% of prisoners said they visited the library at least weekly, well below the comparator of 31%.

Recommendation

- 3.37** **The prison should take action to increase regular library visits, including the extension of opening hours to evenings and weekends.**

Good practice

- 3.38** *In an innovative joint project between the library and healthcare, prison health care professionals ‘prescribed’ carefully selected books to help prisoners improve their physical or mental health.*

Physical education and healthy living

Expected outcomes:

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

3.39 *PE provision was inadequate. Sessions were frequently cancelled and there were virtually none during the week of inspection. Staff had appropriate expertise and facilities were suitable. Vocational PE was not offered.*

3.40 Prisoner access to PE was very poor, and PE provision and promotion of PE and healthy living were inadequate. Planned sessions were frequently cancelled, often without notice to prisoners, as officers responsible for PE were deployed elsewhere. Although PE sessions were timetabled for each morning and afternoon, as well as visits from each residential wing twice a week and dedicated sessions for older prisoners, there were no scheduled sessions for the general population during the week of inspection. During four days in that week only one session was held, for a group of orderlies from across the prison. In our survey, only 4% of respondents said they visited the gym at least three times a week, well below the comparator of 27% (see main recommendation S41).

3.41 Induction to PE activity was regular. In the previous two months, PE officers had supervised around 500 inductions for new arrivals, leading them to anticipate regular access to PE which the prison did not subsequently provide. PE officers had appropriate expertise and enthusiasm for their specialist roles.

3.42 Facilities for PE were suitable. They included two fitness suites with free weights and cardiovascular equipment, a full-size sports hall sufficient for team games and racquet sports, and a well-maintained outdoor all-weather multi-sport pitch. However, due to the frequent cancellation of PE sessions the facilities were significantly underused, and the expectation that prisoners should use them at least twice a week was not met. Provision for prisoners to achieve PE vocational qualifications had ceased more than two years previously.

Recommendation

3.43 **The prison should identify and provide suitable provision leading to vocational qualifications in PE and healthy living.**

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

4.1 *Strategic management of resettlement was underdeveloped, although there had been some work to prepare for the transition to a resettlement prison. Prisoners were negative about resettlement matters in our survey.*

4.2 The strategic management of resettlement was underdeveloped. There was a detailed strategy and a well-attended quarterly reducing reoffending meeting, but both focused exclusively on resettlement pathway provision and did not incorporate offender management. The up-to-date needs analysis was useful to a point but had been developed from prisoner self-reported survey data only, and did not include information from offender assessment system (OASys) assessments to evidence offending behaviour needs. A useful monthly pathways meeting had been introduced just before our inspection.

4.3 In our survey, prisoners were more negative than the comparator across most resettlement questions. Only 33% of sentenced respondents said they had done anything at the prison that would make them less likely to offend in the future, against the comparator of 48% and the response of 52% at the last full inspection.

4.4 Release on temporary licence (ROTL) was not used for resettlement purposes, given the largely category B or remand population.

4.5 There were some meaningful plans to make the transition to a resettlement prison and raise the profile of resettlement. Most notably, these included the development of a resettlement hub housing relevant staff, including the future community rehabilitation company. However, there were no plans to include the offender management team in the hub. A resettlement awareness raising day for staff had been arranged.

Recommendation

4.6 **The strategic management of resettlement should be developed to incorporate and coordinate both offender management and resettlement pathways provision, and be informed by a needs analysis that draws on an appropriate range of data.**

Offender management and planning

Expected outcomes:

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

- 4.7** *More than 80% of prisoners said nobody was working with them to achieve sentence plan targets. Offender supervisors' work was very limited and offender management was weak overall. OASys assessments and associated processes were routinely late, undermining risk management. Internal risk monitoring arrangements were adequate, but public protection arrangements were poorly developed and the risks posed by some potentially dangerous offenders were not effectively managed. Inter departmental risk management team meetings were not held regularly. There was no prisoner recategorisation. Some lifer prisoners had been at the prison for too long.*
- 4.8** In our survey, only 16% of sentenced prisoners, against the comparator of 29%, said they had an offender supervisor at the prison, only 23% against 37% said they had a sentence plan, and 83% said nobody was working with them to achieve sentence plan targets.
- 4.9** The offender management unit (OMU) comprised 13 offender supervisors (five uniformed officers, six probation services officers and two probation officers), a senior probation officer and 17 administrator posts (of which 12 were filled). Unlike probation staff, uniformed staff did not receive management supervision and did not attend team meetings, which were for probation staff only; as a result, there was little management oversight of their work.
- 4.10** Uniformed offender supervisors spent almost all their time redeployed to wings and, while probation staff made efforts to pick up the additional work, all the offender supervisors were overwhelmed with work. As a result, they were unable to see prisoners routinely or motivate them to achieve their sentence plan targets. There was no evidence in the cases we sampled (five in scope for offender management and seven out of scope) of sufficient and meaningful contact between external offender managers and offender supervisors, external offender managers and prisoners, or offender supervisors and prisoners.
- 4.11** OASys assessments were routinely late, undermining the management of risk. At the time of inspection 110 OASys were outstanding, some by several months. It followed that all processes flowing from the OASys were also late, and formal risk of harm screening and risk of serious harm assessments were frequently delayed, and not always of sufficient quality. Some risk management plans did not adequately consider victims or the risk posed by prisoners on release into the community. Initial sentence planning and reviews were often late, and sentence plan objectives were not always outcome-focused or meaningful. For example, sex offenders in denial were set objectives to attend a sex offender treatment programme, rather than motivational work to prepare to attend such a programme in the longer term.
- 4.12** There were weekly boards to consider applications for release on home detention curfew (HDC). In the previous six months, 69 applications had been considered, of which 18 had been successful. An adequate range of information was considered, and unsuccessful prisoners were advised of the decision and rationale. However, prisoners did not attend the board and decisions were often late, primarily due to delays in external probation checks on proposed addresses.

Recommendations

- 4.13** A sufficiently resourced offender management unit should ensure that all relevant prisoners receive prompt and effective OASys assessments, sentence planning and reviews, supported by meaningful input from offender supervisors and offender managers, to enable them to progress through their sentence.
- 4.14** Managers should carry out regular oversight and quality assurance of offender supervisor work to ensure all elements of offender management are delivered to a high standard.

Housekeeping point

- 4.15** Prisoners should be permitted to attend home detention curfew boards, and should be released as close as possible to their HDC eligibility date.

Public protection

- 4.16** There were 77 prisoners subject to monitoring restrictions, and internal arrangements for identifying and implementing restrictions for new arrivals who were public protection cases were adequate and generally prompt. Screening for the presence of restraining orders or a risk to children was clearly a high priority. However, multi-agency public protection arrangements (MAPPAs) were poorly developed, and the risks posed by some potentially dangerous offenders were not effectively managed. There was no robust process to ensure that all relevant cases were identified, logged and referred to external offender managers to assess the appropriate MAPPA risk level six months before release – we saw over 30 examples of this. Conversely, we also identified several electronic files where prisoners were incorrectly identified as MAPPA cases (see main recommendation S41). Offender supervisors and OMU managers were not clear where in the prison responsibility for MAPPA lay. However, in those cases where MAPPA had been correctly identified and engaged with, the reports written for meetings were generally good.
- 4.17** Communication about MAPPA between the prison and external offender managers was often poor, and this was potentially dangerous. In one case, a prisoner due for release within a few days had not been subject to an OASys for over three years, despite a recent history of disruptive behaviour and violent conduct in the prison and restrictions in contacting a named female. No clarification of his MAPPA risk level had been sought, and the external offender manager was unaware of the prisoner's behaviour or the restrictions.
- 4.18** Inter departmental risk management meetings were rarely convened, and there was no mechanism to oversee and monitor release arrangements for MAPPA and other high risk prisoners. In addition, the violent and sexual offenders register (VISOR) was only checked once or twice a month, and staff did not record important information on it. This was an omission given the number of prisoners likely to be detailed on the system.

Categorisation

- 4.19** The prison held 90 category B, 360 category C and six category D prisoners. Initial categorisation decisions were prompt and used a good range of information. If a prisoner was assessed as category D and suitable for open conditions, this was ratified by a manager. However, there were no categorisation reviews, not even for prisoners who had been at the prison for longer periods, which was inappropriate.

- 4.20** Transfers were directed centrally by the population management unit, and did not sufficiently consider sentence plan objectives or family circumstances. One prisoner was being moved to another prison that was too far for his disabled mother to visit, to do a programme which he had insufficient time to complete before his release. Other prisoners were not moved quickly enough to attend courses identified as sentence plan objectives (see also paragraphs 4.24 and 4.48).

Recommendation

- 4.21** **Categorisation reviews should be held on time.**

Indeterminate sentence prisoners

- 4.22** The prison held 35 prisoners subject to an indeterminate sentence for public protection, and 18 lifer prisoners. Probation offender supervisors made contact with most remand prisoners facing a likely life sentence, to discuss immediate needs, answer questions and establish a working relationship.
- 4.23** A quarterly lifer family day was held, and was valued by prisoners who attended. Some offender supervisors attended to talk to families, and two long-term lifers from another establishment had previously attended under escort to talk about their experiences. There was no other provision specifically for indeterminate sentence prisoners.
- 4.24** Some lifer prisoners had been at the prison for several months, which was too long, particularly as they were unable to access their offender supervisor easily and had been unable to progress in their sentence plans (see also paragraph 4.48 and recommendation 4.21).

Reintegration planning

Expected outcomes:

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

- 4.25** *New arrivals were not assessed for their resettlement needs consistently, and there was no meaningful pre-release assessment. There was a new through-the-gate mentoring project, and the prison had strategic and operational links with integrated offender management teams in the community. Accommodation services were underdeveloped and too many prisoners were released with nowhere to live. Provision for employment, training and education on release was poor. There was little pre-release finance, benefit or debt support and no finance management courses. Family support work was limited, but the visitors' centre was well run and it was easy to book visits. There were no accredited offending behaviour programmes, and delays in moving prisoners to prisons that ran these.*

- 4.26** Offender supervisors were meant to complete a basic needs assessment for new arrivals but, in practice, this was not done consistently, and the assessment also did not incorporate all the pathways. Two resettlement officers were responsible for reassessing prisoners' pathway needs around six weeks before their discharge but, due to regular cross-deployment to

other duties, they did not see prisoners until the day they were released, primarily to gather information for the prison's key performance targets (see main recommendation S43).

- 4.27** A through-the-gate mentoring project, delivered in partnership with several providers, had been implemented the week before the inspection and was a promising initiative, as it provided a link to services in the community and support for prisoners to access them on release. The prison had good links to integrated offender management teams in the community, operationally through the police liaison officer based at the prison and strategically through senior management attendance at planning boards, such as the Derby and Nottingham reducing reoffending panels.
- 4.28** In our survey, prisoners were more negative than the comparators about awareness of help available with pathway-related needs – only 15%, against the comparator of 29%, were aware of help with employment issues, 20%, against 36%, with accommodation and 23%, against 45%, with drug and alcohol support (although provision under this pathway was very good).

Housekeeping point

- 4.29** The prison should investigate and address prisoners' lack of awareness of resettlement pathway support.

Accommodation

- 4.30** There was little formal provision of accommodation services and far too many prisoners (13% in the previous six months) were released with no fixed accommodation. A useful monthly accommodation surgery was too often cancelled. Although there were some referrals to local authorities, prisoners had no regular access to specialist housing advice.

Recommendation

- 4.31** **Prisoners should have access to specialist housing advice when required.**

Education, training and employment

- 4.32** The quality of the careers service, subcontracted to Futures Advice Skills and Employment by the National Careers Service, was good. Careers advisers had effective interviews with new arrivals, and the plans agreed clearly recorded actions to meet prisoners' needs. However, other agencies in the prison rarely considered information from these plans in allocating education or work or preparing sentence plans.
- 4.33** Education, training and employment help for prisoners due for release was poor. Although careers advisers provided good support to individuals, including preparation of curriculum vitae, the prison did not make any wider pre-release provision to help those seeking work or training. The Reach Project, a through-the-gate initiative provided by Nacro, offered effective help to the most vulnerable before and after release, but catered for only a small number of prisoners. Prisoners did not have sufficient access to job search facilities, and the virtual campus, giving prisoners access to community education, training and employment opportunities via the internet, was not available. Links with employers were poorly developed.

Recommendation

- 4.34** The prison should provide an effective programme of pre-release employment, training and education activities, including use of the virtual campus for job searching. Links with employers should be developed to increase job opportunities for prisoners on release.

Health care

- 4.35** Pre-release health care arrangements were effective and included appropriate community liaison. All prisoners on medication were discharged with seven-days supply. No prisoner had required palliative or end-of-life input since our last inspection. A resettlement support project ('Helping you out') for prisoners with mental health problems was integrated into the mental health team and provided through-the-gate resettlement support, including assistance with housing, benefits, general health and links with families/employers. Support was allocated and prioritised on need, and included effective engagement with OMU and other charities.

Good practice

- 4.36** *The through-the-gate 'Helping you out' service effectively supported the resettlement of prisoners with mental health problems.*

Drugs and alcohol

- 4.37** Integrated drug treatment system (IDTS) workers engaged with community drug intervention programme (DIP) workers to ensure continuity of support pre- and post-release for prisoners with substance misuse needs. DIP workers visited their clients regularly and nurses liaised with community prescribers to ensure continuity of medication post-release. There were no peer mentors to support prisoners with substance misuse problems and no visiting peer supporters, such as Alcoholics Anonymous or Narcotics Anonymous. The service participated in the national 'N-alive' research project, in which prisoners being released were given naloxone (a drug to help people breath when they have overdosed) to help in an emergency.

Recommendation

- 4.38** Peer mentors should be available to support prisoners recovering from drug and alcohol misuse.

Finance, benefit and debt

- 4.39** There was almost no provision under this pathway, with only Department of Work and Pensions staff offering benefits advice. There was no effective process to deal with prisoners' initial financial needs, pre-release assessment or support, and no finance courses. Links with banks for prisoners to open bank accounts were poor.

