

Report on an unannounced inspection of

# **HMP High Down**

by HM Chief Inspector of Prisons

**12–23 January 2015**

## **Glossary of terms**

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# Introduction

HMP High Down is a local category B prison near Banstead in Surrey which, at the time of this inspection, held about 1,100 men. We last inspected the prison in July 2011. It was clear that outcomes for prisoners had deteriorated significantly in the intervening period and although they were now improving once again, progress was seriously impeded by serious staff shortages and a reliance on significant numbers of detached duty staff temporarily redeployed from other prisons elsewhere in the country. Vacancies, an unusually high number of bed watches, and a lack of consistent staffing adversely affected many areas of the prison. New staff were being recruited and managers generally had a realistic view of the improvements required. Nevertheless, at the time of this inspection, outcomes for the prisoners held were not sufficiently good in a number of important areas.

The prison was operating a restricted regime with reduced association, domestic and exercise periods for all prisoners. Staff absences meant that there were regularly further unplanned regime restrictions. Despite this, a fully employed prisoner had about nine hours out of cell on weekdays which was good, but there were insufficient activity places and almost a third of prisoners were unemployed. Unemployed prisoners were locked in their cells for about 22 hours a day. It was therefore frustrating that full use was not made of the activity places that were available. Only 65% of the available places were used which meant that 200 places were unused. The management of learning and skills required improvement and although a new management team was making good progress and credible quality improvement processes were in place, they were starting from a very low base. There was some very good vocational training and work available that offered prisoners good opportunities to get relevant qualifications and experience. For example, prisoners could acquire good skills in the Clink restaurant, an initiative pioneered at HMP High Down and now copied elsewhere, and the busy call centre and recycling unit provided realistic working environments. Nevertheless, the quality of teaching was inconsistent, the planning of activities was poor, prisoners' achievements in essential English and mathematics were too low and the shortage of places was a fundamental weakness. Library provision was effective but staff shortages also severely restricted access to PE.

Staff shortages also impacted on resettlement activities and this was exacerbated by poor coordination of the relevant services. There was no 'whole prison' approach to resettlement. The probation team had its own manager and was located away from the main offender management unit. There was significant variation in the quality of work of the two teams and insufficient coordination between them. The prison had implemented the national model of officers with dual functions as offender supervisors and with unit supervisory roles. Staff shortages meant that these officers had had little time to devote to their offender supervisor roles and as a consequence large backlogs had built up and contact between prisoners and their offender supervisors was inconsistent. As we are beginning to see elsewhere, shortly before the inspection the prison had abandoned the dual role model and reverted to single role offender supervisors. This was beginning to have a positive impact but it was too early to fully judge its effectiveness. The variable quality of the work and backlogs that had built up affected prisoners' ability to progress and created weaknesses in public protection arrangements. The lack of opportunities to progress for the 50 indeterminate sentence prisoners was a particular concern. There were no nationally accredited offender behaviour programmes offered. In theory prisoners should have transferred to another prison where suitable programmes were in place but not enough prisoners did so, and a lack of suitable places nationally meant this was a particular problem for sex offenders, some of whom were released without having their attitudes, thinking and behaviour addressed.

Practical resettlement services were generally better. The creation of a resettlement centre was positive but this needed to be better organised. Few prisoners were released without accommodation to go to and prisoners received effective help with finance and debt issues. However, support to help prisoners obtain work, training or education required improvement. Pre-

release arrangements for prisoners with drug and alcohol problems were good. Arrangements for prisoners with mental health needs were also effective but less so for those with physical health issues. Palliative care arrangements were compassionate. Visits provision was reasonable.

Despite the pressures it was under, the prison was focused on keeping prisoners safe. It was clear that in the period before the inspection safety had been a concern but safety outcomes now compared well with similar prisons we have recently inspected. In common with many prisons, HMP High Down had had a serious problem with the availability of new psychoactive substances, and the associated security and health issues these created. However, a combination of effective treatment and supply reduction strategies and prisoner-delivered education appeared to have reduced the problem and this had contributed to making the prison safer overall.

Reception was efficient but other first night and early days arrangements needed better organisation to ensure prisoners' basic needs were met. The number of violent incidents was now comparable to similar establishments and to our last inspection but too many prisoners expressed concerns about safety. It was noteworthy, however, that most vulnerable prisoners told us they felt safe, although there had been incidents when their food had been tampered with. The management of individual perpetrators and victims required improvement. The number of self-harm incidents was low and although self-harm prevention processes were not implemented consistently, which may in part have reflected the prison's reliance on detached duty staff, we saw examples of individual staff providing very compassionate and professional individual care. Security was well managed and generally proportionate. The management and oversight of the use of force was inadequate, record keeping was poor and some incidents were not recorded. Neither we nor the prison could be assured that we understood the overall levels of use of force or that it was always proportionate and necessary. The segregation unit was reasonable but the regime was poor, although despite this, most prisoners were reintegrated back into the main population. Substance misuse services were good.

We saw some exceptional interactions between staff and prisoners, and relationships were generally good, although staff shortages and the reliance on detached duty staff inevitably impacted on this. Some accommodation was of good standard but the condition of cells in the older units was more variable. Many cells designed for one held two prisoners and some had broken furniture and windows, and inadequately screened toilets. The poor conditions were exacerbated by the very long periods many prisoners spent locked behind their doors. The restricted regime and staffing shortages meant that some prisoners had problems with basic hygiene and domestic needs. New prisoners had to wear prison clothing, much of which was ill-fitting.

Prisoners with protected characteristics spoke positively about the support they received from the equalities officer and equalities orderlies and wing staff who did what they could to support those who needed it. However, the management of equality and diversity issues was weak. Outcomes for prisoners with protected characteristics were out of range in a number of important areas and in our survey, responses from prisoners in these groups were more negative than those from the rest of the population. The prison had done too little to understand and address these concerns, and consultation arrangements were inadequate. There was no carer scheme for disabled or older prisoners which meant that those who needed help had to rely on informal support from other prisoners. We found one prisoner who was relying on another to wash him and prisoners had carried a disabled prisoner down stairs when a lift was out of order so he could attend education. Faith provision was reasonable and chaplains were well integrated into the life of the prison. There had been a vacancy for a full-time Muslim chaplain but this was being filled.

Health services were good overall but staff shortages resulted in too many appointments being cancelled. Good care was provided on the inpatient unit, but the regime required improvement. Patients on the unit were very positive about the support they received. The pharmacy clinics gave prisoners prompt access to a range of services and so reduced the demand for GP appointments, which was good practice. Primary mental health services had only recently been commissioned and the development of the service had been delayed by difficulties in recruiting staff. Secondary mental

health services were better. There were unacceptable delays in transferring prisoners to secure mental health facilities.

There remained a number of areas of serious concern at HMP High Down. The prison management was aware of most of these, and despite serious staffing shortages, credible plans for improvement were being implemented. We saw impressive work by some individual staff. However, there was still a big job to do. It is essential now that vacancies are filled, more activity places are provided and that managers ensure greater consistency in the quality of work done across all areas of the prison.

**Nick Hardwick**  
HM Chief Inspector of Prisons

June 2015





# Fact page

**Task of the establishment**

A local male category B prison.

**Prison status**

Public

**Region**

Greater London

**Number held**

1090 on 13 January 2015

**Certified normal accommodation**

999

**Operational capacity**

1163

**Date of last full inspection**

18–22 July 2011

**Brief history**

Opened in 1992, High Down in Sutton was built on the site of a former mental hospital. It served the Crown court in Guildford and Croydon and the surrounding magistrates' courts. Two additional new house blocks were opened in 2009. All new accommodation was in single cells and all cells had integral sanitation. They were spread over three landings, all of which had their own showers and phone system.

**Short description of residential units**

House block 1 – Unemployed prisoners who were not involved in purposeful activity

House block 2 – First night and induction unit

House block 3 – Full-time workers

House block 4 – Substance misuse unit

House block 5 – Full-time workers

House block 6 – Vulnerable prisoners' unit.

