

Report on an announced inspection of

HMP Oakwood

by HM Chief Inspector of Prisons

1–5 December 2014

Glossary of terms

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Introduction

HMP Oakwood is a private category C training prison and designated resettlement prison near Wolverhampton, run by G4S. At the time of this inspection it held 1,557 adult men. The prison has attracted significant criticism since it opened in April 2012. We were very concerned by what we found at the previous inspection in June 2013 and outcomes against all our healthy prison tests were either not sufficiently good or poor. At the time many staff were inexperienced and lacked confidence and there were dangerously high levels of frustration among prisoners. However, a new director had just taken over and had made a good analysis of what needed to be done. To drive the improvement we thought was necessary we gave notice to the prison that we would be returning much more quickly than usual. This announced inspection just eighteen months later found that real attention had been paid to our recommendations and, while much remained to do, excellent leadership by the director and hard work by all staff had delivered significant improvement. We were confident that progress was sustainable and there were credible plans for further improvement in future.

The prison was much calmer than before, overall levels of violence had reduced and most prisoners felt safe. Management of safety had improved and prisoners demonstrated their increased confidence by a greater willingness to report incidents. There were very good initiatives such as the 'basic intervention group', which used prisoner mentors to help those on the basic level of the incentives and earned privileges scheme to improve their behaviour, and the Cordial group, which helped to support prisoners who were victims or isolated. There were still high levels of bullying, often related to the availability of so-called 'legal highs' such as Black Mamba and associated debt, particularly on Ash wing. Ash wing held a difficult mix of prisoners who were vulnerable, some because of their offence and many because of drug-debt or other problems on the main wings; allocation policies for this wing were poor. Support for prisoners with substance abuse issues was very good and a wide range of therapeutic interventions was available.

There had been no self-inflicted deaths at the establishment. However, the number of self-harm incidents and the number of prisoners on assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm was high. The quality of documentation and care was not always adequate. A large number of prisoners on ACCTs were held in the segregation unit and we were not assured there were the exceptional reasons required to justify this.

Our greatest concern was the high levels of use of force which was almost double that of similar prisons. Scrutiny of individual incidents was insufficient and we were concerned by some of the incidents we reviewed and brought these to the attention of the director. Some complaints about excessive use of force had not been investigated. A high proportion of these incidents took place in the segregation unit which held some very challenging men. Staff in the unit had not been adequately trained for the role.

The overall environment remained very good. Most prisoners had single cells with integral showers and sanitation, and phones from which they could make outgoing calls at their own expense to an approved list of numbers. Kiosks on the wings enabled them to deal with many administrative tasks, such as booking visits, electronically. As staff had become more experienced, relationships between staff and prisoners had much improved. Managers had moved out of the administration area and were now based on the wings. Most of the difficulties prisoners had had at the previous inspection about getting access to basic domestic items and cleaning materials had been resolved. The very good prisoner-run Resettlement Advice Line and Prisoner Helpline (RALPH), which prisoners could contact from phones in their cells, dealt with many issues quickly and efficiently. As a consequence complaints had reduced, but responses still required improvement. Consultation arrangements were generally good and the prisoner council was effective, but prisoners from black and minority ethnic groups and Muslim prisoners were less positive than the population as a whole and more needed to be done to understand their concerns. Equality and diversity management overall was reasonable and

there was better support for older and disabled prisoners. Good use was made of volunteer prisoner carers but these roles needed to be formalised to ensure neither party was exploited.

Health services, about which we had been very concerned at the last inspection, had also much improved but were affected by staffing shortages. The identification and management of prisoners with complex health needs was very good. Weaknesses in pharmacy arrangements had been addressed and the management of divertible medication had improved. There was insufficient mental health provision to meet the needs of the population and transfers to external mental health facilities took too long.

At the last inspection we were very critical of the lack of purposeful activity for prisoners. At this inspection, most prisoners were employed full time and most had a good amount of time out of their cell. We found 18% of prisoners locked in their cells during the working day; this was still too high but an improvement on the 37% at our last inspection. Ofsted found that the overall effectiveness of learning and skills had improved. The prison was working hard and persuasively to improve further, but at the time of this inspection it was still a work in progress. Too many prisoners were employed in mundane and undemanding wing jobs, the quality of teaching remained too variable and rates of progress and achievement were not good enough. However, many prisoners were usefully employed in a range of innovative and skilled mentoring roles, although too few of these offered formal training and accreditation. The library was a good resource but underused and there was good PE provision, although not enough for the size of the population.

Resettlement services had also improved and now compared well with similar establishments. Offender management and contact with prisoners were good, but hindered by inadequate communication from community-based offender managers. RALPH, the prisoner-run helpline, and prisoner resettlement workers provided quick resolutions to many resettlement queries, but some of the confidential information prisoners were asked to share with these peer workers was inappropriate. Most practical resettlement services were effective. Innovative work was carried out outside of the prison to improve the transition of care for prisoners with substance misuse problems and to support their families. Education, training and employment work required improvement. Family work was very good and the development of Elm wing as a family unit, though still at an early stage, was very promising.

HMP Oakwood has turned the corner. There is more to do but the determined way the director and staff have made improvements following significant criticism should be acknowledged. However, the difficulties Oakwood and other new prisons experienced immediately after opening resulted in unacceptable risks and very poor outcomes for the prisoners held at that time. There are plans to open a number of large establishments in the coming years. I recommend that Ministers undertake and publish a review of the difficulties Oakwood and other new prisons experienced after they opened, and ensure the lessons learned are factored into plans for the opening of other new establishments.

Nick Hardwick
HM Chief Inspector of Prisons

February 2015

Fact page

Task of the establishment

HMP Oakwood is a category C male training establishment for sentenced prisoners serving three months or more.

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

Private, operated by G4S Care and Justice Services.

Region/Department

West Midlands

Number held

1,557

Certified normal accommodation

1,605

Operational capacity

1,605

Date of last full inspection

10–21 June 2013

Brief history

HMP Oakwood opened on 24 April 2012, and provides places for 1,605 category C male prisoners, making it one of the largest prisons in England and Wales.

Short description of residential units

Ash: vulnerable prisoner population

Beech: general population

Cedar: general population

Douglas: lifer population

Elm: general population/family unit

Fir: segregation unit

Name of director

John McLaughlin

Escort contractor

GeoAmey

Health service provider

Worcestershire Health and Care NHS Trust

Learning and skills providers

Milton Keynes College

Independent Monitoring Board chair

Allan Chapel

About this inspection and report

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

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

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

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

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

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

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

This report

- A8 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A9 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A10 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

- S1** Reception (admissions) and first night processes were good. Prisoners were supported and there was an appropriate focus on risk. Levels of violence had reduced and most prisoners felt safe, although less so on Ash wing. Levels of victimisation by other prisoners were high. Understanding and management of safety issues had improved and the use of prisoners to provide mentoring and mediation was impressive. Levels of self-harm were relatively high and the quality of assessment, care in custody and teamwork (ACCT) documents was poor. Security arrangements were mostly proportionate. Despite a robust supply reduction strategy, illicit drugs were easily available. The levels of use of force and of segregation were high. We were not assured that force was always used as a last resort. Substance misuse services were very good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S2** At the last inspection in 2013 we found that outcomes for prisoners at HMP Oakwood were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of safety. At this follow-up inspection we found that seven of the recommendations had been achieved, three had been partially achieved, two had not been achieved and one was no longer relevant.
- S3** Most prisoners had relatively short journeys to the prison and reported feeling safe but we saw grubby escort vehicles with offensive graffiti.
- S4** The admissions unit was clean and bright, and prisoners were positive about their experience there. Processes had improved, with all interviews being held in private and an opportunity for prisoners to disclose personal risk factors, swifter access to health services staff and access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners).
- S5** Most prisoners felt safe on their first night. All new arrivals were located in dedicated induction cells, most of which were clean and well prepared. They were given essential items, and had access to a free telephone call and peer support on their first night.
- S6** A new and comprehensive induction programme had been introduced recently and its delivery was tracked, but the session we observed failed to engage prisoners fully.
- S7** In our survey, the number of prisoners who said that they felt unsafe had reduced and was now similar to that at other prisons. The level of violence had reduced and was also comparable to that at similar prisons. However, victimisation by other prisoners, particularly around debt, drugs and medication, remained high. Fewer prisoners than at the time of the previous inspection sought protection on the vulnerable prisoner wing (Ash wing) but access to the wing was not managed robustly and the wing was a hotspot for bullying and antisocial behaviour. Management oversight of safety had improved and there was better data and trend analysis to raise awareness of issues and take action to make the prison safer. More respondents to our survey than elsewhere and than at the time of the previous inspection said that they were confident in reporting bullying. Many perpetrators were not adequately challenged through the antisocial behaviour scheme, although new projects aimed at managing poor behaviour, resolving conflict, and supporting victims and isolated prisoners were promising steps forward.

- S8 Strategic oversight of suicide and self-harm matters was good and data collection and analysis were thorough. Levels of self-harm and the number of prisoners subject to assessment, care in custody and teamwork (ACCT) case management processes for prisoners at risk of suicide or self-harm were high. The quality of the documentation we viewed was mostly poor and we were not assured that the quality of care was always adequate or focused on the underlying issues. The number of Listeners had increased and access to them had improved.
- S9 Physical security was strong and processes were generally proportionate, although the number of prisoners on closed visits was high and not always related to visits activities. There was a good flow of intelligence and analysis was reasonable.
- S10 The prison was sighted on the threat of drugs, including new psychoactive substances (particularly black mamba) and diverted medication. Despite a comprehensive and robust supply reduction strategy, prisoners told us that it was easy to get drugs at the prison. The mandatory drug testing positive rate was low but not a true reflection of drug use, as black mamba was undetectable.
- S11 Incentives and earned privileges processes were generally sound. The regime for basic prisoners was over-punitive and failed to allow sufficient opportunities to demonstrate improvements in behaviour. However, this was mitigated for some by the innovative use of well-trained prisoners from the basic interventions group to provide positive mentoring, mediation and motivational activities.
- S12 The number of adjudications was in line with that at comparator prisons and had decreased. Processes were reasonable but the quality of investigation needed to improve.
- S13 The level of use of force was high and was almost double that at similar prisons. Governance of use of force had improved but was still inadequate. There was no routine review of use of force paperwork or video evidence, too little data analysis and little evidence of ongoing improvement activity. There was insufficient evidence that de-escalation had been used sufficiently or that the use of force had always been necessary. Not all complaints about excessive use of force had been investigated. We were concerned by some incidents we reviewed.
- S14 Use of segregation was relatively high and had increased. The average length of stay was not excessive but the regime on the unit was limited. There was evidence of reintegration planning for prisoners spending 28 days or more in segregation, but too many prisoners were transferred out to other establishments without their issues being addressed. In our survey, prisoners were negative about their treatment on the unit, and there were high levels of use of force there. Staff were selected for segregation duties but received no additional training to help them to manage challenging individuals.
- S15 Substance misuse services were good and some aspects excellent – including, the range of psychosocial interventions, and group work for prisoners with alcohol problems.

Respect

- S16** *The quality of communal and residential accommodation was very high. Access to clean clothes and toiletry items had improved and was adequate. The applications system was supported by an effective prisoner-run helpline. Staff–prisoner relationships had developed well and were good. The management of equality and diversity had been strengthened and was now reasonable, but the perceptions of black and minority ethnic and Muslim prisoners were more negative than the population as a whole, and there was not enough specific consultation with these groups. The number of complaints submitted had reduced considerably but too many were not investigated adequately. Health services had improved substantially and were reasonable but prisoner perceptions remained very negative. There was insufficient mental health provision. Food and shop arrangements were satisfactory. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S17** *At the last inspection in 2013 we found that outcomes for prisoners at HMP Oakwood were poor against this healthy prison test. We made 25 recommendations in the area of safety. At this follow-up inspection we found that 16 of the recommendations had been achieved, eight had been partially achieved and one had not been achieved.*
- S18** The quality of accommodation was very high and enhanced by in-cell telephones and showers. Communal areas were clean and levels of graffiti were minimal. Access to cleaning materials, laundry facilities, toiletries and prison clothes had improved.
- S19** RALPH (Resettlement Advice Line and Prisoner Helpline), a helpline operated by trained prisoners, was well used by prisoners and provided immediate answers to a range of queries. Formal applications made through the landing-based electronic custody management system had improved but paper-based applications were poorly managed.
- S20** Staff–prisoner relationships were much improved, and we saw good interactions between them. Staff were much more confident in their dealings with prisoners, although prisoners still reported reluctance by some staff to make decisions. The relocation of managers onto the wings had been a positive initiative. The personal officer scheme worked well and electronic and paper-based reports were used effectively to support and provide information on prisoners. Consultation arrangements had improved and the frequent ‘user voice’ meetings were effective and well supported.
- S21** Equality and diversity management had improved with the development of a comprehensive strategy and action plan and improved provision for some protected characteristics. Attendance at the equality governance meeting was good and all protected characteristics were discussed there. The range of data analysed was impressive and action was taken for out-of-range areas. Issues reported through discrimination incident report forms had been investigated to a good standard and quality assurance was effective.
- S22** Individual staff leads had been appointed for each of the protected characteristics but meetings with prisoner representatives to discuss some of these were sporadic.
- S23** The perceptions of black and minority ethnic prisoners, Muslims, and prisoners with a disability were negative across many areas. Although we did not find any evidence to suggest that they were disadvantaged, there was poor consultation with these groups. Formal support forums were provided only for Gypsy, Romany and Traveller and foreign national prisoners, and provision for these prisoners was good. Prisoners with disabilities were much better cared for than at the time of the previous inspection, with good care plans for those with complex needs. The introduction of paid prisoner carers was a welcome addition but

- they required more robust oversight. The needs of older prisoners were met reasonably well, although retired prisoners and those with a disability had little to occupy them when unlocked during the core day. Support for the few identified gay prisoners was developing.
- S24 Facilities were good for all faiths. The chaplaincy and their volunteers were well integrated into the prison regime and links with local faith representatives had been established.
- S25 The number of complaints submitted had reduced considerably and was lower than at comparator prisons. Monitoring of trends had resulted in some positive action to address problem areas. The timeliness of responses had improved but too many did not specifically address the matters raised and some serious complaints about staff had not been sufficiently well investigated, or responded to at all.
- S26 The management of legal mail was poor, with inconsistent recording of letters opened in error, and sometimes delays in delivery.
- S27 Health services had improved considerably and were reasonably good overall. Despite this, prisoners' perceptions of health services were largely negative. A recent health needs assessment informed service provision and there was a good culture of reporting, investigating and learning from adverse incidents. Systems to identify and support prisoners with lifelong conditions and complex health needs were robust, but chronic staffing shortages had created a backlog of nurse reviews. The range of primary care services was appropriate and waiting times were generally reasonable. Medication ordering and administration systems had improved and opportunities for diversion had been reduced, but some prisoners still experienced delays in receiving medication. Dental services were good but prisoners with less than six months to serve received only emergency dental care, which was too restrictive.
- S28 There was insufficient mental health provision and waiting times for assessment were relatively long. Once assessed, the care provided was generally good. Most prisoners transferred to external mental health facilities waited too long to be moved.
- S29 Prisoners were relatively negative about the quality and quantity of food provided. The meals served during the inspection were of adequate quality, and portion sizes were reasonable. There was good consultation with prisoners about the food provided and it had resulted in some changes. The supervision of serveries had improved.
- S30 In our survey, prisoners were relatively positive about the range of goods available from the prison shop. Recent changes to the delivery arrangements had reduced the opportunities for prisoners to be bullied for their shop goods.

Purposeful activity

- S31** *The amount of time out of cell for most was good. Learning and skills provision had improved but was still a work in progress. The number of activity places had increased and most prisoners were engaged in full- or part-time activity, although the quality of much of the available work was mundane. Prisoner peer support roles provided good opportunities but their supervision was inadequate. Standards of teaching and learning were too variable and not enough was good. Levels of progress and educational and vocational achievements also required improvement. The quality of gym and library resources was good but they were underused. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

- S32 At the last inspection in 2013 we found that outcomes for prisoners at HMP Oakwood were poor against this healthy prison test. We made 17 recommendations in the area of safety. At this follow-up inspection we found that seven of the recommendations had been achieved, eight had been partially achieved and two had not been achieved.*
- S33 Most of the population was employed full time, and the amount of time they had out of cell out of cell was good. The number of prisoners locked up during the core day had reduced considerably but was still too high, at 18%. Access to daily association and exercise was good but exercise periods were too short, at 30 minutes.
- S34 The prison was working hard to improve the quality of the education, learning and skills provision but much was a work in progress and required further improvement. The education and training curriculum had expanded and adequately matched the needs of prisoners and employers. A wide range of data was used well for performance management and monitoring purposes. Self-assessment was accurate, but not a sufficiently succinct process. Through effective allocation processes, the number of prisoners involved in activities had risen considerably, and during our spot checks we found 75% of prisoners engaged in either full- or part-time activity.
- S35 The number of full-time activity places had increased substantially and was sufficient for around 84% of the population, although too much prison work was mundane and undemanding. Throughout the prison, a number of prisoners were involved in useful prisoner peer support roles but not all were accredited or adequately supervised.
- S36 A little over half of teaching, learning and assessment was outstanding or good but the rest required improvement and a few sessions were inadequate. In the better sessions, learning was well planned and the teaching was dynamic and individualised, with clear targets. The less successful sessions lacked direction, and learners disengaged and became bored.
- S37 Pass rates on too many education courses required improvement, but on most vocational skills courses were consistently high. Learners' behaviour was good. Teachers challenged and managed instances of inappropriate behaviour well.
- S38 The library was a good resource, with an adequate range of stock. Reading and creative writing groups were active and the Storybook Dads scheme (in which prisoners record stories for their children) was successful. However, the library was not actively promoted and access times were not well understood by prisoners or staff, leaving it underused.
- S39 Only just over a third of prisoners used the gym regularly. The quality of the equipment and facilities was good but the gym was too small to accommodate the number wanting to use it, and often became crowded and noisy. Prisoners had good access to an adequate range of vocational PE training, and pass rates were high.

Resettlement

S40 *The strategic management of resettlement had been strengthened and was good. The backlog of prisoner assessments remained but offender management, and contact with prisoners, had improved. The quality of assessments was adequate but sentence planning was underdeveloped. Too many home detention curfew assessments were late. Public protection arrangements were mostly sound but engagement from offender managers was weak. Reintegration planning was very good. Most pathway work was effective but education, training and employment provision needed improvement. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S41 *At the last inspection in 2013 we found that outcomes for prisoners at HMP Oakwood were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of safety. At this follow-up inspection we found that 10 of the recommendations had been achieved, one had been partially achieved and three had not been achieved.*

S42 The strategic management of resettlement had strengthened with the introduction of clear reducing reoffending and resettlement policies and developmental objectives overseen by regular management group meetings.

S43 Offender management had improved considerably. However, there was a large backlog of assessments, mainly caused by sending establishments. Over 200 prisoners were without an up-to-date offender assessment system (OASys) assessment and many home detention curfew assessments were late. These delays hindered prisoners' ability to progress.

S44 Prisoner–offender supervisor contact through individual meetings and surgery appointments was regular in most cases. The quality of risk of harm assessments was adequate and sentence planning had improved but still did not always incorporate an objective analysis of all information about the prisoner's offending behaviour.

S45 There were clear processes for assessing sex offenders' suitability for treatment promptly and either transferring them to treatment centres or developing an appropriate sentence plan if they remained at the establishment.

S46 Prisoners presenting a risk of harm to the public were reliably identified and appropriate restrictions were put in place. Despite the best efforts of offender supervisors, pre-release planning, particularly for high-risk prisoners, was hampered by a lack of engagement from community-based offender managers.

S47 Recategorisation processes were sound and inclusive. The number of category D prisoners had reduced and their transfer to open conditions was prompt.

S48 Good assessment and planning for indeterminate-sentenced prisoners (ISPs) was provided. The monthly meetings of ISP representatives provided a valuable means of consultation. There were regular ISP family days, and the Douglas wing was valued as a long-term prisoner unit.

S49 Reintegration planning was very good. There were effective processes for identifying prisoners' resettlement needs on arrival and monitoring the delivery of support. A good service was provided by prisoner resettlement workers in gathering information and supporting prisoners. They interviewed all new arrivals and staffed the RALPH telephone advice service, covering resettlement and other prison issues. However, we had reservations

about the confidentiality of some of the information that prisoners were asked to share with the resettlement peer workers.

- S50 The staff resettlement team provided good support for prisoners with accommodation problems, including rent arrears and homelessness. They worked with referrals from a range of sources and identified those requiring accommodation in good time before release.
- S51 Education, training and employment provision required improvement. The range of support from the National Careers Service was limited; no employability skills development was offered, other than CV writing, and there were too few links with employers. The virtual campus (internet access for prisoners to community education, training and employment opportunities) was operational but was not used to its full potential, and not at all for resettlement purposes.
- S52 All prisoners received relevant health information and take-home medication on release. Pre-release planning and community liaison for those with complex physical and mental health needs started early and were effective.
- S53 Support for prisoners with drug and alcohol problems was good and enhanced by a new dedicated community liaison post. Work ‘through the gate’ with family engagement was exemplary.
- S54 There was a range of support for prisoners with debt problems, including the facility to open bank accounts.
- S55 Provision under the children and families pathway was developing well. Visits generally started on time and visitors were positive about their experience. The range of family-based visits was impressive but too many were restricted to enhanced prisoners. The opening of Elm wing as a family unit to support family engagement, although in its infancy, was promising.
- S56 Suitable accredited offending behaviour programmes, in line with a local needs analysis, were provided. Waiting lists were manageable. There was a wide range of individual and group interventions for prisoners who were not suitable for accredited programmes.

Main concerns and recommendations

- S57 Concern: Outcomes for prisoners had much improved since the last inspection but the difficulties Oakwood and other new prisons experienced in the period following their opening resulted in unacceptable risks and very poor outcomes for the prisoners held at that time. There are plans to open a number of large new establishments in the coming years.

Recommendation: There should be a review undertaken and published of the difficulties Oakwood and other recently opened prisons experienced after they opened; and the lessons learned factored into plans for the opening of other new establishments.

- S58 Concern: Allocation processes to the vulnerable prisoner (Ash) wing were not sufficiently robust. Too many vulnerable prisoners on this wing felt unsafe and the wing was a hotspot for incidents of bullying and antisocial behaviour.

Recommendation: Only prisoners requiring the segregation and protection of a vulnerable prisoner wing should be located on Ash wing and their allocation should be subject to review. Bullying and intimidation should be addressed and action should be taken to make the wing safer.

S59 Concern: The number of incidents of self-harm and the number of prisoners subject to ACCT procedures were high. The quality of ACCT documents was poor and we were not assured that the quality of care was always adequate or focused on the underlying issues.

Recommendation: The quality of care for prisoners at risk of suicide and self-harm, evidenced in written assessment, care in custody and teamwork (ACCT) processes, should be improved and should focus on the underlying causes of distress.

S60 Concern: The number of incidents of use of force was high, and almost double that at similar prisons. De-escalation was not used sufficiently and records did not make clear why the use of force had been necessary. Not all complaints about excessive use of force had been investigated.

Recommendation: Incidents of use of force should be monitored and quality assured to ensure that de-escalation is employed and that force is only used as a last resort. All complaints about excessive force should be thoroughly investigated.

S61 Concern: In our survey, black and minority ethnic prisoners, Muslims and prisoners with a disability reported considerably more negatively than their counterparts across a range of areas. While we found no evidence to suggest that they were disadvantaged, consultation with these groups was negligible.

Recommendation: Regular consultation arrangements with black and minority ethnic prisoners, Muslims and prisoners with a disability should be put in place and action taken to improve the perceptions and outcomes for these groups.

S62 Concern: Too many prisoners were employed in undemanding work. Standards of teaching and learning and educational and vocational achievements were often not good enough.

Recommendation: The number of high-quality work places should be increased. Standards of teaching and learning and the level of achievements should be improved.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Journey times to the establishment were relatively short and most prisoners felt safe. The vans were not always clean and some contained offensive graffiti. Prisoners were disembarked quickly on arrival and were not handcuffed.*

I.2 Most prisoners had relatively short journeys to the establishment, and in our survey only 30% of prisoners, against the 46% comparator and 45% at the time of the previous inspection, said that they had spent longer than two hours in the van. Prisoners were offered a drink of water and a toilet stop on the longer journeys. Most prisoners said that they had felt safe during their journey.

I.3 We saw some grubby escort vehicles which contained offensive graffiti. Escort staff were respectful and prisoners were disembarked quickly on arrival outside the admissions unit and were not handcuffed.

Housekeeping point

I.4 Escort vans should be clean and free of graffiti.

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.5 *Delays in the admissions (reception) unit had reduced but some prisoners still spent too long there. Interviews were held in private, admissions staff were respectful and there was access to Listeners in reception. Most prisoners felt safe on their first night. Some induction cells were in a poor state of decoration. First night arrangements and support were adequate. The new induction programme was comprehensive but did not always fully engage prisoners.*

I.6 The admissions unit was clean, bright and in good condition. Processes were carried out efficiently, and the amount of time spent in reception had reduced, as a result of easier access to health services staff, but was still longer than at other category C prisons. The unit remained open over the lunchtime period to reduce waiting times.

- I.7** We saw staff treating prisoners well in admissions and taking care to welcome them and settle them in. In our survey, more than at comparator establishments said that they had been searched in a respectful way and that they had been treated well. Holding rooms were clean and contained useful information about the prison. Refreshments were given to newly arrived prisoners.
- I.8** A first night risk assessment was completed in private and was sufficiently detailed. Staff were alert to individual vulnerabilities and other risk issues.
- I.9** Two Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) worked in admissions during the afternoons to introduce the scheme and check out concerns for new arrivals. A prisoner peer worker also identified any newly arrived foreign national prisoners.
- I.10** In our survey, most prisoners, and a similar number to that at comparator prisons, said that they had felt safe on their first night. The dedicated first night unit was no longer in use and new prisoners were allocated to induction cells on either Beech or Ash wing. Most induction cells were clean and well maintained but some on Ash wing were in a poor state of decoration, with toilets that were stained and dirty.
- I.11** New prisoners told us that they had access to most of the basic items they needed and we saw staff ensuring that this was the case. Prisoners were given a free telephone call, and in our survey more than at other category C prisons and than at the time of the previous inspection said that they had had access to Listeners on their first night. Peer supporters were available on both wings and we saw them making contact with new prisoners to provide additional support.
- I.12** A new two-day induction programme had been introduced which started on the day after arrival. It was structured, comprehensive and delivered by a range of staff and prisoner peer workers. However, the session we observed, which consisted of a long PowerPoint presentation, did not fully engage prisoners, many of whom appeared bored and distracted at times. Completion of the programme was tracked, and in our survey more prisoners than at the time of the previous inspection said that they had completed it.