Recommendation

- 4.40 Finance, benefit and debt provision should meet the needs of prisoners during custody and in preparation for release.**

Children, families and contact with the outside world

- 4.41** There was very little provision to support prisoners to maintain relationships with their family and friends. There was no dedicated family support worker, no relationship counselling and no access to any interventions or programmes on improving parenting skills and relationships. However, the monthly family days, available to all prisoners, were positive; up to four children and one adult could visit the prisoner. Up to 20 prisoners attended each event, and 160 had attended in the previous year. However, at the time of inspection, no further family days had been planned or advertised.
- 4.42** The visits booking system was accessible 24 hours a day and options included booking by text, online, telephone, in person and in writing. However, visits often started late because delays at the gate meant that visitors were not taken to the visits hall promptly.
- 4.43** A fully staffed and well-equipped visitors' centre opened before and after visiting times, and included baby changing and disabled-access toilet facilities. Staff provided a range of information to visitors, including support and advice for first-time visitors, and could discuss any worries. Visitors could also use a confidential hotline, advertised in the visitors' centre and the visits hall, to report any concerns after a visit.
- 4.44** The visits hall was bright with natural light, but the fixed chairs and tables were too close to provide privacy. Staff supervision was unobtrusive and proportionate. A range of refreshments was available, but the two small unsupervised play areas lacked adequate facilities and needed renovation. Vulnerable prisoners said they had equal access to visits, and were escorted to and from the visits hall appropriately.

Recommendations

- 4.45 Provision for prisoners to maintain family ties should be improved, including parenting/relationship courses and continued access to family days.**
- 4.46 The two children's play areas in the visits hall should be renovated, and play sessions should be supervised during visits.**

Housekeeping point

- 4.47** All visits should start on time.

Attitudes, thinking and behaviour

- 4.48** There were no accredited offending behaviour programmes, even though the prison's needs analysis showed that some prisoners had anger management and other behavioural issues linked to their offending. In addition, some prisoners had not been transferred promptly enough to prisons where they could access courses identified in their sentence planning targets, including some indeterminate sentence prisoners who needed to progress to satisfy the Parole Board (see also paragraph 4.24 and recommendation 4.21). There was a

restorative justice programme, but only 10 prisoners had completed this in the previous year.

Recommendation

- 4.49 The prison should offer appropriate offending behaviour courses to meet the identified needs of the population.**

Section 5. Summary of recommendations and housekeeping points

The reference number at the end of each recommendation, housekeeping point or example of good practice refers to its paragraph location in the main report.

Main recommendations

To the governor

- 5.1** Reception and first night processes should ensure a speedy and efficient reception. First night staff should be well informed about all new arrivals, including their personal circumstances and risk factors, and all prisoners should receive a full induction within a week of arrival.(S37)
- 5.2** Effective prison-wide prisoner consultation, discussion and support forums should be developed, including some for groups with protected characteristics.(S38)
- 5.3** All violent incidents should be fully investigated and systematic action taken to address bullying and support victims. The safer custody committee should ensure rigorous and prompt remedial action in response to emergent concerns about violence. (S39)
- 5.4** Prison cells and the general environment should provide clean, safe and decent living conditions for all prisoners. (S40)
- 5.5** The prison should deliver a predictable and equitable regime that allows prisoners to have significant time out of cell, complete domestic tasks, and engage in scheduled learning and skills activities, work and PE. (S41)
- 5.6** Prisoners subject to multi-agency public protection arrangements (MAPPA) should be correctly identified, and there should be appropriate contact with external offender managers. An inter-departmental risk management meeting should meet regularly to ensure all MAPPA nominal and high risk cases are fully considered six months before release. (S42)
- 5.7** All prisoners should be given an immediate needs assessment on their arrival covering all resettlement pathways, and this should be reviewed in sufficient time before their release to address outstanding needs. (S43)

Recommendation

To the Home Office

- 5.8** Immigration detainees should not be held in prisons other than in exceptional circumstances following risk assessment. (2.26)

Recommendations

To the governor

Early days in custody

- 5.9** Prisoners should only be strip searched following an individual risk assessment. (1.8)

Bullying and violence reduction

- 5.10** The regime activities for vulnerable prisoners should match the opportunities available to the rest of the population. (1.15)

Self-harm and suicide

- 5.11** All prisoners at risk of self-harm should have access to sufficient support and activities. Assessment, care in custody and teamwork (ACCT) procedures and documentation should be significantly improved. (1.21)
- 5.12** Prisoners should be able to access a working Samaritans telephone. (1.22)

Safeguarding

- 5.13** There should be a single named safeguarding lead member of staff who should attend the local safeguarding adults board. (1.27)
- 5.14** There should be a formal carers' scheme to support prisoners who cannot look after themselves. (1.28)
- 5.15** Work to meet the safeguarding needs of individual prisoners should be shared across the prison and with wing staff. (1.29)

Security

- 5.16** The routine inclusion of all prisoners found in possession of a mobile phone on to the escape risk list (the E list) without a detailed assessment of the overall and immediate threat should end. (1.39)
- 5.17** Suspicion drug testing should be completed within the stipulated timescale. (1.40)

Incentives and earned privileges

- 5.18** The incentives and earned privileges (IEP) scheme should be properly managed and offer support to help individuals deal with the issues behind their poor behaviour, and should be well advertised and fully explained to prisoners. (1.45)
- 5.19** The regime for prisoners on basic should be improved. (1.44)

Discipline

- 5.20** All disciplinary hearings should be heard and dealt with on time. (1.51)
- 5.21** Governance of the use of force should be rigorous, and information about trends and patterns should be used strategically to help reduce its use. (1.55)
- 5.22** The regime in the segregation unit for longer stay prisoners should be improved and include purposeful activities to help prevent psychological deterioration. (1.61)

Substance misuse

- 5.23** General practitioners should be available to assess new arrivals with substance misuse issues promptly. (1.71)
- 5.24** There should be a forum to consult and take feedback from substance misuse service users. (1.72)
- 5.25** The integrated drug treatment system (IDTS) service should be recovery-focused with an appropriate mix of psychotherapeutic opportunities. (1.73)
- 5.26** Compact-based drug testing should be available to prisoners who choose abstinence. (1.74)

Residential units

- 5.27** Prisoners should have regular and predictable access to telephones to maintain family contact. (2.7)
- 5.28** Applications procedures should be improved and monitored to ensure that responses are timely and appropriate. (2.8)

Staff-prisoner relationships

- 5.29** Each prisoner should be checked on regularly by a named member of staff who should be aware of the prisoner's individual needs, provide support and encourage family contact. A good quality record of contact should be maintained. (2.13)

Equality and diversity

- 5.30** Strategic management of equality should be improved and include consideration of all protected groups. Managers should specifically ensure that disparities emerging from equality monitoring data are acted upon, discrimination reports are thoroughly investigated, and respect for diversity is appropriately promoted. (2.19)
- 5.31** External support groups and networks for all protected groups should be promoted and prisoners helped to make contact with them. (2.27)

Faith and religious activity

- 5.32** All prisoners should be able to see a chaplain in private and attend religious services. (2.30)

Complaints

- 5.33** Complaints should be investigated and responded to promptly, and monitoring should ensure that concerns are systematically identified and addressed. (2.34)

Legal rights

- 5.34** Prisoners should be supported to exercise their legal rights, including help and advice from trained advisers when applying for bail and the use of an 'access to justice' scheme laptop. (2.37)

Health services

- 5.35** All clinical areas should fully comply with current infection control standards, and all waiting areas should be equivalent to those in community services. (2.47)
- 5.36** There should be systematic health promotion throughout the prison, overseen by a prison health promotion action group. (2.48)
- 5.37** All new arrivals should receive a comprehensive secondary assessment within 72 hours. (2.58)
- 5.38** Prisoners should have 24-hour access to a GP for advice and face-to-face assessment. (2.59)
- 5.39** Prisoners should be able to access all primary care services within a reasonable timescale. (2.60)
- 5.40** There should be triage algorithms for nurse assessment clinics to ensure consistent decision making. (2.61)
- 5.41** The enhanced care area should provide an adequate therapeutic environment and regime. (2.62)
- 5.42** Prisoners should be able to see a pharmacist for medicines use advice and review. (2.68)
- 5.43** Medication administration should always be safe and secure with consistent supervision by discipline staff. (2.69)
- 5.44** The in-possession policy should follow current best practice guidance on the prescribing of highly tradable medicines. (2.70)
- 5.45** A wider range of medicines should be available for nurses and pharmacy staff to administer without a prescription when clinically appropriate. (2.71)
- 5.46** All discipline staff should have regular mental health awareness training to recognise and take appropriate action when a prisoner has mental health problems, with segregation unit staff prioritised for this. (2.81)

Catering

- 5.47** The quality of food should be improved in consultation with prisoners. Food comment books should be regularly monitored by the catering manager, with appropriate responses recorded and action taken where required. (2.87)

Purchases

- 5.48** Prisoners should not have to pay an administration fee for shop orders. (2.91)

Learning and skills and work activities

- 5.49** The prison should routinely evaluate the performance of different groups of prisoners in learning and work to ensure all achieve at equally high levels. (3.12)
- 5.50** The scope and accuracy of self-assessment, quality assurance and improvement planning should be extended, and include all areas of learning and skills and work. (3.13)

- 5.51** Entry-level provision in English and mathematics should be extended to cater adequately for the prison population. (3.18)
- 5.52** The work available should be suitable to prepare prisoners for employment on release. Greater priority should be given to developing employability and vocational skills. (3.19)
- 5.53** Allocation of prisoners to work should take into account needs identified in sentence plans and National Careers Service individual action plans. (3.20)
- 5.54** Additional learning support should be given to prisoners with the greatest need, and there should be more use of peer mentors to support learning. (3.26)
- 5.55** Education induction should ensure that all prisoners understand the work and learning available to them, and initial assessments should accurately identify all those who need to improve their English and mathematics skills. (3.27)
- 5.56** The prison should raise achievement rates on educational and vocational courses so that they are consistently good. (3.32)
- 5.57** Prisoners in workshops and other prison jobs should routinely have opportunities to gain qualifications or other recognition for the skills they acquire. (3.33)
- 5.58** The prison should take action to increase regular library visits, including the extension of opening hours to evenings and weekends. (3.37)

Physical education and healthy living

- 5.59** The prison should identify and provide suitable provision leading to vocational qualifications in PE and healthy living. (3.43)

Strategic management of resettlement

- 5.60** The strategic management of resettlement should be developed to incorporate and coordinate both offender management and resettlement pathways provision, and be informed by a needs analysis that draws on an appropriate range of data. (4.6)

Offender management and planning

- 5.61** A sufficiently resourced offender management unit should ensure that all relevant prisoners receive prompt and effective OASys assessments, sentence planning and reviews, supported by meaningful input from offender supervisors and offender managers, to enable them to progress through their sentence. (4.13)
- 5.62** Managers should carry out regular oversight and quality assurance of offender supervisor work to ensure all elements of offender management are delivered to a high standard. (4.14)
- 5.63** Categorisation reviews should be held on time. (4.21)

Reintegration planning

- 5.64** Prisoners should have access to specialist housing advice when required. (4.31)

- 5.65** The prison should provide an effective programme of pre-release employment, training and education activities, including use of the virtual campus for job searching. Links with employers should be developed to increase job opportunities for prisoners on release. (4.34)
- 5.66** Peer mentors should be available to support prisoners recovering from drug and alcohol misuse. (4.38)
- 5.67** Finance, benefit and debt provision should meet the needs of prisoners during custody and in preparation for release. (4.40)
- 5.68** Provision for prisoners to maintain family ties should be improved, including parenting/relationship courses and continued access to family days. (4.45)
- 5.69** The two children's play areas in the visits hall should be renovated, and play sessions should be supervised during visits. (4.46)
- 5.70** The prison should offer appropriate offending behaviour courses to meet the identified needs of the population. (4.49)

Housekeeping points

Early days in custody

- 5.71** All risk interviews with new arrivals should take place in private. (1.9)

Self-harm and suicide

- 5.72** The safer custody manager should meet the Samaritans regularly. (1.23)
- 5.73** The Listener suites should be clean, tidy and fit for purpose. (1.24)

Discipline

- 5.74** The quality of staff entries in prisoners' segregation files should be improved. (1.62)
- 5.75** The analysis of information to monitor levels of segregation should be developed. (1.63)

Substance misuse

- 5.76** Reviews of treatment should be at the frequency stipulated by national guidance and be multidisciplinary. (1.75)
- 5.77** There should be systematic promotion of health, harm minimisation and protection against blood-borne viruses. (1.76)

Health services

- 5.78** Prisoners should be able to complain about health services through a well-publicised system, and all responses to complaints should be prompt and fully address all the issues raised. (2.49)

- 5.79** Barrier protection should be easily available through a well-advertised confidential system. (2.50)
- 5.80** All external defibrillators available to custodial staff should receive daily recorded checks and be ready for use. (2.51)
- 5.81** There should be regular auditing of prescriptions by a pharmacist. (2.72)
- 5.82** All medicines should be properly and clearly labelled before supply to patients. (2.73)
- 5.83** All medication administration records should be complete, and appropriate action taken for any prisoner non-attendance. (2.74)

Learning and skills and work activities

- 5.84** Teachers' feedback and marking should give prisoners clear guidance on how to improve their written work. (3.28)

Offender management and planning

- 5.85** Prisoners should be permitted to attend home detention curfew boards, and should be released as close as possible to their HDC eligibility date. (4.15)

Reintegration planning

- 5.86** The prison should investigate and address prisoners' lack of awareness of resettlement pathway support. (4.29)
- 5.87** All visits should start on time. (4.47)

Example of good practice

- 5.88** In an innovative joint project between the library and healthcare, prison health care professionals 'prescribed' carefully selected books to help prisoners improve their physical or mental health. (3.38)
- 5.89** The through-the-gate 'Helping you out' service effectively supported the resettlement of prisoners with mental health problems. (4.36)

Section 6. Appendices

Appendix I: Inspection team

| | |
|--------------------|------------------------|
| Martin Lomas | Deputy chief inspector |
| Hindpal Singh Bhui | Team leader |
| Beverley Alden | Inspector |
| Colin Carroll | Inspector |
| Fionnuala Gordon | Inspector |
| Gordon Riach | Inspector |
| Paul Rowlands | Inspector |
| Alissa Redmond | Researcher |
| Catherine Shaw | Researcher |
| Lucy Higgins | Researcher |