**Name of governor/director**

Ian Bickers

**Escort contractors**

GEOAmey

**Health service commissioner and providers**

NHS England (Kent, Surrey and Sussex area team) (commissioner)

Surrey and Borders NHS Foundation Trust (provider)

Virgin Care (provider)

KCA (provider)

**Learning and skills provider**

A4E

**Independent Monitoring Board chair**

Sue Bird

# 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:

<b>Safety</b>	prisoners, particularly the most vulnerable, are held safely
<b>Respect</b>	prisoners are treated with respect for their human dignity
<b>Purposeful activity</b>	prisoners are able, and expected, to engage in activity that is likely to benefit them
<b>Resettlement</b>	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.<sup>1</sup>

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

# Summary

## Safety

- S1 *The majority of prisoners had short journeys to the prison; their treatment was reasonable. Reception was efficient and well organised. First night and induction arrangements required improvement as some of prisoners' basic needs were not met. The number of violent incidents and perceptions of safety were comparable to similar prisons. Vulnerable prisoners felt safe overall. There had been one self-inflicted death since our previous inspection. The number of incidents of self-harm had declined significantly, but prisoners in crisis required better support. The prison was addressing the safeguarding needs of its population. Security was well managed and properly focused on trying to maintain a safe environment. New psychoactive substances (NPS) had been a problem in the prison but this appeared to be diminishing. The incentives and earned privileges scheme (IEP) was ineffective. Disciplinary measures were used frequently and, while oversight had improved, it remained inadequate for the use of force. The segregation unit was reasonable, but the regime was poor. Substance misuse services were very good and the overall management of supply and reduction was reasonable despite the lack of suspicion testing. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S2 *At the last inspection in July 2011 we found that outcomes for prisoners in High Down were reasonably good against this healthy prison test. We made 12 recommendations in the area of safety. At this follow-up inspection we found that two of the recommendations had been achieved, one had been partially achieved and nine had not been achieved.*

- S3 Prisoners had relatively short journeys from courts and prisoners' treatment was reasonable. Reception was clean and well maintained. First night risk assessment interviews were thorough and confidential. First night accommodation was clean but often lacked basic amenities, including pillows and adequate furniture. Handover arrangements involving night staff did not cover all new arrivals, which was poor. Many prisoners did not have access to showers or telephones once they had been moved to the first night house block.
- S4 Prisoners were negative about induction. We found the majority of prisoners received most elements of induction, but the service for vulnerable prisoners was worse; we were pleased this was being addressed before the inspection concluded. Population pressures meant that many prisoners waited too long to move out of the induction unit, which had an inferior regime compared with elsewhere in the prison.
- S5 Despite the number of violent incidents being similar to the previous inspection, more prisoners were negative about safety than at the previous inspection. Perceptions of safety were particularly poor among black and minority ethnic, foreign national, Muslim and disabled prisoners and we found evidence to justify their views. The prison needed to address this issue promptly. Strategic oversight of violence was adequate; safer custody meetings were well attended and some analysis of patterns and trends took place. The management of perpetrators and victims of violence required improvement; tackling antisocial attitudes (TASA) documents, used to manage perpetrators, were inconsistently applied and poorly completed, and victims of bullying or violence received no formal support. It was, however, positive that most vulnerable prisoners felt safe.
- S6 The number of self-harm incidents had fallen since the previous inspection and was low. There had been one self-inflicted death since the previous inspection and the prison had incorporated recommendations from the Prisons and Probation Ombudsman into an

ongoing action plan. The weekly multidisciplinary complex case meeting was a positive initiative designed to manage those with multiple needs. Assessment, care in custody and teamwork (ACCT) case management documents were variable and too many demonstrated delayed initial assessments, inconsistent case management, poorly attended case reviews and incomplete care maps.

- S7 Prisoners in crisis told us support from staff varied; while most officers were supportive, a minority were unhelpful or dismissive. The number of prisoners in the segregation unit while on open ACCTs remained high and we were not assured that it was always in exceptional circumstances. The prison had a large number of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and prisoners had good access to them.
- S8 While there was no formal safeguarding policy we found examples of individuals receiving good support. The prison was preparing well for the implementation of the Care Act in April 2015.
- S9 Some security arrangements were disproportionate, especially searching practices, but they did not unnecessarily restrict access to the regime. The security committee set and monitored appropriate objectives focused on maintaining a safe environment. Intelligence was mostly processed efficiently. The average positive mandatory drug testing (MDT) rate was low at approximately 6%. We were told that new psychoactive substances (highly potent synthetic cannabinoids that are potentially more harmful than cannabis but do not show up in MDTs) had been a problem in the prison but their use appeared to be diminishing. Peer mentors were used well to make prisoners aware of the risks of NPS.
- S10 Prisoners were negative about the IEP scheme and its ability to promote positive behaviour. Many staff and prisoners had difficulty understanding the scheme and it was applied inconsistently.
- S11 The number of adjudications had decreased slightly since the previous inspection, but too many records of hearings demonstrated that insufficient enquiries had been made before a finding of guilt and there was no quality assurance process.
- S12 The number of recorded incidents involving the use of force had increased since the previous inspection and remained high. Despite some improvements, oversight of the use of force was inadequate, the recording system was disorganised and not all incidents were recorded or warranted. The prison did not pay sufficient attention to documentation, the use of batons, planned interventions or special accommodation.
- S13 The communal environment in the segregation unit was reasonably well maintained but most cells were in poor condition. Despite some long-term residents, the average length of stay had declined and there had been some improvements to address unnecessary segregation. Survey results were negative but residents we spoke to were mostly positive about interactions with staff.
- S14 There was no formal substance misuse strategy but a range of prison departments dealt with drug and alcohol issues, resulting in positive outcomes for prisoners. The prison had a useful range of programmes and a dedicated alcohol worker. The majority of prisoners requiring support for drug and alcohol problems were on house block four as were all substance use services, which had resulted in an excellent service. Clinical care and prescribing were very good and arrangements for administration were safe. Individual case management was very good.

## Respect

S15 *Communal areas were generally clean and the newer accommodation was good, but some cells in the older house blocks were poor. Staff-prisoner interactions were reasonable overall and we saw some exceptional staff, but staff shortages had an adverse impact on relationships and a few staff were negative. The management of equality and diversity was weak, although this was mitigated by supportive equalities and wing staff. The prison failed to explore adequately some poor outcomes. Health care was good and improving. The food was satisfactory. The prison shop provided an adequate service. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S16 *At the last inspection in July 2011 we found that outcomes for prisoners in High Down were reasonably good against this healthy prison test. We made 22 recommendations in the area of respect.<sup>2</sup> At this follow-up inspection we found that one of the recommendations had been achieved, three had been partially achieved, 16 had not been achieved and two were no longer relevant.*

S17 Communal areas in all house blocks were clean and adequately maintained but some association equipment needed to be repaired. The standard of accommodation in the newer house blocks five and six was good; cells were clean and well maintained and prisoners appreciated their own privacy keys. Conditions in the older units were variable and some single cells used inappropriately to hold two prisoners were poor. Cells in these units were generally clean but too many contained broken furniture, inadequately screened toilets and broken windows. The restricted regime limited prisoners' access to showers, telephones and laundries. Prisoners had little confidence in the application system and we found that responses from some departments took too long.

S18 The lack of consistent staffing had a negative impact on relationships. Most vulnerable prisoners though they were treated respectfully; however, mainstream prisoners were less positive about their treatment than the comparator and we found some evidence to justify their views. There was no personal officer scheme or suitable alternative. Entries in case history notes we examined were perfunctory and irregular. Consultation arrangements were in place but actions were too often carried over to the following meeting.

S19 The strategic management of equality was weak, although this was mitigated by supportive equalities and wing staff. Planning lacked a strategic focus and progress across a range of issues was slow. The establishment had failed to investigate equalities monitoring data showing the disproportionate treatment of black and minority ethnic and Muslim prisoners and young adults in some key areas and there had been no forums for prisoners in these or most other protected groups. While discrimination incident reporting form (DIRF) investigations were generally adequate, prisoners told us they lacked confidence in the process and the number of DIRFs submitted was now low.

S20 Most prisoners with protected characteristics commented favourably on the support they received from the equalities officer and orderlies and also from wing staff. However, the lack of formal care planning for older and disabled prisoners meant that some needs was not identified and met promptly. Arrangements for the evacuation of prisoners with disabilities were inadequate, particularly for those in house block six. Foreign national prisoners and detainees had access to weekly Home Office surgeries, but this was no substitute for free independent legal advice. There was no equalities policy for young adults or specific

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

provision for gay or bisexual men. Faith provision was reasonable and a full-time Muslim chaplain was being appointed. Pastoral care was particularly good.

- S21 Most complaints were for minor issues and replies were generally polite. A minority of responses failed to address adequately all issues raised and quality assurance arrangements required considerable improvement. There were no legal services officers and prisoners did not know where to go for help with legal matters.
- S22 In health care, clinical governance arrangements were satisfactory. Prisoners' perceptions of health care were mixed, but overall health services were good. There was an appropriate range of primary care services and waiting times for most were reasonable but non-attendance rates were too high. The care provided on the inpatient unit remained good, but the regime required improvement. Patients on the unit were very positive about the support they received. An impressive range of specialist services, including radiology and dialysis, were provided onsite, which reduced the demand for external hospital appointments. However, too many external hospital appointments were cancelled.
- S23 Pharmacy services were impressive. Prisoners waited too long for routine dental services but the care provided was good. Secondary mental health services remained good but primary mental health services were inadequate but improving. Most prisoners waited too long to transfer to external mental health facilities.
- S24 Prisoners appeared broadly satisfied with the food and menus were varied and balanced, but meals were still served too early and breakfast was still issued the day before it was to be eaten. We were not assured that enough was being done to alleviate the concerns of vulnerable prisoners in house block six whose food had been tampered with or to prevent food from being contaminated. Consultation arrangements around food were reasonable.
- S25 Prisoners could buy a wide variety of items from the prison shop, but new prisoners waited too long for their first order. The range of catalogues available was poor and it was unacceptable that the prison was not processing deliveries.