Recommendation

- I.13 All induction cells should be clean and well decorated before being occupied.**

Housekeeping point

- I.14 The style of delivery of all induction sessions should maximise prisoner engagement.**

Bullying and violence reduction

Expected outcomes:

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

- I.15** *The levels of violence were lower than at the time of the previous inspection and in line with that at other category C prisons. The level of victimisation from other prisoners was still high but fewer prisoners than at the time of the previous inspection reported staff victimisation. Despite being the vulnerable prisoner unit, Ash wing had the highest levels of violence, victimisation and bullying, leaving more prisoners there than on other wings feeling unsafe. The assessment of suitability for location on Ash wing was weak. Management oversight had improved, with much better data analysis, but there was no localised violence reduction strategy. The application of the antisocial behaviour scheme was weak but some promising new interventions had been developed.*
- I.16** The levels of violence such as fights and assaults were lower than at the time of the previous inspection and were now in line with those at similar prisons. In our survey, the number of prisoners who said that they currently felt unsafe had reduced and was now similar to that at other prisons, although this was not the case for prisoners on Ash wing, the vulnerable prisoner wing (see below). In addition, fewer prisoners than at comparator prisons and than at the time of the previous inspection reported victimisation from staff (24% versus 29% and 30%, respectively), which was a reflection on improved staff–prisoner relationships (see section on staff–prisoner relationships).
- I.17** However, victimisation by other prisoners remained high, with 31% of prisoners in our survey (versus 25% elsewhere) reporting that they had experienced victimisation. The most commonly reported reasons for victimisation were debt, drugs and medication. Ash wing was a hotspot for incidents of bullying and intimidation. The profile of Ash wing had changed. At the time of the previous inspection, 75% of prisoners there had been sex offenders and 25% had been located there owing to other vulnerabilities such as debts or problems on the main wings. The proportion of sex offenders had subsequently reduced substantially and the number located there owing to other vulnerabilities, such as debt, was now much higher and it was the most unsafe of the wings. Almost half (47%) of those surveyed on Ash wing said that they had been victimised, compared with a quarter (24%) of those on other wings. In addition, more prisoners on Ash wing said that they currently felt unsafe (18% versus 10% on other wings). The numbers of prisoners reporting victimisation in relation to taking shop goods, property, medication and debts were far higher on Ash wing than on other wings.
- I.18** While fewer prisoners than at the time of the previous inspection sought protection on Ash wing, the selection process for entry to this unit was weak, making it easy for potential bullies to gain access to the most vulnerable. It was clear that the level of bullying on this wing was increasing and the prison’s own data showed that this involved a number of repeat perpetrators who were very difficult to manage (see main recommendation S58).
- I.19** Management oversight of safety by the safer prison meeting had improved through better data collection and there was better trend analysis to raise awareness of issues and take action to make the prison safer. However, there was no localised violence reduction strategy for the establishment and no specific action plan to address the issues on Ash wing (see main recommendation S58).

- I.20** More prisoners than elsewhere and than at the time of the previous inspection said that they were confident in reporting bullying but too many perpetrators were not adequately challenged through the antisocial behaviour scheme. Antisocial behaviour books completed by wing staff lacked detail and did not set good enough objectives, and reviews were not always focused on the relevant issues. Victim support plans were weak in practice and did little to evidence adequate protection.
- I.21** However, some promising new projects had been introduced. For example, the ‘basic intervention group’ (BIG), which comprised a group of prisoners providing mentoring, constructive reparative activity and mediation, promoted positive behaviour and helped to resolve conflict (see also section on incentives and earned privileges), and the Cordial group helped to support victims and other isolated prisoners. It was too early to evidence the effectiveness of these but we were told that none of the prisoners going through mediation had repeated their poor behaviour.

Recommendation

- I.22** **The quality of antisocial behaviour books and support plans should be improved, to challenge poor behaviour and support victims.**

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.23** *The level of self-harm was high. Recommendations from the Prisons and Probation Ombudsman had been implemented and were reviewed regularly. Better oversight of suicide and self-harm was provided but there was no localised strategy and the quality of case management for those on assessment, care in custody and teamwork (ACCT) documents was mostly poor.*

- I.24** The level of self-harm was high, with 358 incidents in the previous six months, involving 172 individuals, which was higher than at the time of the previous inspection. The number of assessment, care in custody and teamwork (ACCT) case management documents opened was therefore also high, at 287 in the previous six months.
- I.25** There had been no self-inflicted deaths at the establishment, and the Prisons and Probation Ombudsman recommendations from the one death from natural causes were in the continuous improvement plan and reviewed regularly. We saw evidence of improvement in practice; for example, all night staff were now trained in the use of emergency equipment.
- I.26** Good data analysis at the safer prisons meeting had improved the oversight of suicide and self-harm, including the identification of trends and lessons learned nationally, but there was no localised suicide and self-harm prevention strategy.
- I.27** The timeliness of ACCT case management was generally good, although in some examples we saw there had been a delay in the production of the care map. The quality of case management using the ACCT documentation was mostly poor and we were not assured that the quality of care was always adequate or focused on the underlying issues leading to the

individual's crisis. For example, some care maps set a number of objectives, none of which addressed the original reasons for the self-harm. ACCT reviews were rarely multidisciplinary, even where the need for the involvement of other staff had been noted, and some actions took too long to complete (see main recommendation S59). We spoke to several prisoners who were, or had recently been, on an ACCT, and too many of them were unable to identify the value of the process, other than the increase in the number of observations during the night.

- I.28** A large number of prisoners in the segregation unit were on an ACCT and the exceptional circumstances were not always clearly set out in the assessment.
- I.29** Three high-quality Listener suites had been developed but were rarely used. Listeners said that they tended to use the prisoner's cell to meet those in crisis but did not see this as problematic. The number of Listeners had increased to 29 and there were now sufficient to provide cover on a rota basis, and in our survey more prisoners than at the time of the previous inspection said that they could access them at any time.

Recommendation

- I.30** **The exceptional circumstances to approve the location of prisoners on ACCT documents on the segregation unit should be better evidenced in assessments.**

Housekeeping point

- I.31** A localised suicide and self-harm prevention strategy should be developed.

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.32** *Initial discussion had taken place with the local safeguarding adults board but the prison was not yet represented at board meetings and more needed to be done to develop a prison-wide approach, including raising the awareness of wing staff.*

- I.33** The prison had an adult safeguarding policy. Initial contact had been established with the local safeguarding adults board and some discussions had taken place about referral criteria and processes, but the prison was not yet represented on the board. Knowledge about adult safeguarding processes among wing staff was limited.
- I.34** The health care department had comprehensive adult safeguarding policies, and prisoners who were considered vulnerable were discussed at complex case reviews; two referrals had been made to the local safeguarding adults team in recent months.

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).

Recommendation

- I.35** Local safeguarding adults processes should be developed further and wing staff should be more aware of the procedures.

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.36 *Security arrangements were generally proportionate but drug supply was a concern. The drug supply reduction strategy was robust and improving but in our survey too many prisoners said that it was easy to get illegal drugs, and the availability of new psychoactive substances was problematic. Closed visits were sometimes used inappropriately.*

- I.37** Physical security was strong. Some additional fencing, aimed at reducing drug supply, had been installed and more investment was anticipated. Previously excessive searching rates had been reduced and were now more proportionate, but not all strip-searches were intelligence led.
- I.38** There was a good flow of intelligence and analysis was reasonable. Staff usually conducted intelligence-led searches as required. Intelligence was generally appropriately disseminated, but not to the offender management unit, which meant that offender supervisors could miss information relating to risk.
- I.39** Security staff presented an intelligence assessment to the director every week and prepared a good report for the well-attended monthly security meetings, where appropriate intelligence objectives were set. The biggest area of concern was drug use and supply, and this was being addressed through an assertive supply reduction strategy and an action plan; the latter was monitored at security meetings. Staff corruption prevention systems seemed sound.
- I.40** In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection said that it was easy to get illegal drugs at the prison. In addition, more prisoners than elsewhere said that they had developed a problem with drugs and/or diverted medications at the establishment, and that alcohol was available.
- I.41** The mandatory drug testing (MDT) positive rate was 4.5%, which was lower than target (10%) and than at the time of the previous inspection, but prisoners and staff told us that this was not a true reflection of drug use, owing to the availability of 'black mamba' (a new psychoactive substance), which was not detectable. Staff had found 23 packages thrown over the wall in the previous six months, most of which had been believed to contain black mamba. In November 2014, the supply reduction strategy had been updated to try to address the availability of black mamba, initially through close working with the police and education for prisoners and staff.
- I.42** In an effort to understand more about diverted medication, tramadol (an analgesic and commonly diverted drug) had been added to the MDT testing panel in October and November 2014, resulting in some positive results for non-prescribed tramadol. Despite

close supervision of drug administration, subutex (an opiate substitute) was occasionally known to be diverted. Suspicion MDTs were completed on time and appropriate action was taken following positive results.

- I.43** Use of closed visits was relatively high and they were sometimes imposed (for example, following two positive mandatory test results), when there was no evidence that individual prisoners had abused visits arrangements. Of the 24 closed visits decisions active at the time of the inspection, eight were not related to visits. A further 14 men were on non-contact visits, which were imposed for a month after every period of closed visits.

Recommendations

- I.44** Prisoners should only be strip-searched when there is specific intelligence to suggest that it is necessary.
- I.45** Closed visits should only be used when there is evidence that a prisoner has abused visits arrangements.

Housekeeping point

- I.46** Relevant intelligence should be routinely disseminated to offender supervisors.

Incentives and earned privileges³

Expected outcomes:

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

- I.47** *Incentives and earned privileges processes were generally sound, and designated enhanced accommodation was a valued incentive. However, the regime for those on the basic level was far too punitive, although often mitigated by interventions from the basic intervention group team.*

- I.48** The new incentives and earned privileges policy was comprehensive and generally understood by staff and prisoners. The process was applied universally across the prison and there was a good level of managerial oversight to ensure adherence to the policy.
- I.49** Our survey results in relation to the fairness of the scheme and the likelihood that it would encourage behavioural improvement were similar to those at the time of the previous inspection and at comparator prisons. One of the main incentives for prisoners was to be located onto either Douglas wing (for long-term prisoners) or one of the designated enhanced landings on the larger wings.
- I.50** For those on the basic regime, monitoring was good, with at least three written entries made each day, regular reviews and a usually speedy return to the standard level. However, the regime was punitive and resulted in removal of television privileges, prisoners' personal

³ In the previous report, incentives and earned privileges were covered under the healthy prison area of respect. In our updated Expectations (Version 4, 2012) they now appear under the healthy prison area of safety.

clothing, and of access to association, work and educational activities. These prisoners were unlocked each day for an hour in the morning for 'domestics', including half an hour's exercise (see recommendation 3.5). They were then unlocked for short periods to collect meals, resulting in less than two hours out of cell each day. This was mitigated to some extent for those who chose to engage with the BIG programme (see section on bullying and violence reduction).

Recommendation

- I.51 The regime for those on the basic regime should be improved to include the opportunity for at least one hour in the open air and access to association.**

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.52** *The number of adjudications was reasonable and prisoners understood the charges they faced, but the quality of investigations needed to improve. The level of use of force was too high and governance arrangements were inadequate. We were not assured that force had always been necessary or used as a last resort. The segregation unit was well presented but the use of segregation was high, the regime was limited and prisoners were negative about their treatment there.*

Disciplinary procedures

- I.53** The number of adjudications had fallen and was in line with that at comparator prisons. Administrative processes were reasonable and prisoners understood the charges they faced but in our sample, adjudicators had not always investigated thoroughly enough to demonstrate fairness.
- I.54** Quarterly adjudication standards meetings discussed a range of data, which were becoming better presented and more meaningful, and conducted regular reviews of punishment guidelines. However, there was no evidence of routine quality assurance or a continuous improvement process to ensure that lessons learned were shared.
- I.55** Only around 30% of charges were proved, which raised questions about the appropriateness of the charges laid and the quality of investigation.

Recommendation

- I.56 There should be a quality assurance process for adjudications which results in learning for all staff involved in adjudications.**

The use of force

- I.57** In our survey, more prisoners than at comparator prisons said that they had been restrained in the previous six months. The level of use of force was very high, at 214 incidents in the previous six months, which was almost double that at similar prisons. Most incidents were spontaneous and involved active control and restraint procedures (see main recommendation S60). Many incidents took place in the segregation unit.
- I.58** Governance arrangements for use of force had improved but were still inadequate. Documentation was not always complete, and frequently did not make clear if any attempts had been made to de-escalate the situation, why the use of force had been necessary or who had authorised it. In the video recordings we reviewed, we had similar concerns. Verbal handovers to segregation staff were often absent or unclear, which caused misunderstandings and poor outcomes for prisoners. A range of data was presented at quarterly meetings but analysis was inadequate. There was no regular review of use of force paperwork or video evidence, so there was no routine opportunity to identify areas for improvement, learn lessons or commission investigations (see main recommendation S60). However, it was positive that first-line managers had 'body-worn' cameras to record spontaneous incidents.
- I.59** We saw several complaints from prisoners about use of force and were not satisfied with the standard or the timeliness of the investigations. In one potentially serious case, the complainant had not even been interviewed (see main recommendation S60).

Segregation

- I.60** The newly decorated segregation unit was clean and ordered, and cells were free of graffiti. The average length of stay had reduced to 10 days, but segregation was used more frequently than at comparator prisons and than at the time of the previous inspection, with 265 instances in the previous six months. In our survey, compared with the number at similar prisons, far fewer prisoners who had been segregated said that they had been treated well by staff (24% versus 40%).
- I.61** Segregation documentation was in order, and prisoners understood why they had been segregated. However, the regime on the unit was very limited. The exercise yards were bare and prisoners always used them alone. Prisoners had a maximum of 30 minutes' exercise, which was very poor for men who were otherwise almost continuously locked up (see recommendation 3.5). Staff gave prisoners an opportunity to use the telephone each day, but we saw staff using inappropriate discretion to refuse a telephone call.
- I.62** Staff were specially selected to work in segregation but received no additional training or support to help them to care for the challenging population. It was not always clear who was in charge of the unit, which was particularly concerning given the high level of use of force (see section on the use of force).
- I.63** Segregation review boards were held on time, and were well attended. Reintegration plans were developed for the few prisoners who spent over 28 days in segregation, but too many others (56 in the previous six months) were transferred directly from the unit to other prisons without their issues being addressed.
- I.64** Prisoners on ACCT documents were often held in segregation, except when a nurse indicated that a prisoner's well-being was likely to suffer (see also section on self-harm and suicide prevention).

- I.65** Segregation monitoring and review group meetings were held quarterly. The data considered had improved but there was still room for improvement. For example, managers were unaware that the rate of segregation had increased, and complaints about segregation were not reviewed.

Recommendations

- I.66** The prison should investigate the reasons for the high rates of segregation, the volume of transfers out of the segregation unit and poor prisoner perceptions about the unit, and take step to improve outcomes.
- I.67** Staff working in the segregation unit should receive additional training and support to help them care for challenging prisoners.
- I.68** Management oversight of the segregation unit should be improved and staff should not refuse prisoners access to telephones, exercise or any other regime element without the recorded authority of a first-line manager.

Substance misuse

Expected outcomes:

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

- I.69** *Strategic oversight of the substance misuse strategy and implementation plan was very good. There was clear clinical leadership of the integrated substance misuse team and an exemplary range of psychosocial interventions and group work for prisoners with drug and alcohol problems.*

- I.70** The drug and alcohol strategy and associated implementation plan was closely monitored by regular, well-attended meetings. The needs analysis was up to date. An updated clinical management policy was being implemented at the time of the inspection.
- I.71** The integrated substance misuse team demonstrated enthusiasm and commitment to their work. There were 495 prisoners receiving psychosocial interventions, each of whom had a recovery passport. In-cell alcohol, drugs and mental health workbooks were in wide use, and appreciated by prisoners. The integrated substance misuse team delivered a comprehensive range of one-to-one accredited and non-accredited group interventions for alcohol, drug and poly-drug users. The programme of groups was flexible so that small groups could be offered quickly in response to demand. The range of therapeutic opportunities was exemplary. However, there was no designated drug-free area in the prison.
- I.72** There were 111 prisoners receiving opiate substitution treatment, of whom around half were on reducing doses. There were many prisoners with a dual diagnosis (complex drug and mental health problems) and expert staff, led by a forensic consultant psychiatrist, were available to assist them.
- I.73** In our survey, more respondents than at comparator prisons and than at the time of the previous inspection said that they had received help for a drug problem (69% versus 63% and 59%, respectively). There were 193 prisoners subject to voluntary drug testing and over 50% were tested each month, which indicated high vigilance.

- I.74** The service user forum reflected the views of prisoners in treatment, and their views had influenced service developments; for example, peer supporters/recovery champions had been introduced in response to their views. Alcoholics Anonymous held weekly meetings, with external facilitators. Narcotics Anonymous (NA) had ceased meeting since the previous inspection; service commissioners were addressing the shortage of NA facilitators.

Recommendation

- I.75** **The prison should consider creating a drug-free area better to support prisoners choosing abstinence.**

Good practice

- I.76** *The extensive range of therapeutic opportunities for prisoners with substance misuse issues was exemplary.*

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** *The accommodation was of high quality. Communal areas were impressively clean and well maintained. Many residential services had improved and were now at least adequate. RALPH (Resettlement Advice Line and Prisoner Helpline) was an innovative and helpful service.*
- 2.2** There were five main residential units. Two of the large units, holding nearly 500 prisoners, did not have a specific role, while the third large unit was for vulnerable prisoners. There were two smaller units – one for long-term prisoners and another designated as a family support unit. The standard of cellular accommodation across all units was high. Prisoners were mainly housed in single cells with integral showers and sanitation. Additionally, in-cell telephones ensured that all prisoners were able to contact their families at any time.
- 2.3** Internal and external areas were impressively clean and well maintained. Most cells were clean and well equipped, levels of graffiti were minimal and there was a prison-wide adherence to the offensive displays policy.
- 2.4** Our survey results about some residential issues were better than at the time of the previous inspection but worse than at comparator prisons in respect of the availability of bedding and cell cleaning materials, although we found provision adequate or better. Access to cleaning materials had recently improved, with prisoner orderlies ensuring that a wide range was available. Additionally, prisoners could place a monthly order for cleaning equipment via the custody management system (CMS), an on-wing electronic console through which prisoners ordered their meals, placed shop orders, could make a range of applications and booked their visits. Laundry facilities had also improved and were good, and all prisoners could have their clothing and bedding laundered weekly at the on-wing laundries. Access to toiletries was adequate. All prisoners, except those on the basic level of the incentives and earned privileges scheme (see section on incentives and earned privileges), were allowed to wear their own clothes; those without their own clothes were issued with sufficient prison clothing, access to which was now reasonable.
- 2.5** We found that access to stored property was reasonable, in spite of negative survey results, and new arrivals had 28 days to have additional clothing sent or handed in, up to a pre-agreed amount. After this period, prisoners could access their stored property every six months (although this rule was waived in exceptional circumstances).
- 2.6** The application system had improved and the range of electronic applications available via the CMS had increased. There was also a telephone helpline known as RALPH (Resettlement Advice Line and Prisoner Helpline), which prisoners could access through their in-cell telephones and use at any time during the day to gain information about the services available, and probably reduced the necessity for more formal applications. It was staffed mainly by a well-trained prisoner group, with processes and responses overseen by resettlement staff. Four days a week, from 4pm to 5pm, the line was staffed by offender supervisors, to give prisoners the opportunity to ask questions specifically about offender

management issues. An answerphone facility was in place for out-of-hours calls, and this was responded to on the next working day. There was also a paper-based application system but prisoners had little confidence in it and there was no consistency in the recording or tracking of paper applications.

- 2.7** Mail processes (with the exception of legal mail) were efficient, with letters (including letters received via the 'email-a-prisoner' scheme) being delivered within 24 hours of arriving at the prison.

Recommendation

- 2.8** **The applications system should be improved with a tracking system and quality assurance.** (Repeated recommendation 2.12)

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** *Staff-prisoner relationships were much improved, with a more confident staff group evident on the wings, and this was reflected in our survey. Consultation arrangements were sound and the personal officer scheme was well managed and utilised well.*

- 2.10** Frontline staff were much more confident and competent in their dealings with prisoners than at the time of the previous inspection. Efforts had clearly been made to increase staff visibility and improve staff-prisoner interactions, with good support from managers evident. Most interactions we saw were courteous and helpful. In our survey, the results for almost all indicators relating to relationships between staff and prisoners were far better than those at comparator prisons and than at the time of the previous inspection. However, black and minority ethnic prisoners were much more negative than their white counterparts about their treatment at the prison (see section on diversity and equality and main recommendation S61).
- 2.11** Most prisoners we spoke to, individually and in our groups, expressed a level of frustration that, although most staff generally made efforts to help them, there were still some who continued to refer almost every request to managers or to the applications system.
- 2.12** Wing managers' offices had been relocated onto the wings and access to them was good. We observed a 'manager surgery', where prisoners could discuss issues with managers in a relaxed and informal setting. Consultation arrangements were good and the twice-monthly 'User Voice' committee meetings were well attended by an appropriate range of staff to discuss issues with prisoners and agree actions to resolve problems and implement new initiatives. Prisoner council representatives needed to be more visible and told us there was a shortage of the T-shirts they wore to identify their role.
- 2.13** The personal officer scheme was effective and applied universally across the prison, with regular managerial oversight. Electronic case note entries were regular and provided a clear picture of prisoner behaviour and progress, and well-documented monthly reviews between the prisoner and officer ensured a good level of continuing support.

Recommendation

- 2.14** Prisoner council representatives should be provided with T-shirts to identify them and which promote their role.

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic⁴ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

- 2.15** *Equality and diversity management had improved, although some prisoners still had negative perceptions about their treatment. Equality meetings were well attended and the range of data analysed was impressive, with action taken for out-of-range areas. Discrimination incident report forms were investigated to a good standard and quality assurance was effective.*

Strategic management

- 2.16** The strategic management of equality and diversity had improved considerably, with a comprehensive strategy and accompanying up-to-date action plan. Equality governance meetings were held monthly, discussed all protected characteristics and were well attended, but there was no involvement from community organisations to help to develop practice.
- 2.17** There were 16 prisoner equality representatives; their role was well developed and prisoners had been recruited from diverse backgrounds. At least one prisoner representative attended the equality governance meetings and they regularly met as a group with the equality officer. Individual staff leads had been appointed for each of the protected characteristics, although meetings to discuss some of these with prisoner equality representatives had been irregular and had yet to result in improvements for some minority groups.
- 2.18** The prison now measured outcomes for all protected characteristics using the equality monitoring tool, and the range of data considered was impressive. Areas that had previously given us cause for concern had been investigated and monitored further to ensure that no prisoners were disadvantaged. Equality impact assessments were carried out on policies according to a planned timetable and additional assessments carried out when required. All staff had completed equality training. An equality survey had been carried out among prisoners but not analysed.
- 2.19** A total of 84 discrimination incident report forms had been submitted in the previous six months. The quality of responses was good and in all cases the prisoner received a visit from a member of the equality team to discuss the issues. Effective quality assurance was carried

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

out both internally and externally, by a group of staff from neighbouring HMPs Featherstone and Brinsford.

- 2.20** Diversity was well promoted throughout the establishment, with regular celebrations such as Black History Month and Gypsy, Romany, Traveller Month, which were well received by prisoners. The catering department provided a selection of meals from different cultures for these celebrations.

Recommendation

- 2.21** **Community organisations should be involved in helping to develop equality and diversity practice.**

Housekeeping point

- 2.22** The equality survey should be analysed and the findings used to inform the equality action plan.

Protected characteristics

- 2.23** During the admission process, prisoners were asked a range of questions to identify any needs under protected characteristics, including disability, sexual orientation and nationality. The prison acknowledged that specific support and consultation with some protected groups (black and minority ethnic prisoners, Muslims and prisoners with disabilities) was underdeveloped and that there was a need to establish regular support groups (see main recommendation S61). Although we found no evidence that any minority group had been disadvantaged or discriminated against, our survey indicated that prisoners from the minority groups mentioned above still had negative perceptions about many aspects of their treatment and conditions at the establishment.
- 2.24** There were 433 (28%) black and minority ethnic prisoners. The prison monitored their outcomes and this had revealed some concerns which were being investigated by the prison; however, these did not appear to have been communicated to black and minority ethnic prisoners, and those that we spoke to were unaware that issues they were raising with us had been looked at by the prison. There had been two meetings relating to race in 2014 – the most recent in October – but few prisoners had attended them.
- 2.25** The negative perceptions of Muslim prisoners, relative to their non-Muslim counterparts, especially around relationships with staff, had not been explored or addressed.
- 2.26** Regular forums for Gypsy, Romany and Traveller prisoners had been developed and they received a good level of support from the equality team. An external organisation, Pertemps, provided resettlement interventions for them through their New Leaf programme, including finding accommodation and employment.
- 2.27** There were 58 foreign national prisoners, representing 3.6% of the population. Support groups for them had been introduced and some information was available in languages other than English. Professional telephone interpreting services had been used regularly. Foreign national prisoners could have a free five-minute telephone call to help with maintaining contact with their family but only if they had not received any visits, and they had to apply for it monthly. The Home Office ran a monthly surgery for foreign national prisoners and there was access to independent immigration solicitors and advice. At the time of the

inspection, only one prisoner was being held solely under immigration powers; at this point, he had been detained only for a few days beyond the end of his sentence.

- 2.28** Identification of prisoners with a disability had improved and the prison had identified 71 (4.4%) such prisoners. When a disability was identified, the prisoner was visited by members of staff from the equality and health services teams, to complete an assessment. Personal emergency and evacuation plans (PEEPs) and care plans were completed when required. PEEPs were kept on the residential units, although night staff did not know where they were; however, they could quickly identify which prisoners required assistance in an emergency. Prisoners with the most complex needs were monitored at a weekly meeting, where care plans were reviewed and updated.
- 2.29** Care for older prisoners and those with disabilities had improved. Those requiring them had paid carers, and their support was appreciated by the prisoners concerned. Carers were not formally trained but signed a compact which set out clear guidelines for what was required of them. We found some carers carrying out social care duties beyond their remit, such as arranging and organising daily medication, which was inappropriate, and we found that oversight of carers was weak.
- 2.30** Older prisoners and those with disabilities were unlocked during the core day but had little to occupy them. Both groups received additional pay, and retired prisoners did not have to pay to watch television. Many were located on Ash wing, and there was a dedicated older prisoner unit on Cedar wing. There were separate gym sessions and a walking club had been established, but there was little else available to support these groups (see main recommendation S61).
- 2.31** Seven prisoners had identified as gay. Support for them was developing and an external agency had been contacted to provide additional help. There were no transgender prisoners at the establishment at the time of the inspection but there was a protocol to manage them through individual compacts.