Specialist inspectors

| | |
|-------------------|-------------------------------|
| Paul Tarbuck | Substance misuse inspector |
| Majella Pearce | Health services inspector |
| Eilean Robson | Pharmacist |
| Matthew Tedstone | Care Quality Commission |
| Alastair Pearson | Ofsted inspector |
| Rieks Drijver | Ofsted inspector |
| Stephen Hunsley | Ofsted inspector |
| Shane Langthorne | Ofsted inspector |
| Iolo Madoc- Jones | Offender management inspector |
| Vivienne Clark | Offender management inspector |
| Jo Dowling | 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 | 31 | 537 | 55.7 |
| Recall | 4 | 83 | 8.5 |
| Convicted unsentenced | 14 | 108 | 12 |
| Remand | 23 | 204 | 22.3 |
| Detainees | 0 | 9 | 0.9 |
| Total | 72 | 947 | 100 |

| Sentence | 18–20 yr olds | 21 and over | % |
|---|---------------|-------------|------------|
| Unsentenced | 39 | 335 | 36.7 |
| Less than six months | 9 | 161 | 16.7 |
| Six months to less than 12 months | 3 | 107 | 10.8 |
| 12 months to less than 2 years | 10 | 81 | 8.9 |
| 2 years to less than 4 years | 3 | 101 | 10.2 |
| 4 years to less than 10 years | 6 | 69 | 7.4 |
| 10 years and over (not life) | 0 | 42 | 4.1 |
| ISPP (indeterminate sentence for public protection) | 2 | 33 | 5.2 |
| Life | 0 | 18 | 1.8 |
| Total | 72 | 947 | 100 |

| Age | Number of prisoners | % |
|----------------------|---------------------|------------|
| Under 21 years | 72 | 7.1 |
| 21 years to 29 years | 385 | 37.8 |
| 30 years to 39 years | 319 | 31.3 |
| 40 years to 49 years | 156 | 15.3 |
| 50 years to 59 years | 61 | 6.0 |
| 60 years to 69 years | 20 | 2.0 |
| 70 plus years | 6 | 0.6 |
| Total | 1019 | 100 |

| Nationality | 18–20 yr olds | 21 and over | % |
|-------------------|---------------|-------------|------------|
| British | 68 | 863 | 88.2 |
| Foreign nationals | 4 | 84 | 8.6 |
| Total | 72 | 947 | 100 |

| Security category | 18–20 yr olds | 21 and over | % |
|---------------------------|---------------|-------------|------------|
| Uncategorised unsentenced | 46 | 474 | 51 |
| Uncategorised sentenced | 0 | 1 | 0.1 |
| Category B | 0 | 90 | 8.8 |
| Category C | 1 | 359 | 35.3 |
| Category D | 0 | 6 | 0.6 |
| Other | 25 | 17 | 4.2 |
| Total | 72 | 947 | 100 |

| Ethnicity | 18–20 yr olds | 21 and over | % |
|---------------------------|----------------------|--------------------|------------|
| White | 56 | 789 | 82.9 |
| British | 53 | 734 | 77.2 |
| Irish | 0 | 7 | 0.7 |
| Gypsy/Irish Traveller | 1 | 4 | 0.5 |
| Other white | 2 | 44 | 4.5 |
| Mixed | 4 | 34 | 3.7 |
| White and black Caribbean | 3 | 28 | 3.0 |
| White and black African | 0 | 1 | 0.1 |
| White and Asian | 0 | 1 | 0.1 |
| Other mixed | 1 | 4 | 0.5 |
| Asian or Asian British | 6 | 43 | 4.8 |
| Indian | 1 | 16 | 1.7 |
| Pakistani | 4 | 19 | 2.3 |
| Chinese | 0 | 2 | 0.2 |
| Other Asian | 1 | 6 | 0.7 |
| Black or black British | 5 | 63 | 6.7 |
| Caribbean | 3 | 43 | 4.5 |
| African | 1 | 14 | 1.5 |
| Other black | 1 | 6 | 0.7 |
| Other ethnic group | 0 | 7 | 0.7 |
| Not stated | 1 | 11 | 1.2 |
| Total | 72 | 947 | 100 |

| Religion | 18–20 yr olds | 21 and over | % |
|-------------------------------|----------------------|--------------------|------------|
| Baptist | 0 | 1 | 0.1 |
| Church of England | 7 | 155 | 15.9 |
| Roman Catholic | 9 | 134 | 14 |
| Other Christian denominations | 12 | 173 | 18.2 |
| Muslim | 9 | 66 | 7.4 |
| Sikh | 0 | 5 | 0.5 |
| Buddhist | 0 | 18 | 1.8 |
| Jewish | 0 | 2 | 0.2 |
| Other | 1 | 10 | 1.1 |
| No religion | 30 | 355 | 37.8 |
| Total | 72 | 947 | 100 |

| Other demographics | 18–20 yr olds | 21 and over | % |
|-----------------------------|----------------------|--------------------|------------|
| Veteran (ex-armed services) | 0 | 3 | 0.3 |
| Total | 0 | 3 | 0.3 |

Sentenced prisoners only

| Length of stay | 18–20 yr olds | | 21 and over | |
|------------------------|----------------------|------------|--------------------|-------------|
| | Number | % | Number | % |
| Less than 1 month | 15 | 1.5 | 211 | 20.7 |
| 1 month to 3 months | 12 | 1.2 | 218 | 21.4 |
| 3 months to six months | 5 | 0.5 | 86 | 8.4 |
| Six months to 1 year | 0 | 0.0 | 66 | 6.5 |
| 1 year to 2 years | 1 | 0.1 | 24 | 2.4 |
| 2 years to 4 years | 0 | 0.5 | 61 | 0.6 |
| 4 years or more | 0 | 0.0 | 1 | 0.1 |
| Total | 33 | 3.2 | 612 | 60.1 |

Sentenced prisoners only

| | 18–20 yr olds | 21 and over | % |
|---|----------------------|---|------------|
| Foreign nationals detained post sentence expiry | 0 | 9 | 0.9 |
| Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions). | | 77 [we do not keep figures of whether these are adults or young adults] | 7.6 |
| Total | 0 | 86 | 8.5 |

Unsentenced prisoners only

| Length of stay | 18–20 yr olds | | 21 and over | |
|------------------------|----------------------|------------|--------------------|-------------|
| | Number | % | Number | % |
| Less than 1 month | 30 | 8.0 | 117 | 31.3 |
| 1 month to 3 months | 7 | 1.9 | 107 | 28.6 |
| 3 months to six months | 2 | 0.5 | 78 | 20.9 |
| Six months to 1 year | 0 | 0.0 | 16 | 4.3 |
| 1 year to 2 years | 0 | 0.0 | 12 | 3.2 |
| 4 years or more | 0 | 0.0 | 5 | 1.3 |
| Total | 39 | 3.8 | 335 | 32.9 |

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 8 September 2014 the prisoner population at HMP Nottingham was 1,042. Using the method described above, questionnaires were distributed to a sample of 224 prisoners.

We received a total of 190 completed questionnaires, a response rate of 85%. This included one questionnaire completed via interview. Nineteen respondents refused to complete a questionnaire, nine questionnaires were not returned and six were returned blank.

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.

| Wing/Unit | Number of completed survey returns |
|------------------|---|
| A | 31 |
| B | 42 |
| C | 18 |
| D | 28 |
| E | 24 |
| F | 18 |
| G | 27 |
| Segregation unit | 2 |

Presentation of survey results and analyses

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

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 has been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from HMP Nottingham in 2014 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 33 local prisons since April 2008.
- The current survey responses from HMP Nottingham in 2014 compared with the responses of prisoners surveyed at HMP Nottingham in 2010.
- A comparison within the 2014 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2014 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2014 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2014 survey between the vulnerable prisoner wing (G) 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? | | |
| | <i>Under 21</i> | | 14 (7%) |
| | <i>21 - 29</i> | | 71 (37%) |
| | <i>30 - 39</i> | | 58 (31%) |
| | <i>40 - 49</i> | | 32 (17%) |
| | <i>50 - 59</i> | | 12 (6%) |
| | <i>60 - 69</i> | | 3 (2%) |
| | <i>70 and over</i> | | 0 (0%) |
| Q1.3 | Are you sentenced? | | |
| | <i>Yes</i> | | 94 (49%) |
| | <i>Yes - on recall</i> | | 20 (11%) |
| | <i>No - awaiting trial</i> | | 40 (21%) |
| | <i>No - awaiting sentence</i> | | 36 (19%) |
| | <i>No - awaiting deportation</i> | | 0 (0%) |
| Q1.4 | How long is your sentence? | | |
| | <i>Not sentenced</i> | | 76 (41%) |
| | <i>Less than 6 months</i> | | 34 (18%) |
| | <i>6 months to less than 1 year</i> | | 16 (9%) |
| | <i>1 year to less than 2 years</i> | | 15 (8%) |
| | <i>2 years to less than 4 years</i> | | 17 (9%) |
| | <i>4 years to less than 10 years</i> | | 16 (9%) |
| | <i>10 years or more</i> | | 5 (3%) |
| | <i>IPP (indeterminate sentence for public protection)</i> | | 1 (1%) |
| | <i>Life</i> | | 5 (3%) |
| Q1.5 | Are you a foreign national? (i.e. do not have UK citizenship.) | | |
| | <i>Yes</i> | | 21 (11%) |
| | <i>No</i> | | 166 (89%) |
| Q1.6 | Do you understand spoken English? | | |
| | <i>Yes</i> | | 186 (98%) |
| | <i>No</i> | | 3 (2%) |
| Q1.7 | Do you understand written English? | | |
| | <i>Yes</i> | | 182 (96%) |
| | <i>No</i> | | 8 (4%) |
| Q1.8 | What is your ethnic origin? | | |
| | <i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i> | 134 (72%) | <i>Asian or Asian British - Chinese</i> 0 (0%) |
| | <i>White - Irish</i> | 5 (3%) | <i>Asian or Asian British - other</i> 0 (0%) |
| | <i>White - other</i> | 11 (6%) | <i>Mixed race - white and black Caribbean</i> 11 (6%) |
| | <i>Black or black British - Caribbean</i> | 7 (4%) | <i>Mixed race - white and black African</i> 0 (0%) |
| | <i>Black or black British - African</i> | 3 (2%) | <i>Mixed race - white and Asian</i> 3 (2%) |
| | <i>Black or black British - other</i> | 2 (1%) | <i>Mixed race - other</i> 0 (0%) |
| | <i>Asian or Asian British - Indian</i> | 2 (1%) | <i>Arab</i> 0 (0%) |
| | <i>Asian or Asian British - Pakistani</i> | 3 (2%) | <i>Other ethnic group</i> 4 (2%) |
| | <i>Asian or Asian British - Bangladeshi</i> | 0 (0%) | |

| | | | |
|--------------|--|----------|---------------|
| Q1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | | |
| | Yes | | 11 (6%) |
| | No | | 173 (94%) |
| Q1.10 | What is your religion? | | |
| | None | 72 (39%) | Hindu 0 (0%) |
| | Church of England | 56 (30%) | Jewish 0 (0%) |
| | Catholic | 29 (16%) | Muslim 9 (5%) |
| | Protestant | 1 (1%) | Sikh 2 (1%) |
| | Other Christian denomination | 9 (5%) | Other 3 (2%) |
| | Buddhist | 4 (2%) | |
| Q1.11 | How would you describe your sexual orientation? | | |
| | Heterosexual/ Straight | | 181 (98%) |
| | Homosexual/Gay | | 1 (1%) |
| | Bisexual | | 2 (1%) |
| Q1.12 | Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs.) | | |
| | Yes | | 41 (22%) |
| | No | | 147 (78%) |
| Q1.13 | Are you a veteran (ex-armed services)? | | |
| | Yes | | 12 (6%) |
| | No | | 173 (94%) |
| Q1.14 | Is this your first time in prison? | | |
| | Yes | | 51 (27%) |
| | No | | 137 (73%) |
| Q1.15 | Do you have children under the age of 18? | | |
| | Yes | | 105 (56%) |
| | No | | 82 (44%) |

Section 2: Courts, transfers and escorts

| | | | |
|-------------|---|--|-----------|
| Q2.1 | On your most recent journey here, how long did you spend in the van? | | |
| | Less than 2 hours | | 149 (80%) |
| | 2 hours or longer | | 33 (18%) |
| | Don't remember | | 5 (3%) |
| Q2.2 | On your most recent journey here, were you offered anything to eat or drink? | | |
| | My journey was less than two hours | | 149 (79%) |
| | Yes | | 14 (7%) |
| | No | | 23 (12%) |
| | Don't remember | | 2 (1%) |
| Q2.3 | On your most recent journey here, were you offered a toilet break? | | |
| | My journey was less than two hours | | 149 (80%) |
| | Yes | | 4 (2%) |
| | No | | 33 (18%) |
| | Don't remember | | 1 (1%) |
| Q2.4 | On your most recent journey here, was the van clean? | | |
| | Yes | | 97 (52%) |
| | No | | 70 (38%) |
| | Don't remember | | 18 (10%) |

| | | |
|-------------|--|-----------|
| Q2.5 | On your most recent journey here, did you feel safe? | |
| | Yes | 142 (77%) |
| | No | 41 (22%) |
| | Don't remember | 2 (1%) |
| Q2.6 | On your most recent journey here, how were you treated by the escort staff? | |
| | Very well | 42 (22%) |
| | Well | 85 (45%) |
| | Neither | 43 (23%) |
| | Badly | 9 (5%) |
| | Very badly | 4 (2%) |
| | Don't remember | 6 (3%) |
| 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 | 125 (66%) |
| | Yes, I received written information | 5 (3%) |
| | No, I was not told anything | 53 (28%) |
| | Don't remember | 8 (4%) |
| Q2.8 | When you first arrived here did your property arrive at the same time as you? | |
| | Yes | 164 (88%) |
| | No | 17 (9%) |
| | Don't remember | 5 (3%) |