## Purposeful activity

- S26 *Too many prisoners were locked up during the day; unemployment was high and those prisoners had only about two hours out of their cells each day. The recently revised strategy had begun to improve educational and vocational outcomes. There were insufficient activity places for all prisoners. The overall quality of education required improvement, and achievement outcomes in many qualifications were good but they were too low in maths and English. Outcomes in vocational training were good. Attendance was mostly poor. The library provision was adequate. Staff shortages and the redeployment of physical education (PE) staff were having a negative impact on the gym provision.*  
**Outcomes for prisoners were not sufficiently good against this healthy prison test.**
- S27 *At the last inspection in July 2011 we found that outcomes for prisoners in High Down were not sufficiently good against this healthy prison test. We made 13 recommendations in the area of purposeful activity. At this follow-up inspection we found that three of the recommendations had been achieved, three had been partially achieved, six had not been achieved and one was no longer relevant.*



- S28 Fully employed prisoners could achieve up to nine hours out of their cells. However, over a third of the population were unemployed and the restricted regime plus some regime curtailments meant they could expect only around two hours out of their cells. During our roll checks an average of 35% of prisoners were locked in their cells, which was too many.
- S29 The prison had identified the significant weaknesses in its learning, skills and work provision over the previous two years, and managers' effective implementation of well constructed strategies was bringing about improvements in performance and outcomes, although starting from a low base. The strategy for improving prisoners' skills in English and mathematics was underdeveloped. Quality assurance processes were mostly effective and managers accurately evaluated provision through self-assessment. The prison made insufficient use of performance targets to drive further improvements.
- S30 The number of activity places available was not sufficient to ensure all prisoners were purposefully occupied and too many were unemployed. The curriculum and availability of work had been developed well to meet prisoners' needs. A broad and suitable range of subjects was available. Vulnerable prisoners had access to appropriate education, training and work.
- S31 Good training and coaching was provided in vocational training workshops and prisoners developed skills quickly. In education, much teaching and learning were good, but teachers did not consistently use target setting, assessment planning or initial assessment results to plan learning so it met prisoners' individual needs. The prison did not sequence induction, initial assessment and allocation of activities well enough to place all prisoners on suitable courses. Teachers did not plan the development of learners' skills in English and mathematics sufficiently within the context of education and training.
- S32 Outcomes for prisoners on the majority of courses in education and training had improved and were good, and achievement rates were high. Although they had improved, outcomes for prisoners taking English and mathematics qualifications were still too low. Prisoners' attendance and punctuality at Offender Learning and Skills Service education and vocational training were poor, but for prison employment they were good. Many prisoners gained good practical skills.
- S33 The library was appropriately resourced and most prisoners had access to it. Staff developed suitable additional activities to improve access and the library's impact. Peer workers provided effective support and there were some positive initiatives, such as the Toe by Toe mentoring scheme to help prisoners improve their reading. A computer systems failure meant managers could not monitor comprehensively the use of the library, but early indications showed that prisoners from different house blocks had variable access.
- S34 PE provision was inadequate and did not meet prisoners' needs. Sessions were too often cancelled. Resources were good but underused and there were insufficient staff to provide recreational and accredited courses. This was exacerbated by PE staff being used to collect prisoners from house blocks.

## Resettlement

- S35 *The reducing reoffending strategy was up to date and comprehensive but its delivery was fragmented. Offender management outcomes varied greatly. The prison's use of dedicated offender supervisors was appropriate but there was a backlog of work, including in offender assessment system (OASys) documents. Multi-agency public protection arrangements (MAPPA) and the identification of MAPPA levels required greater focus and prioritisation. Too many indeterminate sentence prisoners stayed at High Down too long without receiving sufficient assistance to help them progress. Pathway provision was good in most areas but offender supervisor involvement was minimal. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S36 *At the last inspection in July 2011 we found that outcomes for prisoners in High Down were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of resettlement. At this follow-up inspection we found that two of the recommendations had been achieved, one had been partially achieved, eight had not been achieved and one was no longer relevant.*
- S37 The reducing reoffending and offender management policies were up to date, however, the two functions were not sufficiently coordinated and they lacked a 'whole prison' approach. The prison had reverted to the use of dedicated offender supervisors after it had identified problems over the previous six months, including the lack of offender management staff.
- S38 The offender management department was struggling with a significant backlog of work. Thirty-seven per cent of OASys for which the prison was responsible were missing or out of date. This had an effect on prisoners' ability to progress. Overall the quality of work we saw varied considerably, although it was generally better for those assessed as high- or very high-risk. The risk management plans we reviewed relating to low- or medium-risk cases, were either missing or insufficient. Where they were in place, sentence plans across all cases were broadly good. The lack of available interventions had an impact on interactions between offender supervisors and prisoners.
- S39 Quality assurance overall was limited. Too few cases were reviewed on a regular basis and while probation staff received regular supervision, no coherent approach was adopted with prison officers. The introduction of a former probation officer to facilitate the professional development of officer offender supervisors was positive, although its impact had so far been limited.
- S40 The prison's approach to public protection was too variable. The identification and management of sex offenders was generally good, but less so for others subject to MAPPA. High-risk prisoners were not consistently identified in time to plan their release effectively and 11 prisoners due for release within the four weeks following the inspection had still not had their MAPPA level identified.
- S41 Although the number of indeterminate sentence prisoners was reasonably low, we were concerned about the lack of progress for some of them.
- S42 All prisoners were seen during induction for an assessment of their resettlement needs. Subsequent referrals to pathway providers were appropriately undertaken. The creation of the resettlement department was a positive initiative but it was not sufficiently well managed or coordinated. Each pathway provider made its own pre-release interview arrangements, which often meant that prisoners had to make three or four separate visits to the unit. Prisoners only attended about 42% of appointments.

- S43 The accommodation support provided by St Giles Trust was generally good and it consistently met its target. Level 3 advice and guidance training was also provided to peer advisers, which was positive.
- S44 Not enough prisoners were placed promptly in suitable activities. The education, training and employment provision lacked coordination and not enough was done to prepare all prisoners for release. Individual careers advisers provided effective guidance, but prisoners' attendance at sessions was too low. Prisoners made limited use of the virtual campus (internet access for prisoners to community education, training and employment opportunities).
- S45 Pre-release health care arrangements were reasonable, but systems to ensure all prisoners had their required take-home medication and liaison with the GP required improvement. The health provider, prison and community services worked together effectively to provide prisoners with palliative and end of life needs with compassionate care. Preparation for the release of prisoners with substance misuse needs was very good and five local drug intervention programme teams visited the prison every week. Finance benefit and debt support was reasonably good.
- S46 The large visits area was very busy and visitors were treated respectfully. Support for families was good and the visits booking service had improved.
- S47 There were no nationally accredited offending behaviour programmes. In principle, prisoners could transfer to other prisons to attend programmes, but transfers for this purpose were relatively rare. We were concerned that there was no clear strategy for the management or progression of some specific groups of prisoners, especially sex offenders. The shortage of spaces nationally meant it was difficult to transfer sex offenders and many completed their sentences at High Down with little or no intervention to challenge their attitudes, thinking or behaviour.

## Main concerns and recommendations

- S48 Concern: The procedures in place to record and monitor use of force data were inadequate and inaccurate. We were concerned that the establishment did not focus properly on this important area of control as there was a lack of good governance and quality assurance. This meant lessons from incidents requiring the use of force were not learned. There was no proper scrutiny regarding protective characteristics. Poor record keeping meant we could not be assured that all use of force was proportionate and necessary.

**Recommendation: There should be improvements in the governance of the use of force, particularly regarding logging of incidents, quality of documentation, special accommodation, planned interventions, scrutiny of drawing/use of batons and the use of force committee.** (Repeated recommendation 1.72)

- S49 Concern: The establishment did not pay enough attention to the needs of prisoners across the range of protective characteristics, and there were significant gaps in management oversight, governance, quality assurance and action planning to address and resolve prisoners' concerns and needs. The population mostly depended on the uncoordinated ad hoc efforts of staff to support them.