Recommendations

- 2.32** **Paid carers should receive training for their role and the carer scheme should have better oversight from staff.**
- 2.33** **Older prisoners and those with disabilities who are not attending work and are unlocked during the day should be provided with recreational activity.**

Housekeeping point

- 2.34** Night staff should be aware of the location of personal emergency and evacuation plans.

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.

2.35 *Facilities and provision were good for all faiths but some prisoners faced delays in getting to religious services. The chaplaincy was well integrated into the prison regime and links with local faith representatives had been established.*

2.36 Facilities for all faiths were good, with adequate space for all services and other faith-based activities, and the population was monitored regularly to ensure adequate provision. There were few religious texts and little faith-related written information available for prisoners but chaplains worked together well to ensure that pastoral care and general chaplaincy duties were covered.

2.37 The chaplaincy was well integrated into prison life, and met all new arrivals within 24 hours. Ministers regularly attended meetings such as security, safer custody and equality, and were involved in providing support to bereaved prisoners. Some prisoners faced delays in getting to religious services. In our survey, only 45% of respondents said that it was easy to attend these services, although this was an improvement on 34% at the time of the previous inspection. Physical access to the facilities was good, with a lift available for those with reduced mobility. Religious festivals were promoted and celebrated well.

2.38 There was a wide range of faith-based classes and groups. Community engagement through the chaplaincy was well established. The chaplaincy provided a formal prison visitor scheme, with four prisoners receiving visits from volunteers at the time of the inspection.

Recommendation

2.39 **The prison should ensure that all prisoners who wish to attend services can do so, and on time, subject to a risk assessment.** (Repeated recommendation 2.48)

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.

2.40 *The number of complaints submitted had reduced considerably. Monitoring of trends had resulted in some action to address problem areas. Timeliness had improved but too few prisoners were satisfied with the fairness of complaints. Too many responses did not specifically address the matters raised and we were concerned that some serious complaints about staff had not been sufficiently well investigated or in some cases responded to at all.*

- 2.41** The overall management of complaints had improved. Analysis and monitoring of complaints had led to issues being investigated and action taken to address problem areas. Complaint forms were readily available but the number of complaints submitted had reduced considerably and was lower than at comparator prisons. Managers said that this was due to the introduction of the prisoner helpline, RALPH (see section on residential units), managers' forums for prisoners and the 'user voice' consultation group. The timeliness of responses had improved and most complaints were answered on time.
- 2.42** In our survey, fewer respondents who had made a complaint were satisfied with the fairness of responses, compared with those at comparator prisons. Many complaints we sampled did not answer the issue raised and demonstrated insufficient investigation, leading to prisoners having to submit subsequent complaints. We were concerned that a number of serious complaints about staff had not been referred to the police when interim responses indicated that they had been. Further, these complaints in general had not been sufficiently well investigated and in some cases had not been responded to at all. Quality assurance of complaints had not discovered the deficiencies we found.

Recommendation

- 2.43 All formal complaints from prisoners, including complaints about staff, should be fully investigated and provide a comprehensive response that answers all the issues raised.**

Legal rights

Expected outcomes:

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

- 2.44** *All applications for legal services were dealt with by offender supervisors. Access to legal visits was adequate. Processes for dealing with legal mail were not sufficiently robust.*

- 2.45** There were no trained legal services officers; offender supervisors handled all applications for legal services. A register of appellants was kept and there was no evidence that prisoners' cases were impeded in any way.
- 2.46** Legal visits took place in private rooms in the visits complex and access was adequate. In our survey, prisoners were more positive than at comparator prisons about all aspects of legal services. However, we found that the processes for dealing with legal mail were poor. Staff kept two records of legal mail that had been opened in error, but the records did not correspond with one another and in many cases the name of the prisoner whose mail had been opened was not recorded. All legal mail was checked by the drugs dog before distribution. Records in the mail room observation book indicated that legal mail was sometimes delayed by up to three days as the drugs dog was not available to check it. In addition, legal mail was sometimes damaged by the actions of the drugs dog.

Recommendations

- 2.47 Legal mail opened in error should be fully recorded in one central log.**

2.48 The delivery of legal mail to prisoners should not be delayed.

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.

2.49 *Despite staffing shortages, health services had improved considerably and were reasonably good overall, although prisoners' perceptions were largely negative. A recent health needs assessment and adverse incident reviews informed service delivery. There was good identification and management of prisoners with lifelong conditions. Support for those with complex health needs was impressive. Waiting times for primary care services were reasonable. Dental services were good, but prisoners with less than six months to serve received only emergency dental care, which was too restrictive. Medication management was much improved but some prisoners still experienced delays in receiving medication. There was insufficient mental health provision for the population and prisoners waited too long for transfer to external mental health facilities.*

Governance arrangements

- 2.50** NHS England (Shropshire and Staffordshire Area Team) commissioned Worcestershire Health and Care Trust (WHCT) to provide health services. Working relationships between the commissioners, prison and provider were good. A 2013 health needs assessment and effective health-specific prisoner consultation informed service delivery. Well-attended clinical governance and partnership board meetings covered requisite areas. The reporting, analysis and sharing of learning from adverse incidents were good.
- 2.51** Experienced clinical managers led service improvement. The integrated health team had a rich skill mix, but chronic staff shortages had adversely affected some areas, including mental health provision and lifelong condition reviews. Regular agency staff filled shortages. Nurses were available from 7am to 8pm on weekdays and from 7.30am to 5.30pm at weekends.
- 2.52** Health services staff had good access to training and clinical supervision and were clearly identifiable. The interactions between health services staff and prisoners were generally good. Formal care planning was well developed, and the clinical records we saw were good. Health services staff used a satisfactory range of relevant policies, including communicable disease management and safeguarding.
- 2.53** Newly arrived prisoners received written health information and health services staff provided a session about health services during induction. However, there was insufficient information displayed around the prison to remind prisoners about available services. Most services were provided from the main health centre, and three half-days weekly dedicated to clinics for the vulnerable prisoners unit ensured equitable access. Non-attendance at appointments was monitored.
- 2.54** The impressive health care environment included several well-equipped and maintained rooms in the health centre and on the wings. Regular infection control audits were completed and the standard of cleaning was generally adequate.

- 2.55** Health services staff had access to suitable, strategically placed and well-maintained emergency equipment; 98% of custodial staff were trained in first aid, and 88% in the use of automated external defibrillators, which were located on all residential units and at the gate. Call logs in the control room showed that ambulances were called promptly in emergencies.
- 2.56** A senior lead nurse for older prisoners and those with disabilities completed mobility and health aid assessments, and access was good. Older prisoners received comprehensive annual health screens and appropriate referral to relevant services. Staffing shortages had created an assessment backlog, which was being addressed, and those with clinical needs were prioritised. Joint working with the prison was effective.
- 2.57** Prisoners were aware of the confidential health care complaints system, and complaint forms were easily accessible. Information on how to complain to the Trust and access advocacy or the Trust patient advice and liaison services (PALS) was printed on complaint forms. The complaint responses we sampled were good.
- 2.58** The prison health promotion action group met regularly. The range of health promotion displays across the prison was good, supplemented by regular drop-in sessions. Smoking cessation support for all prisoners had recently restarted. Screening for blood-borne viruses was appropriate. Access to most immunisations was good and a drive to provide the full range of immunisation for younger and older adults was planned. Barrier protection was accessible but poorly advertised.

Housekeeping points

- 2.59** Information about the available health services, including nurse assessment, should be easily accessible across the prison.
- 2.60** Confidential access to barrier protection should be well advertised.

Delivery of care (physical health)

- 2.61** In our survey, prisoner satisfaction with the access to and quality of health care provision had improved but was worse than at comparator prisons. Most prisoners we spoke to were also negative about health services but reported considerable improvements on the previous year.
- 2.62** All new prisoners received a comprehensive health assessment, including mental health and learning disability screening, in reception and appropriate referrals were made. The range of primary care clinics was appropriate and waiting times were generally reasonable. Prisoners applied for services and received appointments using the custody management system (CMS) consoles (see section on residential units). Health services staff told us that their limited access to prison computers restricted their ability to communicate with prisoners via the CMS. Prisoner application orderlies had been introduced in October 2014 to deliver reminders of appointments, to reduce non-attendance.
- 2.63** Most requests for GP appointments received an initial nurse assessment. The nurse assessment was completed by well-trained staff and resolved most issues without the need to see a GP. Emergency GP and nurse appointments were available daily, and out-of-hours GP access was good.
- 2.64** Prisoners with lifelong conditions were identified in reception and added to a register. Those with complex or severe needs were prioritised for assessment, were allocated a named

nurse and received regular, face-to-face reviews, and were discussed at the regular complex care meeting, which was attended by representatives from relevant prison departments. The remainder had initial care plans generated from their clinical records and were added to the review list. Health services staff could not directly record in P-Nomis (electronic case notes), which made information sharing less effective.

- 2.65** The four daily slots for external appointments were rarely cancelled and the prison provided additional emergency escorts if required. However, there were too few slots for the demand, and in addition the prison was unable to arrange appointments at times when staff could be available, which generated a lot of cancellations and some long waits for appointments.

Recommendations

- 2.66** **Health services staff should be able to communicate easily with prisoners via the custody management system and be able to document directly into P-Nomis prisoner records.**
- 2.67** **Prisoners should have timely access to required external hospital appointments.**

Good practice

- 2.68** *The identification and management of prisoners with complex health needs ensured effective integrated care between health services and prison staff.*

Pharmacy

- 2.69** Lloyds pharmacy was located on-site and also provided pharmacy services for other, nearby prisons. Procedures for reordering medicines had improved but some prisoners still experienced delays in receiving medication. A part-time WHCT pharmacy technician had been employed to improve medicines management, but health services and pharmacy staff said that, as a result of poor communication between Lloyds and WHCT staff, there was a lack of continuity of medication for prisoners. Pharmacy staff told us that prisoners could see a pharmacist for routine advice; however, this service was not advertised.
- 2.70** Medicines were typically stored securely, but medicine trolleys were not routinely secured to the wall when not in use. Medicines were marked clearly with the patient's surname and stored in alphabetical order, but medication for different prisoners was not sufficiently well separated, which increased the potential for drug errors. Medication expiry dates and refrigerator temperatures were monitored and there were good stock reconciliation procedures. Controlled drugs were managed and stored correctly. A prescribing formulary and appropriate policies were used. Errors, near misses and drug alerts were managed effectively. Pharmacy audits were completed regularly.
- 2.71** In-possession risk assessments were usually, but not consistently, documented by the prescriber and reviewed appropriately, including pharmacy input if required. Medicines were administered on each wing at least twice daily, at clinically appropriate times. Supervised medication, controlled drugs and in-possession medication were dispensed separately, to reduce the risk of errors and manage queues.
- 2.72** Each administration area was clean, with hand sanitiser wipes available, and had several hatches, including a private booth for controlled drug administration. High levels of tradable

medications were prescribed for supervised consumption, but as the continuity of GPs improved they were better able to assess prisoners and were starting to allow possession of medication more often. Administration was reasonably well supervised by officers, but health services staff and prisoners receiving medication could be overheard by others, which compromised confidentiality.

- 2.73** Administration records were complete and prisoners who did not attend for medication were appropriately followed up. Out of hours, prisoners could only obtain over-the-counter medicines such as pain killers following a visit by the on-call GP, which was too limited.
- 2.74** A well-attended regular GP meeting, attended by pharmacy staff, discussed local medication issues, including prescribing data. This informed the quarterly medicine management committee meeting.

Recommendations

- 2.75** Prisoners should consistently receive their prescribed medication on time, without gaps in provision, and effective communication between health services and Lloyds staff should support this.
- 2.76** Suitable documented risk assessments should be carried out for all in-possession medication.
- 2.77** Prisoners should be able to collect their medication in private, with adequate confidentiality.
- 2.78** Prisoners should be able to access simple medication easily and safely when the health care department is closed.

Housekeeping points

- 2.79** Prisoner access to a pharmacist for routine advice about medicines should be well advertised.
- 2.80** Medicine trolleys should be secured to the wall when not in use.
- 2.81** Medicines for different patients should be clearly separated, to reduce the risk of a patient receiving the wrong medication.

Dentistry

- 2.82** WHCT provided eight dentist and eight dental therapist sessions weekly. Appointments were appropriately prioritised. A full range of NHS-equivalent dental treatment was available and waiting times were reasonable. The dental consultation and clinical records we saw were very good. However, prisoners with less than six months to serve were offered only emergency dental care, which excluded around 60% of the population and was too restrictive. Effective oral health promotion was provided.
- 2.83** The two dental surgeries and adjoining decontamination suite met best practice standards for infection control. All equipment was maintained appropriately and dental waste received professional disposal.

Recommendation

- 2.84 All prisoners should have access to routine NHS-equivalent dental care, regardless of time left in prison.**

Delivery of care (mental health)

- 2.85** In our survey, a similar number of prisoners to that at comparator establishments reported having emotional and mental health problems but fewer said that they had been helped by someone in the prison (37% versus 51%), although this figure was higher than at the time of the previous inspection (30%). The mental health team was well integrated into the prison. Most custodial staff had received some mental health awareness training in the previous three years.
- 2.86** All staff could refer prisoners for mental health support using a mini-assessment tool called the threshold assessment grid (TAG). The integrated mental health team (IMHT) prioritised cases based on the TAG score and past history.
- 2.87** The IMHT included a clinical psychologist, consultant psychiatrists and mental health nurses, although there was insufficient nurse and psychiatrist input for the size of the establishment. Prisoners waited 12–15 weeks for a routine psychiatrist appointment and 5–6 weeks for a routine nurse assessment. Clinical emergencies were prioritised, which increased routine waiting times.
- 2.88** There was a significant shortage of IMHT nurses, and they also supported primary care, which further reduced capacity. Consequently, the primary focus was on assessment, with limited opportunity for individual casework. The IMHT supported an average of 100 prisoners at any one time, of which about a third had severe and enduring mental health problems. The IMHT nurses were available daily and the care provided to those on their caseload was good. Care planning was generally good, but care programme approach reviews were not sufficiently multidisciplinary owing to a lack of staff.
- 2.89** All but one of the 11 transfers of prisoners to external mental health facilities since the previous inspection had been outside the Department of Health recommended timeframes, with most waiting over eight weeks to transfer.

Recommendations

- 2.90 Prisoners should have timely access to a full range of care-planned support, including multidisciplinary care programme approach reviews.**
- 2.91 Patients requiring transfer to external mental health facilities should be transferred within Department of Health timeframe guidelines.**

Catering

Expected outcomes:

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

2.92 *In our survey and groups, prisoners were very negative about the food provided. The meals served during the inspection were of adequate quality and portion sizes were reasonable but prisoners told us that this was not often the case. There was good consultation with prisoners about the food provided and it had resulted in some improvements.*

2.93 Prisoners in our groups were very negative about the quality and quantity of the food provided. In our survey, only 23% of prisoners said that the food was good or very good, which was worse than the comparator but better than at the time of the previous inspection.

2.94 The prison had carried out regular surveys of prisoners' views and the catering manager attended the prisoner consultative committee to collect prisoners' comments. Food comments books were available and regularly checked by catering staff. There had been some changes to menus and improvements in food provision.

2.95 The range of food provided was adequate, catering for a diverse population and providing a four-weekly menu cycle with enough healthy options. The food we tasted was adequate and portions were good during the inspection, but prisoners said that this was not often the case. Staff supervision of the serving of meals had improved considerably and the serveries were well attended by staff. Few prisoners had the option of communal dining. Meals were served at appropriate times.

2.96 One kitchen, run by Aramark, provided meals across the whole prison and was well equipped. Prisoners working in the kitchen were trained and could achieve formal qualifications, and some had gained employment with Aramark on leaving prison.

Recommendation

2.97 Prisoners should be able to dine communally.

Purchases

Expected outcomes:

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

2.98 *Arrangements for prisoners to make purchases were reasonable. The shop goods system had improved, but prisoners' perceptions of shop-related victimisation were higher than at comparator prisons.*

- 2.99** In our survey, prisoners were more positive than at comparator prisons and than at the time of the previous inspection about the range of goods available in the prison shop, but black and minority ethnic and Muslim men were less positive. Regular consultation arrangements were effective. Prisoners could make purchases from eight different catalogues, but were charged an administration fee.
- 2.100** New arrivals could wait 13 days for their first shop delivery, but were able to make two purchases from a choice of four 'reception packs', and could receive an advance of earnings for this purpose.
- 2.101** In our survey, more prisoners than at comparator prisons said that they had had their shop goods taken by other prisoners, particularly on Ash wing. The shop goods distribution system had changed in summer 2014, and this reduced the possibility of prisoners' high-value goods being identified at delivery and prisoners being victimised for their purchases immediately after delivery.

Recommendation

- 2.102 Prisoners should not be charged an administration fee when they make catalogue purchases.**

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

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

- 3.1** *Most of the population was employed full time, and the amount of time they had out of cell was good. Association and exercise were regular, but prisoners only had 30 minutes' outside exercise on weekdays.*
- 3.2** Most prisoners who were employed full time had around 10 hours out of their cell on weekdays, and around eight hours on Fridays and at weekends. At the time of the inspection, about 40 men were unemployed and had 4.5 hours out of cell on weekdays. Those on the basic regime who were not engaging with the basic intervention group (see section on incentives and earned privileges) had less than two hours out of cell each day, which was poor. By contrast, the 80 men on the enhanced Douglas wing had 12 hours out of cell on weekdays.
- 3.3** The number of prisoners locked up during our roll checks was much improved (18% compared with 37% at the time of the previous inspection) but was still too high. However, most men participated in an activity for at least part of the week.
- 3.4** The regime ran on time, and association and exercise were rarely cancelled. Exercise periods were too short, at 30 minutes, but this was mitigated for most, although not for segregated prisoners (see section on segregation), by long walks to activities.

Recommendation

- 3.5 All prisoners should have access to at least one hour's exercise each day.**
(Repeated recommendation 3.4)

⁵ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

Learning and skills and work activities

Expected outcomes:

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

3.6 *Learning and skills provision had improved but was still a work in progress and required further improvement. The number of activity places had increased and most prisoners were engaged in full- or part-time activity, although the quality of much work was mundane. A small number of prisoner peer support roles provided good personal development opportunities but were not all accredited or well enough supervised. Standards of teaching and learning were too variable, and too much required improvement. Prisoners' rate of progress and their educational and vocational achievements also required improvement. The quality of the library resources was good but they were underused.*

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

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

Management of learning and skills and work

3.8 The overall management, coordination and monitoring of the education, learning and skills provision had improved substantially since the previous inspection. The prison was working hard to improve the quality of the education, learning and skills provision but much was a work in progress and required further improvement, particularly to raise all prisoners' pass rates to a consistently high level. The education and vocational training provision provided by Milton Keynes College (MKC) required improvement.

3.9 The prison had established a monthly performance delivery and review (PDR) meeting, involving all key partners in the provision. This was an effective forum for performance monitoring and management. A wide range of data was available to the PDR and used well to gauge progress against targets but the PDR did not evaluate all qualitative aspects of the provision in sufficient depth. MKC's observation of teaching and learning scheme was comprehensive and led directly to constructive professional development support for teachers.

⁶ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.10** The allocations process for education, vocational training and work was fair and administered effectively, and we found 75% of prisoners engaged in activities during our spot checks. Waiting lists for vocational training courses were long but managed adequately. The pay rate for education sessions was too low in comparison with work and vocational training, which acted as a disincentive for prisoners considering taking education courses.
- 3.11** The turnover of MKC teaching staff had been high and had led to class cancellations but the situation had stabilised over the previous six months. All teaching staff were required to meet and maintain high performance standards.
- 3.12** Self-assessment was extensive and highly inclusive. It drew well on learner views, and the main judgements and grades awarded were accurate and based on robust and stringently applied criteria. However, aspects identified as needing improvement and the actions required were not always evaluated in sufficient depth. The final self-assessment report was not sufficiently succinct and prioritised. Quality improvement action planning arrangements were comprehensive but much was a work in progress and had not had sufficient impact on improving the provision.
- 3.13** None of the teachers promoted equality and diversity sufficiently in classroom and workshop-based sessions but there were adequate arrangements to celebrate diversity more generally throughout the year, through themed events and celebrations.
- 3.14** The safety and security arrangements for prisoners and teaching staff during classroom-based sessions in particular had been revised and improved, but still required a consistency of approach by all teachers. Some prisoners were being allowed to work without wearing the personal protective equipment provided and the quality of some risk assessments was poor

Recommendations

- 3.15** **The prison should evaluate the qualitative aspects of the learning, skills and work provision more extensively from day to day and during self-assessment to identify successful and unsuccessful practice and how to improve it.**
- 3.16** **The pay structure in education should be equitable with that in other purposeful activity areas.** (Repeated recommendation 3.18)
- 3.17** **All teaching staff should be trained in, and confident about, promoting equality and diversity during learning sessions.**
- 3.18** **All purposeful activity in workshops should be thoroughly risk assessed and the use of personal protective equipment fully enforced.**

Provision of activities

- 3.19** A new curriculum model had been introduced in July 2014 and had achieved its aim of enabling a greater number of prisoners to access a wider range of education courses and structured learning pathways. Labour market information was used well to inform curriculum planning and delivery. The education and training curriculum matched the needs of prisoners reasonably well but there were insufficient higher-level options.

- 3.20** The number of full-time activity places had increased and there were sufficient for about 84% of the prison population. Around half the places were in education, training and workshops. A successful strategy was providing a very high proportion of the working-age prison population with either part- or full-time activity – for example, an education session in the morning and work in the afternoon. However, too much prison work was mundane and undemanding, consisting mainly of recycling, assembly work, contract services and wing-based cleaning and painting (see main recommendation S62).
- 3.21** A wide range of vocational training courses was offered, including construction skills, catering and hospitality, barbering, music technology, horticulture, window fitting and electrical installation. Vulnerable prisoners could attend accredited vocational activities but their choices were narrow and take-up was low.
- 3.22** A few prisoners were involved in peer mentoring and support roles – for example, working on RALPH (Resettlement Advice Line and Prisoner Helpline; see also section on residential units), which provided good opportunities for personal development and responsibility. However, too few of the roles involved formal training and accreditation and not all were supervised.

Recommendations

- 3.23** **The curriculum should be expanded further to include a greater proportion of level 3 courses.**
- 3.24** **A greater range of vocational training places for vulnerable prisoners should be provided.**
- 3.25** **Prisoners with mentoring and coordination roles should receive appropriate training and accreditation and should be supervised effectively.**

Quality of provision

- 3.26** The quality of teaching, learning and assessment in vocational training sessions ranged from good to ‘requires improvement’ (see main recommendation S62); the less effective sessions suffered from instances of poor classroom management, while in the better ones prisoners enjoyed their learning and progressed well.
- 3.27** The quality of teaching, learning and assessment in education sessions was too variable, ranging from outstanding to a small minority that were inadequate (see main recommendation S62). In the better sessions, prisoners had individualised plans and targets which they understood, worked towards and achieved. The best teachers knew and engaged with prisoners well, using a wide range of tailored and more general activities. In the less effective sessions, prisoners did not know what was expected of them, lacked engagement and became bored; such sessions lacked direction and prisoners were not making the progress expected.
- 3.28** Most prisoners were very complimentary about their teachers and the positive impact they felt they were having on their learning. In most cases, teachers enabled prisoners to explore their current knowledge and extend their understanding, as appropriate to the qualification. However, there was little evidence of teachers extending this knowledge or stretching and challenging the more able prisoners beyond the minimum required. Prisoners were able to develop employability skills in only a minority of lessons. Functional English skills were integrated well into most lessons, but this was not the case for mathematics.

- 3.29** Individual learning plans (ILPs) were not valued by all teachers or prisoners as tools for promoting progress and achievement. Target setting in ILPs was not always specific and time-bound. The personal and social targets identified were often generic rather than individualised.
- 3.30** Teachers' verbal feedback was good in many sessions but there was minimal written feedback, and it concentrated too much on spelling rather than constructive criticism to support progress. Grammatical errors were not identified or corrected. Some teachers' spelling was poor.
- 3.31** A team of additional learning support (ALS) staff and teachers had been appointed recently but the links between the team and teachers were not well developed. Teachers were not all clear about how best to use the resources provided by the ALS team to support prisoners during sessions.
- 3.32** Formal support for prisoners on distance learning and Open University courses had improved following the appointment of a coordinator in June 2013.
- 3.33** Prisoners received too little information about the content and potential benefit of education classes at their initial and second education induction and were unable to make sufficiently informed choices about which ones to choose. An innovative prisoner-led initiative was beginning to provide useful support and advice for unemployed prisoners to persuade them to engage in learning and development activities.

Recommendations

- 3.34** **Functional mathematics and employability should be included seamlessly in a wide range of education and vocational training courses.**
- 3.35** **The prison should review and improve the use of individual learning plans and ensure that all prisoners are set short-, medium- and long-term targets that they understand, work towards, achieve and value.**
- 3.36** **The education and training provider should improve the quality of verbal and written feedback to prisoners to ensure that they understand how to progress and improve.**
- 3.37** **The additional learning support provision should be integrated better and used more effectively to promote and support learning in classroom sessions.**
- 3.38** **Initial advice and guidance should ensure that prisoners understand better each course's requirements and potential benefits, to promote their involvement in the appropriate learning activities.**

Education and vocational achievements

- 3.39** Prisoners' pass rates across the whole range of education courses required improvement, as they were too variable and not consistently high enough (see main recommendation S62). Pass rates were generally good on entry-level functional mathematics courses, but required improvement on entry-level functional English courses. The standard of prisoners' work in education classes was at the expected level for the qualification. Overall, education course pass rates were divided approximately equally between high and 'requires improvement'. MKC data indicated that prisoners' overall pass rates on education courses in the current

academic year to date were considerably higher than in the same period in the previous academic year.

- 3.40** By contrast, pass rates on most vocational skills courses were consistently high and prisoners' work sometimes exceeded the requirements of the qualification.
- 3.41** More prisoners than at the time of the previous inspection progressed to successive levels of learning or structured learning pathways, but the proportion was still low and too many prisoners took too few courses.
- 3.42** Prisoners' attendance at classroom and workshop training sessions had improved substantially, to around 80% on average, but required further improvement. Attendance at education classes during the inspection was frequently low. Prisoners' behaviour in education and training sessions was good. Teachers managed and challenged instances of inappropriate behaviour well.
- 3.43** The number of prisoners withdrawn from functional skills classes (for example, for poor behaviour or wanting to leave the course) had dropped considerably since the start of the current academic year. Effective sanctions were in place for non-attendees.