Section 3: Reception, first night and induction

| | | | | |
|-------------|---|-----------|---|----------|
| Q3.1 | How long were you in reception? | | | |
| | Less than 2 hours | 36 (19%) | | |
| | 2 hours or longer | 149 (78%) | | |
| | Don't remember | 5 (3%) | | |
| Q3.2 | When you were searched, was this carried out in a respectful way? | | | |
| | Yes | 155 (82%) | | |
| | No | 28 (15%) | | |
| | Don't remember | 5 (3%) | | |
| Q3.3 | Overall, how were you treated in reception? | | | |
| | Very well | 26 (14%) | | |
| | Well | 77 (41%) | | |
| | Neither | 37 (20%) | | |
| | Badly | 30 (16%) | | |
| | Very badly | 17 (9%) | | |
| | Don't remember | 2 (1%) | | |
| 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 | 22 (12%) | Physical health | 40 (22%) |
| | Housing problems | 34 (18%) | Mental health | 50 (27%) |
| | Contacting employers | 10 (5%) | Needing protection from other prisoners | 21 (11%) |
| | Contacting family | 68 (37%) | Getting phone numbers | 75 (40%) |
| | Childcare | 6 (3%) | Other | 13 (7%) |
| | Money worries | 44 (24%) | Did not have any problems | 38 (20%) |
| | Feeling depressed or suicidal | 43 (23%) | | |

| | | |
|--------------|---|-----------|
| Q3.5 | Did you receive any help/support from staff in dealing with these problems when you first arrived here? | |
| | Yes | 28 (15%) |
| | No | 116 (64%) |
| | Did not have any problems | 38 (21%) |
| Q3.6 | When you first arrived here, were you offered any of the following? (Please tick all that applies to you.) | |
| | Tobacco | 147 (78%) |
| | A shower | 118 (63%) |
| | A free telephone call | 135 (72%) |
| | Something to eat | 144 (77%) |
| | PIN phone credit | 101 (54%) |
| | Toiletries/ basic items | 102 (54%) |
| | Did not receive anything | 5 (3%) |
| 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 | 67 (36%) |
| | Someone from health services | 114 (61%) |
| | A Listener/Samaritans | 27 (14%) |
| | Prison shop/ canteen | 40 (21%) |
| | Did not have access to any of these | 46 (25%) |
| 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 | 51 (28%) |
| | What support was available for people feeling depressed or suicidal | 38 (21%) |
| | How to make routine requests (applications) | 42 (23%) |
| | Your entitlement to visits | 39 (22%) |
| | Health services | 57 (32%) |
| | Chaplaincy | 43 (24%) |
| | Not offered any information | 94 (52%) |
| Q3.9 | Did you feel safe on your first night here? | |
| | Yes | 133 (70%) |
| | No | 51 (27%) |
| | Don't remember | 5 (3%) |
| Q3.10 | How soon after you arrived here did you go on an induction course? | |
| | Have not been on an induction course | 117 (63%) |
| | Within the first week | 26 (14%) |
| | More than a week | 33 (18%) |
| | Don't remember | 10 (5%) |
| Q3.11 | Did the induction course cover everything you needed to know about the prison? | |
| | Have not been on an induction course | 117 (64%) |
| | Yes | 21 (12%) |
| | No | 37 (20%) |
| | Don't remember | 7 (4%) |
| Q3.12 | How soon after you arrived here did you receive an education ('skills for life') assessment? | |
| | Did not receive an assessment | 111 (61%) |
| | Within the first week | 5 (3%) |
| | More than a week | 49 (27%) |
| | Don't remember | 16 (9%) |

Section 4: Legal rights and respectful custody

| | | | | | | | |
|-------------|--|-----------|-----------|------------|-----------|----------------|-----------|
| Q4.1 | How easy is it to..... | | | | | | |
| | | Very easy | Easy | Neither | Difficult | Very difficult | N/A |
| | Communicate with your solicitor or legal representative? | 11 (6%) | 35 (19%) | 21 (12%) | 53 (29%) | 36 (20%) | 26 (14%) |
| | Attend legal visits? | 14 (8%) | 53 (31%) | 26 (15%) | 28 (16%) | 13 (8%) | 38 (22%) |
| | Get bail information? | 8 (5%) | 10 (6%) | 26 (16%) | 30 (18%) | 39 (24%) | 52 (32%) |
| Q4.2 | Have staff here ever opened letters from your solicitor or your legal representative when you were not with them? | | | | | | |
| | Not had any letters | | | | | | 25 (14%) |
| | Yes | | | | | | 75 (41%) |
| | No | | | | | | 81 (45%) |
| Q4.3 | Can you get legal books in the library? | | | | | | |
| | Yes | | | | | | 46 (25%) |
| | No | | | | | | 17 (9%) |
| | Don't know | | | | | | 120 (66%) |
| Q4.4 | Please answer the following questions about the wing/unit you are currently living on: | | | | | | |
| | | Yes | No | Don't know | | | |
| | Do you normally have enough clean, suitable clothes for the week? | 55 (30%) | 124 (68%) | 4 (2%) | | | |
| | Are you normally able to have a shower every day? | 53 (29%) | 128 (70%) | 1 (1%) | | | |
| | Do you normally receive clean sheets every week? | 105 (58%) | 71 (39%) | 6 (3%) | | | |
| | Do you normally get cell cleaning materials every week? | 74 (41%) | 102 (57%) | 4 (2%) | | | |
| | Is your cell call bell normally answered within five minutes? | 18 (10%) | 153 (84%) | 11 (6%) | | | |
| | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 64 (36%) | 115 (64%) | 1 (1%) | | | |
| | If you need to, can you normally get your stored property? | 20 (11%) | 121 (67%) | 40 (22%) | | | |
| Q4.5 | What is the food like here? | | | | | | |
| | Very good | | | | | | 4 (2%) |
| | Good | | | | | | 20 (11%) |
| | Neither | | | | | | 33 (18%) |
| | Bad | | | | | | 67 (36%) |
| | Very bad | | | | | | 61 (33%) |
| Q4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | | | | | | |
| | Have not bought anything yet/ don't know | | | | | | 14 (8%) |
| | Yes | | | | | | 89 (48%) |
| | No | | | | | | 81 (44%) |
| Q4.7 | Can you speak to a Listener at any time, if you want to? | | | | | | |
| | Yes | | | | | | 63 (34%) |
| | No | | | | | | 40 (22%) |
| | Don't know | | | | | | 83 (45%) |
| Q4.8 | Are your religious beliefs respected? | | | | | | |
| | Yes | | | | | | 57 (30%) |
| | No | | | | | | 41 (22%) |
| | Don't know/ N/A | | | | | | 89 (48%) |
| Q4.9 | Are you able to speak to a chaplain of your faith in private if you want to? | | | | | | |
| | Yes | | | | | | 58 (31%) |
| | No | | | | | | 29 (16%) |
| | Don't know/ N/A | | | | | | 98 (53%) |

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

| | |
|-------------------------------|----------|
| <i>I don't want to attend</i> | 43 (23%) |
| <i>Very easy</i> | 19 (10%) |
| <i>Easy</i> | 30 (16%) |
| <i>Neither</i> | 11 (6%) |
| <i>Difficult</i> | 22 (12%) |
| <i>Very difficult</i> | 11 (6%) |
| <i>Don't know</i> | 49 (26%) |

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

| | |
|-------------------|-----------|
| <i>Yes</i> | 119 (65%) |
| <i>No</i> | 45 (24%) |
| <i>Don't know</i> | 20 (11%) |

Q5.2 Please answer the following questions about applications

| | <i>Not made one</i> | <i>Yes</i> | <i>No</i> |
|---|---------------------|------------|-----------|
| <i>Are applications dealt with fairly?</i> | 28 (16%) | 47 (27%) | 101 (57%) |
| <i>Are applications dealt with quickly (within seven days)?</i> | 28 (17%) | 19 (11%) | 119 (72%) |

Q5.3 Is it easy to make a complaint?

| | |
|-------------------|----------|
| <i>Yes</i> | 89 (50%) |
| <i>No</i> | 43 (24%) |
| <i>Don't know</i> | 45 (25%) |

Q5.4 Please answer the following questions about complaints

| | <i>Not made one</i> | <i>Yes</i> | <i>No</i> |
|---|---------------------|------------|-----------|
| <i>Are complaints dealt with fairly?</i> | 77 (43%) | 19 (11%) | 83 (46%) |
| <i>Are complaints dealt with quickly (within seven days)?</i> | 77 (44%) | 11 (6%) | 87 (50%) |

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

| | |
|------------|-----------|
| <i>Yes</i> | 39 (22%) |
| <i>No</i> | 135 (78%) |

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> | 90 (50%) |
| <i>Very easy</i> | 12 (7%) |
| <i>Easy</i> | 11 (6%) |
| <i>Neither</i> | 22 (12%) |
| <i>Difficult</i> | 22 (12%) |
| <i>Very difficult</i> | 23 (13%) |

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> | 44 (24%) |
| <i>Yes</i> | 53 (29%) |
| <i>No</i> | 58 (32%) |
| <i>Don't know</i> | 28 (15%) |

| | | |
|-------------|---|-----------|
| Q6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels) | |
| | <i>Don't know what the IEP scheme is</i> | 44 (24%) |
| | Yes | 54 (30%) |
| | No | 63 (35%) |
| | <i>Don't know</i> | 21 (12%) |
| Q6.3 | In the last six months have any members of staff physically restrained you (C&R)? | |
| | Yes | 15 (8%) |
| | No | 166 (92%) |
| Q6.4 | If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff? | |
| | <i>I have not been to segregation in the last 6 months</i> | 152 (84%) |
| | Very well | 4 (2%) |
| | Well | 9 (5%) |
| | Neither | 8 (4%) |
| | Badly | 2 (1%) |
| | Very badly | 6 (3%) |

Section 7: Relationships with staff

| | | |
|-------------|--|-----------|
| Q7.1 | Do most staff treat you with respect? | |
| | Yes | 128 (70%) |
| | No | 55 (30%) |
| Q7.2 | Is there a member of staff you can turn to for help if you have a problem? | |
| | Yes | 108 (61%) |
| | No | 70 (39%) |
| Q7.3 | Has a member of staff checked on you personally in the last week to see how you are getting on? | |
| | Yes | 33 (18%) |
| | No | 153 (82%) |
| Q7.4 | How often do staff normally speak to you during association? | |
| | <i>Do not go on association</i> | 11 (6%) |
| | Never | 64 (35%) |
| | Rarely | 48 (26%) |
| | Some of the time | 39 (21%) |
| | Most of the time | 13 (7%) |
| | All of the time | 10 (5%) |
| Q7.5 | When did you first meet your personal (named) officer? | |
| | <i>I have not met him/her</i> | 156 (84%) |
| | <i>In the first week</i> | 9 (5%) |
| | <i>More than a week</i> | 9 (5%) |
| | <i>Don't remember</i> | 12 (6%) |
| Q7.6 | How helpful is your personal (named) officer? | |
| | <i>Do not have a personal officer/ I have not met him/ her</i> | 156 (89%) |
| | Very helpful | 8 (5%) |
| | Helpful | 5 (3%) |
| | Neither | 1 (1%) |
| | Not very helpful | 0 (0%) |
| | Not at all helpful | 6 (3%) |

Section 8: Safety

| | | | |
|-------------|--|----------|---------------------------------|
| Q8.1 | Have you ever felt unsafe here? | | |
| | Yes | | 101 (54%) |
| | No | | 86 (46%) |
| Q8.2 | Do you feel unsafe now? | | |
| | Yes | | 52 (29%) |
| | No | | 128 (71%) |
| Q8.3 | In which areas have you felt unsafe? (Please tick all that applies to you.) | | |
| | Never felt unsafe | 86 (47%) | At meal times 26 (14%) |
| | Everywhere | 35 (19%) | At health services 19 (10%) |
| | Segregation unit | 3 (2%) | Visits area 19 (10%) |
| | Association areas | 36 (20%) | In wing showers 35 (19%) |
| | Reception area | 14 (8%) | In gym showers 14 (8%) |
| | At the gym | 13 (7%) | In corridors/stairwells 13 (7%) |
| | In an exercise yard | 27 (15%) | On your landing/wing 30 (16%) |
| | At work | 18 (10%) | In your cell 17 (9%) |
| | During movement | 25 (14%) | At religious services 6 (3%) |
| | At education | 11 (6%) | |
| Q8.4 | Have you been victimised by other prisoners here? | | |
| | Yes | | 73 (39%) |
| | No | | 114 (61%) |
| 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) | | 42 (22%) |
| | Physical abuse (being hit, kicked or assaulted) | | 23 (12%) |
| | Sexual abuse | | 3 (2%) |
| | Feeling threatened or intimidated | | 50 (27%) |
| | Having your canteen/property taken | | 24 (13%) |
| | Medication | | 16 (9%) |
| | Debt | | 10 (5%) |
| | Drugs | | 14 (8%) |
| | Your race or ethnic origin | | 7 (4%) |
| | Your religion/religious beliefs | | 6 (3%) |
| | Your nationality | | 9 (5%) |
| | You are from a different part of the country than others | | 15 (8%) |
| | You are from a traveller community | | 4 (2%) |
| | Your sexual orientation | | 3 (2%) |
| | Your age | | 7 (4%) |
| | You have a disability | | 9 (5%) |
| | You were new here | | 19 (10%) |
| | Your offence/ crime | | 18 (10%) |
| | Gang related issues | | 20 (11%) |
| Q8.6 | Have you been victimised by staff here? | | |
| | Yes | | 55 (30%) |
| | No | | 130 (70%) |

| | | |
|-------------|--|----------|
| Q8.7 | If yes, what did the incident(s) involve/ what was it about? (Please tick all that applies to you.) | |
| | <i>Insulting remarks (about you or your family or friends)</i> | 26 (14%) |
| | <i>Physical abuse (being hit, kicked or assaulted)</i> | 12 (6%) |
| | <i>Sexual abuse</i> | 4 (2%) |
| | <i>Feeling threatened or intimidated</i> | 29 (16%) |
| | <i>Medication</i> | 10 (5%) |
| | <i>Debt</i> | 6 (3%) |
| | <i>Drugs</i> | 6 (3%) |
| | <i>Your race or ethnic origin</i> | 7 (4%) |
| | <i>Your religion/religious beliefs</i> | 8 (4%) |
| | <i>Your nationality</i> | 5 (3%) |
| | <i>You are from a different part of the country than others</i> | 7 (4%) |
| | <i>You are from a traveller community</i> | 3 (2%) |
| | <i>Your sexual orientation</i> | 3 (2%) |
| | <i>Your age</i> | 8 (4%) |
| | <i>You have a disability</i> | 6 (3%) |
| | <i>You were new here</i> | 13 (7%) |
| | <i>Your offence/ crime</i> | 10 (5%) |
| | <i>Gang related issues</i> | 14 (8%) |

| | | |
|-------------|--|----------|
| Q8.8 | If you have been victimised by prisoners or staff, did you report it? | |
| | <i>Not been victimised</i> | 97 (60%) |
| | <i>Yes</i> | 26 (16%) |
| | <i>No</i> | 39 (24%) |