**Recommendation: Management oversight of diversity should be prioritised to ensure that the needs of all prisoners from minority groups are identified, assessed and met, and that any negative monitoring data and prisoner perceptions relating to particular groups are understood and acted on.**

S50 Concern: A third of the population was unemployed and attendance at some of the activity that was available was poor. Too many prisoners spent most of the day locked in their cells with nothing to do. Access to domestic periods and association were very limited for most prisoners because the prison had been operating a restricted regime since May 2014 due to staff shortages. The published regime was 45 minutes shorter than the national core day and domestic periods were being split in an attempt to offer all prisoners some association; however, even these periods were being affected by regime curtailments for operational reasons.

**Recommendation: There should be sufficient purposeful activity to meet the needs of the population, attendance should be improved and prisoners' access to time out of cells should be increased.** (Repeated recommendation HP50)

S51 Concern: The prison lacked a 'whole prison approach' to resettlement and work was not effectively co-ordinated between different departments and providers. There was a significant backlog in offender management and the quality of work was too variable.

**Recommendation: Implementation of the reducing re-offending strategy should be effectively co-ordinated, backlogs should be cleared and quality improvement measures implemented.**

# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

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

- I.1** *Most prisoners travelled short distances but they were handcuffed unnecessarily. Not all prisoners received information about High Down before they arrived.*
- I.2** Most journey times to the prison were short. Some prisoners had unnecessarily lengthy waits in holding rooms after court appearances. In our survey, fewer respondents than the comparator said they were told where they were being taken or that they had received written information about the prison before they arrived. Local courts received information from the prison but prisoners we spoke to said they had not received a copy. Escort vehicles were clean, well maintained and contained no graffiti. Escort staff we observed were respectful towards prisoners. Prisoners were routinely handcuffed to and from the escort vehicle, which was disproportionate (see section on security).

## Early days in custody

### Expected outcomes:

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

- I.3** *Reception was welcoming. First night cells were clean but poorly equipped. Handover arrangements were inadequate. Not all prisoners could have a shower or make a telephone call. Most prisoners participated in all elements of the induction. Some prisoners in the induction unit received an impoverished regime.*
- I.4** The large reception area was clean and welcoming. Holding rooms were stark and TVs were not working; however, cabinets containing information and working TVs were installed during the inspection.
- I.5** Procedures were efficient and most prisoners spent less than an hour in reception. In our groups and survey, prisoners were more negative about their treatment in reception than in similar prisons; however, we observed friendly interactions between staff and prisoners. All new arrivals were strip-searched without having a risk assessment, which was unacceptable. New arrivals had a health screening and were offered food and drinks. After the interview, new arrivals could speak to a Listener (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners).
- I.6** All new arrivals, including vulnerable prisoners, went to house block two, the induction unit, where they were offered a reception pack of shop items and telephone credit. Trained peer

supporters conducted an initial interview before officers carried out a confidential comprehensive risk assessment. Vulnerable prisoners were moved to house block six once the initial risk assessment was completed.

- I.7** There were no designated first night cells in the induction unit but those we saw had been cleaned before being occupied. However, many lacked basic amenities including pillows and adequate furniture. Handover arrangements between day and night staff were inadequate. The night officer did not know where new arrivals were located and there was no system of enhanced checks. In our survey, only 65% of respondents said they felt safe on their first night, against the comparator of 73%; however, 45% said they had trouble contacting their family when they arrived against the comparator of 31%; only 8% said they had access to a shower against the comparator of 32%. Our inspection confirmed that not all new arrivals had access to a telephone or shower on their first night.
- I.8** Induction started the following day and included a presentation about High Down, meetings with resettlement agencies and a basic skills assessment. In our survey, only 45% of respondents said that induction covered everything they needed to know against the comparator of 52%. We found it covered most relevant elements but there was too much information for some prisoners to assimilate. A trained peer supporter delivered the vulnerable prisoners' induction, but it was not overseen by an officer and new arrivals had to apply to see most agencies. This inferior service was addressed during the inspection.
- I.9** The regime in the induction unit was restricted to encourage prisoners to move to another house block within five days after they had completed their induction. Most prisoners in the unit could not work or access the gym or library. However, around a third of the population had been in the house block for more than five days and many for much longer for no other reason than population pressures.

## Recommendations

- I.10** First night cells should be fully prepared and handover arrangements improved.
- I.11** New arrivals should be offered a phone call and shower on their first night.
- I.12** The regime in the induction unit should be improved.

## 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.13** *The number of violent incidents was similar to the previous inspection. Perceptions of safety were poor among some groups and we found evidence to support their views. Strategic oversight of violence reduction was adequate, but the management of perpetrators and victims of violence required improvement. Documents used to manage perpetrators were inconsistently applied and poorly completed and victims received no formal support. It was positive that most vulnerable prisoners felt safe.*

- I.14** The number of recorded incidents of violence remained similar to the previous inspection and was comparable to other local prisons. Despite this the number of prisoners who were positive about safety had fallen and was now similar to or lower than other local prisons. Perceptions of safety were particularly poor among black and minority ethnic, foreign national, Muslim and disabled prisoners. Despite identifying a consistent over-representation of black, Muslim and young adult prisoners in violent incidents the prison had not investigated the reasons for this (see section on equality and diversity). It was positive that despite feeling unsafe during their first night, vulnerable prisoners felt safer at the time of the inspection than mainstream prisoners.
- I.15** The strategic oversight of violence was adequate; the prison used a national safer custody policy, and the analysis of data that was undertaken at the well attended monthly safer custody meetings had improved. During the previous six months there had been 111 violent incidents, including 24 fights and 87 assaults on prisoners and staff. While there had been eight serious assaults over this period, the majority of incidents were minor. The recording of violence remained good; the safer custody team received information about incidents from residential staff, unexplained injuries forms and intelligence reports from security.
- I.16** The management of individual perpetrators and victims of bullying or violence required improvement. Perpetrators were managed through tackling antisocial attitudes (TASA) documents; 227 prisoners had been subject to TASAs during the previous six months. Prisoners were placed on a TASA for up to 28 days and could be subject to a number of sanctions imposed after an initial investigation. TASA documents were inconsistently applied; we found some prisoners on TASAs for relatively minor incidents, while others who had been involved in serious incidents were not. TASA documents were poorly completed and most contained perfunctory targets and inconsistent entries.
- I.17** There was no formal support for victims of violence or bullying and some victims we spoke to did not feel staff supported them. However, most vulnerable prisoners felt safe.

## Recommendation

- I.18** **The management of perpetrators of bullying or violence should be improved and a formal system to support victims should be implemented.**

## 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.19** *The number of self-harm incidents was now lower than previously. There had been one self-inflicted death since the previous inspection and the prison had incorporated Prisons and Probation Ombudsman (PPO) recommendations into an ongoing action plan. The quality of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm varied. Prisoners in crisis told us support from staff was inconsistent and the number of prisoners located in the segregation unit while on open ACCTs remained too high. Access to Listeners was good.*

- I.20** The number of self-harm incidents had fallen since the previous inspection and was lower than at similar prisons. There had been one self-inflicted death since our previous inspection. The prison had incorporated recommendations from the PPO into an ongoing action plan. The safer custody manager investigated all serious incidents of self-harm.
- I.21** Monthly safer custody meetings were well attended and trends in open ACCT documents and self-harm incidents were analysed proficiently. A weekly multidisciplinary complex case meeting also took place to manage prisoners with multiple needs.
- I.22** We found ACCT documents to be too variable; in too many cases they demonstrated that initial assessments were delayed, case management was inconsistent, case reviews were poorly attended and care maps were incomplete. Many documents also had either predictable or insufficient observations, which management checks failed to identify.
- I.23** Prisoners in crisis we spoke to said that support from staff was inconsistent. Staffing shortages meant many working in house blocks had been redeployed from other units or prisons. They often did not know the prisoners in their care as well as permanent staff. Prisoners said while most officers were supportive, a minority were unhelpful or dismissive.
- I.24** We were concerned that despite previous recommendations the number of prisoners who were segregated while on open ACCTs remained high and were not assured that this was always in exceptional circumstances.
- I.25** A large number of trained Listeners (45) received support from the prison and the local Samaritans. Access to Listeners was good, including at night, and each house block had a Listeners' suite.