Recommendations

- 3.44** **The number of prisoners who progress between successive levels of learning and along structured learning pathways should be increased significantly.**
- 3.45** **Prisoners' attendance at all learning sessions should be improved further.**

Library

- 3.46** The library, provided by Staffordshire County Library Service, was a good but underused facility. It had sufficient staff, was sited in a clean and bright area of the prison, and was available through timetabled and drop-in access each weekday.
- 3.47** The library stocked an adequate range of fiction, non-fiction, audio-books, legal texts and foreign language publications, and there were good inter-library lending arrangements. Music CDs and DVDs were not currently available. Reading and creative writing groups were active and the Storybook Dads scheme (in which prisoners record stories for their children) had been successful and was being developed further. The Toe by Toe scheme coordinated by the Shannon Trust was successful, and involved 44 mentors and 24 mentees.
- 3.48** Timetabled options for access to the Library were not well understood by all prison staff and prisoners. Library inductions had virtually ceased by the middle of 2014 but had subsequently been reinstated. The total numbers of library visits and loans had declined in 2013/14 and had not improved in 2014 to date. Library staff recognised that they needed to promote the service more actively and widely to prison staff and prisoners.

Recommendations

- 3.49** **The library service should produce and analyse comprehensive datasets on prisoner visits and lending to identify trends and improvement actions.**

- 3.50** Library service staff should promote the library more effectively and more widely to increase prisoners' access to, and usage of, the facility.

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.

3.51 *Only just over a third of the prison population used the PE facilities regularly – a slightly smaller proportion than at the time of the previous inspection. All prisoners were timetabled at least two PE sessions a week. The indoor facilities were good and well equipped, but too small to cater for the prison population. PE sessions were well planned and managed. An adequate range of vocational PE courses was offered and pass rates were high.*

- 3.52** PE provision was promoted adequately to prisoners through induction during their first week at the prison. However, only just over a third used the main facility regularly – a slightly smaller proportion than at the time of the previous inspection. Prisoners had access to some basic fitness equipment on the wings during association time, but some of it was broken. All prisoners were timetabled at least two PE sessions a week, which was an improvement on the previous inspection. Plans to secure additional funding and expand the facilities were in place but had not yet been realised.
- 3.53** PE staff were appropriately experienced and qualified. The quality of the equipment and the gym facilities, which included a well-appointed changing room, were very good. However, the gym was too small for the numbers wanting to use it, and often became crowded and noisy. Four outdoor all-weather sports pitches were used well. Competitive football matches were hosted against teams from a local football league, which helped to promote community links.
- 3.54** Staff worked in partnership with the health care department to provide well-structured, timetabled training for older prisoners, those with a disability or those requiring remedial PE.
- 3.55** Prisoners had good access to an adequate range of accredited vocational and recreational PE training courses. Sessions were well planned and well managed, making best use of the facilities and staff time. Prisoners' pass rates on these courses were high, averaging 91% for those who completed them. The quality of teaching and learning on training courses was not formally observed by PE or prison managers, although plans to carry out observations were well advanced.
- 3.56** A resettlement project ('Second Chance') had been effective in helping prisoners to find employment in leisure-related industries but this was not linked to the National Careers Service provision in the prison, which would have maximised the range of resettlement opportunities and avoided duplication of effort.

Recommendations

- 3.57** The prison should increase the size of the gym so that a much greater percentage of the prison population can use it.
- 3.58** The prison should plan and carry out formal observations of teaching and learning for all PE staff who teach training courses.

3.59 Links between 'Second Chance' and the National Careers Service should be created, to maximise resettlement opportunities and to avoid unnecessary duplication of effort.

Housekeeping point

3.60 Fitness equipment in residential areas should be kept in good repair.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

4.1 *The strategic management of resettlement had improved considerably, with clear strategies and good management processes.*

4.2 Since the previous inspection, a strategy for reducing reoffending, which addressed all the resettlement pathways, had been developed. It had been informed by induction assessments and offender assessment system (OASys) data. It was complemented by a separate resettlement policy which described how services were organised and developed.

4.3 There were identified members of staff responsible for each resettlement pathway and appropriate developmental objectives had been identified in an action plan. There was good contact with a range of external providers to deliver some resettlement services.

4.4 A monthly meeting of the reducing reoffending group managed the provision. This group included the lead staff for each pathway, senior managers and external provider.

4.5 There were systems for identifying and assessing those who needed sex offender programmes, and suitable prisoners were transferred to treatment centres in other prisons in a timely fashion. Those who were not suitable for programmes had access to other interventions in the prison that were appropriate to their offending needs.

4.6 Release on temporary licence (ROTL) was not used as part of the strategy, although it was available for compassionate reasons, and the emphasis was on ensuring that good recategorisation processes were in place, leading to prompt transfer to open conditions (see section on offender management and planning).

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 *Offender management and planning had improved but there was a backlog of offender assessment system (OASys) assessments and home detention curfew assessments. The quality of assessment and planning was improving but needed to develop further. Levels of contact between the offender management unit and prisoners were reasonable. Public protection processes were mostly good but inadequate communication from community offender managers impeded risk prevention planning. Categorisation processes were good, and a helpful range of facilities for indeterminate-sentenced prisoners had been developed.*

4.8 Offender management had improved considerably. In our survey, far more prisoners than at comparator prisons and than at the time of the previous inspection said that they had an offender supervisor in the prison (86% versus 72% and 48%, respectively) and that they had a sentence plan (75% versus 70% and 43%, respectively). Of those with a plan, 42% said that their offender supervisor was helping them to achieve their targets, against the 35% comparator and 27% at the time of the previous inspection. Prisoners also reported better contact with their offender manager, with 37% saying that they had been visited by them, compared with 21% at the time of the previous inspection.

4.9 The offender management unit (OMU) had been given appropriate priority, with a considerable reduction in staff redeployment and an increase in training opportunities to improve the skills of offender supervisors and administrative staff. Offender supervisors told us that they were well supported and received feedback on the quality of their work, which made them feel more confident in the role.

4.10 However, the department had a backlog of 241 OASys assessments, including 79 with no assessment at all. A total of 103 of these were the responsibility of external offender managers and, although they were being chased by OMU staff, there was no strategic relationship with Probation Services to resolve the issue. There were also 43 prisoners beyond their home detention curfew (HDC) eligibility date.

4.11 The problem of backlogs was caused by regular drafts of prisoners received from local prisons without an up-to-date OASys assessment. Many of these occurred after a HDC assessment should have started and with recategorisation reviews overdue, and this created extra work for the prison to catch up. In the previous two months, 11 of the 43 prisoners received who would have been eligible for HDC were past the eligibility date and another 16 were within the time window when the assessment process should have begun. These delays hindered prisoners' ability to progress.

4.12 In our inspection of cases and discussions with prisoners, we found that levels of contact with, and accessibility to, the OMU had improved and were reasonable, with weekly wing surgeries and the introduction of RALPH (Resettlement Advice Line and Prisoner Helpline), which was provided by prisoners in the resettlement department and attended four days a week by offender supervisors (see also section on residential units).

- 4.13** The quality of OASys assessments and sentence planning was variable, but reasonable in many cases and had improved since the previous inspection. However, many assessments were too reliant on the prisoner's views and did not take a sufficiently objective approach to reaching an assessment about the nature and causes of offending behaviour.
- 4.14** The quality of HDC assessments and processes were good, although they were not timely (see above). Decisions had been appropriate in the cases we examined.

Recommendations

- 4.15 All prisoners should have an offender assessment system (OASys) assessment and sentence plan.**
- 4.16 The prison should initiate a strategic relationship with local Probation Services to address issues of planning and communication.**
- 4.17 HDC decisions should be made before a prisoner reaches his eligibility date.**

Public protection

- 4.18** Arrangements for identifying prisoners who presented a high risk of harm to the public or to known victims were sound, and safeguarding and monitoring measures were appropriate. Restrictions were monitored and reviewed through the monthly inter-departmental risk management team meetings, which were effective; release arrangements for high-risk prisoners were also reviewed there.
- 4.19** Prisoners subject to restrictions were informed of the reasons and could apply for contact with children. Appropriate checks with carers and social services were undertaken before contact was allowed.
- 4.20** In the cases we examined, assessments of risk of harm were reasonable, with appropriate risk management plans. However, in spite of the best efforts of offender supervisors, we found examples of cases where communication from community offender managers, particularly in relation to high-risk prisoners, had been inadequate. Risk information to inform pre-release planning had been difficult to obtain and in some cases the offender manager responsible had been hard to identify.

Recommendation

- 4.21 Communication from community offender managers before release should be improved to enable more effective pre-release planning, particularly for high-risk prisoners.**

Categorisation

- 4.22** Categorisation processes were timely, thorough and inclusive. Information was gained from the OMU and other prison departments, and prisoners made submissions and were invited to attend the categorisation board so that they could engage directly with the decision-making process. The categorisation decisions we examined had been appropriately assessed and fair, with reasons clearly outlined for the prisoner.

- 4.23** There were fewer category D prisoners at the prison than at the time of the previous inspection. When prisoners were recategorised to category D, they were mostly moved to open conditions within four weeks, with appropriate exceptions, such those who were completing programmes. In the previous two months, 54 prisoners had moved to open conditions.

Indeterminate sentence prisoners

- 4.24** The prison held 153 indeterminate-sentenced prisoners (ISPs) – 89 serving life sentences and 64 indeterminate sentences for public protection (IPP). Their sentence planning was managed by a dedicated team of probation officer offender supervisors, and their residential needs by a custodial manager. Parole dossiers were prepared on time.
- 4.25** Since the previous inspection, specific services for ISPs had been developed. Enhanced accommodation (on Douglas wing) was available for them; this provided extended time unlocked and access to recreational facilities, some self-catering opportunities and prisoner involvement in the management of the wing.
- 4.26** Prisoner ISP representatives were present on all wings and they met in a monthly consultation group with prison managers. Prisoner representatives assured us, and minutes confirmed, that the meetings were effective and valued.
- 4.27** In school holidays, ISP family visits were held, which included a full day of activities provided by the PE department. In addition, ISP prisoners had been taken on accompanied temporary release to view an open prison, followed by a visit to Oakwood by prisoners in open conditions to speak to ISPs; however, this initiative had ceased when accompanied temporary release had been suspended.
- 4.28** In spite of the wide range of provision for them, we met a number of ISPs who were disaffected and reluctant to engage. Efforts had been made to communicate with all ISPs but attendance at consultation meetings and family days was surprisingly low.

Recommendation

- 4.29** **Subject to appropriate risk assessments, the good initiative to liaise with an open prison should be continued, to provide regular events for prisoners about living in open conditions.**

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.

4.30 *There were good systems, supported by an effective group of prisoners, to identify and respond to resettlement needs. An effective accommodation and debt advice service was provided by the resettlement team. National Careers Service and virtual campus provision required improvement to provide a comprehensive education, training and employment service. Pre-discharge health care provision was comprehensive and there were links with post-release palliative care services. Pre-release and community links arrangements for prisoners with substance misuse issues were impressive, and links with families excellent. Visiting arrangements were good; provision under this pathway had improved and, although in its infancy, the use of Elm wing as a family unit looked promising. The family pathway centre was an excellent facility, providing good support to prisoners' families. There was a wide range of family-based visits but these were restricted to enhanced prisoners. Appropriate accredited offending behaviour programmes were available and a range of non-accredited interventions were used effectively.*

4.31 A group of prisoner resettlement coordinators provided a valuable service, meeting all new prisoners during induction to assess their resettlement needs, checking outstanding needs three months before release and making referrals to the three resettlement staff as required. They had been trained and were overseen by the resettlement manager, who was aware of the risks of using prisoners in such an influential role, and selected them carefully and monitored their performance closely. However, we still had reservations about the confidentiality of some of the information that prisoners were asked to share with the resettlement coordinators, especially around medical matters and safety, and the prison were actively addressing this during our inspection.

4.32 The resettlement coordinators also ran the RALPH telephone helpline, which provided valuable support across a range of subjects, including offender management, resettlement and routine information about the regime (see also section on residential units).

4.33 Arrangements immediately before release had been developed and prisoners due for discharge were invited to attend a 'through-the-gate' meeting with resettlement and admissions staff. Practical arrangements and concerns were addressed, such as travel and clothing, as well as fears about release after a long time in custody and how to ensure that they complied with post-custody supervision.

Good practice

4.34 *The resettlement coordinator prisoners were trained and supervised to a good level. The support and advice they provided to prisoners, including through the RALPH telephone helpline, was helpful across a range of areas.*

Accommodation

4.35 Accommodation advice and support were provided by resettlement prison custody officers, who received referrals from induction assessments, the RALPH helpline and residential staff. Initial needs, such as maintaining tenancies or rent arrears, were usually dealt with on arrival

but this help was also provided pre-release if required. Accommodation staff had built up a comprehensive database of resources in areas to which prisoners were most commonly released, including specialist provision for those with care needs or at risk. They recorded the details of prisoners who had no address on admission and then contacted them in good time before release to check whether they needed the help of the resettlement team. A record was kept of those released without permanent accommodation, which was maintained at a reasonable average of 5%; such prisoners were provided with advice and directed to the local authority homelessness team in the area to which they were returning.

- 4.36** In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection knew where to get help with accommodation (46% versus 37% and 21%, respectively).

Education, training and employment

- 4.37** The quality of the National Careers Service (NCS), which was subcontracted by Prospects to the Coventry Solihull Warwickshire Partnership, required improvement. Staff from the NCS were working with those from Jobcentre Plus and Pertemps to produce a 'rounded' programme for prisoners on release, but currently offered no employability skills development, other than CV writing. There were too few links with employers.
- 4.38** The virtual campus (internet access for prisoners to community education, training and employment opportunities) was operational, but was not used to its full potential. It was used mainly for online assessment of educational levels and not at all for resettlement purposes. NCS staff had received no training in how best to use this facility. Access to virtual campus content and its speed of response were hampered by slow broadband speeds at times of peak demand. The prison was lobbying for investment to improve capacity.

Recommendations

- 4.39** **A full programme of employment, training and education courses should be developed and tailored to prisoners' needs before their release.**
- 4.40** **The virtual campus should be used to provide job search opportunities.**
- 4.41** **National Careers Service staff should be competent in the best use of the virtual campus facility.**

Health care

- 4.42** All prisoners were seen by health services staff before release and received relevant health information, including on how to register with community services. Discharge planning for prisoners with complex health needs started early and we saw two cases where appropriate safeguarding referrals had been made to the local council to ensure that the prisoners received adequate housing and health care support on release. Prisoners being released received a week's supply of medication and a discharge summary to take to their GP.
- 4.43** Links with local palliative care services were good and a local palliative care and end-of-life policy was being developed jointly.

Drugs and alcohol

- 4.44** Pre-release sessions and community reintegration of prisoners with substance misuse problems were impressive. They had been enhanced by the employment of a dedicated community liaison worker, who engaged with the principal drug intervention teams in the community to facilitate smooth transition of care. The integrated substance misuse team had started work in the family pathway centre (external to the prison; see also section on children, families and contact with the outside world), where prisoners' relatives were educated about substance misuse services and the treatment being given to their family member, and supported to share their concerns and gain help.

Good practice

- 4.45** *Excellent work was carried out outside of the prison to improve the transition of care for prisoners with substance misuse problems and to engage and support their families.*

Finance, benefit and debt

- 4.46** In our survey, more prisoners than at comparator prisons and than at the time of the previous inspection knew how to get help with finances (41% versus 26% and 16%, respectively) and benefits (52% versus 39% and 22%, respectively).
- 4.47** Resettlement officers contacted creditors on behalf of prisoners with outstanding debt issues, and courts for those with outstanding fines. For prisoners with more intractable debt problems, ongoing casework was provided.
- 4.48** Jobcentre Plus staff visited the prison regularly to provide advice and set up appointments to make benefits claims for prisoners due for release.
- 4.49** Prisoners without a bank account could open one before release but only on completion of a money management course. There had been some disruption in the provision of the course, and this had led to a reduction in the number of bank accounts opened, from an average of 25 a month to 10 but we were told that the matter would be resolved over the next few months.

Children, families and contact with the outside world

- 4.50** Visiting arrangements were good, with visits sessions daily, including evening visits four days a week. The family pathway centre had been set up as a community centre and was large and clean. It provided an excellent and welcoming environment for prisoners' families and friends. It was run by HALOW (Birmingham) (Help and Advice Line for Offenders Wives) and staff there offered information, support and signposting to all visitors. Staff from an external organisation, Brompton Support, attended the centre weekly to provide advice to prisoners' families across a range of areas. The substance misuse team provided a drop-in service in the centre twice a month for prisoners' families (see above). A regular survey was carried out among visitors, and a visitors helpline was provided.
- 4.51** Prisoners booked visits through the custody management system (CMS) consoles on each wing (see section on residential units) but complained that there was insufficient capacity at weekends, when demand was highest.

- 4.52** Visits generally started on time, and all visitors and prisoners we spoke to were positive about their experience and said that they were treated well by staff. There were two visits halls; the larger of these was institutional in appearance but had a children's play area and a new refreshment facility. The smaller visits area was less formal, with soft furnishings, and was used for family visits. Prisoners were allowed to have reasonable physical contact with their visitors and but had to wear identifying sashes, including during family visits, despite the biometric identification systems in place.
- 4.53** The provision and range of family visits was very good and included father and baby bonding, teenager and faith-based visits. However, these visits were restricted to enhanced prisoners only.
- 4.54** The recent opening of Elm wing, as a facility to support family engagement, was a welcome initiative and it was open to all prisoners. Prisoners residing on the unit received regular family visits, and prisoner orderlies provided good support and information to them. Work had been undertaken with troubled families and good links had been made with local authorities, social services and child protection units in the community, to provide support to some individual prisoners and their families.

Recommendations

- 4.55** **Managers should investigate the need for additional visits capacity at weekends.**
- 4.56** **Access to enhanced family visit days should be extended to all prisoners.**

Housekeeping point

- 4.57** Prisoners should not be required to wear identifying sashes during visits.

Attitudes, thinking and behaviour

- 4.58** Participation in offending behaviour programmes had improved considerably, with 76% of prisoners in our survey saying that they had been involved in a programme, against the 72% comparator and 58% at the time of the previous inspection.
- 4.59** The prison provided two accredited programmes: the thinking skills programme (TSP) and the Resolve violence reduction programme. A needs analysis had shown that these were appropriate for the population, and waiting lists were manageable. There were 162 places provided in accredited programmes each year.
- 4.60** The six-week Chrysalis programme was a valuable personal development programme, based on the concept of the 'seven habits of effective people'. It was offered to those who did not meet the criteria for TSP and Resolve. It was popular and well used, with 122 completions in the previous eight months.
- 4.61** Victim awareness was addressed through in-cell workbooks, and a restorative justice project in partnership with a local police force. A Gamblers Anonymous group visited the prison every two weeks to meet a small group of prisoners.
- 4.62** Two new initiatives were being developed: Bringing Hope was a personal development programme being introduced by an external organisation, and there were regular meetings of the Cordial group for isolated prisoners (see section on bullying and violence reduction).

Section 5. Summary of recommendations and housekeeping points

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

Main recommendation

To Ministers

- 5.1** There should be a review undertaken and published of the difficulties Oakwood and other recently opened prisons experienced after they opened; and the lessons learned factored into plans for the opening of other new establishments. (S57)

Main recommendations

To the director

- 5.2** Only prisoners requiring the segregation and protection of a vulnerable prisoner wing should be located on Ash wing and their allocation should be subject to review. Bullying and intimidation should be addressed and action should be taken to make the wing safer. (S58)
- 5.3** The quality of care for prisoners at risk of suicide and self-harm, evidenced in written assessment, care in custody and teamwork (ACCT) processes, should be improved and should focus on the underlying causes of distress. (S59)
- 5.4** Incidents of use of force should be monitored and quality assured to ensure that de-escalation is employed and that force is only used as a last resort. All complaints about excessive force should be thoroughly investigated. (S60)
- 5.5** Regular consultation arrangements with black and minority ethnic prisoners, Muslims and prisoners with a disability should be put in place and action taken to improve the perceptions and outcomes for these groups. (S61)
- 5.6** The number of high-quality work places should be increased. Standards of teaching and learning and the level of achievements should be improved. (S62)

Recommendation

to NOMS

Offender management and planning

- 5.7** Communication from community offender managers before release should be improved to enable more effective pre-release planning, particularly for high-risk prisoners. (4.21)

Recommendations

To the director

Early days in custody

- 5.8** All induction cells should be clean and well decorated before being occupied. (I.13)

Bullying and violence reduction

- 5.9** The quality of antisocial behaviour books and support plans should be improved, to challenge poor behaviour and support victims. (I.22)

Self-harm and suicide

- 5.10** The exceptional circumstances to approve the location of prisoners on ACCT documents on the segregation unit should be better evidenced in assessments. (I.30)

Safeguarding

- 5.11** Local safeguarding adults processes should be developed further and wing staff should be more aware of the procedures. (I.35)

Security

- 5.12** Prisoners should only be strip-searched when there is specific intelligence to suggest that it is necessary. (I.44)
- 5.13** Closed visits should only be used when there is evidence that a prisoner has abused visits arrangements. (I.45)

Incentives and earned privileges

- 5.14** The regime for those on the basic regime should be improved to include the opportunity for at least one hour in the open air and access to association. (I.51)

Discipline

- 5.15** There should be a quality assurance process for adjudications which results in learning for all staff involved in adjudications. (I.56)
- 5.16** The prison should investigate the reasons for the high rates of segregation, the volume of transfers out of the segregation unit and poor prisoner perceptions about the unit, and take step to improve outcomes. (I.66)
- 5.17** Staff working in the segregation unit should receive additional training and support to help them care for challenging prisoners. (I.67)
- 5.18** Management oversight of the segregation unit should be improved and staff should not refuse prisoners access to telephones, exercise or any other regime element without the recorded authority of a first-line manager. (I.68)

Substance misuse

- 5.19** The prison should consider creating a drug-free area better to support prisoners choosing abstinence. (1.75)

Residential units

- 5.20** The applications system should be improved with a tracking system and quality assurance. (2.8, repeated recommendation 2.12)

Staff-prisoner relationships

- 5.21** Prisoner council representatives should be provided with T-shirts to identify them and which promote their role. (2.14)

Equality and diversity

- 5.22** Community organisations should be involved in helping to develop equality and diversity practice. (2.21)
- 5.23** Paid carers should receive training for their role and the carer scheme should have better oversight from staff. (2.32)
- 5.24** Older prisoners and those with disabilities who are not attending work and are unlocked during the day should be provided with recreational activity. (2.33)

Faith and religious activity

- 5.25** The prison should ensure that all prisoners who wish to attend services can do so, and on time, subject to a risk assessment. (2.39, repeated recommendation 2.48)

Complaints

- 5.26** All formal complaints from prisoners, including complaints about staff, should be fully investigated and provide a comprehensive response that answers all the issues raised. (2.43)

Legal rights

- 5.27** Legal mail opened in error should be fully recorded in one central log. (2.47)
- 5.28** The delivery of legal mail to prisoners should not be delayed. (2.48)

Health services

- 5.29** Health services staff should be able to communicate easily with prisoners via the custody management system and be able to document directly into P-Nomis prisoner records. (2.66)
- 5.30** Prisoners should have timely access to required external hospital appointments. (2.67)
- 5.31** Prisoners should consistently receive their prescribed medication on time, without gaps in provision, and effective communication between health services and Lloyds staff should support this. (2.75)

- 5.32** Suitable documented risk assessments should be carried out for all in-possession medication. (2.76)
- 5.33** Prisoners should be able to collect their medication in private, with adequate confidentiality. (2.77)
- 5.34** Prisoners should be able to access simple medication easily and safely when the health care department is closed. (2.78)
- 5.35** All prisoners should have access to routine NHS-equivalent dental care, regardless of time left in prison. (2.84)
- 5.36** Prisoners should have timely access to a full range of care-planned support, including multidisciplinary care programme approach reviews. (2.90)
- 5.37** Patients requiring transfer to external mental health facilities should be transferred within Department of Health timeframe guidelines. (2.91)

Catering

- 5.38** Prisoners should be able to dine communally. (2.97)

Purchases

- 5.39** Prisoners should not be charged an administration fee when they make catalogue purchases. (2.102)

Time out of cell

- 5.40** All prisoners should have access to at least one hour's exercise each day. (3.5, repeated recommendation 3.4)

Learning and skills and work activities

- 5.41** The prison should evaluate the qualitative aspects of the learning, skills and work provision more extensively from day to day and during self-assessment to identify successful and unsuccessful practice and how to improve it. (3.15)
- 5.42** The pay structure in education should be equitable with that in other purposeful activity areas. (3.16, repeated recommendation 3.18)
- 5.43** All teaching staff should be trained in, and confident about, promoting equality and diversity during learning sessions. (3.17)
- 5.44** All purposeful activity in workshops should be thoroughly risk assessed and the use of personal protective equipment fully enforced. (3.18)
- 5.45** The curriculum should be expanded further to include a greater proportion of level 3 courses. (3.23)
- 5.46** A greater range of vocational training places for vulnerable prisoners should be provided. (3.24)

- 5.47** Prisoners with mentoring and coordination roles should receive appropriate training and accreditation and should be supervised effectively. (3.25)
- 5.48** Functional mathematics and employability should be included seamlessly in a wide range of education and vocational training courses. (3.34)
- 5.49** The prison should review and improve the use of individual learning plans and ensure that all prisoners are set short-, medium- and long-term targets that they understand, work towards, achieve and value. (3.35)
- 5.50** The education and training provider should improve the quality of verbal and written feedback to prisoners to ensure that they understand how to progress and improve. (3.36)
- 5.51** The additional learning support provision should be integrated better and used more effectively to promote and support learning in classroom sessions. (3.37)
- 5.52** Initial advice and guidance should ensure that prisoners understand better each course's requirements and potential benefits, to promote their involvement in the appropriate learning activities. (3.38)
- 5.53** The number of prisoners who progress between successive levels of learning and along structured learning pathways should be increased significantly. (3.44)
- 5.54** Prisoners' attendance at all learning sessions should be improved further. (3.45)
- 5.55** The library service should produce and analyse comprehensive datasets on prisoner visits and lending to identify trends and improvement actions. (3.49)
- 5.56** Library service staff should promote the library more effectively and more widely to increase prisoners' access to, and usage of, the facility. (3.50)