Section 9: Health services

| | | | | | | | |
|-------------|---|-------------------|------------------|-------------|----------------|------------------|-----------------------|
| Q9.1 | How easy or difficult is it to see the following people? | | | | | | |
| | | <i>Don't know</i> | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> |
| | The doctor | 29 (16%) | 3 (2%) | 20 (11%) | 12 (7%) | 58 (33%) | 56 (31%) |
| | The nurse | 30 (17%) | 10 (6%) | 33 (19%) | 20 (11%) | 47 (27%) | 36 (20%) |
| | The dentist | 36 (20%) | 5 (3%) | 14 (8%) | 9 (5%) | 50 (28%) | 62 (35%) |

| | | | | | | | |
|-------------|--|-----------------|------------------|-------------|----------------|------------|-----------------|
| Q9.2 | What do you think of the quality of the health service from the following people? | | | | | | |
| | | <i>Not been</i> | <i>Very good</i> | <i>Good</i> | <i>Neither</i> | <i>Bad</i> | <i>Very bad</i> |
| | The doctor | 56 (32%) | 13 (7%) | 30 (17%) | 27 (15%) | 21 (12%) | 28 (16%) |
| | The nurse | 44 (25%) | 17 (10%) | 43 (24%) | 23 (13%) | 24 (13%) | 27 (15%) |
| | The dentist | 77 (44%) | 11 (6%) | 15 (9%) | 26 (15%) | 17 (10%) | 29 (17%) |

| | | |
|-------------|--|----------|
| Q9.3 | What do you think of the overall quality of the health services here? | |
| | <i>Not been</i> | 40 (23%) |
| | <i>Very good</i> | 12 (7%) |
| | <i>Good</i> | 37 (21%) |
| | <i>Neither</i> | 28 (16%) |
| | <i>Bad</i> | 28 (16%) |
| | <i>Very bad</i> | 32 (18%) |

| | | |
|-------------|---|----------|
| Q9.4 | Are you currently taking medication? | |
| | <i>Yes</i> | 93 (51%) |
| | <i>No</i> | 89 (49%) |

| | | |
|-------------|--|----------|
| Q9.5 | If you are taking medication, are you allowed to keep some/ all of it in your own cell? | |
| | <i>Not taking medication</i> | 89 (50%) |
| | <i>Yes, all my meds</i> | 21 (12%) |
| | <i>Yes, some of my meds</i> | 15 (8%) |
| | <i>No</i> | 54 (30%) |

| | | |
|-------------|---|-----------|
| Q9.6 | Do you have any emotional or mental health problems? | |
| | Yes | 79 (44%) |
| | No | 102 (56%) |
| 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> | 102 (57%) |
| | Yes | 34 (19%) |
| | No | 42 (24%) |

Section 10: Drugs and alcohol

| | | |
|--------------|---|-----------|
| Q10.1 | Did you have a problem with drugs when you came into this prison? | |
| | Yes | 59 (32%) |
| | No | 123 (68%) |
| Q10.2 | Did you have a problem with alcohol when you came into this prison? | |
| | Yes | 35 (19%) |
| | No | 146 (81%) |
| Q10.3 | Is it easy or difficult to get illegal drugs in this prison? | |
| | Very easy | 54 (30%) |
| | Easy | 35 (20%) |
| | Neither | 8 (4%) |
| | Difficult | 3 (2%) |
| | Very difficult | 5 (3%) |
| | Don't know | 73 (41%) |
| Q10.4 | Is it easy or difficult to get alcohol in this prison? | |
| | Very easy | 23 (13%) |
| | Easy | 12 (7%) |
| | Neither | 13 (7%) |
| | Difficult | 14 (8%) |
| | Very difficult | 15 (8%) |
| | Don't know | 105 (58%) |
| Q10.5 | Have you developed a problem with illegal drugs since you have been in this prison? | |
| | Yes | 23 (13%) |
| | No | 155 (87%) |
| Q10.6 | Have you developed a problem with diverted medication since you have been in this prison? | |
| | Yes | 20 (11%) |
| | No | 160 (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> | 107 (63%) |
| | Yes | 23 (14%) |
| | No | 40 (24%) |
| Q10.8 | Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison? | |
| | <i>Did not / do not have an alcohol problem</i> | 146 (82%) |
| | Yes | 11 (6%) |
| | No | 20 (11%) |

| | | |
|--------------|---|-----------|
| Q10.9 | Was the support or help you received, while in this prison, helpful? | |
| | <i>Did not have a problem/ did not receive help</i> | 140 (84%) |
| | Yes | 19 (11%) |
| | No | 8 (5%) |

Section 11: Activities

| | | | | | | | |
|--------------|---|--------------------------|------------------|-------------|-------------------|------------------|-----------------------|
| Q11.1 | How easy or difficult is it to get into the following activities, in this prison? | | | | | | |
| | | <i>Don't know</i> | <i>Very easy</i> | <i>Easy</i> | <i>Neither</i> | <i>Difficult</i> | <i>Very difficult</i> |
| | Prison job | 30 (17%) | 10 (6%) | 35 (20%) | 13 (7%) | 45 (25%) | 46 (26%) |
| | Vocational or skills training | 50 (31%) | 3 (2%) | 21 (13%) | 21 (13%) | 32 (20%) | 35 (22%) |
| | Education (including basic skills) | 39 (23%) | 5 (3%) | 31 (19%) | 25 (15%) | 37 (22%) | 29 (17%) |
| | Offending behaviour programmes | 69 (41%) | 3 (2%) | 6 (4%) | 19 (11%) | 27 (16%) | 43 (26%) |
| Q11.2 | Are you currently involved in the following? (Please tick all that applies to you.) | | | | | | |
| | <i>Not involved in any of these</i> | | | | | 81 (47%) | |
| | Prison job | | | | | 76 (44%) | |
| | Vocational or skills training | | | | | 7 (4%) | |
| | Education (including basic skills) | | | | | 22 (13%) | |
| | Offending behaviour programmes | | | | | 2 (1%) | |
| 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 | 63 (38%) | 27 (16%) | 63 (38%) | 11 (7%) | | |
| | Vocational or skills training | 79 (59%) | 17 (13%) | 24 (18%) | 15 (11%) | | |
| | Education (including basic skills) | 76 (55%) | 27 (19%) | 25 (18%) | 11 (8%) | | |
| | Offending behaviour programmes | 85 (64%) | 13 (10%) | 20 (15%) | 15 (11%) | | |
| Q11.4 | How often do you usually go to the library? | | | | | | |
| | <i>Don't want to go</i> | | | | | 35 (20%) | |
| | Never | | | | | 88 (49%) | |
| | <i>Less than once a week</i> | | | | | 33 (19%) | |
| | <i>About once a week</i> | | | | | 19 (11%) | |
| | <i>More than once a week</i> | | | | | 3 (2%) | |
| Q11.5 | Does the library have a wide enough range of materials to meet your needs? | | | | | | |
| | <i>Don't use it</i> | | | | | 88 (53%) | |
| | Yes | | | | | 34 (20%) | |
| | No | | | | | 44 (27%) | |
| Q11.6 | How many times do you usually go to the gym each week? | | | | | | |
| | <i>Don't want to go</i> | | | | | 37 (22%) | |
| | 0 | | | | | 83 (49%) | |
| | 1 to 2 | | | | | 44 (26%) | |
| | 3 to 5 | | | | | 5 (3%) | |
| | More than 5 | | | | | 2 (1%) | |
| Q11.7 | How many times do you usually go outside for exercise each week? | | | | | | |
| | <i>Don't want to go</i> | | | | | 24 (14%) | |
| | 0 | | | | | 25 (14%) | |
| | 1 to 2 | | | | | 55 (31%) | |
| | 3 to 5 | | | | | 53 (30%) | |
| | More than 5 | | | | | 18 (10%) | |

| | | |
|--------------|--|----------|
| Q11.8 | How many times do you usually have association each week? | |
| | <i>Don't want to go</i> | 8 (5%) |
| | <i>0</i> | 18 (10%) |
| | <i>1 to 2</i> | 64 (36%) |
| | <i>3 to 5</i> | 72 (41%) |
| | <i>More than 5</i> | 14 (8%) |
| 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> | 79 (45%) |
| | <i>2 to less than 4 hours</i> | 40 (23%) |
| | <i>4 to less than 6 hours</i> | 23 (13%) |
| | <i>6 to less than 8 hours</i> | 9 (5%) |
| | <i>8 to less than 10 hours</i> | 4 (2%) |
| | <i>10 hours or more</i> | 9 (5%) |
| | <i>Don't know</i> | 13 (7%) |

Section 12: Contact with family and friends

| | | |
|--------------|---|-----------|
| Q12.1 | Have staff supported you and helped you to maintain contact with your family/friends while in this prison? | |
| | <i>Yes</i> | 47 (26%) |
| | <i>No</i> | 133 (74%) |
| Q12.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | |
| | <i>Yes</i> | 98 (55%) |
| | <i>No</i> | 80 (45%) |
| Q12.3 | Have you had any problems getting access to the telephones? | |
| | <i>Yes</i> | 97 (56%) |
| | <i>No</i> | 77 (44%) |
| Q12.4 | How easy or difficult is it for your family and friends to get here? | |
| | <i>I don't get visits</i> | 30 (17%) |
| | <i>Very easy</i> | 27 (15%) |
| | <i>Easy</i> | 43 (24%) |
| | <i>Neither</i> | 7 (4%) |
| | <i>Difficult</i> | 33 (19%) |
| | <i>Very difficult</i> | 28 (16%) |
| | <i>Don't know</i> | 10 (6%) |

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> | 76 (42%) |
| | <i>Yes</i> | 50 (28%) |
| | <i>No</i> | 55 (30%) |
| 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> | 131 (73%) |
| | <i>No contact</i> | 28 (16%) |
| | <i>Letter</i> | 11 (6%) |
| | <i>Phone</i> | 4 (2%) |
| | <i>Visit</i> | 12 (7%) |

| | | |
|---------------|--|-----------|
| Q13.3 | Do you have a named offender supervisor in this prison? | |
| | Yes | 28 (16%) |
| | No | 146 (84%) |
| Q13.4 | Do you have a sentence plan? | |
| | Not sentenced | 76 (41%) |
| | Yes | 25 (14%) |
| | No | 83 (45%) |
| Q13.5 | How involved were you in the development of your sentence plan? | |
| | Do not have a sentence plan/ not sentenced | 159 (88%) |
| | Very involved | 8 (4%) |
| | Involved | 2 (1%) |
| | Neither | 4 (2%) |
| | Not very involved | 4 (2%) |
| | Not at all involved | 4 (2%) |
| 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 | 159 (87%) |
| | Nobody | 19 (10%) |
| | Offender supervisor | 2 (1%) |
| | Offender manager | 3 (2%) |
| | Named/ personal officer | 1 (1%) |
| | Staff from other departments | 1 (1%) |
| Q13.7 | Can you achieve any of your sentence plan targets in this prison? | |
| | Do not have a sentence plan/ not sentenced | 159 (87%) |
| | Yes | 6 (3%) |
| | No | 11 (6%) |
| | Don't know | 7 (4%) |
| 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 | 159 (87%) |
| | Yes | 4 (2%) |
| | No | 11 (6%) |
| | Don't know | 9 (5%) |
| 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 | 159 (87%) |
| | Yes | 8 (4%) |
| | No | 7 (4%) |
| | Don't know | 9 (5%) |
| Q13.10 | Do you have a needs based custody plan? | |
| | Yes | 11 (7%) |
| | No | 71 (42%) |
| | Don't know | 87 (51%) |
| Q13.11 | Do you feel that any member of staff has helped you to prepare for your release? | |
| | Yes | 8 (5%) |
| | No | 160 (95%) |

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

| | <i>Do not need help</i> | <i>Yes</i> | <i>No</i> |
|-------------------|-------------------------|------------|-----------|
| Employment | 41 (26%) | 17 (11%) | 99 (63%) |
| Accommodation | 37 (24%) | 24 (15%) | 95 (61%) |
| Benefits | 35 (22%) | 34 (21%) | 90 (57%) |
| Finances | 34 (22%) | 16 (11%) | 102 (67%) |
| Education | 37 (24%) | 21 (14%) | 95 (62%) |
| Drugs and alcohol | 45 (29%) | 26 (17%) | 86 (55%) |

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> | 76 (43%) |
| <i>Yes</i> | 33 (19%) |
| <i>No</i> | 68 (38%) |

Main comparator and comparator to last time



Prisoner survey responses HMP Nottingham 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 Nottingham 2014 | Local prisons comparator | HMP Nottingham 2014 | HMP Nottingham 2010 |
|--|--|---------------------|--------------------------|---------------------|---------------------|
| | 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 | | 190 | 5775 | 190 | 163 |
| SECTION 1: General information | | | | | |
| 1.2 | Are you under 21 years of age? | 7% | 6% | 7% | 2% |
| 1.3 | Are you sentenced? | 60% | 67% | 60% | 48% |
| 1.3 | Are you on recall? | 11% | 9% | 11% | 13% |
| 1.4 | Is your sentence less than 12 months? | 27% | 20% | 27% | 12% |
| 1.4 | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 1% | 3% | 1% | 3% |
| 1.5 | Are you a foreign national? | 11% | 13% | 11% | 11% |
| 1.6 | Do you understand spoken English? | 99% | 97% | 99% | |
| 1.7 | Do you understand written English? | 96% | 96% | 96% | |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | 19% | 24% | 19% | 27% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 6% | 5% | 6% | 2% |
| 1.1 | Are you Muslim? | 5% | 11% | 5% | 9% |
| 1.11 | Are you homosexual/gay or bisexual? | 2% | 3% | 2% | 1% |
| 1.12 | Do you consider yourself to have a disability? | 22% | 23% | 22% | 23% |
| 1.13 | Are you a veteran (ex-armed services)? | 7% | 5% | 7% | |
| 1.14 | Is this your first time in prison? | 27% | 32% | 27% | 23% |
| 1.15 | Do you have any children under the age of 18? | 56% | 54% | 56% | 58% |
| SECTION 2: Transfers and escorts | | | | | |
| On your most recent journey here: | | | | | |
| 2.1 | Did you spend more than 2 hours in the van? | 18% | 21% | 18% | 13% |
| For those who spent two or more hours in the escort van: | | | | | |
| 2.2 | Were you offered anything to eat or drink? | 36% | 37% | 36% | |
| 2.3 | Were you offered a toilet break? | 11% | 9% | 11% | |
| 2.4 | Was the van clean? | 53% | 58% | 53% | |
| 2.5 | Did you feel safe? | 77% | 74% | 77% | |
| 2.6 | Were you treated well/very well by the escort staff? | 67% | 66% | 67% | 70% |
| 2.7 | Before you arrived here were you told that you were coming here? | 67% | 64% | 67% | |