## Recommendations

- I.26** **The quality and consistency of ACCT documentation should be improved.**
- I.27** **There should be better staff support for prisoners in crises.**
- I.28** **The prison should reinforce that prisoners on an open ACCT document should only be segregated in exceptional circumstances and where necessary to ensure their own or others' safety. (Repeated recommendation HP47)**

## 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.<sup>3</sup>**

- I.29** *While there was no formal safeguarding policy, we found examples of individuals receiving good support and the prison was preparing well for the implementation of the Care Act 2015.*

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



- I.30** While formal safeguarding policies and procedures were underdeveloped, we found examples of good support for individuals with additional needs. Health care, prison and education staff identified prisoners with safeguarding needs during the first night and induction processes. Individual officers or departments supported adults at risk, some of whom were managed through the multi-agency complex case meetings. It was positive that the prison had been working with Surrey County Council and had well advanced plans for the implementation of the Care Act in April 2015<sup>4</sup>, which will make local authorities responsible for assessing and meeting the social care needs of adult prisoners.

## Recommendation

- I.31** **The governor should work with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes.**

## 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.32** *Security was well managed and did not restrict prisoners' access to the regime unnecessarily. There were, however, some disproportionate practices mostly taking place without supporting intelligence. Closed visits were used very frequently and often for inappropriate reasons. Despite some evidence of new psychoactive substances, the availability of drugs was relatively low. Arrangements for suspicion drug testing were inadequate.*

- I.33** Security arrangements were managed well and during the inspection we found no evidence to suggest that security procedures unnecessarily restricted prisoners' access to the regime. The security committee set and monitored appropriate objectives focused on making the prison safe. In the six months before the inspection 1872 intelligence reports (IRs) were submitted and were mostly processed efficiently. Intelligence-led searches were completed within reasonable timeframes and often yielded good results. Information was shared appropriately with other departments, including the safer custody team, and relationships with the police were good.
- I.34** However, we found a number of practices that were applied disproportionately. All prisoners were handcuffed to and from escort vehicles (see section on courts, escorts and transfers) and all were strip-searched in reception (see section on early days in custody) and on entry to the health care inpatients department. We were also concerned about all prisoners apparently being strip-searched on entry to the segregation unit and 5% randomly after visits. In most cases this took place in the absence of supporting intelligence.

<sup>4</sup> The Care Act outlines new obligations on local authorities and looks at the way in which local authorities should carry out carer's assessments and needs assessments; how they determine who is eligible for support; and how they charge for both residential care and community care.

- I.35** The number of closed visits had increased substantially and at the time of the inspection this sanction was applied to 41 prisoners; only five were related directly to the trafficking of items during visits. Prisoners were reviewed on a monthly basis but generally remained on closed visits for three months without there being any supporting intelligence.
- I.36** Arrangements to control the supply of drugs were reasonable overall. In our survey, a similar percentage of prisoners (35%) said it was easy to get illegal drugs compared with 34% at comparator prisons; however this figure was higher than at the previous inspection. More prisoners (22%) said it was easy to obtain alcohol than at comparator prisons (14%).
- I.37** The random mandatory drug testing (MDT) positive rate averaged 6% (against a target of 10.5%) during the previous six months, which was low; testing was suitably unpredictable. Suspicion testing had only been completed during one month in the previous six months; risk-based testing was reasonable.
- I.38** We were told that new psychoactive substances (highly potent synthetic cannabinoids that are potentially more harmful than cannabis but do not show up in MDTs) had been a significant issue in the prison but by the time of this inspection its use appeared to have diminished, although the lack of a reliable testing method made this impossible to establish with certainty. There was good proactive education using peer mentors to warn prisoners about the dangers and consequences of using these substances.

## Recommendations

- I.39 All strip-searching of prisoners should be intelligence-led or based on a specific suspicion.**
- I.40 Prisoners should only be placed on and remain on closed visits when there is sufficient intelligence relating to visits to support this.** (Repeated recommendation I.56)
- I.41 The MDT programme should be appropriately resourced to enable suspicion tests to be conducted.**

## Incentives and earned privileges<sup>5</sup>

### 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.42** *The IEP scheme was often applied inconsistently and we were not assured that it was sufficiently focused to promote positive behaviour or constructively challenge poor behaviour. Warnings were often for petty reasons and prisoners did not always appear to be given the opportunity to improve their behaviour before sanctions were applied. There were few differences between the levels, but the regime for those on basic was not overly punitive.*

<sup>5</sup> In the previous report, incentives and earned privileges were covered under the healthy prison area of respect. In our updated Expectations (Version 4, 2012) they now appear under the healthy prison area of safety.

- I.43** At the time of the inspection around 22% of prisoners were on the enhanced level of the IEP scheme, 5% were on the basic level, 12% on the entry level and the remainder on standard. Prisoners in our survey were more negative than the comparator about the fairness of the scheme and its ability to encourage them to change their behaviour.
- I.44** There was little distinction between the different levels. Other than mandatory requirements relating to access to extra private cash and visits, those on the enhanced level received few incentives.
- I.45** The scheme was applied inconsistently: a paper system operated well in house block six but otherwise prisoners and staff did not understand how the system operated. Records were maintained on P-Nomis (the Prison Service IT system) and were mostly poor; they did not always demonstrate that the reasons for demotions or for refusing promotions were sufficient, reviews were not always recorded and warnings were often for petty reasons.
- I.46** Most demotions to the basic level were as a result of a single serious incident. The basic regime was used frequently but was not overly punitive. Prisoners spent differing lengths of time on basic depending on the alleged misdemeanour and there was little evidence that they were set meaningful targets to help them change their behaviour.

## Recommendation

- I.47** **The IEP scheme should be applied fairly and consistently.**

## 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.48** *The number of adjudications was high and many records revealed enquiries to have been insufficient. The use of force was also high and despite some recent improvements in oversight, required remedial attention. The segregation environment was reasonably good but many cells were poor and the regime was inadequate.*

## Disciplinary procedures

- I.49** Although the number of formal adjudications had decreased since the previous inspection from 1236 to 1150 in the six months prior to the inspection, it was still high. Sampled records of hearings showed that enquiries in a significant number had not been sufficient before a finding of guilt. In 2014, 24 adjudications had been quashed on appeal, which was relatively high. There was no quality assurance process. Adjudication standardisation meetings had been reintroduced just weeks prior to our inspection and minutes now reflected appropriate discussions. However, there was little evidence that data were being used meaningfully to identify trends or patterns.

## Recommendations

- I.50** Records of adjudications should record a thorough exploration of charges before a finding of guilt and formal quality assurance measures should be introduced.
- I.51** Adjudication standardisation meetings should use data meaningfully to identify and act on trends and patterns.

## The use of force

- I.52** Incidents requiring the use of force had increased since the previous inspection and remained high. We were provided with various figures for the use of force, which, when interrogated, were inaccurate. The system for logging use of force incidents was disorganised and while we were assured that all were logged, several incidents were often given a single log number, which made figures appear lower than they actually were. From our sample we concluded that there had been at least 197 incidents involving the use of force between July and December 2014. Around three quarters of records sampled required the use of control and restraint techniques, which was high. In approximately 40% of the records we sampled force was used as a result of non-compliance with staff instructions; we were not assured that this had been necessary or carried out as a last resort.
- I.53** Much of the sampled documentation relating to incidents was incomplete. Most completed documentation was, however, reasonably good.
- I.54** Sampled records revealed there had been least seven incidents during which 12 batons were drawn and one had been used between July and December 2014. The scrutiny of recently identified incidents was appropriate and had highlighted some lessons to be learned and action points for staff involved.
- I.55** Planned interventions had not been filmed or reviewed for over 12 months (see main recommendation S48).
- I.56** The recorded use of special accommodation was not excessive; it had been used six times between July and December 2014. Authorising documentation was not always completed well and not all uses appeared warranted. Records suggested that prisoners remained there for too long and we were also concerned that some were placed into strip-clothing without good reason.
- I.57** The use of force committee had not met since March 2014 and, while we acknowledged that oversight of the use of force had improved in the previous few months, there remained some significant issues that needed to be addressed (see main recommendation S48).

## Segregation

- I.58** There were 22 cells, two special accommodation cells and a Listener suite in the segregation unit. Communal areas were reasonably clean and bright. Showers were clean but not sufficiently private. The two exercise yards were large but austere and one had a caged roof. Many cells were dirty, cold and contained graffiti, and most toilets were filthy.
- I.59** There had been 250 periods of segregation between June and November 2014. The average number of residents each week had increased to 16 from 14 at the time of the previous inspection and despite a number of long-term residents, the average length of stay had decreased to about seven days. We were not assured that all prisoners who were

segregated needed to be and were pleased that the prison had begun to address this particularly over the previous six months through better oversight.