Physical education and healthy living

- 5.57** The prison should increase the size of the gym so that a much greater percentage of the prison population can use it. (3.57)
- 5.58** The prison should plan and carry out formal observations of teaching and learning for all PE staff who teach training courses. (3.58)
- 5.59** Links between 'Second Chance' and the National Careers Service should be created, to maximise resettlement opportunities and to avoid unnecessary duplication of effort. (3.59)

Offender management and planning

- 5.60** All prisoners should have an offender assessment system (OASys) assessment and sentence plan. (4.15)
- 5.61** The prison should initiate a strategic relationship with local Probation Services to address issues of planning and communication. (4.16)
- 5.62** HDC decisions should be made before a prisoner reaches his eligibility date. (4.17)
- 5.63** Subject to appropriate risk assessments, the good initiative to liaise with an open prison should be continued, to provide regular events for prisoners about living in open conditions. (4.29)

Reintegration planning

- 5.64** A full programme of employment, training and education courses should be developed and tailored to prisoners' needs before their release. (4.39)
- 5.65** The virtual campus should be used to provide job search opportunities. (4.40)
- 5.66** National Careers Service staff should be competent in the best use of the virtual campus facility. (4.41)
- 5.67** Managers should investigate the need for additional visits capacity at weekends. (4.55)
- 5.68** Access to enhanced family visit days should be extended to all prisoners. (4.56)

Housekeeping points

Courts, escort and transfers

- 5.69** Escort vans should be clean and free of graffiti. (1.4)

Early days in custody

- 5.70** The style of delivery of all induction sessions should maximise prisoner engagement. (1.14)

Self-harm and suicide

- 5.71** A localised suicide and self-harm prevention strategy should be developed. (1.31)

Security

- 5.72** Relevant intelligence should be routinely disseminated to offender supervisors. (1.46)

Equality and diversity

- 5.73** The equality survey should be analysed and the findings used to inform the equality action plan. (2.22)
- 5.74** Night staff should be aware of the location of personal emergency and evacuation plans. (2.34)

Health services

- 5.75** Information about the available health services, including nurse assessment, should be easily accessible across the prison. (2.59)
- 5.76** Confidential access to barrier protection should be well advertised. (2.60)
- 5.77** Prisoner access to a pharmacist for routine advice about medicines should be well advertised. (2.79)
- 5.78** Medicine trolleys should be secured to the wall when not in use. (2.80)

- 5.79** Medicines for different patients should be clearly separated, to reduce the risk of a patient receiving the wrong medication. (2.81)

Physical education and healthy living

- 5.80** Fitness equipment in residential areas should be kept in good repair. (3.60)

Reintegration planning

- 5.81** Prisoners should not be required to wear identifying sashes during visits. (4.57)

Examples of good practice

Substance misuse

- 5.82** The extensive range of therapeutic opportunities for prisoners with substance misuse issues was exemplary. (1.76)

Health services

- 5.83** The identification and management of prisoners with complex health needs ensured effective integrated care between health services and prison staff. (2.68)

Reintegration planning

- 5.84** The resettlement coordinator prisoners were trained and supervised to a good level. The support and advice they provided to prisoners, including through the RALPH telephone helpline, was helpful across a range of areas. (4.34)
- 5.85** Excellent work was carried out outside of the prison to improve the transition of care for prisoners with substance misuse problems and to engage and support their families. (4.45)

Section 6. Appendices

Appendix I: Inspection team

| | |
|-------------------|-----------------------|
| Nick Hardwick | Chief Inspector |
| Alison Perry | Team leader |
| Andrew Rooke | Inspector |
| Sandra Fieldhouse | Inspector |
| Paul Rowlands | Inspector |
| Jeanette Hall | Inspector |
| Karen Dillon | Inspector |
| Colette Daoud | Researcher |
| Amy Radford | Researcher |
| Alissa Redmond | Researcher |
| Jane Parsons | HMIP Public Relations |

Specialist inspectors

| | |
|---------------------|-------------------------------|
| Paul Tarbuck | Substance misuse inspector |
| Majella Pearce | Health services inspector |
| Helen Boniface | Pharmacist |
| Nick Crombie | Ofsted inspector |
| John Grimmer | Ofsted inspector |
| Tracy Zimmerman | Ofsted inspector |
| Yvonne McGuckian | Offender management inspector |
| Amanda Patterson | Offender management inspector |
| Jo Coleshill | Offender management inspector |
| Matthew Tedstone | CQC inspector |
| Rosie Eatwell White | HMIP policy adviser |

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

*At the last inspection, in 2013 reception (admissions) processes were good but took too long. First night arrangements were reasonable, with good peer support. Too many prisoners felt unsafe. There were high levels of assaults and victimisation and there was poor understanding and management of these issues. Levels of self-harm were high. Security arrangements were generally proportionate. Illicit drugs were easily available and use was high. The number of adjudications was similar to that at comparator establishments. The level of use of force was high but governance had recently improved. Segregation was not overused. Substance misuse provision was reasonably good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendations

All incidents of violence and victimisation should be recorded and analysed. This should identify trends and action should be taken to make the prison safer. (S43)

Achieved

Analysis of drug supply and demand should be improved and action should be taken to reduce availability. (S44)

Achieved

Recommendations

Prisoners should not experience excessive delays in the admissions unit. (I.12)

Achieved

The first night centre should not be used to hold vulnerable prisoners or those seeking their own protection, and should not hold prisoners for extended periods. (I.13)

No longer relevant

All wing staff should understand and take responsibility for implementing the violence reduction strategy, including quicker and better investigations and the improved use of antisocial behaviour booklets and victim support plans to challenge poor behaviour and support victims. (I.25)

Partially achieved

The quality of assessment, care in custody and teamwork (ACCT) processes should be improved and include the identification and provision of active and constructive support for prisoners in crisis. (I.36)

Not achieved

The director should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop a local strategy and safeguarding processes. (1.42)
Partially achieved

Closed visits should be used only for incidents relating to visits, and restrictions should be reviewed regularly and lifted if there is no evidence of further illicit activity. (1.53)
Partially achieved

The incentives and earned privileges policy should be updated, including the use of Douglas wing, publicised to staff and prisoners, and fully applied, with appropriate quality assurance and management checks. (1.60)
Achieved

The reasons for the high number of incidents of use of force should be investigated, with a view to reducing use, encouraging de-escalation and ensuring that all incidents are fully documented and all prisoners examined by health services staff as soon as possible after an incident. (1.67)
Not achieved

The purpose of the segregation unit should be clearly defined, the policy fully implemented and the regime improved. Governance should be improved, with the implementation of regular quality assurance and analysis of data to ensure that use of segregation is appropriate. (1.73)
Achieved

The integrated substance misuse team should introduce an alcohol-specific group-work programme. (1.81)
Achieved

Properly supported and supervised peer mentors and recovery champion schemes should be introduced. (1.82)
Achieved

Respect

Prisoners are treated with respect for their human dignity.

*At the last inspection, in 2013, the quality of accommodation was very good but prisoners were unable to access basic cleaning and toiletry items. The application system was chaotic and ineffective. Prisoners were frustrated by staff inexperience and inability to provide advice and support. Staff lacked confidence and did not challenge poor prisoner behaviour. Diversity arrangements were weak, support for prisoners in minority groups was poor and some very acute needs of prisoners with disabilities were not being met. Faith facilities were good but access to some services was problematic. There were high levels of complaints. Health provision was very poor. Food was reasonable. **Outcomes for prisoners were poor against this healthy prison test.***

Main recommendations

Comprehensive prisoner consultation arrangements should be introduced to identify areas of concern and action should be taken to improve staff skills and knowledge. (S45)
Achieved

All prisoners with disabilities should be identified. Where necessary, care should be coordinated between health services and wing staff and their needs should be identified in a care plan available to wing staff. (S46)

Achieved

Procedures for the prescribing and administration of medicines, including repeat prescriptions, should be improved, all medication administration should be risk assessed, and opportunities for the diversion of medications should be minimised. (S47)

Partially achieved

Recommendations

Cleaning materials, basic toiletries and, where necessary, prison clothing should be routinely available. (2.10)

Achieved

The offensive display policy should be universally enforced. (2.11)

Achieved

The applications system should be improved with a tracking system and quality assurance. (2.12)

Not achieved (recommendation repeated, 2.8)

Governance and management oversight of diversity should be prioritised to ensure that the needs of all prisoners with protected characteristics are identified, assessed and met, and any negative perceptions of particular groups are investigated. (2.26)

Partially achieved

Prisoners with disabilities and retired prisoners should not be routinely locked up during the core day. (2.39)

Achieved

The prison should ensure that the needs of all religious and faith groups are met, and that any negative perceptions of faith and religious groups are understood. (2.47)

Achieved

The prison should ensure that all prisoners who wish to attend services can do so, and on time, subject to a risk assessment. (2.48)

Not achieved (recommendation repeated, 2.38)

Outcomes of the analysis of complaints should be fully investigated and action should be taken to resolve any deficiencies. (2.53)

Achieved

All health care policies should be relevant to a prison setting and followed by health services staff. (2.65)

Achieved

All staff working at the prison should have immediate access to resuscitation equipment, including defibrillators, and be trained in its use. (2.66)

Achieved

On arrival, prisoners should be given accurate information about accessing and using prison health services in a language and format that they can understand. (2.67)

Achieved

Prisoners should be supported to make complaints about health services when required and not discouraged from doing so. (2.68)

Achieved

All prisoners with immediate or long-term health needs should be seen and provided for expeditiously. (2.76)

Achieved

Prisoners with lifelong conditions should receive care and treatment in line with evidence-based best practice. (2.77)

Partially achieved

All waiting lists should be reviewed, and services provided to meet the needs of the population within acceptable time limits. (2.78)

Partially achieved

Prisoners should have access to a pharmacist. (2.87)

Partially achieved

Medications should be administered at times to ensure maximum efficacy, not to suit the prison regime. (2.88)

Achieved

All medications should be stored safely and securely. (2.89)

Partially achieved

Prisoners should have timely access to dental services. (2.92)

Partially achieved

Prisoners with mental health problems should have unhindered access to health services and specialist staff. (2.98)

Partially achieved

The monitoring of the serving of meals should ensure the safety of prisoners, that portion control is maintained and that food hygiene standards are met. (2.105)

Achieved

The supervision of shop order deliveries should be improved to ensure that prisoners can safely take delivery of their goods. (2.112)

Achieved

Purposeful activity

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

*At the last inspection, in 2013, the amount of time unlocked was good for fully employed prisoners but not for those who were unemployed. Access to association was good. Implementation of the learning and skills provision was poorly managed and slow. Far too few activity places were available for the population and not all of these were fully utilised. Very few vocational training places were available but the range and quality were good and achievements were reasonable. Standards of teaching in education classes were poor, unacceptable behaviour was not challenged and levels of progress and achievement were low. Access to the library and PE was problematic. PE facilities were good but often overcrowded. **Outcomes for prisoners were poor against this healthy prison test.***

Main recommendations

The amount of high-quality learning and skills and work activity should be increased to meet the needs of the population. (S48)

Partially achieved

Recommendations

All prisoners should have access to at least one hour's exercise each day. (3.4)

Not achieved (recommendation repeated, 3.5)

The prison should improve attendance and punctuality to all activities. (3.15)

Achieved

Prisoners who have allocated daytime activities should not attend recreational PE during the core day. (3.16)

Achieved

The provider should implement a learner-focused activity strategy, to include analysis of learner information to improve the quality of learning and achievement. (3.17)

Achieved

The pay structure for learners attending education should be equitable with that in workplace activities. (3.18)

Not achieved (recommendation repeated, 3.16)

The provider should review the delivery model in education to ensure that all learners make good progress in well-planned lessons. (3.26)

Partially achieved

Sentence plans and initial assessments should be used to identify suitable courses and qualifications that prisoners need to undertake. (3.27)

Achieved

The quality of teaching and learning in education should be improved. (3.36)

Partially achieved

There should be an appropriate support structure for prisoners identified with learning disabilities. (3.37)

Partially achieved

Initial assessments should be improved to ensure that they accurately identify learning difficulties and disabilities and the need for additional support interventions in education and vocational training. (3.38)

Partially achieved

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

Partially achieved

Success rates on education programmes should be improved. (3.43)

Partially achieved

Access time to the library should be included in the published prison regime. (3.47)

Achieved

The prison should connect the 12 computer terminals and introduce the virtual campus to support prisoners in their research, learning and employment opportunities. (3.48)

Partially achieved

All prisoners should have access to at least two PE sessions per week regardless of their incentives and earned privileges status. (3.54)

Achieved

Appropriate bespoke sessions for older prisoners and those with disabilities should be developed with the health care department. (3.55)

Achieved

Resettlement

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

*At the last inspection, in 2013, The strategic management of resettlement was not sufficiently developed. Too few prisoners had a sentence plan or contact with their offender supervisor and they were frustrated in their attempts to progress. Offender supervisors were ill-equipped to assess and manage risk. Home detention curfew procedures and public protection arrangements were sound. Reintegration planning was developing but was compromised by the lack of an initial assessment. Resettlement pathway work was reasonable. The lack of specific interventions for the high number of sex offenders was a significant concern. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

Main recommendations

All prisoners should have a sentence or custody plan and regular contact with their offender supervisor. (S49)

Partially achieved

The prison should have a clear strategy to ensure that sex offenders, including those in denial, have access to appropriate interventions. (S50)

Achieved

Recommendations

There should be a policy for reducing reoffending based on a regularly updated analysis of prisoner need and implemented through a management group which includes all relevant departments and providers. (4.7)

Achieved

Offender supervisors should be fully trained for the role and the quality of their work should be monitored (4.14)

Achieved

Prisoners recategorised to D should be transferred promptly. (4.23)

Achieved

Indeterminate-sentenced prisoners should have access to trained staff, escorted absences according to their entitlement, specific events which address their understanding of their sentence and maintaining family ties, and help in developing basic living skills in preparation for release. (4.28)

Achieved

Prisoners' immediate resettlement needs should be assessed on arrival and referrals made when required. (4.33)

Achieved

The use of release on temporary licence (ROTL) to support the resettlement needs of prisoners into employment and/or further education and training opportunities should be implemented when appropriate. (4.39)

Not achieved

Prisoners should be able to get advice and support with financial problems and have access to benefits from specialist providers in the prison. (4.47)

Achieved

Prisoners should be able to open bank accounts. (4.48)

Achieved

Prisoners' negative perceptions about visits should be investigated and measures implemented to increase their confidence in the process. (4.58)

Achieved

Access to enhanced family visit days and other visits-related activities should be extended to all prisoners. (4.59)

Not achieved

ROTL should be used when appropriate to maintain family ties. (4.60)

Not achieved

There should be ready access to psychology services to provide individual treatment, assessments for programmes, and reports. (4.73)

Achieved

Appendix III: Prison population profile

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

| Status | 18–20-year-olds | 21 and over | % |
|-----------------------|-----------------|--------------|------------|
| Sentenced | 0 | 1,419 | 92.2 |
| Recall | 0 | 120 | 7.8 |
| Convicted unsentenced | 0 | 0 | 0 |
| Remand | 0 | 0 | 0 |
| Civil prisoners | 0 | 0 | 0 |
| Detainees | 0 | 0 | 0 |
| Total | 0 | 1,539 | 100 |

| Sentence | 18–20-year-olds | 21 and over | % |
|---|-----------------|--------------|------------|
| Unsentenced | 0 | 1 | 0.1 |
| Less than six months | 0 | 8 | 0.5 |
| six months to less than 12 months | 0 | 34 | 2.2 |
| 12 months to less than 2 years | 0 | 112 | 7.3 |
| 2 years to less than 3 years | 0 | 221 | 14.4 |
| 3 years to less than 4 years | 0 | 224 | 14.6 |
| 4 years to less than 10 years | | 631 | 41.0 |
| 10 years and over (not life) | 0 | 155 | 10.1 |
| ISPP (indeterminate sentence for public protection) | 0 | 64 | 4.2 |
| Life | 0 | 89 | 9.9 |
| Total | 0 | 1,539 | 100 |

| Age | Number of prisoners | % |
|-----------------------------------|---------------------|------------|
| Please state minimum age here: | | |
| Under 21 years | - | - |
| 21 years to 29 years | 550 | 35.7 |
| 30 years to 39 years | 521 | 33.9 |
| 40 years to 49 years | 287 | 18.6 |
| 50 years to 59 years | 105 | 6.8 |
| 60 years to 69 years | 48 | 3.1 |
| 70 plus years | 28 | 1.8 |
| Please state maximum age here: 85 | | |
| Total | 1,539 | 100 |

| Nationality | 18–20-year-olds | 21 and over | % |
|-------------------|-----------------|--------------|------------|
| British | 0 | 1475 | 95.8 |
| Foreign nationals | 0 | 64 | 4.2 |
| Total | 0 | 1,539 | 100 |

| Security category | 18–20-year-olds | 21 and over | % |
|---------------------------|-----------------|--------------|------------|
| Uncategorised unsentenced | - | - | - |
| Uncategorised sentenced | - | - | - |
| Category A | - | - | - |
| Category B | 0 | 0 | 0.0 |
| Category C | 0 | 1,517 | 98.6 |
| Category D | 0 | 22 | 1.4 |
| Other | - | - | - |
| Total | | 1,539 | 100 |

| Ethnicity | 18–20-year-olds | 21 and over | % |
|-------------------------------|------------------------|--------------------|--------------|
| White | | 1,090 | 70.8% |
| British | 0 | 1,041 | 67.6 |
| Irish | 0 | 9 | 0.6 |
| Gypsy/Irish Traveller | 0 | 10 | 0.6 |
| Other white | 0 | 30 | 1.9 |
| | | | |
| Mixed | | 85 | 5.5 |
| White and black Caribbean | 0 | 59 | 3.8 |
| White and black African | 0 | 4 | 0.3 |
| White and Asian | 0 | 9 | 0.6 |
| Other mixed | 0 | 13 | 0.8 |
| | | | |
| Asian or Asian British | | 190 | 12.3 |
| Indian | 0 | 62 | 4.0 |
| Pakistani | 0 | 99 | 6.4 |
| Bangladeshi | 0 | 6 | 0.4 |
| Chinese | 0 | 1 | 0.1 |
| Other Asian | 0 | 22 | 1.4 |
| | | | |
| Black or black British | | 167 | 10.9 |
| Caribbean | 0 | 118 | 7.7 |
| African | 0 | 28 | 1.8 |
| Other black | 0 | 21 | 1.4 |
| | | | |
| Other ethnic group | | 4 | 0.3 |
| Arab | 0 | 1 | 0.1 |
| Other ethnic group | 0 | 3 | 0.2 |
| | | | |
| Not stated | 0 | 3 | 0.2 |
| Total | 0 | 1,539 | 100 |

| Religion | 18–20-year-olds | 21 and over | % |
|-------------------------------|------------------------|--------------------|------------|
| Baptist | 0 | 0 | 0% |
| Church of England | 0 | 308 | 20.0 |
| Roman Catholic | 0 | 216 | 14.0 |
| Other Christian denominations | 0 | 171 | 11.1 |
| Muslim | 0 | 241 | 15.7 |
| Sikh | 0 | 37 | 2.4 |
| Hindu | 0 | 6 | 0.4 |
| Buddhist | 0 | 21 | 1.4 |
| Jewish | 0 | 4 | 0.3 |
| Other | 0 | 27 | 1.8 |
| No religion | 0 | 507 | 32.9 |
| Not Stated | 0 | 1 | 0.1 |
| Total | 0 | 1,539 | 100 |

| Other demographics | 18–20-year-olds | 21 and over | % |
|-----------------------------|------------------------|--------------------|------------|
| Veteran (ex-armed services) | 0 | 20 | 1.3 |
| | | | |
| Total | 0 | 20 | 1.3 |

Sentenced prisoners only

| Length of stay | 18–20-year-olds | | 21 and over | |
|------------------------|-----------------|----|--------------|------------|
| | Number | % | Number | % |
| Less than 1 month | 0 | 0% | 172 | 11.2 |
| 1 month to 3 months | 0 | 0% | 355 | 23.1 |
| 3 months to six months | 0 | 0% | 376 | 24.4 |
| six months to 1 year | 0 | 0% | 307 | 19.9 |
| 1 year to 2 years | 0 | 0% | 241 | 15.7 |
| 2 years to 4 years | 0 | 0% | 88 | 5.7 |
| 4 years or more | 0 | 0% | 0 | 0 |
| Total | | | 1,539 | 100 |

Sentenced prisoners only

| | 18–20-year-olds | 21 and over | % |
|---|-----------------|-------------|-------------|
| Foreign nationals detained post sentence expiry | 0 | 0 | 0.0 |
| Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions). | 0 | 921 | 59.8 |
| Total | 0 | 921 | 59.8 |

Unsentenced prisoners only

| Length of stay | 18–20-year-olds | | 21 and over | |
|------------------------|-----------------|---|-------------|------------|
| | Number | % | Number | % |
| Less than 1 month | 0 | 0 | 0 | 0 |
| 1 month to 3 months | 0 | 0 | 1 | 100 |
| 3 months to six months | 0 | 0 | 0 | 0 |
| six months to 1 year | 0 | 0 | 0 | 0 |
| 1 year to 2 years | 0 | 0 | 0 | 0 |
| 2 years to 4 years | 0 | 0 | 0 | 0 |
| 4 years or more | 0 | 0 | 0 | 0 |
| Total | | | 1 | 0.1 |

Below not available on P-Nomis:

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

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

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

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 17 November 2014 the prisoner population at HMP Oakwood was 1,541. Using the method described above, questionnaires were distributed to 246 prisoners.

We received a total of 204 completed questionnaires, a response rate of 83%. This included one questionnaire completed via interview. Eight respondents refused to complete a questionnaire, 27 questionnaires were not returned and seven were returned blank.

| Wing/Unit | Number of completed survey returns |
|------------------|------------------------------------|
| A | 63 |
| B | 57 |
| C | 63 |
| D | 12 |
| E | 8 |
| Segregation unit | 1 |

Presentation of survey results and analyses

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

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant⁷ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Oakwood in 2014 compared with responses from prisoners surveyed in all other category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 34 category C training prisons since April 2008.
- The current survey responses from HMP Oakwood in 2014 compared with the responses of prisoners surveyed at HMP Oakwood in 2013.
- A comparison within the 2014 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2014 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2014 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2014 survey between those who are aged 50 and over and those under 50. A comparison within the 2014 survey between the vulnerable prisoner wing (Ash) 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> | 1 (0%) |
| | <i>21–29</i> | 78 (38%) |
| | <i>30–39</i> | 67 (33%) |
| | <i>40–49</i> | 33 (16%) |
| | <i>50–59</i> | 11 (5%) |
| | <i>60–69</i> | 9 (4%) |
| | <i>70 and over</i> | 4 (2%) |
| Q1.3 | Are you sentenced? | |
| | <i>Yes</i> | 181 (89%) |
| | <i>Yes - on recall</i> | 23 (11%) |
| | <i>No - awaiting trial</i> | 0 (0%) |
| | <i>No - awaiting sentence</i> | 0 (0%) |
| | <i>No - awaiting deportation</i> | 0 (0%) |
| Q1.4 | How long is your sentence? | |
| | <i>Not sentenced</i> | 0 (0%) |
| | <i>Less than 6 months</i> | 7 (3%) |
| | <i>6 months to less than 1 year</i> | 9 (4%) |
| | <i>1 year to less than 2 years</i> | 16 (8%) |
| | <i>2 years to less than 4 years</i> | 52 (26%) |
| | <i>4 years to less than 10 years</i> | 76 (38%) |
| | <i>10 years or more</i> | 21 (10%) |
| | <i>IPP (indeterminate sentence for public protection)</i> | 9 (4%) |
| | <i>Life</i> | 11 (5%) |
| Q1.5 | Are you a foreign national? (i.e. do not have UK citizenship.) | |
| | <i>Yes</i> | 9 (5%) |
| | <i>No</i> | 190 (95%) |
| Q1.6 | Do you understand spoken English? | |
| | <i>Yes</i> | 201 (100%) |
| | <i>No</i> | 1 (0%) |
| Q1.7 | Do you understand written English? | |
| | <i>Yes</i> | 202 (100%) |
| | <i>No</i> | 1 (0%) |

| | | | |
|--------------|--|-----------|---|
| Q1.8 | What is your ethnic origin? | | |
| | <i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i> | 128 (64%) | <i>Asian or Asian British - Chinese</i> 0 (0%) |
| | <i>White - Irish</i> | 6 (3%) | <i>Asian or Asian British - other</i> 2 (1%) |
| | <i>White - other</i> | 5 (2%) | <i>Mixed race - white and black Caribbean</i> 10 (5%) |
| | <i>Black or black British - Caribbean</i> | 18 (9%) | <i>Mixed race - white and black African</i> 2 (1%) |
| | <i>Black or black British - African</i> | 3 (1%) | <i>Mixed race - white and Asian</i> 3 (1%) |
| | <i>Black or black British - other</i> | 2 (1%) | <i>Mixed race - other</i> 0 (0%) |
| | <i>Asian or Asian British - Indian</i> | 3 (1%) | <i>Arab</i> 0 (0%) |
| | <i>Asian or Asian British - Pakistani</i> | 14 (7%) | <i>Other ethnic group</i> 2 (1%) |
| | <i>Asian or Asian British - Bangladesh</i> | 3 (1%) | |
| Q1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | | |
| | <i>Yes</i> | | 6 (3%) |
| | <i>No</i> | | 190 (97%) |
| Q1.10 | What is your religion? | | |
| | <i>None</i> | 64 (32%) | <i>Hindu</i> 1 (1%) |
| | <i>Church of England</i> | 45 (23%) | <i>Jewish</i> 1 (1%) |
| | <i>Catholic</i> | 37 (19%) | <i>Muslim</i> 34 (17%) |
| | <i>Protestant</i> | 0 (0%) | <i>Sikh</i> 2 (1%) |
| | <i>Other Christian denomination</i> | 7 (4%) | <i>Other</i> 2 (1%) |
| | <i>Buddhist</i> | 4 (2%) | |
| Q1.11 | How would you describe your sexual orientation? | | |
| | <i>Heterosexual/ Straight</i> | | 197 (98%) |
| | <i>Homosexual/Gay</i> | | 2 (1%) |
| | <i>Bisexual</i> | | 3 (1%) |
| Q1.12 | Do you consider yourself to have a disability? (I.e. do you need help with any long term physical, mental or learning needs?) | | |
| | <i>Yes</i> | | 40 (20%) |
| | <i>No</i> | | 161 (80%) |
| Q1.13 | Are you a veteran (ex- armed services)? | | |
| | <i>Yes</i> | | 9 (4%) |
| | <i>No</i> | | 193 (96%) |
| Q1.14 | Is this your first time in prison? | | |
| | <i>Yes</i> | | 62 (31%) |
| | <i>No</i> | | 137 (69%) |
| Q1.15 | Do you have children under the age of 18? | | |
| | <i>Yes</i> | | 103 (51%) |
| | <i>No</i> | | 98 (49%) |