Main comparator and comparator to last time

Key to tables

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|--|--|---------------------|--------------------------|---------------------|---------------------|
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| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 2.7 | Before you arrived here did you receive any written information about coming here? | 3% | 3% | 3% | |
| 2.8 | When you first arrived here did your property arrive at the same time as you? | 88% | 80% | 88% | 89% |
| SECTION 3: Reception, first night and induction | | | | | |
| 3.1 | Were you in reception for less than 2 hours? | 19% | 43% | 19% | |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 82% | 77% | 82% | 82% |
| 3.3 | Were you treated well/very well in reception? | 55% | 62% | 55% | 68% |
| | When you first arrived: | | | | |
| 3.4 | Did you have any problems? | 80% | 75% | 80% | 72% |
| 3.4 | Did you have any problems with loss of property? | 12% | 15% | 12% | 16% |
| 3.4 | Did you have any housing problems? | 18% | 20% | 18% | 33% |
| 3.4 | Did you have any problems contacting employers? | 5% | 5% | 5% | 4% |
| 3.4 | Did you have any problems contacting family? | 37% | 32% | 37% | 31% |
| 3.4 | Did you have any problems ensuring dependants were being looked after? | 3% | 3% | 3% | 10% |
| 3.4 | Did you have any money worries? | 24% | 23% | 24% | 19% |
| 3.4 | Did you have any problems with feeling depressed or suicidal? | 23% | 22% | 23% | 22% |
| 3.4 | Did you have any physical health problems? | 22% | 18% | 22% | |
| 3.4 | Did you have any mental health problems? | 27% | 21% | 27% | |
| 3.4 | Did you have any problems with needing protection from other prisoners? | 11% | 8% | 11% | 10% |
| 3.4 | Did you have problems accessing phone numbers? | 40% | 31% | 40% | 28% |
| | For those with problems: | | | | |
| 3.5 | Did you receive any help/ support from staff in dealing with these problems? | 19% | 34% | 19% | |
| | When you first arrived here, were you offered any of the following: | | | | |
| 3.6 | Tobacco? | 78% | 82% | 78% | 93% |
| 3.6 | A shower? | 63% | 31% | 63% | 26% |
| 3.6 | A free telephone call? | 72% | 58% | 72% | 85% |
| 3.6 | Something to eat? | 77% | 73% | 77% | 77% |
| 3.6 | PIN phone credit? | 54% | 55% | 54% | |
| 3.6 | Toiletries/ basic items? | 54% | 60% | 54% | |
| 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? | 36% | 45% | 36% | |
| 3.7 | Someone from health services? | 61% | 69% | 61% | |
| 3.7 | A Listener/Samaritans? | 14% | 34% | 14% | |
| 3.7 | Prison shop/ canteen? | 21% | 20% | 21% | 10% |

Main comparator and comparator to last time

Key to tables

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|---|---|---------------------|--------------------------|---------------------|---------------------|
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| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| | When you first arrived here were you offered information about any of the following: | | | | |
| 3.8 | What was going to happen to you? | 28% | 44% | 28% | 51% |
| 3.8 | Support was available for people feeling depressed or suicidal? | 21% | 42% | 21% | 62% |
| 3.8 | How to make routine requests? | 23% | 38% | 23% | 53% |
| 3.8 | Your entitlement to visits? | 22% | 39% | 22% | 52% |
| 3.8 | Health services? | 32% | 48% | 32% | 63% |
| 3.8 | The chaplaincy? | 24% | 42% | 24% | 58% |
| 3.9 | Did you feel safe on your first night here? | 70% | 73% | 70% | 76% |
| 3.10 | Have you been on an induction course? | 37% | 77% | 37% | 92% |
| | For those who have been on an induction course: | | | | |
| 3.11 | Did the course cover everything you needed to know about the prison? | 32% | 53% | 32% | 74% |
| 3.12 | Did you receive an education (skills for life) assessment? | 39% | 74% | 39% | |
| 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? | 25% | 39% | 25% | 47% |
| 4.1 | Attend legal visits? | 39% | 55% | 39% | 59% |
| 4.1 | Get bail information? | 11% | 20% | 11% | 26% |
| 4.2 | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 41% | 41% | 41% | 35% |
| 4.3 | Can you get legal books in the library? | 25% | 37% | 25% | |
| | For the wing/unit you are currently on: | | | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 30% | 53% | 30% | 70% |
| 4.4 | Are you normally able to have a shower every day? | 29% | 78% | 29% | 33% |
| 4.4 | Do you normally receive clean sheets every week? | 58% | 76% | 58% | 91% |
| 4.4 | Do you normally get cell cleaning materials every week? | 41% | 56% | 41% | 60% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 9% | 31% | 10% | 47% |
| 4.4 | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 36% | 63% | 36% | 73% |
| 4.4 | Can you normally get your stored property, if you need to? | 11% | 22% | 11% | 32% |
| 4.5 | Is the food in this prison good/very good? | 13% | 22% | 13% | 26% |
| 4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 48% | 47% | 48% | 45% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 34% | 55% | 34% | 65% |
| 4.8 | Are your religious beliefs are respected? | 31% | 50% | 31% | 58% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 31% | 51% | 31% | 62% |

Main comparator and comparator to last time

Key to tables

| | | HMP Nottingham 2014 | Local prisons comparator | HMP Nottingham 2014 | HMP Nottingham 2010 |
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| | Percentages which are not highlighted show there is no significant difference | | | | |
| 4.10 | Is it easy/very easy to attend religious services? | 27% | 44% | 27% | |
| SECTION 5: Applications and complaints | | | | | |
| 5.1 | Is it easy to make an application? | 65% | 75% | 65% | |
| | For those who have made an application: | | | | |
| 5.2 | Do you feel applications are dealt with fairly? | 32% | 53% | 32% | 60% |
| 5.2 | Do you feel applications are dealt with quickly (within seven days)? | 14% | 40% | 14% | 57% |
| 5.3 | Is it easy to make a complaint? | 50% | 51% | 50% | |
| | For those who have made a complaint: | | | | |
| 5.4 | Do you feel complaints are dealt with fairly? | 19% | 31% | 19% | 38% |
| 5.4 | Do you feel complaints are dealt with quickly (within seven days)? | 11% | 29% | 11% | 44% |
| 5.5 | Have you ever been prevented from making a complaint when you wanted to? | 22% | 20% | 22% | |
| 5.6 | Is it easy/very easy to see the Independent Monitoring Board? | 13% | 20% | 13% | 33% |
| SECTION 6: Incentives and earned privileges scheme | | | | | |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 29% | 41% | 29% | 48% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 30% | 43% | 30% | 46% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 8% | 8% | 8% | 4% |
| 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? | 45% | 36% | 45% | |
| SECTION 7: Relationships with staff | | | | | |
| 7.1 | Do most staff, in this prison, treat you with respect? | 70% | 74% | 70% | 75% |
| 7.2 | Is there a member of staff, in this prison, that you can turn to for help if you have a problem? | 61% | 71% | 61% | 78% |
| 7.3 | Has a member of staff checked on you personally in the last week to see how you were getting on? | 18% | 28% | 18% | |
| 7.4 | Do staff normally speak to you most of the time/all of the time during association? | 12% | 18% | 12% | 12% |
| 7.5 | Do you have a personal officer? | 16% | 41% | 16% | 47% |
| | For those with a personal officer: | | | | |
| 7.6 | Do you think your personal officer is helpful/very helpful? | 65% | 67% | 65% | 64% |
| SECTION 8: Safety | | | | | |
| 8.1 | Have you ever felt unsafe here? | 54% | 42% | 54% | 31% |
| 8.2 | Do you feel unsafe now? | 29% | 18% | 29% | 11% |
| 8.4 | Have you been victimised by other prisoners here? | 39% | 27% | 39% | 15% |
| | Since you have been here, have other prisoners: | | | | |
| 8.5 | Made insulting remarks about you, your family or friends? | 22% | 11% | 22% | 5% |
| 8.5 | Hit, kicked or assaulted you? | 12% | 8% | 12% | 6% |
| 8.5 | Sexually abused you? | 2% | 2% | 2% | 1% |

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| 8.5 | Threatened or intimidated you? | 27% | 15% | 27% | |
| 8.5 | Taken your canteen/property? | 13% | 6% | 13% | 4% |
| 8.5 | Victimised you because of medication? | 9% | 5% | 9% | |
| 8.5 | Victimised you because of debt? | 5% | 4% | 5% | |
| 8.5 | Victimised you because of drugs? | 8% | 4% | 8% | 1% |
| 8.5 | Victimised you because of your race or ethnic origin? | 4% | 3% | 4% | 1% |
| 8.5 | Victimised you because of your religion/religious beliefs? | 3% | 3% | 3% | 1% |
| 8.5 | Victimised you because of your nationality? | 5% | 3% | 5% | |
| 8.5 | Victimised you because you were from a different part of the country? | 8% | 4% | 8% | 2% |
| 8.5 | Victimised you because you are from a Traveller community? | 2% | 1% | 2% | |
| 8.5 | Victimised you because of your sexual orientation? | 2% | 1% | 2% | 0% |
| 8.5 | Victimised you because of your age? | 4% | 2% | 4% | 0% |
| 8.5 | Victimised you because you have a disability? | 5% | 3% | 5% | 2% |
| 8.5 | Victimised you because you were new here? | 10% | 6% | 10% | 1% |
| 8.5 | Victimised you because of your offence/crime? | 10% | 5% | 10% | 2% |
| 8.5 | Victimised you because of gang related issues? | 11% | 4% | 11% | 4% |
| SECTION 8: Safety continued | | | | | |
| 8.6 | Have you been victimised by staff here? | 30% | 30% | 30% | 19% |
| | Since you have been here, have staff: | | | | |
| 8.7 | Made insulting remarks about you, your family or friends? | 14% | 11% | 14% | 8% |
| 8.7 | Hit, kicked or assaulted you? | 7% | 5% | 7% | 2% |
| 8.7 | Sexually abused you? | 2% | 1% | 2% | 1% |
| 8.7 | Threatened or intimidated you? | 16% | 12% | 16% | |
| 8.7 | Victimised you because of medication? | 5% | 5% | 5% | |
| 8.7 | Victimised you because of debt? | 3% | 2% | 3% | |
| 8.7 | Victimised you because of drugs? | 3% | 3% | 3% | 3% |
| 8.7 | Victimised you because of your race or ethnic origin? | 4% | 4% | 4% | 3% |
| 8.7 | Victimised you because of your religion/religious beliefs? | 4% | 4% | 4% | 0% |
| 8.7 | Victimised you because of your nationality? | 3% | 3% | 3% | |
| 8.7 | Victimised you because you were from a different part of the country? | 4% | 3% | 4% | 1% |
| 8.7 | Victimised you because you are from a Traveller community? | 2% | 2% | 2% | |
| 8.7 | Victimised you because of your sexual orientation? | 2% | 1% | 2% | 0% |

Main comparator and comparator to last time

Key to tables

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| 8.7 | Victimised you because of your age? | 4% | 2% | 4% | 3% |
| 8.7 | Victimised you because you have a disability? | 3% | 3% | 3% | 2% |
| 8.7 | Victimised you because you were new here? | 7% | 5% | 7% | 1% |
| 8.7 | Victimised you because of your offence/crime? | 5% | 5% | 5% | 3% |
| 8.7 | Victimised you because of gang related issues? | 8% | 3% | 8% | 1% |
| | For those who have been victimised by staff or other prisoners: | | | | |
| 8.8 | Did you report any victimisation that you have experienced? | 40% | 32% | 40% | 45% |
| SECTION 9: Health services | | | | | |
| 9.1 | Is it easy/very easy to see the doctor? | 13% | 22% | 13% | 43% |
| 9.1 | Is it easy/very easy to see the nurse? | 25% | 46% | 25% | 69% |
| 9.1 | Is it easy/very easy to see the dentist? | 11% | 9% | 11% | 15% |
| | For those who have been to the following services, do you think the quality of the health service from the following is good/very good: | | | | |
| 9.2 | The doctor? | 36% | 40% | 36% | 71% |
| 9.2 | The nurse? | 45% | 53% | 45% | 72% |
| 9.2 | The dentist? | 26% | 30% | 26% | 44% |
| 9.3 | The overall quality of health services? | 36% | 36% | 36% | 57% |
| 9.4 | Are you currently taking medication? | 51% | 51% | 51% | 55% |
| | For those currently taking medication: | | | | |
| 9.5 | Are you allowed to keep possession of some or all of your medication in your own cell? | 40% | 60% | 40% | |
| 9.6 | Do you have any emotional well being or mental health problems? | 44% | 37% | 44% | 36% |
| | For those who have problems: | | | | |
| 9.7 | Are you being helped or supported by anyone in this prison? | 45% | 44% | 45% | |
| SECTION 10: Drugs and alcohol | | | | | |
| 10.1 | Did you have a problem with drugs when you came into this prison? | 32% | 34% | 32% | 32% |
| 10.2 | Did you have a problem with alcohol when you came into this prison? | 19% | 23% | 19% | 32% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 50% | 32% | 50% | 26% |
| 10.4 | Is it easy/very easy to get alcohol in this prison? | 19% | 13% | 19% | |
| 10.5 | Have you developed a problem with drugs since you have been in this prison? | 13% | 8% | 13% | 8% |
| 10.6 | Have you developed a problem with diverted medication since you have been in this prison? | 11% | 9% | 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? | 37% | 62% | 37% | |
| 10.8 | Have you received any support or help with your alcohol problem while in this prison? | 35% | 59% | 35% | |