- I.60** The daily regime was impoverished. It was unacceptable that most prisoners could only access showers and domestic telephone calls two or three times a week and that daily exercise periods were usually only 30 minutes long. Many prisoners did not have access to a radio, although a small minority were allowed a TV. Some residents had access to outreach education every week and a small number had been risk assessed to attend religious services.
- I.61** Segregation reviews were timely and multidisciplinary. Documentation was, however, perfunctory and failed to address poor behaviour adequately. Despite the lack of formal care and reintegration planning, most prisoners were reintegrated into the main prison.
- I.62** In our survey prisoners were more negative than the comparator about how staff in the segregation unit treated them. During the inspection most prisoners were complimentary about how staff treated them, but we felt that inconsistent staffing was adversely affecting relationships between staff and prisoners (see section on staff-prisoner relationships).

## Recommendations

- I.63 All cells in the segregation unit should be clean, well maintained and free of graffiti.**
- I.64 The regime in the segregation unit should be improved.**

## Housekeeping point

- I.65** Review documentation should be completed thoroughly and include meaningful targets to assist with effective reintegration.

## 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.66** *The co-location and effective integration of all substance use services provided most prisoners with timely and focused support, including one-to-one and group work. Peer mentors were used well. Prisoners received consistent first night treatment and were located safely in the induction unit. Prescribing was suitably flexible with reasonable arrangements for controlled drug administration. Prisoners were very positive about the support they received.*

- I.67** There was no formal substance misuse strategy. The reducing reoffending strategy and action plan lacked a strategic approach to drugs and alcohol and the connection between offending behaviour and substance misuse was not evident.
- I.68** Relationships with external commissioners were excellent and working relationships between relevant prison departments were strong and included attendance at formal meetings; to some extent, this offset the lack of a strategy. However, the reducing reoffending strategy meeting had only just been reinstated after a gap of seven months, which

meant drug and alcohol issues were not being robustly monitored. A needs analysis had been completed in 2014 and a further assessment for vulnerable prisoners was planned.

- I.69** Most prisoners could access a wide range of programmes, including: the Living Safely with Drugs and Living Safely with Alcohol programmes; Stepping Stones, which prepared prisoners for reduction or abstinence; and The Bridge programme, which helped them maintain abstinence. In addition, Narcotics Anonymous, Cocaine Anonymous and Alcoholics Anonymous ran regular sessions. Peer mentors were used well, but vulnerable prisoners were still unable to attend group programmes.
- I.70** Prisoners generally received timely and effective clinical assessment but there was a risk that by locating the primary care clinicians in reception, and the substance use clinicians separately, on the first night centre, this could compromise an effective joined-up approach to the assessment of prisoner's health risks on arrival.
- I.71** Prisoners received prompt and suitable symptom relief and opiate substitution treatment. Those with detoxification needs were safely located in the induction house block in hatched cells, where a nurse monitored them 24 hours a day. We observed respectful and thoughtful consultations.
- I.72** Opiate substitution prescribing was flexible and tailored to individual circumstances; community prescribing continued in the prison. One hundred and twenty-eight prisoners were on methadone and 19 on buprenorphine; 70 prisoners were on a reducing regime. Administration arrangements were reasonable and planned improvements had been implemented during our visit; however we noted some delays in prisoners receiving their prescriptions.
- I.73** Attendance at five-day reviews was good. Too many men failed to attend their 13-week reviews, but this was partly offset by men having reviews at different intervals. Appropriate records were completed on SystmOne (the electronic clinical information system), which the whole team could access. There was appropriate secondary detoxification for prisoners who relapsed.
- I.74** Since our previous inspection, the move to locate the majority of prisoners in the same house block, alongside all substance use services, had resulted in a very good service for most men. In our survey, of the prisoners receiving support, more (90%) said it was good or very good, compared with 75% at comparator prisons. Prisoners we spoke to said most officers and substance misuse workers were supportive, but a small minority of prison officers made derogatory comments.
- I.75** A total of 358 prisoners were receiving support; 293 men were in active treatment and 65 men were receiving help pre-release. Individual case management work was good and paper substance misuse records were well organised and comprehensive.
- I.76** A dedicated alcohol worker provided individual support, prioritising remanded and short sentence prisoners.

## Recommendations

- I.77** **Drug and alcohol issues should be prioritised and monitored regularly; an action plan should ensure there is a direct link between prisoners' offending behaviour and substance use.**
- I.78** **Vulnerable prisoners should have access to the full range of programmes.**

## 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** *Communal areas in all house blocks were clean and adequately maintained but some association equipment needed to be repaired. The standard of accommodation in house blocks five and six was good, but varied in the older units, where some single cells were inappropriately used to hold two prisoners. Cells in house blocks one to four were mostly clean, but some contained broken furniture, inadequately screened toilets and windows that needed to be replaced. The restricted regime limited prisoners' access to showers, telephones and laundries. Prisoners had little confidence in the application system and we found that some departments took too long to respond.*

- 2.2** Communal areas in all house blocks were clean and adequately maintained but some association equipment was in need of repair. The external areas across the prison were pleasant, but gardens and exercise yards contained large amounts of litter.
- 2.3** There were six house blocks. House blocks five and six provided a good standard of accommodation: cells were clean and well furnished and prisoners had privacy keys, which they appreciated. Cellular accommodation in the older house blocks was more variable. About a third of the cells on these units held more prisoners than they were designed for; these overcrowded cells were cramped, lacked furniture and contained inadequately screened toilets. The impact of the poor accommodation was exacerbated by the long periods of time many prisoners spent locked in their cell (see section on time out of cell). While the other cells in these house blocks were better, too many contained insufficient or broken furniture and some had windows that needed replacing. Although cells were generally clean, some contained graffiti and the offensive displays policy was not being consistently enforced.
- 2.4** Communal showers in the four older units lacked privacy and were in poor condition. Most prisoners could wear their own clothes and used laundries in the units to wash them; new prisoners had to wear prison clothing, much of which was ill-fitting. In our survey the number of prisoners reporting they had sufficient access to clean clothing, bedding and showers had fallen since the previous inspection. We found the restricted regime limited prisoners' access to showers, laundries and phones in all house blocks.
- 2.5** In our survey only 18% of prisoners said their cell bell was normally answered within five minutes (compared with a comparator of 29%); we found response times were regularly too long.
- 2.6** All new arrivals were told about the application process during their induction, and most prisoners we spoke to understood the system. Applications were logged by an administrator in each house block and then sent to relevant departments for a response. In our survey prisoners were negative about all aspects of the application system and throughout the week prisoners and staff confirmed that some departments took too long to reply.

## Recommendations

- 2.7** Single cells should not be used to accommodate two prisoners. (Repeated recommendation 2.11)
- 2.8** Prisoners should be able to shower in private. (Repeated recommendation 2.13)
- 2.9** Cell bells should receive a prompt response.
- 2.10** The application process should be robust, timely and have the confidence of prisoners. (Repeated recommendation 2.15)

## Housekeeping point

- 2.11** The offensive displays policy should be enforced consistently.

## 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.**

**2.12** *Vulnerable prisoners were positive across a range of indicators relating to respect, but mainstream prisoners were less positive. There was no personal officer scheme or viable alternative. Consultation arrangements were not always effective.*

- 2.13** The prison's serious staff shortage was having a negative impact on staff-prisoner relationships. In our survey, only 66% of respondents said staff treated them with respect and only 64% said they had a member of staff they could turn to for help, against the comparators of 74% and 70% respectively. Vulnerable prisoners were much more positive. We found evidence to support both views. We saw some exceptionally caring staff but a few were disengaged and on occasion disrespectful. The use of preferred names was not embedded.
- 2.14** There was no personal officer scheme and the alternative, where staff were allocated to each spur, was not working. Staffing inconsistencies in some units were affecting relationships. Prisoners in our groups said it was difficult to form relationships with staff because of the restricted regime and irregularity of staff. Case history notes we examined were not completed on a regular basis and were perfunctory.
- 2.15** Consultation took place regularly and included house block and monthly prison-wide meetings. Staff from relevant departments did not attend the prison-wide meeting; instead responses to issues raised were sought from functional heads. Some issues were raised consistently without concerns being addressed.

## Recommendations

- 2.16** The prison should explore and address the negative perceptions of some groups of prisoners about relationships with staff. (Repeated recommendation 2.21)



## 2.17 The prison should address issues raised through consultation effectively.

### Housekeeping point

2.18 Staff should use preferred names when addressing prisoners.

## 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 characteristic<sup>6</sup> 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.**

**2.19** *The strategic management of equalities was weak, although this was mitigated by some supportive equalities and wing staff. Planning lacked a strategic focus and progress across a range of issues was slow. The prison failed to investigate equalities monitoring data showing the disproportionate treatment of some prisoners in a number of key areas and there was little consultation with prisoners in protected groups. Support for foreign national prisoners and detainees was not sufficient. Many older prisoners and those with disabilities said they felt well supported, although an absence of formal care planning meant that developing needs were not always identified and addressed quickly enough.*

### Strategic management

**2.20** The strategic management of equalities was weak. Planning lacked a strategic focus and progress across a range of issues was slow. The monthly equality action team (EAT) meeting had not taken place in the previous two months. It was poorly attended and, as with the action plan, was not focused enough and too many actions were carried forward.