Section 2: Courts, transfers and escorts

| | | |
|-------------|---|-----------|
| Q2.1 | On your most recent journey here, how long did you spend in the van? | |
| | <i>Less than 2 hours</i> | 134 (66%) |
| | <i>2 hours or longer</i> | 60 (30%) |
| | <i>Don't remember</i> | 9 (4%) |

| | | |
|-------------|--|-----------|
| Q2.2 | On your most recent journey here, were you offered anything to eat or drink? | |
| | <i>My journey was less than two hours</i> | 134 (66%) |
| | Yes | 53 (26%) |
| | No | 14 (7%) |
| | Don't remember | 2 (1%) |
| Q2.3 | On your most recent journey here, were you offered a toilet break? | |
| | <i>My journey was less than two hours</i> | 134 (66%) |
| | Yes | 8 (4%) |
| | No | 59 (29%) |
| | Don't remember | 2 (1%) |
| Q2.4 | On your most recent journey here, was the van clean? | |
| | Yes | 123 (61%) |
| | No | 63 (31%) |
| | Don't remember | 17 (8%) |
| Q2.5 | On your most recent journey here, did you feel safe? | |
| | Yes | 164 (81%) |
| | No | 33 (16%) |
| | Don't remember | 6 (3%) |
| Q2.6 | On your most recent journey here, how were you treated by the escort staff? | |
| | Very well | 59 (29%) |
| | Well | 89 (44%) |
| | Neither | 40 (20%) |
| | Badly | 6 (3%) |
| | Very badly | 6 (3%) |
| | Don't remember | 3 (1%) |
| 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 | 158 (78%) |
| | Yes, I received written information | 14 (7%) |
| | No, I was not told anything | 28 (14%) |
| | Don't remember | 4 (2%) |
| Q2.8 | When you first arrived here did your property arrive at the same time as you? | |
| | Yes | 175 (86%) |
| | No | 26 (13%) |
| | Don't remember | 3 (1%) |

Section 3: Reception, first night and induction

| | | |
|-------------|--|-----------|
| Q3.1 | How long were you in reception? | |
| | <i>Less than 2 hours</i> | 84 (41%) |
| | <i>2 hours or longer</i> | 105 (52%) |
| | Don't remember | 14 (7%) |
| Q3.2 | When you were searched, was this carried out in a respectful way? | |
| | Yes | 177 (88%) |
| | No | 18 (9%) |
| | Don't remember | 6 (3%) |

| | | | |
|-------------|---|----------|--|
| Q3.3 | Overall, how were you treated in reception? | | |
| | <i>Very well</i> | | 58 (29%) |
| | <i>Well</i> | | 105 (52%) |
| | <i>Neither</i> | | 23 (11%) |
| | <i>Badly</i> | | 9 (4%) |
| | <i>Very badly</i> | | 3 (1%) |
| | <i>Don't remember</i> | | 3 (1%) |
| Q3.4 | Did you have any of the following problems when you first arrived here? (Please tick all that applies to you.) | | |
| | <i>Loss of property</i> | 29 (15%) | <i>Physical health</i> 31 (16%) |
| | <i>Housing problems</i> | 15 (8%) | <i>Mental health</i> 27 (14%) |
| | <i>Contacting employers</i> | 3 (2%) | <i>Needing protection from other prisoners</i> 10 (5%) |
| | <i>Contacting family</i> | 26 (13%) | <i>Getting phone numbers</i> 26 (13%) |
| | <i>Childcare</i> | 0 (0%) | <i>Other</i> 7 (4%) |
| | <i>Money worries</i> | 18 (9%) | <i>Did not have any problems</i> 95 (49%) |
| | <i>Feeling depressed or suicidal</i> | 20 (10%) | |
| Q3.5 | Did you receive any help/support from staff in dealing with these problems when you first arrived here? | | |
| | <i>Yes</i> | | 30 (15%) |
| | <i>No</i> | | 73 (37%) |
| | <i>Did not have any problems</i> | | 95 (48%) |
| Q3.6 | When you first arrived here, were you offered any of the following? (Please tick all that applies to you.) | | |
| | <i>Tobacco</i> | | 152 (75%) |
| | <i>A shower</i> | | 82 (40%) |
| | <i>A free telephone call</i> | | 131 (65%) |
| | <i>Something to eat</i> | | 136 (67%) |
| | <i>PIN phone credit</i> | | 64 (32%) |
| | <i>Toiletries/ basic items</i> | | 103 (51%) |
| | <i>Did not receive anything</i> | | 10 (5%) |
| Q3.7 | When you first arrived here, did you have access to the following people or services? (Please tick all that applies to you.) | | |
| | <i>Chaplain</i> | | 118 (60%) |
| | <i>Someone from health services</i> | | 138 (70%) |
| | <i>A Listener/Samaritans</i> | | 84 (42%) |
| | <i>Prison shop/ canteen</i> | | 56 (28%) |
| | <i>Did not have access to any of these</i> | | 27 (14%) |
| Q3.8 | When you first arrived here, were you offered information on the following? (Please tick all that applies to you.) | | |
| | <i>What was going to happen to you</i> | | 112 (57%) |
| | <i>What support was available for people feeling depressed or suicidal</i> | | 92 (47%) |
| | <i>How to make routine requests (applications)</i> | | 88 (45%) |
| | <i>Your entitlement to visits</i> | | 76 (39%) |
| | <i>Health services</i> | | 92 (47%) |
| | <i>Chaplaincy</i> | | 99 (51%) |
| | <i>Not offered any information</i> | | 48 (25%) |

| | | |
|--------------|---|-----------|
| Q3.9 | Did you feel safe on your first night here? | |
| | Yes | 168 (83%) |
| | No | 29 (14%) |
| | Don't remember | 5 (2%) |
| Q3.10 | How soon after you arrived here did you go on an induction course? | |
| | Have not been on an induction course | 26 (13%) |
| | Within the first week | 139 (69%) |
| | More than a week | 22 (11%) |
| | Don't remember | 15 (7%) |
| Q3.11 | Did the induction course cover everything you needed to know about the prison? | |
| | Have not been on an induction course | 26 (13%) |
| | Yes | 92 (46%) |
| | No | 62 (31%) |
| | Don't remember | 18 (9%) |
| Q3.12 | How soon after you arrived here did you receive an education ('skills for life') assessment? | |
| | Did not receive an assessment | 31 (16%) |
| | Within the first week | 83 (43%) |
| | More than a week | 51 (26%) |
| | Don't remember | 30 (15%) |

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? | 45 (24%) | 58 (31%) | 22 (12%) | 23 (12%) | 6 (3%) 35 (19%) |
| | Attend legal visits? | 32 (17%) | 75 (41%) | 22 (12%) | 6 (3%) | 4 (2%) 44 (24%) |
| | Get bail information? | 15 (9%) | 20 (12%) | 23 (13%) | 15 (9%) | 10 (6%) 88 (51%) |
| 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 | | | | | 49 (25%) |
| | Yes | | | | | 73 (37%) |
| | No | | | | | 74 (38%) |
| Q4.3 | Can you get legal books in the library? | | | | | |
| | Yes | | | | | 56 (29%) |
| | No | | | | | 26 (14%) |
| | Don't know | | | | | 110 (57%) |
| 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? | 139 (70%) | 55 (28%) | 5 (3%) | | |
| | Are you normally able to have a shower every day? | 196 (98%) | 2 (1%) | 1 (1%) | | |
| | Do you normally receive clean sheets every week? | 99 (51%) | 87 (45%) | 7 (4%) | | |
| | Do you normally get cell cleaning materials every week? | 62 (31%) | 128 (65%) | 8 (4%) | | |
| | Is your cell call bell normally answered within five minutes? | 54 (28%) | 107 (55%) | 35 (18%) | | |
| | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 129 (66%) | 66 (34%) | 1 (1%) | | |
| | If you need to, can you normally get your stored property? | 41 (21%) | 92 (47%) | 64 (32%) | | |

| | | | |
|--------------|---|--|-----------|
| Q4.5 | What is the food like here? | | |
| | Very good | | 3 (1%) |
| | Good | | 44 (22%) |
| | Neither | | 51 (25%) |
| | Bad | | 58 (29%) |
| | Very bad | | 45 (22%) |
| 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 | | 3 (1%) |
| | Yes | | 99 (49%) |
| | No | | 99 (49%) |
| Q4.7 | Can you speak to a Listener at any time, if you want to? | | |
| | Yes | | 115 (57%) |
| | No | | 10 (5%) |
| | Don't know | | 76 (38%) |
| Q4.8 | Are your religious beliefs respected? | | |
| | Yes | | 99 (50%) |
| | No | | 23 (12%) |
| | Don't know/ N/A | | 77 (39%) |
| Q4.9 | Are you able to speak to a Chaplain of your faith in private if you want to? | | |
| | Yes | | 124 (62%) |
| | No | | 6 (3%) |
| | Don't know/ N/A | | 71 (35%) |
| Q4.10 | How easy or difficult is it for you to attend religious services? | | |
| | I don't want to attend | | 48 (24%) |
| | Very easy | | 45 (23%) |
| | Easy | | 44 (22%) |
| | Neither | | 12 (6%) |
| | Difficult | | 5 (3%) |
| | Very difficult | | 3 (2%) |
| | Don't know | | 41 (21%) |

Section 5: Applications and complaints

| | | | |
|-------------|--|---------------------|------------|
| Q5.1 | Is it easy to make an application? | | |
| | Yes | | 147 (75%) |
| | No | | 45 (23%) |
| | Don't know | | 4 (2%) |
| Q5.2 | Please answer the following questions about applications (If you have not made an application please tick the 'not made one' option). | | |
| | | <i>Not made one</i> | <i>Yes</i> |
| | Are applications dealt with fairly? | 24 (13%) | 81 (42%) |
| | Are applications dealt with quickly (within seven days)? | 24 (14%) | 52 (30%) |
| | | | <i>No</i> |
| | | | 87 (45%) |
| | | | 95 (56%) |
| Q5.3 | Is it easy to make a complaint? | | |
| | Yes | | 126 (65%) |
| | No | | 27 (14%) |
| | Don't know | | 40 (21%) |

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

| | Not made one | Yes | No |
|--|--------------|----------|----------|
| Are complaints dealt with fairly? | 70 (36%) | 35 (18%) | 88 (46%) |
| Are complaints dealt with quickly (within seven days)? | 70 (38%) | 36 (19%) | 79 (43%) |

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

| | |
|-----|-----------|
| Yes | 47 (25%) |
| No | 139 (75%) |

Q5.6 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?

| | |
|-------------------------|----------|
| Don't know who they are | 63 (33%) |
| Very easy | 20 (10%) |
| Easy | 27 (14%) |
| Neither | 35 (18%) |
| Difficult | 22 (12%) |
| Very difficult | 24 (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)**

| | |
|-----------------------------------|-----------|
| Don't know what the IEP scheme is | 12 (6%) |
| Yes | 103 (52%) |
| No | 61 (31%) |
| Don't know | 23 (12%) |

Q6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels)

| | |
|-----------------------------------|----------|
| Don't know what the IEP scheme is | 12 (6%) |
| Yes | 94 (47%) |
| No | 75 (38%) |
| Don't know | 17 (9%) |

Q6.3 In the last six months have any members of staff physically restrained you (C&R)?

| | |
|-----|-----------|
| Yes | 19 (10%) |
| No | 181 (91%) |

Q6.4 If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?

| | |
|---|-----------|
| I have not been to segregation in the last 6 months | 141 (74%) |
| Very well | 4 (2%) |
| Well | 8 (4%) |
| Neither | 12 (6%) |
| Badly | 13 (7%) |
| Very badly | 13 (7%) |

Section 7: Relationships with staff**Q7.1 Do most staff treat you with respect?**

| | |
|-----|-----------|
| Yes | 155 (79%) |
| No | 41 (21%) |

Q7.2 Is there a member of staff you can turn to for help if you have a problem?

| | |
|-----|-----------|
| Yes | 138 (70%) |
| No | 59 (30%) |

| | | |
|-------------|--|-----------|
| Q7.3 | Has a member of staff checked on you personally in the last week to see how you are getting on? | |
| | Yes | 80 (40%) |
| | No | 118 (60%) |
| Q7.4 | How often do staff normally speak to you during association? | |
| | <i>Do not go on association</i> | 17 (9%) |
| | Never | 26 (13%) |
| | Rarely | 49 (25%) |
| | Some of the time | 52 (26%) |
| | Most of the time | 40 (20%) |
| | All of the time | 14 (7%) |
| Q7.5 | When did you first meet your personal (named) officer? | |
| | <i>I have not met him/her</i> | 26 (13%) |
| | <i>In the first week</i> | 82 (41%) |
| | <i>More than a week</i> | 63 (32%) |
| | <i>Don't remember</i> | 28 (14%) |
| Q7.6 | How helpful is your personal (named) officer? | |
| | <i>Do not have a personal officer/ I have not met him/ her</i> | 26 (13%) |
| | Very helpful | 54 (27%) |
| | Helpful | 52 (26%) |
| | Neither | 32 (16%) |
| | Not very helpful | 19 (10%) |
| | Not at all helpful | 16 (8%) |

Section 8: Safety

| | | |
|-------------|--|-----------|
| Q8.1 | Have you ever felt unsafe here? | |
| | Yes | 77 (39%) |
| | No | 121 (61%) |
| Q8.2 | Do you feel unsafe now? | |
| | Yes | 25 (13%) |
| | No | 173 (87%) |
| Q8.3 | In which areas have you felt unsafe? (Please tick all that applies to you.) | |
| | Never felt unsafe | 121 (62%) |
| | Everywhere | 15 (8%) |
| | Segregation unit | 8 (4%) |
| | Association areas | 28 (14%) |
| | Reception area | 5 (3%) |
| | At the gym | 14 (7%) |
| | In an exercise yard | 22 (11%) |
| | At work | 17 (9%) |
| | During movement | 29 (15%) |
| | At education | 11 (6%) |
| | At meal times | 13 (7%) |
| | At health services | 11 (6%) |
| | Visits area | 10 (5%) |
| | In wing showers | 0 (0%) |
| | In gym showers | 6 (3%) |
| | In corridors/stairwells | 25 (13%) |
| | On your landing/wing | 20 (10%) |
| | In your cell | 14 (7%) |
| | At religious services | 6 (3%) |
| Q8.4 | Have you been victimised by other prisoners here? | |
| | Yes | 61 (31%) |
| | No | 134 (69%) |

| | | |
|-------------|--|-----------|
| Q8.5 | If yes, what did the incident(s) involve/ what was it about? (Please tick all that applies to you.) | |
| | <i>Insulting remarks (about you or your family or friends)</i> | 29 (15%) |
| | <i>Physical abuse (being hit, kicked or assaulted)</i> | 17 (9%) |
| | <i>Sexual abuse</i> | 3 (2%) |
| | <i>Feeling threatened or intimidated</i> | 39 (20%) |
| | <i>Having your canteen/property taken</i> | 16 (8%) |
| | <i>Medication</i> | 15 (8%) |
| | <i>Debt</i> | 15 (8%) |
| | <i>Drugs</i> | 15 (8%) |
| | <i>Your race or ethnic origin</i> | 6 (3%) |
| | <i>Your religion/religious beliefs</i> | 5 (3%) |
| | <i>Your nationality</i> | 5 (3%) |
| | <i>You are from a different part of the country than others</i> | 8 (4%) |
| | <i>You are from a traveller community</i> | 3 (2%) |
| | <i>Your sexual orientation</i> | 4 (2%) |
| | <i>Your age</i> | 5 (3%) |
| | <i>You have a disability</i> | 8 (4%) |
| | <i>You were new here</i> | 13 (7%) |
| | <i>Your offence/ crime</i> | 11 (6%) |
| | <i>Gang related issues</i> | 11 (6%) |
| Q8.6 | Have you been victimised by staff here? | |
| | Yes | 47 (24%) |
| | No | 147 (76%) |
| 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> | 11 (6%) |
| | <i>Physical abuse (being hit, kicked or assaulted)</i> | 6 (3%) |
| | <i>Sexual abuse</i> | 2 (1%) |
| | <i>Feeling threatened or intimidated</i> | 17 (9%) |
| | <i>Medication</i> | 7 (4%) |
| | <i>Debt</i> | 6 (3%) |
| | <i>Drugs</i> | 7 (4%) |
| | <i>Your race or ethnic origin</i> | 8 (4%) |
| | <i>Your religion/religious beliefs</i> | 4 (2%) |
| | <i>Your nationality</i> | 5 (3%) |
| | <i>You are from a different part of the country than others</i> | 6 (3%) |
| | <i>You are from a traveller community</i> | 2 (1%) |
| | <i>Your sexual orientation</i> | 3 (2%) |
| | <i>Your age</i> | 3 (2%) |
| | <i>You have a disability</i> | 7 (4%) |
| | <i>You were new here</i> | 5 (3%) |
| | <i>Your offence/ crime</i> | 6 (3%) |
| | <i>Gang related issues</i> | 5 (3%) |
| Q8.8 | If you have been victimised by prisoners or staff, did you report it? | |
| | Not been victimised | 117 (65%) |
| | Yes | 33 (18%) |
| | No | 29 (16%) |

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 | 15 (8%) | 3 (2%) | 23 (12%) | 16 (8%) | 76 (39%) | 60 (31%) |
| | The nurse | 16 (9%) | 8 (4%) | 42 (22%) | 27 (14%) | 54 (29%) | 41 (22%) |
| | The dentist | 25 (13%) | 4 (2%) | 12 (6%) | 12 (6%) | 55 (29%) | 81 (43%) |
| 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 | 24 (13%) | 14 (7%) | 43 (22%) | 33 (17%) | 25 (13%) | 53 (28%) |
| | The nurse | 22 (12%) | 16 (9%) | 46 (25%) | 33 (18%) | 21 (11%) | 46 (25%) |
| | The dentist | 39 (21%) | 17 (9%) | 30 (16%) | 32 (17%) | 20 (11%) | 48 (26%) |
| Q9.3 | What do you think of the overall quality of the health services here? | | | | | | |
| | <i>Not been</i> | | | | | 16 (8%) | |
| | <i>Very good</i> | | | | | 11 (6%) | |
| | <i>Good</i> | | | | | 33 (17%) | |
| | <i>Neither</i> | | | | | 34 (18%) | |
| | <i>Bad</i> | | | | | 34 (18%) | |
| | <i>Very bad</i> | | | | | 61 (32%) | |
| Q9.4 | Are you currently taking medication? | | | | | | |
| | Yes | | | | | 90 (46%) | |
| | No | | | | | 105 (54%) | |
| 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> | | | | | 105 (54%) | |
| | <i>Yes, all my meds</i> | | | | | 41 (21%) | |
| | <i>Yes, some of my meds</i> | | | | | 31 (16%) | |
| | <i>No</i> | | | | | 18 (9%) | |
| Q9.6 | Do you have any emotional or mental health problems? | | | | | | |
| | Yes | | | | | 57 (30%) | |
| | No | | | | | 136 (70%) | |
| 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> | | | | | 136 (72%) | |
| | Yes | | | | | 20 (11%) | |
| | No | | | | | 34 (18%) | |

Section 10: Drugs and alcohol

| | | |
|--------------|--|-----------|
| Q10.1 | Did you have a problem with drugs when you came into this prison? | |
| | Yes | 51 (27%) |
| | No | 141 (73%) |
| Q10.2 | Did you have a problem with alcohol when you came into this prison? | |
| | Yes | 36 (19%) |
| | No | 157 (81%) |

| | | |
|--------------|--|-----------|
| Q10.3 | Is it easy or difficult to get illegal drugs in this prison? | |
| | Very easy | 52 (27%) |
| | Easy | 37 (19%) |
| | Neither | 14 (7%) |
| | Difficult | 3 (2%) |
| | Very difficult | 6 (3%) |
| | Don't know | 78 (41%) |
| Q10.4 | Is it easy or difficult to get alcohol in this prison? | |
| | Very easy | 20 (10%) |
| | Easy | 31 (16%) |
| | Neither | 19 (10%) |
| | Difficult | 12 (6%) |
| | Very difficult | 19 (10%) |
| | Don't know | 91 (47%) |
| Q10.5 | Have you developed a problem with illegal drugs since you have been in this prison? | |
| | Yes | 23 (12%) |
| | No | 167 (88%) |
| Q10.6 | Have you developed a problem with diverted medication since you have been in this prison? | |
| | Yes | 21 (11%) |
| | No | 171 (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> | 126 (66%) |
| | Yes | 44 (23%) |
| | No | 20 (11%) |
| Q10.8 | Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison? | |
| | <i>Did not / do not have an alcohol problem</i> | 157 (83%) |
| | Yes | 21 (11%) |
| | No | 12 (6%) |
| Q10.9 | Was the support or help you received, whilst in this prison, helpful? | |
| | <i>Did not have a problem/ did not receive help</i> | 138 (74%) |
| | Yes | 38 (20%) |
| | No | 11 (6%) |

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 | 15 (8%) | 34 (18%) | 70 (37%) | 22 (12%) | 32 (17%) | 15 (8%) |
| | Vocational or skills training | 33 (18%) | 26 (14%) | 55 (30%) | 28 (15%) | 29 (16%) | 14 (8%) |
| | Education (including basic skills) | 21 (11%) | 38 (21%) | 82 (45%) | 25 (14%) | 11 (6%) | 7 (4%) |
| | Offending behaviour programmes | 47 (25%) | 17 (9%) | 37 (20%) | 29 (15%) | 31 (16%) | 27 (14%) |
| Q11.2 | Are you currently involved in the following? (Please tick all that applies to you.) | | | | | | |
| | <i>Not involved in any of these</i> | | | | | 25 (13%) | |
| | Prison job | | | | | 114 (61%) | |
| | Vocational or skills training | | | | | 29 (16%) | |
| | Education (including basic skills) | | | | | 47 (25%) | |
| | Offending behaviour programmes | | | | | 24 (13%) | |

| | | | | | |
|--------------|---|--------------------------|------------|-----------|-------------------|
| 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 | 22 (14%) | 50 (32%) | 65 (41%) | 20 (13%) |
| | Vocational or skills training | 34 (23%) | 68 (46%) | 33 (22%) | 12 (8%) |
| | Education (including basic skills) | 28 (20%) | 69 (48%) | 34 (24%) | 12 (8%) |
| | Offending behaviour programmes | 34 (24%) | 53 (38%) | 36 (26%) | 18 (13%) |
| Q11.4 | How often do you usually go to the library? | | | | |
| | <i>Don't want to go</i> | | | | 35 (18%) |
| | <i>Never</i> | | | | 52 (27%) |
| | <i>Less than once a week</i> | | | | 37 (19%) |
| | <i>About once a week</i> | | | | 60 (32%) |
| | <i>More than once a week</i> | | | | 6 (3%) |
| Q11.5 | Does the library have a wide enough range of materials to meet your needs? | | | | |
| | <i>Don't use it</i> | | | | 62 (33%) |
| | <i>Yes</i> | | | | 72 (38%) |
| | <i>No</i> | | | | 55 (29%) |
| Q11.6 | How many times do you usually go to the gym each week? | | | | |
| | <i>Don't want to go</i> | | | | 49 (26%) |
| | <i>0</i> | | | | 34 (18%) |
| | <i>1 to 2</i> | | | | 48 (25%) |
| | <i>3 to 5</i> | | | | 46 (24%) |
| | <i>More than 5</i> | | | | 12 (6%) |
| Q11.7 | How many times do you usually go outside for exercise each week? | | | | |
| | <i>Don't want to go</i> | | | | 36 (19%) |
| | <i>0</i> | | | | 27 (14%) |
| | <i>1 to 2</i> | | | | 47 (25%) |
| | <i>3 to 5</i> | | | | 40 (21%) |
| | <i>More than 5</i> | | | | 39 (21%) |
| Q11.8 | How many times do you usually have association each week? | | | | |
| | <i>Don't want to go</i> | | | | 10 (5%) |
| | <i>0</i> | | | | 5 (3%) |
| | <i>1 to 2</i> | | | | 8 (4%) |
| | <i>3 to 5</i> | | | | 16 (8%) |
| | <i>More than 5</i> | | | | 150 (79%) |
| 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> | | | | 22 (12%) |
| | <i>2 to less than 4 hours</i> | | | | 23 (12%) |
| | <i>4 to less than 6 hours</i> | | | | 23 (12%) |
| | <i>6 to less than 8 hours</i> | | | | 30 (16%) |
| | <i>8 to less than 10 hours</i> | | | | 30 (16%) |
| | <i>10 hours or more</i> | | | | 40 (21%) |
| | <i>Don't know</i> | | | | 19 (10%) |