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| | For those who have received help or support with their drug or alcohol problem: | | | | |
| 10.9 | Was the support helpful? | 70% | 76% | 70% | 86% |
| SECTION 11: Activities | | | | | |
| | Is it very easy/ easy to get into the following activities: | | | | |
| 11.1 | A prison job? | 25% | 30% | 25% | |
| 11.1 | Vocational or skills training? | 15% | 30% | 15% | |
| 11.1 | Education (including basic skills)? | 22% | 45% | 22% | |
| 11.1 | Offending behaviour programmes? | 5% | 18% | 5% | |
| | Are you currently involved in any of the following activities: | | | | |
| 11.2 | A prison job? | 44% | 44% | 44% | 56% |
| 11.2 | Vocational or skills training? | 4% | 10% | 4% | 6% |
| 11.2 | Education (including basic skills)? | 13% | 25% | 13% | 23% |
| 11.2 | Offending behaviour programmes? | 1% | 7% | 1% | 6% |
| 11.3 | Have you had a job while in this prison? | 62% | 69% | 62% | 64% |
| | For those who have had a prison job while in this prison: | | | | |
| 11.3 | Do you feel the job will help you on release? | 27% | 40% | 27% | 31% |
| 11.3 | Have you been involved in vocational or skills training while in this prison? | 42% | 57% | 42% | 15% |
| | 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? | 30% | 47% | 30% | 50% |
| 11.3 | Have you been involved in education while in this prison? | 45% | 67% | 45% | 40% |
| | For those who have been involved in education while in this prison: | | | | |
| 11.3 | Do you feel the education will help you on release? | 43% | 52% | 43% | 56% |
| 11.3 | Have you been involved in offending behaviour programmes while in this prison? | 36% | 54% | 36% | 11% |
| | 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? | 27% | 44% | 27% | 71% |
| 11.4 | Do you go to the library at least once a week? | 12% | 31% | 12% | 39% |
| 11.5 | Does the library have a wide enough range of materials to meet your needs? | 21% | 33% | 21% | |
| 11.6 | Do you go to the gym three or more times a week? | 4% | 27% | 4% | 28% |
| 11.7 | Do you go outside for exercise three or more times a week? | 41% | 40% | 41% | 18% |
| 11.8 | Do you go on association more than five times each week? | 8% | 48% | 8% | 25% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? | 5% | 10% | 5% | 7% |
| SECTION 12: Friends and family | | | | | |
| 12.1 | Have staff supported you and helped you to maintain contact with family/friends while in this prison? | 26% | 32% | 26% | 33% |
| 12.2 | Have you had any problems with sending or receiving mail? | 55% | 48% | 55% | 43% |
| 12.3 | Have you had any problems getting access to the telephones? | 56% | 33% | 56% | 24% |

Main comparator and comparator to last time

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| 12.4 | Is it easy/ very easy for your friends and family to get here? | 39% | 37% | 39% | |
| 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? | 48% | 61% | 48% | |
| | For those who are sentenced what type of contact have you had with your offender manager: | | | | |
| 13.2 | No contact? | 57% | 42% | 57% | |
| 13.2 | Contact by letter? | 22% | 29% | 22% | |
| 13.2 | Contact by phone? | 8% | 13% | 8% | |
| 13.2 | Contact by visit? | 25% | 36% | 25% | |
| 13.3 | Do you have a named offender supervisor in this prison? | 16% | 29% | 16% | |
| | For those who are sentenced: | | | | |
| 13.4 | Do you have a sentence plan? | 23% | 37% | 23% | 36% |
| | For those with a sentence plan: | | | | |
| 13.5 | Were you involved/very involved in the development of your plan? | 46% | 56% | 46% | 62% |
| | Who is working with you to achieve your sentence plan targets: | | | | |
| 13.6 | Nobody? | 83% | 44% | 83% | |
| 13.6 | Offender supervisor? | 9% | 32% | 9% | |
| 13.6 | Offender manager? | 13% | 27% | 13% | |
| 13.6 | Named/ personal officer? | 4% | 10% | 4% | |
| 13.6 | Staff from other departments? | 4% | 17% | 4% | |
| | For those with a sentence plan: | | | | |
| 13.7 | Can you achieve any of your sentence plan targets in this prison? | 25% | 56% | 25% | 44% |
| 13.8 | Are there plans for you to achieve any of your targets in another prison? | 17% | 27% | 17% | |
| 13.9 | Are there plans for you to achieve any of your targets in the community? | 33% | 33% | 33% | |
| 13.10 | Do you have a needs based custody plan? | 7% | 7% | 7% | |
| 13.11 | Do you feel that any member of staff has helped you to prepare for release? | 5% | 12% | 5% | 15% |
| | For those that need help do you know of anyone in this prison who can help you on release with following: | | | | |
| 13.12 | Employment? | 15% | 29% | 15% | |
| 13.12 | Accommodation? | 20% | 36% | 20% | |
| 13.12 | Benefits? | 27% | 40% | 27% | |
| 13.12 | Finances? | 14% | 24% | 14% | |
| 13.12 | Education? | 18% | 30% | 18% | |
| 13.12 | Drugs and alcohol? | 23% | 45% | 23% | |
| | 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 the future? | 33% | 48% | 33% | 52% |

Diversity analysis



Key question responses (ethnicity and foreign national) HMP Nottingham 2014

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

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Foreign national prisoners | British prisoners |
|--|--|-------------------------------------|-----------------|----------------------------|-------------------|
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| Number of completed questionnaires returned | | 35 | 150 | 21 | 166 |
| 1.3 | Are you sentenced? | 40% | 64% | 43% | 62% |
| 1.5 | Are you a foreign national? | 18% | 10% | | |
| 1.6 | Do you understand spoken English? | 94% | 99% | 86% | 100% |
| 1.7 | Do you understand written English? | 89% | 98% | 77% | 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.) | | | 29% | 17% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 6% | 5% | 20% | 4% |
| 1.1 | Are you Muslim? | 25% | 0% | 4% | 4% |
| 1.12 | Do you consider yourself to have a disability? | 20% | 22% | 14% | 23% |
| 1.13 | Are you a veteran (ex-armed services)? | 3% | 7% | 20% | 5% |
| 1.14 | Is this your first time in prison? | 31% | 26% | 52% | 24% |
| 2.6 | Were you treated well/very well by the escort staff? | 63% | 69% | 62% | 69% |
| 2.7 | Before you arrived here were you told that you were coming here? | 59% | 69% | 45% | 69% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 80% | 83% | 70% | 84% |
| 3.3 | Were you treated well/very well in reception? | 59% | 53% | 65% | 54% |
| 3.4 | Did you have any problems when you first arrived? | 80% | 79% | 85% | 79% |
| 3.7 | Did you have access to someone from health care when you first arrived here? | 56% | 62% | 64% | 61% |
| 3.9 | Did you feel safe on your first night here? | 68% | 71% | 50% | 73% |
| 3.10 | Have you been on an induction course? | 45% | 35% | 42% | 37% |
| 4.1 | Is it easy/very easy to communicate with your solicitor or legal representative? | 27% | 24% | 37% | 24% |

Diversity analysis

Key to tables

| | | Black and minority ethnic prisoners | White prisoners | Foreign national prisoners | British prisoners |
|-----|--|-------------------------------------|-----------------|----------------------------|-------------------|
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| | 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? | 38% | 28% | 47% | 28% |
| 4.4 | Are you normally able to have a shower every day? | 30% | 29% | 53% | 27% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 15% | 8% | 26% | 8% |
| 4.5 | Is the food in this prison good/very good? | 12% | 14% | 25% | 12% |
| 4.6 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 39% | 51% | 50% | 48% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 26% | 36% | 26% | 34% |
| 4.8 | Do you feel your religious beliefs are respected? | 29% | 31% | 50% | 29% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 26% | 32% | 37% | 31% |
| 5.1 | Is it easy to make an application? | 44% | 69% | 60% | 65% |
| 5.3 | Is it easy to make a complaint? | 43% | 52% | 40% | 52% |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 26% | 30% | 32% | 29% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 31% | 30% | 32% | 29% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 3% | 9% | 5% | 9% |
| 7.1 | Do most staff, in this prison, treat you with respect? | 71% | 69% | 80% | 69% |
| 7.2 | Is there a member of staff you can turn to for help if you have a problem in this prison? | 61% | 60% | 74% | 59% |
| 7.3 | Do staff normally speak to you at least most of the time during association time? (most/all of the time) | 6% | 14% | 5% | 14% |
| 7.4 | Do you have a personal officer? | 8% | 18% | 35% | 14% |
| 8.1 | Have you ever felt unsafe here? | 52% | 54% | 55% | 54% |
| 8.2 | Do you feel unsafe now? | 40% | 27% | 30% | 29% |
| 8.3 | Have you been victimised by other prisoners? | 37% | 38% | 45% | 38% |
| 8.5 | Have you ever felt threatened or intimidated by other prisoners here? | 23% | 27% | 15% | 29% |
| 8.5 | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 8% | 2% | 10% | 3% |
| 8.5 | Have you been victimised because of your religion/religious beliefs? (By prisoners) | 14% | 0% | 5% | 2% |
| 8.5 | Have you been victimised because of your nationality? (By prisoners) | 14% | 2% | 15% | 3% |

Diversity analysis

Key to tables

| | Any percentage highlighted in green is significantly better | Black and minority ethnic prisoners | White prisoners | Foreign national prisoners | British prisoners |
|------|---|-------------------------------------|-----------------|----------------------------|-------------------|
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 8.5 | Have you been victimised because you have a disability? (By prisoners) | 12% | 2% | 0% | 5% |
| 8.6 | Have you been victimised by a member of staff? | 34% | 28% | 10% | 32% |
| 8.7 | Have you ever felt threatened or intimidated by staff here? | 26% | 13% | 5% | 17% |
| 8.7 | Have you been victimised because of your race or ethnic origin since you have been here? (By staff) | 17% | 0% | 5% | 3% |
| 8.7 | Have you been victimised because of your religion/religious beliefs? (By staff) | 17% | 1% | 5% | 4% |
| 8.7 | Have you been victimised because of your nationality? (By staff) | 8% | 1% | 5% | 3% |
| 8.7 | Have you been victimised because you have a disability? (By staff) | 12% | 1% | 0% | 3% |
| 9.1 | Is it easy/very easy to see the doctor? | 12% | 14% | 12% | 13% |
| 9.1 | Is it easy/ very easy to see the nurse? | 21% | 26% | 17% | 26% |
| 9.4 | Are you currently taking medication? | 48% | 51% | 35% | 54% |
| 9.6 | Do you feel you have any emotional well being/mental health issues? | 38% | 44% | 32% | 45% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 51% | 50% | 22% | 54% |
| 11.2 | Are you currently working in the prison? | 44% | 44% | 53% | 42% |
| 11.2 | Are you currently undertaking vocational or skills training? | 0% | 5% | 5% | 4% |
| 11.2 | Are you currently in education (including basic skills)? | 15% | 12% | 21% | 11% |
| 11.2 | Are you currently taking part in an offending behaviour programme? | 3% | 1% | 5% | 1% |
| 11.4 | Do you go to the library at least once a week? | 12% | 12% | 15% | 12% |
| 11.6 | Do you go to the gym three or more times a week? | 6% | 4% | 5% | 4% |
| 11.7 | Do you go outside for exercise three or more times a week? | 38% | 42% | 24% | 42% |
| 11.8 | On average, do you go on association more than five times each week? | 12% | 7% | 11% | 7% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc) | 9% | 4% | 5% | 5% |
| 12.2 | Have you had any problems sending or receiving mail? | 47% | 57% | 39% | 56% |
| 12.3 | Have you had any problems getting access to the telephones? | 51% | 57% | 50% | 56% |

Diversity analysis



Key question responses (disability) HMP Nottingham 2014

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

Key to tables

| | | | |
|--|--|---|--|
| | Any percentage highlighted in green is significantly better | Consider themselves to have a disability | Do not consider themselves to have a disability |
| | Any percentage highlighted in blue is significantly worse | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | |
| | Percentages which are not highlighted show there is no significant difference | | |
| Number of completed questionnaires returned | | 41 | 147 |
| 1.3 | Are you sentenced? | 59% | 60% |
| 1.5 | Are you a foreign national? | 7% | 13% |
| 1.6 | Do you understand spoken English? | 100% | 98% |
| 1.7 | Do you understand written English? | 100% | 95% |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | 17% | 19% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 7% | 6% |
| 1.1 | Are you Muslim? | 7% | 4% |
| 1.12 | Do you consider yourself to have a disability? | | |
| 1.13 | Are you a veteran (ex-armed services)? | 17% | 3% |
| 1.14 | Is this your first time in prison? | 29% | 27% |
| 2.6 | Were you treated well/very well by the escort staff? | 76% | 65% |
| 2.7 | Before you arrived here were you told that you were coming here? | 73% | 64% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 78% | 83% |
| 3.3 | Were you treated well/very well in reception? | 61% | 52% |
| 3.4 | Did you have any problems when you first arrived? | 95% | 75% |
| 3.7 | Did you have access to someone from health care when you first arrived here? | 63% | 61% |
| 3.9 | Did you feel safe on your first night here? | 63% | 72% |
| 3.10 | Have you been on an induction course? | 32% | 39% |
| 4.1 | Is it easy/very easy to communicate with your solicitor or legal representative? | 18% | 26% |

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 |
| | 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? | 28% | 30% |
| 4.4 | Are you normally able to have a shower every day? | 31% | 28% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 8% | 10% |
| 4.5 | Is the food in this prison good/very good? | 10% | 14% |
| 4.6 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 42% | 50% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 40% | 31% |
| 4.8 | Do you feel your religious beliefs are respected? | 35% | 28% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 36% | 29% |
| 5.1 | Is it easy to make an application? | 64% | 64% |
| 5.3 | Is it easy to make a complaint? | 60% | 48% |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 25% | 30% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 22% | 32% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 8% | 9% |
| 7.1 | Do most staff, in this prison, treat you with respect? | 53% | 74% |
| 7.2 | Is there a member of staff you can turn to for help if you have a problem in this prison? | 51% | 63% |
| 7.3 | Do staff normally speak to you at least most of the time during association time? (most/all of the time) | 7% | 14% |
| 7.4 | Do you have a personal officer? | 17% | 16% |
| 8.1 | Have you ever felt unsafe here? | 70% | 49% |
| 8.2 | Do you feel unsafe now? | 50% | 24% |
| 8.3 | Have you been victimised by other prisoners? | 60% | 33% |
| 8.5 | Have you ever felt threatened or intimidated by other prisoners here? | 50% | 19% |
| 8.5 | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 10% | 2% |
| 8.5 | Have you been victimised because of your religion/religious beliefs? (By prisoners) | 12% | 1% |
| 8.5 | Have you been victimised because of your nationality? (By prisoners) | 10% | 3% |
| 8.5 | Have you been victimised because of your age? (By prisoners) | 10% | 2% |