**2.21** The prison did not pay enough attention to equalities monitoring data, which indicated that, over at least a six month period, black and minority ethnic and Muslim prisoners and young adults were consistently over-represented when it came to the use of force, segregation and the basic level of the incentives and earned privileges (IEP) scheme (see also paragraph 3.8). Investigations into this as part of a use of force equalities impact assessment in June 2014 and as requested by the EAT meeting in August 2014 had not been completed by the time of the inspection (see main recommendation S49).

**2.22** Only two consultation forums had been held in the six months prior to the inspection, one for older people and the other for Gypsy, Roma and Traveller prisoners. There had been no other forums for other protected groups. Very few links had been made with external support agencies and few events were organised to celebrate diversity (see main recommendation S49).

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

- 2.23** Twenty-four discrimination incident reporting forms (DIRFs) had been submitted in the six months prior to the inspection, fewer than previously. The reasons for this trend had not been fully explored and prisoners we spoke to said they lacked faith in the process. Nonetheless, although responses did not always document the investigation and outcomes in sufficient detail, most did appear to be adequate.

## Protected characteristics

- 2.24** A full-time equalities officer was assisted by two equalities orderlies. Although the orderlies had received no formal training for their role, they felt well supported, and they worked well with the equalities officer and with prisoners. Most prisoners in protected groups, particularly older, disabled prisoners and foreign national men commented favourably on the support they received from the equalities officer and orderlies, despite some of these groups being less positive in our survey. Most prisoners we spoke to in protected groups also commented favourably on the support they received from staff on the wings, although some complained that staffing was too stretched to provide support consistently, when it was needed.
- 2.25** In our survey, black and minority ethnic and Muslim prisoners reported a poorer experience than their white and non-Muslim counterparts across all four healthy prison tests. In particular, both groups reported a higher incidence of victimisation by staff and greater use of control and restraint, which reflected the prison's own equalities monitoring data (see paragraph 2.21). There was little specific provision for either group.
- 2.26** There were 173 foreign national prisoners. Although the Home Office held a weekly surgery at the prison, there were no free independent legal advice surgeries. Staff told us that prisoners who could not afford to pay for representation were very unlikely to have been able to obtain advice. A 28-year-old detainee who had lived in the UK since he was six was facing deportation to the Democratic Republic of Congo. He did not speak any local languages and had no contact with any family there. He could not afford representation and was utterly ill-equipped to address the complex legal case facing him.
- 2.27** Ten detainees were held under immigration powers after the end of their sentences. We were told that the Home Office often only informed prisoners that they were going to be detained on the day they were due to be released, which was unacceptable.
- 2.28** Records showed that telephone interpretation was rarely used for the group of about 11 prisoners who spoke no English. One of the equalities orderlies was unaware that the facility was available. Health care staff told us they used staff to interpret, or failing that, Google's translation service or other prisoners. We observed them using other prisoners as interpreters in confidential screening interviews.
- 2.29** Prisoners with disabilities were also very negative in our survey across a range of issues, while older prisoners were much more positive. Most prisoners in these groups we spoke to said staff supported them well. Prisoners in the VP wing in particular, where most prisoners with disabilities and older prisoners were located, commented favourably on staff support, although some said that staffing levels meant the support was not always available when it was needed. In addition, a lack of formal care planning meant that developing needs were not always identified and addressed promptly. There were also some delays in the provision of necessary adjustments to prisoners' living environment.
- 2.30** There was no paid carer scheme for those requiring additional support, although prisoners said they received support from other prisoners informally. This support went further than could reasonably be expected. One prisoner, for example, was helping another to wash

himself. We were told of occasions when prisoners in house block six had carried disabled prisoners up a flight of stairs while the lift was out of order so he could attend education, which was unsafe. According to staff and some prisoners, when the lift was not working, prisoners who could not use the stairs were usually unable to attend education.

- 2.31** Notices in unit offices outlining personal emergency and evacuation plans (PEEPs) were inaccurate. Arrangements were generic and clearly impractical for house block six where 14 prisoners had PEEPs as the duty officer in each house block was responsible for ensuring their safe evacuation.
- 2.32** Few dedicated activities were available for disabled and older prisoners. Those who were retired or unable to work were frequently locked in their cells during the day, which was inappropriate and it was particularly unreasonable to charge them 50p a week for using their TV. Retired prisoners had to bear this cost from retirement pay of £3.25 per week, which in any case was insufficient.
- 2.33** There was no policy for the care or management of young adults. Staff did not have a sufficient understanding of the special needs of this group.
- 2.34** Gay and bisexual men we spoke to in the vulnerable prisoner unit felt well supported but there was no special provision for this group.

## Recommendations

- 2.35** **The Home Office should serve all decisions to detain a prisoner at least one month before the end of their sentence.**
- 2.36** **Unit staff should make greater use of the telephone interpreting service to communicate with foreign national prisoners who do not speak or understand English.**
- 2.37** **All older prisoners and those with disabilities should have an assessment to determine if they need a care plan, which should be reviewed regularly.** (Repeated recommendation 2.47)
- 2.38** **All prisoners requiring help to evacuate their units in the event of an emergency should have a bespoke evacuation plan and staff on duty should know who they are.**
- 2.39** **Retired prisoners should not have to pay to use their TVs.** (Repeated recommendation 2.49)

## 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.**

- 2.40** *Faith provision was reasonable and a full-time Muslim chaplain was being appointed. Pastoral care was particularly good.*

- 2.41** Faith provision was reasonable; 54% of prisoners in our survey said their religious beliefs were respected compared with 49% in similar prisons.
- 2.42** The small core team of paid chaplains, supported by paid sessional chaplains and volunteers, covered prisoners' diverse religious affiliations. However, only 48% of Muslim prisoners said they could speak to a religious leader of their choice in private if they wanted to, compared with 58% of non-Muslims; a temporary Muslim chaplain, who only generally worked on Fridays, was filling a full-time vacancy pending recruitment. Although only 33% of prisoners said they had access to a chaplain when they arrived in the prison compared with 46% in similar prisons, records indicated that nearly all saw one.
- 2.43** The facilities in the multi-faith room were adequate and could be adapted for different faith groups. Arrangements were in place so that vulnerable prisoners could attend corporate worship with other prisoners in the multi-faith room. Prisoners in the segregation unit could attend corporate worship subject to a risk assessment. Chaplains visited the vulnerable prisoners' unit, segregation and the health care centre every day.
- 2.44** Prisoners we spoke to, including two who had been bereaved, commented very favourably on the strong pastoral support offered by the chaplaincy, two of whom were trained counsellors.
- 2.45** The team was fairly well integrated into the work of the prison. Chaplains were very visible in residential units during our inspection and attended a wide range of meetings. The team was implementing plans to improve support to prisoners about to be released.

## 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.**

**2.46** *Most complaints were for minor matters and replies were generally polite. A minority of responses failed to address adequately all issues raised and quality assurance arrangements required considerable improvement.*

- 2.47** In our survey, 27% of prisoners felt their complaints were dealt with fairly, this was better than our previous inspection and similar to comparator prisons. Most complaints were for minor matters. Responses we looked at were generally polite, although apologies were not always offered when complaints were upheld. A minority of responses failed to address adequately all issues raised.
- 2.48** Monthly monitoring data showed that about 10% of complaints received a delayed response. Monitoring could have been improved through the analysis of complaint trends over time and by reclassifying confidential access complaints (which are initially only read by the person to whom they are addressed) that are considered suitable for a response under the normal procedure.
- 2.49** The quality assurance arrangements required improvement: only two or three complaints each month were referred by the complaints clerk to her manager for checking, which was not sufficient to address the concerns we identified.

## Recommendation

- 2.50** The establishment should put in place an effective and thorough quality assurance system for complaints and the results should be communicated to prisoners.

## 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.**

- 2.51** *There were no legal services officers and prisoners did not know where they should go for help with legal matters.*

- 2.52** There was no longer a legal aid officer and prisoners we spoke to did not know where they should go for support with their cases. Prisoners were unclear about the arrangements to ensure legally privileged and confidential access telephone calls (which exempt prisoners from being monitored) were not recorded and these arrangements were not explained to them in the induction interviews we observed. Prisoners were not aware of any problems booking legal visits. The solicitor we spoke to said there were sometimes delays before they were admitted to consultation booths. The prison had 21 consultation booths, which was sufficient.