Section 12: Contact with family and friends

| | | |
|--------------|---|-----------|
| Q12.1 | Have staff supported you and helped you to maintain contact with your family/friends while in this prison? | |
| | Yes | 70 (38%) |
| | No | 113 (62%) |
| Q12.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | |
| | Yes | 75 (40%) |
| | No | 111 (60%) |
| Q12.3 | Have you had any problems getting access to the telephones? | |
| | Yes | 15 (8%) |
| | No | 171 (92%) |
| Q12.4 | How easy or difficult is it for your family and friends to get here? | |
| | <i>I don't get visits</i> | 24 (13%) |
| | <i>Very easy</i> | 32 (17%) |
| | <i>Easy</i> | 51 (28%) |
| | <i>Neither</i> | 14 (8%) |
| | <i>Difficult</i> | 29 (16%) |
| | <i>Very difficult</i> | 24 (13%) |
| | <i>Don't know</i> | 11 (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> | 0 (0%) |
| | Yes | 156 (85%) |
| | No | 27 (15%) |
| 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> | 27 (15%) |
| | <i>No contact</i> | 49 (27%) |
| | <i>Letter</i> | 50 (27%) |
| | <i>Phone</i> | 46 (25%) |
| | <i>Visit</i> | 58 (32%) |
| Q13.3 | Do you have a named offender supervisor in this prison? | |
| | Yes | 157 (86%) |
| | No | 25 (14%) |
| Q13.4 | Do you have a sentence plan? | |
| | <i>Not sentenced</i> | 0 (0%) |
| | Yes | 138 (75%) |
| | No | 46 (25%) |
| Q13.5 | How involved were you in the development of your sentence plan? | |
| | <i>Do not have a sentence plan/ not sentenced</i> | 46 (25%) |
| | <i>Very involved</i> | 35 (19%) |
| | <i>Involved</i> | 38 (21%) |
| | <i>Neither</i> | 20 (11%) |
| | <i>Not very involved</i> | 18 (10%) |
| | <i>Not at all involved</i> | 24 (13%) |

| | | | | |
|---------------|--|-------------------------|------------|----------|
| Q13.6 | Who is working with you to achieve your sentence plan targets? (please tick all that applies to you.) | | | |
| | <i>Do not have a sentence plan/ not sentenced</i> | | 46 (26%) | |
| | <i>Nobody</i> | | 54 (30%) | |
| | <i>Offender supervisor</i> | | 55 (31%) | |
| | <i>Offender manager</i> | | 35 (20%) | |
| | <i>Named/ personal officer</i> | | 16 (9%) | |
| | <i>Staff from other departments</i> | | 16 (9%) | |
| Q13.7 | Can you achieve any of your sentence plan targets in this prison? | | | |
| | <i>Do not have a sentence plan/ not sentenced</i> | | 46 (25%) | |
| | <i>Yes</i> | | 87 (48%) | |
| | <i>No</i> | | 30 (17%) | |
| | <i>Don't know</i> | | 18 (10%) | |
| Q13.8 | Are there plans for you to achieve any of your sentence plan targets in another prison? | | | |
| | <i>Do not have a sentence plan/ not sentenced</i> | | 46 (26%) | |
| | <i>Yes</i> | | 21 (12%) | |
| | <i>No</i> | | 75 (42%) | |
| | <i>Don't know</i> | | 38 (21%) | |
| Q13.9 | Are there plans for you to achieve any of your sentence plan targets in the community? | | | |
| | <i>Do not have a sentence plan/ not sentenced</i> | | 46 (25%) | |
| | <i>Yes</i> | | 44 (24%) | |
| | <i>No</i> | | 48 (26%) | |
| | <i>Don't know</i> | | 44 (24%) | |
| Q13.10 | Do you have a needs based custody plan? | | | |
| | <i>Yes</i> | | 14 (8%) | |
| | <i>No</i> | | 94 (53%) | |
| | <i>Don't know</i> | | 71 (40%) | |
| Q13.11 | Do you feel that any member of staff has helped you to prepare for your release? | | | |
| | <i>Yes</i> | | 39 (22%) | |
| | <i>No</i> | | 140 (78%) | |
| Q13.12 | Do you know of anyone in this prison who can help you with the following on release? (please tick all that applies to you.) | | | |
| | | <i>Do not need help</i> | <i>Yes</i> | |
| | | | <i>No</i> | |
| | Employment | 36 (21%) | 56 (33%) | 78 (46%) |
| | Accommodation | 36 (22%) | 59 (36%) | 70 (42%) |
| | Benefits | 32 (20%) | 69 (42%) | 63 (38%) |
| | Finances | 36 (22%) | 52 (32%) | 74 (46%) |
| | Education | 40 (25%) | 51 (31%) | 72 (44%) |
| | Drugs and alcohol | 47 (29%) | 54 (33%) | 61 (38%) |
| 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> | | 0 (0%) | |
| | <i>Yes</i> | | 86 (50%) | |
| | <i>No</i> | | 87 (50%) | |

Main comparator and comparator to last time



Prisoner survey responses HMP Oakwood 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 Oakwood 2014 | Category C Training Prisons Comparator | HMP Oakwood 2014 | HMP Oakwood 2013 |
|--|--|------------------|--|------------------|------------------|
| | 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 | | 204 | 5,853 | 204 | 207 |
| SECTION 1: General information | | | | | |
| 1.2 | Are you under 21 years of age? | 1% | 3% | 1% | 0% |
| 1.3 | Are you sentenced? | 100% | 100% | 100% | 100% |
| 1.3 | Are you on recall? | 11% | 9% | 11% | 14% |
| 1.4 | Is your sentence less than 12 months? | 8% | 5% | 8% | 7% |
| 1.4 | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 5% | 10% | 5% | 4% |
| 1.5 | Are you a foreign national? | 5% | 9% | 5% | 10% |
| 1.6 | Do you understand spoken English? | 100% | 99% | 100% | 99% |
| 1.7 | Do you understand written English? | 100% | 98% | 100% | 98% |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | 31% | 26% | 31% | 29% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 3% | 4% | 3% | 4% |
| 1.1 | Are you Muslim? | 17% | 12% | 17% | 13% |
| 1.11 | Are you homosexual/gay or bisexual? | 3% | 3% | 3% | 3% |
| 1.12 | Do you consider yourself to have a disability? | 20% | 19% | 20% | 22% |
| 1.13 | Are you a veteran (ex-armed services)? | 5% | 6% | 5% | 5% |
| 1.14 | Is this your first time in prison? | 31% | 37% | 31% | 38% |
| 1.15 | Do you have any children under the age of 18? | 51% | 51% | 51% | 58% |
| SECTION 2: Transfers and escorts | | | | | |
| On your most recent journey here: | | | | | |
| 2.1 | Did you spend more than 2 hours in the van? | 30% | 46% | 30% | 45% |
| For those who spent two or more hours in the escort van: | | | | | |
| 2.2 | Were you offered anything to eat or drink? | 77% | 73% | 77% | 83% |
| 2.3 | Were you offered a toilet break? | 12% | 8% | 12% | 8% |
| 2.4 | Was the van clean? | 61% | 65% | 61% | 63% |
| 2.5 | Did you feel safe? | 81% | 80% | 81% | 86% |
| 2.6 | Were you treated well/very well by the escort staff? | 73% | 72% | 73% | 76% |
| 2.7 | Before you arrived here were you told that you were coming here? | 78% | 61% | 78% | 68% |
| 2.7 | Before you arrived here did you receive any written information about coming here? | 7% | 16% | 7% | 9% |
| 2.8 | When you first arrived here did your property arrive at the same time as you? | 86% | 88% | 86% | 90% |
| SECTION 3: Reception, first night and induction | | | | | |

Main comparator and comparator to last time

Key to tables

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|--|--|---------------------|--|---------------------|---------------------|
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| | Percentages which are not highlighted show there is no significant difference | | | | |
| 3.1 | Were you in reception for less than 2 hours? | 41% | 52% | 41% | 34% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 88% | 84% | 88% | 89% |
| 3.3 | Were you treated well/very well in reception? | 81% | 74% | 81% | 81% |
| When you first arrived: | | | | | |
| 3.4 | Did you have any problems? | 51% | 61% | 51% | 60% |
| 3.4 | Did you have any problems with loss of property? | 15% | 17% | 15% | 15% |
| 3.4 | Did you have any housing problems? | 8% | 14% | 8% | 11% |
| 3.4 | Did you have any problems contacting employers? | 2% | 3% | 2% | 2% |
| 3.4 | Did you have any problems contacting family? | 13% | 20% | 13% | 20% |
| 3.4 | Did you have any problems ensuring dependants were being looked after? | 0% | 2% | 0% | 1% |
| 3.4 | Did you have any money worries? | 9% | 15% | 9% | 16% |
| 3.4 | Did you have any problems with feeling depressed or suicidal? | 10% | 14% | 10% | 12% |
| 3.4 | Did you have any physical health problems? | 16% | 12% | 16% | 14% |
| 3.4 | Did you have any mental health problems? | 14% | 13% | 14% | 16% |
| 3.4 | Did you have any problems with needing protection from other prisoners? | 5% | 5% | 5% | 5% |
| 3.4 | Did you have problems accessing phone numbers? | 13% | 18% | 13% | 15% |
| For those with problems: | | | | | |
| 3.5 | Did you receive any help/ support from staff in dealing with these problems? | 29% | 37% | 29% | 28% |
| When you first arrived here, were you offered any of the following: | | | | | |
| 3.6 | Tobacco? | 75% | 76% | 75% | 67% |
| 3.6 | A shower? | 40% | 27% | 40% | 42% |
| 3.6 | A free telephone call? | 65% | 40% | 65% | 68% |
| 3.6 | Something to eat? | 67% | 58% | 67% | 70% |
| 3.6 | PIN phone credit? | 32% | 52% | 32% | 27% |
| 3.6 | Toiletries/ basic items? | 51% | 43% | 51% | 42% |
| 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? | 60% | 50% | 60% | 53% |
| 3.7 | Someone from health services? | 70% | 69% | 70% | 63% |
| 3.7 | A Listener/Samaritans? | 42% | 32% | 42% | 23% |
| 3.7 | Prison shop/ canteen? | 28% | 21% | 28% | 28% |
| When you first arrived here were you offered information about any of the following: | | | | | |
| 3.8 | What was going to happen to you? | 57% | 51% | 57% | 43% |

Main comparator and comparator to last time

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| | Percentages which are not highlighted show there is no significant difference | | | | |
| 3.8 | Support was available for people feeling depressed or suicidal? | 47% | 42% | 47% | 31% |
| 3.8 | How to make routine requests? | 45% | 45% | 45% | 40% |
| 3.8 | Your entitlement to visits? | 39% | 43% | 39% | 30% |
| 3.8 | Health services? | 47% | 55% | 47% | 42% |
| 3.8 | The chaplaincy? | 51% | 49% | 51% | 41% |
| 3.9 | Did you feel safe on your first night here? | 83% | 83% | 83% | 88% |
| 3.10 | Have you been on an induction course? | 87% | 91% | 87% | 84% |
| | For those who have been on an induction course: | | | | |
| 3.11 | Did the course cover everything you needed to know about the prison? | 54% | 61% | 54% | 50% |
| 3.12 | Did you receive an education (skills for life) assessment? | 84% | 83% | 84% | 80% |
| 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? | 55% | 47% | 55% | 51% |
| 4.1 | Attend legal visits? | 59% | 51% | 59% | 50% |
| 4.1 | Get bail information? | 20% | 15% | 20% | 11% |
| 4.2 | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 37% | 41% | 37% | 46% |
| 4.3 | Can you get legal books in the library? | 29% | 45% | 29% | 28% |
| | For the wing/unit you are currently on: | | | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 70% | 66% | 70% | 68% |
| 4.4 | Are you normally able to have a shower every day? | 99% | 93% | 99% | 100% |
| 4.4 | Do you normally receive clean sheets every week? | 51% | 80% | 51% | 48% |
| 4.4 | Do you normally get cell cleaning materials every week? | 31% | 70% | 31% | 34% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 28% | 37% | 28% | 15% |
| 4.4 | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 66% | 68% | 66% | 62% |
| 4.4 | Can you normally get your stored property, if you need to? | 21% | 24% | 21% | 16% |
| 4.5 | Is the food in this prison good/very good? | 23% | 26% | 23% | 14% |
| 4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 49% | 45% | 49% | 41% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 57% | 57% | 57% | 49% |
| 4.8 | Are your religious beliefs are respected? | 50% | 53% | 50% | 44% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 62% | 58% | 62% | 56% |
| 4.10 | Is it easy/very easy to attend religious services? | 45% | 50% | 45% | 34% |
| SECTION 5: Applications and complaints | | | | | |
| 5.1 | Is it easy to make an application? | 75% | 84% | 75% | 63% |

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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 those who have made an application: | | | | |
| 5.2 | Do you feel applications are dealt with fairly? | 48% | 60% | 48% | 36% |
| 5.2 | Do you feel applications are dealt with quickly (within seven days)? | 35% | 45% | 35% | 19% |
| 5.3 | Is it easy to make a complaint? | 65% | 60% | 65% | 53% |
| | For those who have made a complaint: | | | | |
| 5.4 | Do you feel complaints are dealt with fairly? | 28% | 33% | 28% | 25% |
| 5.4 | Do you feel complaints are dealt with quickly (within seven days)? | 31% | 32% | 31% | 18% |
| 5.5 | Have you ever been prevented from making a complaint when you wanted to? | 25% | 19% | 25% | 20% |
| 5.6 | Is it easy/very easy to see the Independent Monitoring Board? | 25% | 30% | 25% | 17% |
| SECTION 6: Incentives and earned privileges scheme | | | | | |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 52% | 52% | 52% | 49% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 48% | 46% | 48% | 47% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 10% | 6% | 10% | 8% |
| 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? | 24% | 40% | 24% | 19% |
| SECTION 7: Relationships with staff | | | | | |
| 7.1 | Do most staff, in this prison, treat you with respect? | 79% | 78% | 79% | 71% |
| 7.2 | Is there a member of staff, in this prison, that you can turn to for help if you have a problem? | 70% | 75% | 70% | 65% |
| 7.3 | Has a member of staff checked on you personally in the last week to see how you were getting on? | 40% | 29% | 40% | 24% |
| 7.4 | Do staff normally speak to you most of the time/all of the time during association? | 27% | 20% | 27% | 21% |
| 7.5 | Do you have a personal officer? | 87% | 69% | 87% | 61% |
| | For those with a personal officer: | | | | |
| 7.6 | Do you think your personal officer is helpful/very helpful? | 61% | 63% | 61% | 59% |
| SECTION 8: Safety | | | | | |
| 8.1 | Have you ever felt unsafe here? | 39% | 33% | 39% | 37% |
| 8.2 | Do you feel unsafe now? | 13% | 14% | 13% | 16% |
| 8.4 | Have you been victimised by other prisoners here? | 31% | 25% | 31% | 29% |
| | Since you have been here, have other prisoners: | | | | |
| 8.5 | Made insulting remarks about you, your family or friends? | 15% | 11% | 15% | 12% |
| 8.5 | Hit, kicked or assaulted you? | 9% | 6% | 9% | 9% |
| 8.5 | Sexually abused you? | 2% | 1% | 2% | 1% |
| 8.5 | Threatened or intimidated you? | 20% | 15% | 20% | 16% |
| 8.5 | Taken your canteen/property? | 8% | 5% | 8% | 7% |

Main comparator and comparator to last time

Key to tables

| | | HMP Oakwood 2014 | Category C Training Prisons Comparator | HMP Oakwood 2014 | HMP Oakwood 2013 |
|------------------------------------|--|------------------|--|------------------|------------------|
| | Any percentage highlighted in green is significantly better | | | | |
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 8.5 | Victimised you because of medication? | 8% | 4% | 8% | 6% |
| 8.5 | Victimised you because of debt? | 8% | 3% | 8% | 5% |
| 8.5 | Victimised you because of drugs? | 8% | 3% | 8% | 5% |
| 8.5 | Victimised you because of your race or ethnic origin? | 3% | 3% | 3% | 4% |
| 8.5 | Victimised you because of your religion/religious beliefs? | 3% | 3% | 3% | 3% |
| 8.5 | Victimised you because of your nationality? | 3% | 2% | 3% | 3% |
| 8.5 | Victimised you because you were from a different part of the country? | 4% | 4% | 4% | 5% |
| 8.5 | Victimised you because you are from a Traveller community? | 2% | 1% | 2% | 2% |
| 8.5 | Victimised you because of your sexual orientation? | 2% | 1% | 2% | 1% |
| 8.5 | Victimised you because of your age? | 3% | 3% | 3% | 1% |
| 8.5 | Victimised you because you have a disability? | 4% | 3% | 4% | 3% |
| 8.5 | Victimised you because you were new here? | 7% | 4% | 7% | 8% |
| 8.5 | Victimised you because of your offence/crime? | 6% | 4% | 6% | 4% |
| 8.5 | Victimised you because of gang related issues? | 6% | 4% | 6% | 5% |
| SECTION 8: Safety continued | | | | | |
| 8.6 | Have you been victimised by staff here? | 24% | 29% | 24% | 30% |
| | Since you have been here, have staff: | | | | |
| 8.7 | Made insulting remarks about you, your family or friends? | 6% | 11% | 6% | 10% |
| 8.7 | Hit, kicked or assaulted you? | 3% | 3% | 3% | 5% |
| 8.7 | Sexually abused you? | 1% | 1% | 1% | 0% |
| 8.7 | Threatened or intimidated you? | 9% | 13% | 9% | 12% |
| 8.7 | Victimised you because of medication? | 4% | 4% | 4% | 7% |
| 8.7 | Victimised you because of debt? | 3% | 2% | 3% | 3% |
| 8.7 | Victimised you because of drugs? | 4% | 2% | 4% | 4% |
| 8.7 | Victimised you because of your race or ethnic origin? | 4% | 4% | 4% | 4% |
| 8.7 | Victimised you because of your religion/religious beliefs? | 2% | 3% | 2% | 4% |
| 8.7 | Victimised you because of your nationality? | 3% | 3% | 3% | 3% |
| 8.7 | Victimised you because you were from a different part of the country? | 3% | 3% | 3% | 5% |
| 8.7 | Victimised you because you are from a Traveller community? | 1% | 1% | 1% | 1% |
| 8.7 | Victimised you because of your sexual orientation? | 2% | 1% | 2% | 0% |

Main comparator and comparator to last time

Key to tables

| | | HMP Oakwood 2014 | Category C Training Prisons Comparator | HMP Oakwood 2014 | HMP Oakwood 2013 |
|--------------------------------------|---|------------------|--|------------------|------------------|
| | Any percentage highlighted in green is significantly better | | | | |
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 8.7 | Victimised you because of your age? | 2% | 2% | 2% | 1% |
| 8.7 | Victimised you because you have a disability? | 4% | 3% | 4% | 2% |
| 8.7 | Victimised you because you were new here? | 3% | 4% | 3% | 6% |
| 8.7 | Victimised you because of your offence/crime? | 3% | 4% | 3% | 2% |
| 8.7 | Victimised you because of gang related issues? | 3% | 2% | 3% | 2% |
| | For those who have been victimised by staff or other prisoners: | | | | |
| 8.8 | Did you report any victimisation that you have experienced? | 53% | 39% | 53% | 44% |
| SECTION 9: Health services | | | | | |
| 9.1 | Is it easy/very easy to see the doctor? | 14% | 33% | 14% | 5% |
| 9.1 | Is it easy/very easy to see the nurse? | 27% | 56% | 27% | 14% |
| 9.1 | Is it easy/very easy to see the dentist? | 9% | 14% | 9% | 4% |
| | For those who have been to the following services, do you think the quality of the health service from the following is good/very good: | | | | |
| 9.2 | The doctor? | 34% | 48% | 34% | 25% |
| 9.2 | The nurse? | 38% | 59% | 38% | 30% |
| 9.2 | The dentist? | 32% | 44% | 32% | 24% |
| 9.3 | The overall quality of health services? | 25% | 44% | 25% | 18% |
| 9.4 | Are you currently taking medication? | 46% | 48% | 46% | 46% |
| | For those currently taking medication: | | | | |
| 9.5 | Are you allowed to keep possession of some or all of your medication in your own cell? | 80% | 85% | 80% | 69% |
| 9.6 | Do you have any emotional well being or mental health problems? | 30% | 28% | 30% | 32% |
| | For those who have problems: | | | | |
| 9.7 | Are you being helped or supported by anyone in this prison? | 37% | 51% | 37% | 30% |
| SECTION 10: Drugs and alcohol | | | | | |
| 10.1 | Did you have a problem with drugs when you came into this prison? | 27% | 24% | 27% | 25% |
| 10.2 | Did you have a problem with alcohol when you came into this prison? | 19% | 17% | 19% | 14% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 47% | 33% | 47% | 42% |
| 10.4 | Is it easy/very easy to get alcohol in this prison? | 27% | 22% | 27% | 25% |
| 10.5 | Have you developed a problem with drugs since you have been in this prison? | 12% | 8% | 12% | 14% |
| 10.6 | Have you developed a problem with diverted medication since you have been in this prison? | 11% | 7% | 11% | 9% |
| | For those with drug or alcohol problems: | | | | |
| 10.7 | Have you received any support or help with your drug problem while in this prison? | 69% | 63% | 69% | 59% |
| 10.8 | Have you received any support or help with your alcohol problem while in this prison? | 64% | 63% | 64% | 67% |

Main comparator and comparator to last time

Key to tables

| Any percentage highlighted in green is significantly better | | HMP Oakwood 2014 | Category C Training Prisons Comparator | HMP Oakwood 2014 | HMP Oakwood 2013 |
|--|---|------------------|--|------------------|------------------|
| Any percentage highlighted in blue is significantly worse | | | | | |
| Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | | |
| Percentages which are not highlighted show there is no significant difference | | | | | |
| For those who have received help or support with their drug or alcohol problem: | | | | | |
| 10.9 | Was the support helpful? | 78% | 78% | 78% | 72% |
| SECTION 11: Activities | | | | | |
| Is it very easy/ easy to get into the following activities: | | | | | |
| 11.1 | A prison job? | 55% | 45% | 55% | 24% |
| 11.1 | Vocational or skills training? | 44% | 39% | 44% | 24% |
| 11.1 | Education (including basic skills)? | 65% | 53% | 65% | 45% |
| 11.1 | Offending behaviour programmes? | 29% | 22% | 29% | 12% |
| Are you currently involved in any of the following activities: | | | | | |
| 11.2 | A prison job? | 61% | 60% | 61% | 51% |
| 11.2 | Vocational or skills training? | 16% | 16% | 16% | 10% |
| 11.2 | Education (including basic skills)? | 25% | 24% | 25% | 16% |
| 11.2 | Offending behaviour programmes? | 13% | 13% | 13% | 7% |
| 11.3 | Have you had a job while in this prison? | 86% | 83% | 86% | 72% |
| For those who have had a prison job while in this prison: | | | | | |
| 11.3 | Do you feel the job will help you on release? | 37% | 42% | 37% | 38% |
| 11.3 | Have you been involved in vocational or skills training while in this prison? | 77% | 74% | 77% | 62% |
| For those who have had vocational or skills training while in this prison: | | | | | |
| 11.3 | Do you feel the vocational or skills training will help you on release? | 60% | 57% | 60% | 57% |
| 11.3 | Have you been involved in education while in this prison? | 80% | 79% | 80% | 66% |
| For those who have been involved in education while in this prison: | | | | | |
| 11.3 | Do you feel the education will help you on release? | 60% | 59% | 60% | 51% |
| 11.3 | Have you been involved in offending behaviour programmes while in this prison? | 76% | 72% | 76% | 58% |
| 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? | 50% | 53% | 50% | 51% |
| 11.4 | Do you go to the library at least once a week? | 35% | 44% | 35% | 45% |
| 11.5 | Does the library have a wide enough range of materials to meet your needs? | 38% | 48% | 38% | 25% |
| 11.6 | Do you go to the gym three or more times a week? | 31% | 34% | 31% | 27% |
| 11.7 | Do you go outside for exercise three or more times a week? | 42% | 49% | 42% | 53% |
| 11.8 | Do you go on association more than five times each week? | 79% | 73% | 79% | 83% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? | 21% | 16% | 21% | 22% |
| SECTION 12: Friends and family | | | | | |
| 12.1 | Have staff supported you and helped you to maintain contact with family/friends while in this prison? | 38% | 34% | 38% | 31% |
| 12.2 | Have you had any problems with sending or receiving mail? | 40% | 45% | 40% | 51% |

Main comparator and comparator to last time

Key to tables

| | Any percentage highlighted in green is significantly better | HMP Oakwood 2014 | Category C Training Prisons Comparator | HMP Oakwood 2014 | HMP Oakwood 2013 |
|---|---|------------------|--|------------------|------------------|
| | 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 | | | | |
| 12.3 | Have you had any problems getting access to the telephones? | 8% | 25% | 8% | 4% |
| 12.4 | Is it easy/ very easy for your friends and family to get here? | 45% | 26% | 45% | 34% |
| 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? | 85% | 83% | 85% | 77% |
| For those who are sentenced what type of contact have you had with your offender manager: | | | | | |
| 13.2 | No contact? | 31% | 35% | 31% | 40% |
| 13.2 | Contact by letter? | 32% | 37% | 32% | 36% |
| 13.2 | Contact by phone? | 30% | 24% | 30% | 25% |
| 13.2 | Contact by visit? | 37% | 33% | 37% | 21% |
| 13.3 | Do you have a named offender supervisor in this prison? | 86% | 72% | 86% | 48% |
| For those who are sentenced: | | | | | |
| 13.4 | Do you have a sentence plan? | 75% | 70% | 75% | 43% |
| For those with a sentence plan: | | | | | |
| 13.5 | Were you involved/very involved in the development of your plan? | 54% | 54% | 54% | 58% |
| Who is working with you to achieve your sentence plan targets: | | | | | |
| 13.6 | Nobody? | 41% | 47% | 41% | 58% |
| 13.6 | Offender supervisor? | 42% | 35% | 42% | 27% |
| 13.6 | Offender manager? | 27% | 27% | 27% | 16% |
| 13.6 | Named/ personal officer? | 12% | 12% | 12% | 11% |
| 13.6 | Staff from other departments? | 12% | 16% | 12% | 10% |
| For those with a sentence plan: | | | | | |
| 13.7 | Can you achieve any of your sentence plan targets in this prison? | 65% | 65% | 65% | 48% |
| 13.8 | Are there plans for you to achieve any of your targets in another prison? | 16% | 22% | 16% | 25% |
| 13.9 | Are there plans for you to achieve any of your targets in the community? | 32% | 29% | 32% | 34% |
| 13.10 | Do you have a needs based custody plan? | 8% | 7% | 8% | 4% |
| 13.11 | Do you feel that any member of staff has helped you to prepare for release? | 22% | 16% | 22% | 8% |
| For those that need help do you know of anyone in this prison who can help you on release with the following: | | | | | |
| 13.12 | Employment? | 42% | 33% | 42% | 22% |
| 13.12 | Accommodation? | 46% | 37% | 46% | 21% |
| 13.12 | Benefits? | 52% | 39% | 52% | 22% |
| 13.12 | Finances? | 41% | 26% | 41% | 16% |
| 13.12 | Education? | 41% | 34% | 41% | 23% |
| 13.12 | Drugs and alcohol? | 47% | 44% | 47% | 32% |
| For those who are sentenced: | | | | | |
| 13.13 | Have you done anything, or has anything happened to you here to make you less likely to offend in future? | 50% | 55% | 50% | 45% |