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 |
|------|---|---|--|
| | 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) | 17% | 1% |
| 8.6 | Have you been victimised by a member of staff? | 48% | 25% |
| 8.7 | Have you ever felt threatened or intimidated by staff here? | 32% | 11% |
| 8.7 | Have you been victimised because of your race or ethnic origin since you have been here? (By staff) | 12% | 1% |
| 8.7 | Have you been victimised because of your religion/religious beliefs? (By staff) | 10% | 3% |
| 8.7 | Have you been victimised because of your nationality? (By staff) | 7% | 1% |
| 8.7 | Have you been victimised because of your age? (By staff) | 15% | 1% |
| 8.7 | Have you been victimised because you have a disability? (By staff) | 15% | 0% |
| 9.1 | Is it easy/very easy to see the doctor? | 19% | 12% |
| 9.1 | Is it easy/ very easy to see the nurse? | 36% | 22% |
| 9.4 | Are you currently taking medication? | 77% | 43% |
| 9.6 | Do you feel you have any emotional well being/mental health issues? | 69% | 36% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 64% | 46% |
| 11.2 | Are you currently working in the prison? | 34% | 46% |
| 11.2 | Are you currently undertaking vocational or skills training? | 8% | 3% |
| 11.2 | Are you currently in education (including basic skills)? | 16% | 12% |
| 11.2 | Are you currently taking part in an offending behaviour programme? | 0% | 2% |
| 11.4 | Do you go to the library at least once a week? | 13% | 12% |
| 11.6 | Do you go to the gym three or more times a week? | 3% | 5% |
| 11.7 | Do you go outside for exercise three or more times a week? | 32% | 43% |
| 11.8 | On average, do you go on association more than five times each week? | 3% | 9% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc) | 2% | 6% |
| 12.2 | Have you had any problems sending or receiving mail? | 61% | 54% |
| 12.3 | Have you had any problems getting access to the telephones? | 49% | 58% |



Prisoner survey responses HMP Nottingham vulnerable prisoner wing comparator

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

Key to tables

| | | | |
|--|--|-------------------------------|---------------------------|
| | Any percentage highlighted in green is significantly better | G wing (vulnerable prisoners) | 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 | | |
| Number of completed questionnaires returned | | 27 | 161 |
| SECTION 1: General information | | | |
| 1.2 | Are you under 21 years of age? | 15% | 6% |
| 1.3 | Are you sentenced? | 78% | 57% |
| 1.3 | Are you on recall? | 15% | 10% |
| 1.4 | Is your sentence less than 12 months? | 7% | 31% |
| 1.4 | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 0% | 1% |
| 1.5 | Are you a foreign national? | 15% | 11% |
| 1.6 | Do you understand spoken English? | 100% | 98% |
| 1.7 | Do you understand written English? | 97% | 96% |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | 11% | 20% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 0% | 7% |
| 1.1 | Are you Muslim? | 8% | 4% |
| 1.11 | Are you homosexual/gay or bisexual? | 8% | 1% |
| 1.12 | Do you consider yourself to have a disability? | 22% | 21% |
| 1.13 | Are you a veteran (ex-armed services)? | 7% | 6% |
| 1.14 | Is this your first time in prison? | 55% | 22% |
| 1.15 | Do you have any children under the age of 18? | 48% | 57% |
| SECTION 2: Transfers and escorts | | | |
| On your most recent journey here: | | | |
| 2.1 | Did you spend more than 2 hours in the van? | 11% | 18% |
| 2.5 | Did you feel safe? | 63% | 80% |
| 2.6 | Were you treated well/very well by the escort staff? | 70% | 68% |
| 2.7 | Before you arrived here were you told that you were coming here? | 63% | 67% |
| 2.8 | When you first arrived here did your property arrive at the same time as you? | 97% | 87% |
| SECTION 3: Reception, first night and induction | | | |
| 3.1 | Were you in reception for less than 2 hours? | 22% | 19% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 78% | 84% |
| 3.3 | Were you treated well/very well in reception? | 41% | 58% |
| When you first arrived: | | | |
| 3.4 | Did you have any problems? | 85% | 78% |
| 3.4 | Did you have any problems with loss of property? | 0% | 13% |
| 3.4 | Did you have any housing problems? | 7% | 20% |
| 3.4 | Did you have any problems contacting employers? | 0% | 6% |

Key to tables

| | | | |
|--|---|-------------------------------|---------------------------|
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| | 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? | 33% | 37% |
| 3.4 | Did you have any problems ensuring dependants were being looked after? | 0% | 3% |
| 3.4 | Did you have any money worries? | 33% | 22% |
| 3.4 | Did you have any problems with feeling depressed or suicidal? | 33% | 21% |
| 3.4 | Did you have any physical health problems? | 15% | 22% |
| 3.4 | Did you have any mental health problems? | 30% | 26% |
| 3.4 | Did you have any problems with needing protection from other prisoners? | 41% | 6% |
| 3.4 | Did you have problems accessing phone numbers? | 37% | 40% |
| | When you first arrived here, were you offered any of the following: | | |
| 3.6 | Tobacco? | 52% | 82% |
| 3.6 | A shower? | 26% | 69% |
| 3.6 | A free telephone call? | 45% | 76% |
| 3.6 | Something to eat? | 67% | 79% |
| 3.6 | PIN phone credit? | 37% | 57% |
| 3.6 | Toiletries/ basic items? | 48% | 55% |
| 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? | 22% | 37% |
| 3.7 | Someone from health services? | 60% | 61% |
| 3.7 | A Listener/Samaritans? | 3% | 16% |
| 3.7 | Prison shop/ canteen? | 11% | 23% |
| | When you first arrived here were you offered information about any of the following: | | |
| 3.8 | What was going to happen to you? | 23% | 29% |
| 3.8 | Support was available for people feeling depressed or suicidal? | 11% | 22% |
| 3.8 | How to make routine requests? | 15% | 24% |
| 3.8 | Your entitlement to visits? | 11% | 23% |
| 3.8 | Health services? | 19% | 34% |
| 3.8 | The chaplaincy? | 15% | 25% |
| 3.9 | Did you feel safe on your first night here? | 37% | 77% |
| 3.10 | Have you been on an induction course? | 55% | 34% |
| 3.12 | Did you receive an education (skills for life) assessment? | 54% | 36% |
| 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? | 33% | 24% |
| 4.1 | Attend legal visits? | 39% | 39% |
| 4.1 | Get bail information? | 8% | 12% |
| 4.2 | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 41% | 41% |
| 4.3 | Can you get legal books in the library? | 26% | 25% |

Key to tables

| | | | |
|--|--|-------------------------------|---------------------------|
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| | 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? | 46% | 28% |
| 4.4 | Are you normally able to have a shower every day? | 52% | 26% |
| 4.4 | Do you normally receive clean sheets every week? | 74% | 55% |
| 4.4 | Do you normally get cell cleaning materials every week? | 63% | 37% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 11% | 10% |
| 4.4 | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 30% | 36% |
| 4.4 | Can you normally get your stored property, if you need to? | 22% | 9% |
| 4.5 | Is the food in this prison good/very good? | 15% | 13% |
| 4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 52% | 48% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 15% | 37% |
| 4.8 | Are your religious beliefs are respected? | 41% | 29% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 41% | 30% |
| 4.10 | Is it easy/very easy to attend religious services? | 37% | 25% |
| SECTION 5: Applications and complaints | | | |
| 5.1 | Is it easy to make an application? | 85% | 61% |
| 5.3 | Is it easy to make a complaint? | 81% | 44% |
| 5.5 | Have you ever been prevented from making a complaint when you wanted to? | 18% | 23% |
| 5.6 | Is it easy/very easy to see the Independent Monitoring Board? | 30% | 10% |
| SECTION 6: Incentive and earned privileges scheme | | | |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 45% | 27% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 27% | 31% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 3% | 8% |
| SECTION 7: Relationships with staff | | | |
| 7.1 | Do most staff, in this prison, treat you with respect? | 74% | 69% |
| 7.2 | Is there a member of staff, in this prison, that you can turn to for help if you have a problem? | 82% | 58% |
| 7.3 | Has a member of staff checked on you personally in the last week to see how you were getting on? | 15% | 19% |
| 7.4 | Do staff normally speak to you most of the time/all of the time during association? | 7% | 14% |
| 7.5 | Do you have a personal officer? | 26% | 15% |
| SECTION 8: Safety | | | |
| 8.1 | Have you ever felt unsafe here? | 70% | 51% |
| 8.2 | Do you feel unsafe now? | 28% | 29% |
| 8.4 | Have you been victimised by other prisoners here? | 48% | 37% |
| Since you have been here, have other prisoners: | | | |
| 8.5 | Made insulting remarks about you, your family or friends? | 37% | 19% |
| 8.5 | Hit, kicked or assaulted you? | 18% | 11% |
| 8.5 | Sexually abused you? | 0% | 1% |

Key to tables

| | | | |
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| | 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 | Threatened or intimidated you? | 37% | 24% |
| 8.5 | Taken your canteen/property? | 18% | 11% |
| 8.5 | Victimised you because of medication? | 3% | 8% |
| 8.5 | Victimised you because of debt? | 3% | 4% |
| 8.5 | Victimised you because of drugs? | 0% | 8% |
| 8.5 | Victimised you because of your race or ethnic origin? | 7% | 2% |
| 8.5 | Victimised you because of your religion/religious beliefs? | 3% | 3% |
| 8.5 | Victimised you because of your nationality? | 7% | 3% |
| 8.5 | Victimised you because you were from a different part of the country? | 3% | 8% |
| 8.5 | Victimised you because you are from a traveller community? | 0% | 2% |
| 8.5 | Victimised you because of your sexual orientation? | 3% | 1% |
| 8.5 | Victimised you because of your age? | 0% | 4% |
| 8.5 | Victimised you because you have a disability? | 0% | 5% |
| 8.5 | Victimised you because you were new here? | 7% | 10% |
| 8.5 | Victimised you because of your offence/crime? | 33% | 5% |
| 8.5 | Victimised you because of gang related issues? | 7% | 11% |
| SECTION 8: Safety continued | | | |
| 8.6 | Have you been victimised by staff here? | 23% | 30% |
| | Since you have been here, have staff: | | |
| 8.7 | Made insulting remarks about you, your family or friends? | 23% | 12% |
| 8.7 | Hit, kicked or assaulted you? | 11% | 5% |
| 8.7 | Sexually abused you? | 0% | 2% |
| 8.7 | Threatened or intimidated you? | 11% | 16% |
| 8.7 | Victimised you because of medication? | 0% | 5% |
| 8.7 | Victimised you because of debt? | 0% | 3% |
| 8.7 | Victimised you because of drugs? | 0% | 3% |
| 8.7 | Victimised you because of your race or ethnic origin? | 4% | 3% |
| 8.7 | Victimised you because of your religion/religious beliefs? | 4% | 4% |
| 8.7 | Victimised you because of your nationality? | 4% | 2% |
| 8.7 | Victimised you because you were from a different part of the country? | 0% | 4% |
| 8.7 | Victimised you because you are from a traveller community? | 0% | 1% |
| 8.7 | Victimised you because of your sexual orientation? | 0% | 1% |
| 8.7 | Victimised you because of your age? | 0% | 4% |
| 8.7 | Victimised you because you have a disability? | 0% | 3% |
| 8.7 | Victimised you because you were new here? | 0% | 8% |
| 8.7 | Victimised you because of your offence/crime? | 4% | 5% |
| 8.7 | Victimised you because of gang related issues? | 4% | 8% |
| SECTION 9: Health services | | | |

Key to tables

| | | | |
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| | 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 doctor? | 15% | 13% |
| 9.1 | Is it easy/very easy to see the nurse? | 31% | 24% |
| 9.1 | Is it easy/very easy to see the dentist? | 23% | 9% |
| 9.4 | Are you currently taking medication? | 67% | 48% |
| 9.6 | Do you have any emotional well being or mental health problems? | 41% | 44% |
| SECTION 10: Drugs and alcohol | | | |
| 10.1 | Did you have a problem with drugs when you came into this prison? | 26% | 33% |
| 10.2 | Did you have a problem with alcohol when you came into this prison? | 15% | 20% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 45% | 51% |
| 10.4 | Is it easy/very easy to get alcohol in this prison? | 30% | 18% |
| 10.5 | Have you developed a problem with drugs since you have been in this prison? | 11% | 12% |
| 10.6 | Have you developed a problem with diverted medication since you have been in this prison? | 15% | 9% |
| SECTION 11: Activities | | | |
| | Is it very easy/ easy to get into the following activities: | | |
| 11.1 | A prison job? | 45% | 22% |
| 11.1 | Vocational or skills training? | 24% | 13% |
| 11.1 | Education (including basic skills)? | 28% | 21% |
| 11.1 | Offending Behaviour Programmes? | 0% | 6% |
| | Are you currently involved in any of the following activities: | | |
| 11.2 | A prison job? | 54% | 43% |
| 11.2 | Vocational or skills training? | 8% | 3% |
| 11.2 | Education (including basic skills)? | 27% | 10% |
| 11.2 | Offending Behaviour Programmes? | 0% | 1% |
| 11.4 | Do you go to the library at least once a week? | 41% | 7% |
| 11.5 | Does the library have a wide enough range of materials to meet your needs? | 22% | 20% |
| 11.6 | Do you go to the gym three or more times a week? | 0% | 5% |
| 11.7 | Do you go outside for exercise three or more times a week? | 22% | 44% |
| 11.8 | Do you go on association more than five times each week? | 3% | 9% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? | 7% | 5% |
| SECTION 12: Friends and family | | | |
| 12.1 | Have staff supported you and helped you to maintain contact with family/friends while in this prison? | 26% | 27% |
| 12.2 | Have you had any problems with sending or receiving mail? | 33% | 59% |
| 12.3 | Have you had any problems getting access to the telephones? | 62% | 54% |
| 12.4 | Is it easy/ very easy for your friends and family to get here? | 41% | 39% |
| SECTION 13: Preparation for release | | | |
| 13.3 | Do you have a named offender supervisor in this prison? | 31% | 14% |
| 13.10 | Do you have a needs based custody plan? | 4% | 7% |
| 13.11 | Do you feel that any member of staff has helped you to prepare for release? | 8% | 4% |