Diversity analysis



Key question responses (ethnicity and religion) HMP Oakwood 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 | Muslim prisoners | Non-Muslim prisoners |
|--|--|-------------------------------------|-----------------|------------------|----------------------|
| | Any percentage highlighted in green is significantly better | | | | |
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| Number of completed questionnaires returned | | 62 | 139 | 34 | 163 |
| 1.3 | Are you sentenced? | 100% | 100% | 100% | 100% |
| 1.5 | Are you a foreign national? | 7% | 4% | 12% | 3% |
| 1.6 | Do you understand spoken English? | 100% | 99% | 97% | 100% |
| 1.7 | Do you understand written English? | 100% | 99% | 100% | 99% |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | | | 91% | 19% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 0% | 4% | 0% | 3% |
| 1.1 | Are you Muslim? | 50% | 2% | | |
| 1.12 | Do you consider yourself to have a disability? | 8% | 25% | 21% | 20% |
| 1.13 | Are you a veteran (ex-armed services)? | 0% | 7% | 0% | 6% |
| 1.14 | Is this your first time in prison? | 43% | 26% | 45% | 28% |
| 2.6 | Were you treated well/very well by the escort staff? | 59% | 78% | 55% | 76% |
| 2.7 | Before you arrived here were you told that you were coming here? | 79% | 78% | 77% | 78% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 87% | 89% | 79% | 90% |
| 3.3 | Were you treated well/very well in reception? | 77% | 83% | 67% | 85% |
| 3.4 | Did you have any problems when you first arrived? | 49% | 52% | 61% | 48% |
| 3.7 | Did you have access to someone from health care when you first arrived here? | 71% | 70% | 67% | 70% |
| 3.9 | Did you feel safe on your first night here? | 86% | 83% | 76% | 85% |
| 3.10 | Have you been on an induction course? | 97% | 84% | 94% | 86% |
| 4.1 | Is it easy/very easy to communicate with your solicitor or legal representative? | 63% | 50% | 64% | 52% |

Diversity analysis

Key to tables

| | Any percentage highlighted in green is significantly better | Black and minority ethnic prisoners | White prisoners | Muslim prisoners | Non-Muslim prisoners |
|-----|---|-------------------------------------|-----------------|------------------|----------------------|
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 71% | 69% | 61% | 72% |
| 4.4 | Are you normally able to have a shower every day? | 97% | 99% | 94% | 99% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 23% | 30% | 21% | 29% |
| 4.5 | Is the food in this prison good/very good? | 25% | 22% | 18% | 24% |
| 4.6 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 43% | 52% | 39% | 51% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 51% | 61% | 51% | 57% |
| 4.8 | Do you feel your religious beliefs are respected? | 55% | 46% | 67% | 45% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 66% | 59% | 64% | 61% |
| 5.1 | Is it easy to make an application? | 75% | 75% | 70% | 76% |
| 5.3 | Is it easy to make a complaint? | 62% | 67% | 56% | 67% |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 48% | 53% | 41% | 52% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 55% | 44% | 45% | 46% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 10% | 9% | 10% | 9% |
| 7.1 | Do most staff, in this prison, treat you with respect? | 75% | 81% | 61% | 82% |
| 7.2 | Is there a member of staff you can turn to for help if you have a problem in this prison? | 70% | 70% | 51% | 73% |
| 7.3 | Do staff normally speak to you at least most of the time during association time (most/all of the time) | 17% | 32% | 21% | 28% |
| 7.4 | Do you have a personal officer? | 89% | 86% | 85% | 87% |
| 8.1 | Have you ever felt unsafe here? | 39% | 40% | 45% | 38% |
| 8.2 | Do you feel unsafe now? | 10% | 14% | 12% | 13% |
| 8.3 | Have you been victimised by other prisoners? | 30% | 33% | 33% | 31% |
| 8.5 | Have you ever felt threatened or intimidated by other prisoners here? | 20% | 21% | 18% | 20% |
| 8.5 | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 5% | 2% | 6% | 3% |
| 8.5 | Have you been victimised because of your religion/religious beliefs? (By prisoners) | 7% | 1% | 9% | 1% |
| 8.5 | Have you been victimised because of your nationality? (By prisoners) | 3% | 2% | 3% | 3% |

Diversity analysis

Key to tables

| | Any percentage highlighted in green is significantly better | Black and minority ethnic prisoners | White prisoners | Muslim prisoners | Non-Muslim prisoners |
|------|---|-------------------------------------|-----------------|------------------|----------------------|
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 8.5 | Have you been victimised because you have a disability? (By prisoners) | 2% | 5% | 3% | 5% |
| 8.6 | Have you been victimised by a member of staff? | 36% | 20% | 42% | 21% |
| 8.7 | Have you ever felt threatened or intimidated by staff here? | 10% | 8% | 13% | 8% |
| 8.7 | Have you been victimised because of your race or ethnic origin since you have been here? (By staff) | 7% | 3% | 10% | 3% |
| 8.7 | Have you been victimised because of your religion/religious beliefs? (By staff) | 5% | 1% | 10% | 1% |
| 8.7 | Have you been victimised because of your nationality? (By staff) | 7% | 1% | 10% | 1% |
| 8.7 | Have you been victimised because you have a disability? (By staff) | 3% | 4% | 6% | 3% |
| 9.1 | Is it easy/very easy to see the doctor? | 14% | 13% | 6% | 15% |
| 9.1 | Is it easy/ very easy to see the nurse? | 28% | 26% | 24% | 28% |
| 9.4 | Are you currently taking medication? | 42% | 49% | 53% | 46% |
| 9.6 | Do you feel you have any emotional well being/mental health issues? | 20% | 34% | 34% | 30% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 42% | 50% | 48% | 47% |
| 11.2 | Are you currently working in the prison? | 63% | 59% | 62% | 60% |
| 11.2 | Are you currently undertaking vocational or skills training? | 14% | 16% | 10% | 16% |
| 11.2 | Are you currently in education (including basic skills)? | 32% | 21% | 28% | 22% |
| 11.2 | Are you currently taking part in an offending behaviour programme? | 15% | 11% | 6% | 14% |
| 11.4 | Do you go to the library at least once a week? | 45% | 30% | 39% | 33% |
| 11.6 | Do you go to the gym three or more times a week? | 38% | 27% | 36% | 30% |
| 11.7 | Do you go outside for exercise three or more times a week? | 45% | 41% | 42% | 42% |
| 11.8 | On average, do you go on association more than five times each week? | 76% | 80% | 72% | 80% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc) | 16% | 24% | 19% | 22% |
| 12.2 | Have you had any problems sending or receiving mail? | 48% | 37% | 58% | 37% |
| 12.3 | Have you had any problems getting access to the telephones? | 7% | 9% | 13% | 7% |

Diversity Analysis



Key question responses (disability, age 50 and over) HMP Oakwood 2014

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

Key to tables

| | | Consider themselves to have a disability | Do not consider themselves to have a disability | | Prisoners aged 50 and over | Prisoners under the age of 50 |
|--|--|--|---|--|----------------------------|-------------------------------|
| | Any percentage highlighted in green is significantly better | | | | | |
| | Any percentage highlighted in blue is significantly worse | | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | | |
| Number of completed questionnaires returned | | 40 | 161 | | 24 | 179 |
| 1.3 | Are you sentenced? | 100% | 100% | | 100% | 100% |
| 1.5 | Are you a foreign national? | 0% | 6% | | 0% | 5% |
| 1.6 | Do you understand spoken English? | 97% | 100% | | 100% | 99% |
| 1.7 | Do you understand written English? | 97% | 100% | | 100% | 99% |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | 13% | 35% | | 17% | 32% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 5% | 3% | | 0% | 4% |
| 1.1 | Are you Muslim? | 18% | 17% | | 14% | 17% |
| 1.12 | Do you consider yourself to have a disability? | | | | 35% | 18% |
| 1.13 | Are you a veteran (ex-armed services)? | 5% | 4% | | 9% | 4% |
| 1.14 | Is this your first time in prison? | 24% | 33% | | 59% | 27% |
| 2.6 | Were you treated well/very well by the escort staff? | 70% | 74% | | 92% | 70% |
| 2.7 | Before you arrived here were you told that you were coming here? | 73% | 80% | | 67% | 79% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 83% | 90% | | 87% | 88% |
| 3.3 | Were you treated well/very well in reception? | 82% | 82% | | 92% | 80% |
| 3.4 | Did you have any problems when you first arrived? | 87% | 42% | | 52% | 51% |
| 3.7 | Did you have access to someone from health care when you first arrived here? | 65% | 71% | | 74% | 69% |
| 3.9 | Did you feel safe on your first night here? | 82% | 83% | | 87% | 83% |
| 3.10 | Have you been on an induction course? | 85% | 88% | | 87% | 87% |
| 4.1 | Is it easy/very easy to communicate with your solicitor or legal representative? | 46% | 57% | | 58% | 54% |

Key to tables

Diversity Analysis

| | | Consider themselves to have a disability | Do not consider themselves to have a disability | Prisoners aged 50 and over | Prisoners under the age of 50 |
|-----|---|--|---|----------------------------|-------------------------------|
| | Any percentage highlighted in green is significantly better | | | | |
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 4.4 | Are you normally offered enough clean, suitable clothes for the week? | 60% | 72% | 83% | 68% |
| 4.4 | Are you normally able to have a shower every day? | 100% | 98% | 100% | 98% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 28% | 28% | 38% | 26% |
| 4.5 | Is the food in this prison good/very good? | 28% | 22% | 33% | 22% |
| 4.6 | Does the shop /canteen sell a wide enough range of goods to meet your needs? | 53% | 48% | 46% | 50% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 68% | 55% | 83% | 53% |
| 4.8 | Do you feel your religious beliefs are respected? | 58% | 48% | 75% | 47% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 60% | 62% | 71% | 61% |
| 5.1 | Is it easy to make an application? | 75% | 76% | 65% | 76% |
| 5.3 | Is it easy to make a complaint? | 70% | 65% | 82% | 64% |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 44% | 54% | 71% | 49% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 35% | 51% | 52% | 47% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 8% | 10% | 0% | 11% |
| 7.1 | Do most staff, in this prison, treat you with respect? | 79% | 79% | 92% | 78% |
| 7.2 | Is there a member of staff you can turn to for help if you have a problem in this prison? | 70% | 70% | 91% | 68% |
| 7.3 | Do staff normally speak to you at least most of the time during association time (most/all of the time) | 28% | 27% | 38% | 26% |
| 7.4 | Do you have a personal officer? | 83% | 89% | 87% | 87% |
| 8.1 | Have you ever felt unsafe here? | 50% | 36% | 31% | 40% |
| 8.2 | Do you feel unsafe now? | 15% | 12% | 9% | 13% |
| 8.3 | Have you been victimised by other prisoners? | 42% | 28% | 26% | 32% |
| 8.5 | Have you ever felt threatened or intimidated by other prisoners here? | 27% | 18% | 22% | 19% |
| 8.5 | Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) | 3% | 3% | 0% | 3% |
| 8.5 | Have you been victimised because of your religion/religious beliefs? (By prisoners) | 3% | 3% | 0% | 2% |
| 8.5 | Have you been victimised because of your nationality? (By prisoners) | 3% | 3% | 0% | 2% |
| 8.5 | Have you been victimised because of your age? (By prisoners) | 5% | 2% | 5% | 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 | Prisoners aged 50 and over | Prisoners under the age of 50 |
|------|---|--|---|----------------------------|-------------------------------|
| | Any percentage highlighted in blue is significantly worse | | | | |
| | Any percentage highlighted in orange shows a significant difference in prisoners' background details | | | | |
| | Percentages which are not highlighted show there is no significant difference | | | | |
| 8.5 | Have you been victimised because you have a disability? (By prisoners) | 16% | 1% | 9% | 3% |
| 8.6 | Have you been victimised by a member of staff? | 27% | 23% | 13% | 25% |
| 8.7 | Have you ever felt threatened or intimidated by staff here? | 19% | 7% | 9% | 8% |
| 8.7 | Have you been victimised because of your race or ethnic origin since you have been here? (By staff) | 5% | 4% | 0% | 4% |
| 8.7 | Have you been victimised because of your religion/religious beliefs? (By staff) | 3% | 2% | 0% | 2% |
| 8.7 | Have you been victimised because of your nationality? (By staff) | 3% | 3% | 0% | 2% |
| 8.7 | Have you been victimised because of your age? (By staff) | 5% | 1% | 5% | 1% |
| 8.7 | Have you been victimised because you have a disability? (By staff) | 13% | 1% | 5% | 3% |
| 9.1 | Is it easy/very easy to see the doctor? | 15% | 13% | 27% | 12% |
| 9.1 | Is it easy/ very easy to see the nurse? | 29% | 26% | 27% | 27% |
| 9.4 | Are you currently taking medication? | 85% | 36% | 74% | 42% |
| 9.6 | Do you feel you have any emotional well being/mental health issues? | 67% | 20% | 18% | 31% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 49% | 47% | 35% | 48% |
| 11.2 | Are you currently working in the prison? | 54% | 62% | 61% | 61% |
| 11.2 | Are you currently undertaking vocational or skills training? | 8% | 18% | 22% | 15% |
| 11.2 | Are you currently in education (including basic skills)? | 24% | 25% | 17% | 26% |
| 11.2 | Are you currently taking part in an offending behaviour programme? | 8% | 14% | 5% | 14% |
| 11.4 | Do you go to the library at least once a week? | 45% | 32% | 44% | 33% |
| 11.6 | Do you go to the gym three or more times a week? | 11% | 35% | 22% | 32% |
| 11.7 | Do you go outside for exercise three or more times a week? | 28% | 46% | 35% | 43% |
| 11.8 | On average, do you go on association more than five times each week? | 78% | 80% | 77% | 80% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc) | 11% | 24% | 22% | 22% |
| 12.2 | Have you had any problems sending or receiving mail? | 49% | 38% | 27% | 42% |
| 12.3 | Have you had any problems getting access to the telephones? | 14% | 7% | 5% | 8% |



Prisoner survey responses HMP Oakwood 2014 (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

| | | Ash Wing | All Other Wings (Beech, Cedar, Douglas and Elm) |
|--|--|-----------|---|
| | 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 | | 63 | 140 |
| SECTION 1: General information | | | |
| 1.2 | Are you under 21 years of age? | 0% | 1% |
| 1.3 | Are you sentenced? | 100% | 100% |
| 1.3 | Are you on recall? | 16% | 9% |
| 1.4 | Is your sentence less than 12 months? | 8% | 8% |
| 1.4 | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 8% | 3% |
| 1.5 | Are you a foreign national? | 3% | 5% |
| 1.6 | Do you understand spoken English? | 98% | 100% |
| 1.7 | Do you understand written English? | 100% | 99% |
| 1.8 | Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.) | 13% | 39% |
| 1.9 | Do you consider yourself to be Gypsy/ Romany/ Traveller? | 2% | 4% |
| 1.1 | Are you Muslim? | 9% | 21% |
| 1.11 | Are you homosexual/gay or bisexual? | 8% | 0% |
| 1.12 | Do you consider yourself to have a disability? | 34% | 14% |
| 1.13 | Are you a veteran (ex-armed services)? | 11% | 1% |
| 1.14 | Is this your first time in prison? | 31% | 32% |
| 1.15 | Do you have any children under the age of 18? | 51% | 52% |
| SECTION 2: Transfers and escorts | | | |
| On your most recent journey here: | | | |
| 2.1 | Did you spend more than 2 hours in the van? | 46% | 22% |
| 2.5 | Did you feel safe? | 84% | 79% |
| 2.6 | Were you treated well/very well by the escort staff? | 78% | 71% |
| 2.7 | Before you arrived here were you told that you were coming here? | 74% | 79% |
| 2.8 | When you first arrived here did your property arrive at the same time as you? | 92% | 83% |
| SECTION 3: Reception, first night and induction | | | |
| 3.1 | Were you in reception for less than 2 hours? | 38% | 42% |
| 3.2 | When you were searched in reception, was this carried out in a respectful way? | 95% | 85% |
| 3.3 | Were you treated well/very well in reception? | 82% | 81% |
| When you first arrived: | | | |
| 3.4 | Did you have any problems? | 54% | 50% |
| 3.4 | Did you have any problems with loss of property? | 10% | 18% |
| 3.4 | Did you have any housing problems? | 13% | 5% |

Key to tables

| | | | |
|--|---|----------|---|
| | Any percentage highlighted in green is significantly better | Ash Wing | All Other Wings (Beech, Cedar, Douglas and Elm) |
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| | Percentages which are not highlighted show there is no significant difference | | |
| 3.4 | Did you have any problems contacting employers? | 0% | 2% |
| 3.4 | Did you have any problems contacting family? | 15% | 13% |
| 3.4 | Did you have any problems ensuring dependants were being looked after? | 0% | 0% |
| 3.4 | Did you have any money worries? | 13% | 8% |
| 3.4 | Did you have any problems with feeling depressed or suicidal? | 21% | 5% |
| 3.4 | Did you have any physical health problems? | 17% | 16% |
| 3.4 | Did you have any mental health problems? | 25% | 9% |
| 3.4 | Did you have any problems with needing protection from other prisoners? | 12% | 2% |
| 3.4 | Did you have problems accessing phone numbers? | 12% | 14% |
| | When you first arrived here, were you offered any of the following: | | |
| 3.6 | Tobacco? | 76% | 74% |
| 3.6 | A shower? | 40% | 41% |
| 3.6 | A free telephone call? | 65% | 64% |
| 3.6 | Something to eat? | 76% | 63% |
| 3.6 | PIN phone credit? | 30% | 32% |
| 3.6 | Toiletries/ basic items? | 56% | 49% |
| SECTION 3: Reception, first night and induction continued | | | |
| | When you first arrived here did you have access to the following people: | | |
| 3.7 | The chaplain or a religious leader? | 61% | 60% |
| 3.7 | Someone from health services? | 72% | 68% |
| 3.7 | A Listener/Samaritans? | 41% | 43% |
| 3.7 | Prison shop/ canteen? | 30% | 28% |
| | When you first arrived here were you offered information about any of the following: | | |
| 3.8 | What was going to happen to you? | 52% | 60% |
| 3.8 | Support was available for people feeling depressed or suicidal? | 49% | 47% |
| 3.8 | How to make routine requests? | 46% | 45% |
| 3.8 | Your entitlement to visits? | 35% | 41% |
| 3.8 | Health services? | 46% | 48% |
| 3.8 | The chaplaincy? | 51% | 51% |
| 3.9 | Did you feel safe on your first night here? | 79% | 85% |
| 3.10 | Have you been on an induction course? | 76% | 92% |
| 3.12 | Did you receive an education (skills for life) assessment? | 83% | 84% |
| 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? | 50% | 56% |
| 4.1 | Attend legal visits? | 50% | 62% |
| 4.1 | Get bail information? | 24% | 19% |
| 4.2 | Have staff ever opened letters from your solicitor or legal representative when you were not with them? | 33% | 39% |
| 4.3 | Can you get legal books in the library? | 31% | 28% |

Key to tables

| | | | |
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| | 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? | 68% | 71% |
| 4.4 | Are you normally able to have a shower every day? | 100% | 98% |
| 4.4 | Do you normally receive clean sheets every week? | 68% | 44% |
| 4.4 | Do you normally get cell cleaning materials every week? | 26% | 33% |
| 4.4 | Is your cell call bell normally answered within five minutes? | 31% | 26% |
| 4.4 | Is it normally quiet enough for you to be able to relax or sleep in your cell at night time? | 65% | 66% |
| 4.4 | Can you normally get your stored property, if you need to? | 23% | 19% |
| 4.5 | Is the food in this prison good/very good? | 27% | 22% |
| 4.6 | Does the shop/canteen sell a wide enough range of goods to meet your needs? | 62% | 43% |
| 4.7 | Are you able to speak to a Listener at any time, if you want to? | 63% | 54% |
| 4.8 | Are your religious beliefs are respected? | 51% | 49% |
| 4.9 | Are you able to speak to a religious leader of your faith in private if you want to? | 60% | 62% |
| 4.10 | Is it easy/very easy to attend religious services? | 41% | 47% |
| SECTION 5: Applications and complaints | | | |
| 5.1 | Is it easy to make an application? | 68% | 78% |
| 5.3 | Is it easy to make a complaint? | 62% | 66% |
| 5.5 | Have you ever been prevented from making a complaint when you wanted to? | 23% | 27% |
| 5.6 | Is it easy/very easy to see the Independent Monitoring Board? | 23% | 25% |
| SECTION 6: Incentive and earned privileges scheme | | | |
| 6.1 | Do you feel you have been treated fairly in your experience of the IEP scheme? | 58% | 49% |
| 6.2 | Do the different levels of the IEP scheme encourage you to change your behaviour? | 42% | 50% |
| 6.3 | In the last six months have any members of staff physically restrained you (C&R)? | 11% | 9% |
| SECTION 7: Relationships with staff | | | |
| 7.1 | Do most staff, in this prison, treat you with respect? | 82% | 78% |
| 7.2 | Is there a member of staff, in this prison, that you can turn to for help if you have a problem? | 70% | 71% |
| 7.3 | Has a member of staff checked on you personally in the last week to see how you were getting on? | 48% | 37% |
| 7.4 | Do staff normally speak to you most of the time/all of the time during association? | 33% | 25% |
| 7.5 | Do you have a personal officer? | 85% | 88% |
| SECTION 8: Safety | | | |
| 8.1 | Have you ever felt unsafe here? | 56% | 31% |
| 8.2 | Do you feel unsafe now? | 18% | 10% |
| 8.4 | Have you been victimised by other prisoners here? | 47% | 24% |
| | Since you have been here, have other prisoners: | | |
| 8.5 | Made insulting remarks about you, your family or friends? | 34% | 7% |
| 8.5 | Hit, kicked or assaulted you? | 17% | 5% |
| 8.5 | Sexually abused you? | 3% | 1% |
| 8.5 | Threatened or intimidated you? | 32% | 15% |

Key to tables

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| | Percentages which are not highlighted show there is no significant difference | | |
| 8.5 | Taken your canteen/property? | 15% | 5% |
| 8.5 | Victimised you because of medication? | 12% | 6% |
| 8.5 | Victimised you because of debt? | 14% | 5% |
| 8.5 | Victimised you because of drugs? | 9% | 8% |
| 8.5 | Victimised you because of your race or ethnic origin? | 3% | 3% |
| 8.5 | Victimised you because of your religion/religious beliefs? | 2% | 3% |
| 8.5 | Victimised you because of your nationality? | 3% | 2% |
| 8.5 | Victimised you because you were from a different part of the country? | 7% | 3% |
| 8.5 | Victimised you because you are from a traveller community? | 2% | 2% |
| 8.5 | Victimised you because of your sexual orientation? | 5% | 1% |
| 8.5 | Victimised you because of your age? | 2% | 3% |
| 8.5 | Victimised you because you have a disability? | 7% | 3% |
| 8.5 | Victimised you because you were new here? | 9% | 6% |
| 8.5 | Victimised you because of your offence/crime? | 14% | 2% |
| 8.5 | Victimised you because of gang related issues? | 5% | 6% |
| SECTION 8: Safety continued | | | |
| 8.6 | Have you been victimised by staff here? | 18% | 27% |
| | Since you have been here, have staff: | | |
| 8.7 | Made insulting remarks about you, your family or friends? | 3% | 7% |
| 8.7 | Hit, kicked or assaulted you? | 2% | 4% |
| 8.7 | Sexually abused you? | 2% | 1% |
| 8.7 | Threatened or intimidated you? | 5% | 11% |
| 8.7 | Victimised you because of medication? | 5% | 3% |
| 8.7 | Victimised you because of debt? | 5% | 2% |
| 8.7 | Victimised you because of drugs? | 3% | 4% |
| 8.7 | Victimised you because of your race or ethnic origin? | 3% | 5% |
| 8.7 | Victimised you because of your religion/religious beliefs? | 2% | 2% |
| 8.7 | Victimised you because of your nationality? | 2% | 3% |
| 8.7 | Victimised you because you were from a different part of the country? | 2% | 4% |
| 8.7 | Victimised you because you are from a traveller community? | 3% | 0% |
| 8.7 | Victimised you because of your sexual orientation? | 2% | 2% |
| 8.7 | Victimised you because of your age? | 2% | 2% |
| 8.7 | Victimised you because you have a disability? | 2% | 5% |
| 8.7 | Victimised you because you were new here? | 2% | 3% |
| 8.7 | Victimised you because of your offence/crime? | 3% | 3% |
| 8.7 | Victimised you because of gang related issues? | 2% | 3% |
| SECTION 9: Health services | | | |
| 9.1 | Is it easy/very easy to see the doctor? | 18% | 12% |

Key to tables

| | | | |
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| | Percentages which are not highlighted show there is no significant difference | | |
| 9.1 | Is it easy/very easy to see the nurse? | 22% | 29% |
| 9.1 | Is it easy/very easy to see the dentist? | 12% | 7% |
| 9.4 | Are you currently taking medication? | 60% | 39% |
| 9.6 | Do you have any emotional well being or mental health problems? | 48% | 20% |
| SECTION 10: Drugs and alcohol | | | |
| 10.1 | Did you have a problem with drugs when you came into this prison? | 28% | 26% |
| 10.2 | Did you have a problem with alcohol when you came into this prison? | 29% | 14% |
| 10.3 | Is it easy/very easy to get illegal drugs in this prison? | 57% | 41% |
| 10.4 | Is it easy/very easy to get alcohol in this prison? | 36% | 22% |
| 10.5 | Have you developed a problem with drugs since you have been in this prison? | 19% | 9% |
| 10.6 | Have you developed a problem with diverted medication since you have been in this prison? | 13% | 10% |
| SECTION 11: Activities | | | |
| | Is it very easy/ easy to get into the following activities: | | |
| 11.1 | A prison job? | 63% | 52% |
| 11.1 | Vocational or skills training? | 40% | 46% |
| 11.1 | Education (including basic skills)? | 64% | 66% |
| 11.1 | Offending Behaviour Programmes? | 22% | 32% |
| | Are you currently involved in any of the following activities: | | |
| 11.2 | A prison job? | 64% | 60% |
| 11.2 | Vocational or skills training? | 14% | 17% |
| 11.2 | Education (including basic skills)? | 32% | 22% |
| 11.2 | Offending Behaviour Programmes? | 14% | 13% |
| 11.4 | Do you go to the library at least once a week? | 32% | 36% |
| 11.5 | Does the library have a wide enough range of materials to meet your needs? | 39% | 38% |
| 11.6 | Do you go to the gym three or more times a week? | 15% | 39% |
| 11.7 | Do you go outside for exercise three or more times a week? | 28% | 49% |
| 11.8 | Do you go on association more than five times each week? | 77% | 81% |
| 11.9 | Do you spend ten or more hours out of your cell on a weekday? | 17% | 24% |
| SECTION 12: Friends and family | | | |
| 12.1 | Have staff supported you and helped you to maintain contact with family/friends while in this prison? | 43% | 36% |
| 12.2 | Have you had any problems with sending or receiving mail? | 33% | 44% |
| 12.3 | Have you had any problems getting access to the telephones? | 5% | 9% |
| 12.4 | Is it easy/ very easy for your friends and family to get here? | 32% | 51% |
| SECTION 13: Preparation for release | | | |
| 13.3 | Do you have a named offender supervisor in this prison? | 88% | 85% |
| 13.10 | Do you have a needs based custody plan? | 10% | 7% |
| 13.11 | Do you feel that any member of staff has helped you to prepare for release? | 23% | 21% |