## 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.**

- 2.53** *Prisoners' perception of health care was mixed but overall services were good. The range of primary care services was appropriate and waiting times for the GP were short, but prisoners waited too long for dental and optician services. The inpatient unit provided good care; the regime was poor but improving. Too many external hospital appointments were cancelled. The pharmacy provision was impressive. Secondary mental health services were good. Primary mental health provision was inadequate, although it was improving. Most prisoners waited too long to transfer to external mental health facilities.*

## Governance arrangements

- 2.54** Virgin Care provided primary care services and the Surrey and Borders NHS Foundation Trust ran the mental health provision. The commissioners, prison and providers worked together effectively. Well attended clinical governance and partnership board meetings covered all essential areas. An up-to-date health needs assessment and health improvement

plan informed service delivery. Lessons learned from serious incidents, complaints, prisoners' feedback and audits were shared with health staff and drove service improvements.

- 2.55** The primary care manager had been interim nurse manager for over a year without anyone covering his previous role, which had an impact on service development. The health team had a rich skills mix. Nurses were always onsite, staffing shortages were normally covered by the core team and a local GP practice provided regular GP clinics.
- 2.56** Health staff were not easily identifiable: for example, pharmacy technicians administering medication wore the same uniform as a staff nurse and name badges were not consistently visible. The interactions we observed were good. Staff generally had good access to training and appraisals. Clinical and managerial supervision was embedded for most nurses but underdeveloped for senior nurses and health care assistants. Health staff used appropriate policies including one on safeguarding.
- 2.57** Health care assistants took on tasks over and above their normal role, including medication administration and reception screening. The practice we observed was good, but ongoing training, supervision and quality assurance processes for these roles were weak.
- 2.58** New arrivals received clear written information on health services. Access to clinical services in all six house blocks and the health centre was good. Cleaning did not meet NHS standards and most rooms required some refurbishment to comply with infection control standards. The waiting area for most prisoners was pleasant, but prisoners from the vulnerable prisoners' unit told us they felt they were at risk while waiting in the main health centre corridor as prisoners from other units walked by.
- 2.59** Appropriate well checked emergency equipment was located across the establishment. Too few discipline staff had had up-to-date first aid training and none had had defibrillator training, which could have delayed an appropriate emergency response; however, this was offset by nurses being constantly onsite. Ambulances were called promptly in emergencies and response times were mostly good.
- 2.60** All prisoners over 40 had the NHS health check. Prisoners over 55 had good access to annual health checks and relevant community screening programmes. Access to mobility and health aids was satisfactory.
- 2.61** Prisoners knew how to complain but we were concerned that the different providers followed different policies and it was unclear what constituted a formal complaint. Prisoners used the prison complaints system, which was not sufficiently confidential. The majority of complaints related to medication and most responses we sampled were prompt and addressed the issues raised.
- 2.62** Good health promotion displays and literature were located in the health department but very little was available in the house blocks. Health promotion literature in other languages was limited. Prisoners had good access to smoking cessation services, immunisations, treatment for blood borne viruses and barrier protection.

## Recommendations

- 2.63** **Health staff carrying out tasks beyond their usual role should receive competency-based initial and refresher training, regular supervision and ongoing practice assessments from senior staff.**
- 2.64** **All clinical environments should comply with infection control standards.**

**2.65 Sufficient custodial staff should be trained in emergency first aid and defibrillation to ensure a prompt response in emergencies.**

### Housekeeping point

**2.66** Vulnerable prisoners should have a discrete private waiting area in health care where they feel safe.

### Delivery of care (physical health)

**2.67** In our survey, a similar number to the comparator but fewer than on the previous inspection were satisfied with the overall quality of health services.

**2.68** Health care assistants saw all new prisoners promptly for a combined initial and secondary assessment in reception. Consultations were private but the assessment was too detailed for the first night and delayed prisoners in reception. Appropriate community liaison and follow-up referrals were completed.

**2.69** Prisoners requested services from the house block nurse or submitted applications. Each house block nurse provided daily 'special sick' (immediate health treatment) appointments. The range of primary care services was appropriate. Waiting times for the GP and nurse practitioner were short, but for the optician and dentist they were too long (see also section on dentistry). The non-attendance rate for all clinics was excessive at over 20%. Emergency GP and nurse practitioner appointments were available every day. The out-of-hours' GP provision was satisfactory.

**2.70** Prisoners with lifelong conditions were identified effectively and relevant clinics, including a weekly GP-led clinic, were provided. Clinical records and care plans we examined were generally good.

**2.71** Clear clinical admission criteria for the 21-bedded inpatient unit had been introduced in November 2014. Prisoners were rarely admitted for non-clinical reasons and governance had improved. Daily GP input and weekly operational and clinical meetings ensured better communication. The environment was reasonable and we observed good care, but patients spent too much time locked in their cells. The commissioners, prison and providers were implementing an integrated improvement plan for inpatients. Patients we spoke to were positive about the support they received.

**2.72** Wide ranging in-house secondary services, including visiting specialists, radiology, ultrasound and dialysis, meant prisoners had a better experience of and access to these services. However, demand for the four available external hospital slots every day remained high. Most prisoners were seen within NHS waiting times, but too many were cancelled by the prison due to emergencies or bed watches (hospital admissions of at least one night, during which the prisoner requires constant observation for security purposes).

### Recommendations

**2.73 All prisoners should receive a separate secondary health assessment within 72 hours of arrival.**

**2.74 Prisoners should be able to access all primary care clinics including dental and external hospital appointments within community equivalent waiting times.**

**2.75 The non-attendance rates for all clinics should be reduced to under 12%.**

## Pharmacy

- 2.76** The onsite pharmacy supplied medicines promptly Monday to Saturday, along with relevant patient information leaflets. Access to out-of-hours' medicine was appropriate. A formulary (list of medications used to inform prescribing) and full range of policies were used; errors and drug alerts were managed effectively and regular audits informed practice. The pharmacy team provided an impressive range of well attended clinics, including medicine use reviews, smoking cessation, lactose intolerance, weight management, skin and asthma clinics.
- 2.77** Medicines were transferred to dispensing rooms securely and stored appropriately. Refrigerator temperatures were not consistently recorded in the house blocks. Controlled drugs were generally managed appropriately, but methadone for some prisoners who were not located in house block four was measured into named containers that nurses labelled, filled and transferred to the relevant house block for administration. This poor practice was being addressed. Plastic measures were inappropriately used for methadone in some areas of the prison.
- 2.78** All prescribing was recorded and administered on SystmOne (the electronic clinical information system). Medicines were administered four times a day, including at night time. The pharmacist trained the pharmacy technicians and health care assistants in medication administration. Health professionals could administer an appropriate range of medicines without a prescription.
- 2.79** Between 65% and 70% of medication was given in possession following a satisfactory risk assessment, although not all prisoners had secure in-cell storage. The medication administration we observed was respectful and safe. Officers did not supervise medication administration, which increased the risk of medicines being diverted; instead a prisoner peer health worker was present and chased up non-attendance. Despite this we did not observe any crowding around the hatches.
- 2.80** Prescribing issues, including tradable medication, were discussed at bimonthly medicines management meetings. Prisoners on chronic pain medication or whose pain control was poor had a face-to-face review with a doctor and pharmacist at a fortnightly pain management clinic. Overall the clinic appeared to complete appropriate investigations, liaise with community agencies, review notes and follow relevant prescribing guidance, but the pathway had not been formalised or agreed by the medicines management committee. Many prisoners we spoke to were unhappy with the outcome of their reviews.

## Recommendations

- 2.81 Methadone administration should comply with professional standards and only approved glass measures should be used.**
- 2.82 Custodial staff should supervise the medicine administration queues adequately to maintain patient confidentiality and reduce potential bullying.**

## Housekeeping point

- 2.83** Refrigerator temperatures should be recorded daily and appropriate documented remedial action taken when required.



## Good practice

- 2.84** *The impressive range of pharmacy clinics gave prisoners prompt access to specialist services and reduced the demand for GP appointments.*

## Dentistry

- 2.85** Virgin Care provided eight dentist sessions a week. All prisoners could access NHS-equivalent services regardless of their sentence, but waiting times were excessive at 12 weeks for routine appointments and eight weeks for ongoing treatment (see section on physical care). In our survey, fewer prisoners than the comparator were positive about access (6% against 9%), but a similar number to the comparator and more than at the previous inspection said the quality of the dentist was good.
- 2.86** Appointments were appropriately allocated according to clinical need and emergency appointments were available every day. The clinical records and consultation we observed were good. Effective oral health promotion was provided. The dental surgery was good, but did not meet best practice because it lacked a separate decontamination room and washer-disinfector. All equipment was appropriately maintained and dental waste was disposed of professionally.

## Recommendation

- 2.87** **The dental surgery should comply with best practice standards for dental infection control.**

## Delivery of care (mental health)

- 2.88** In our survey, fewer prisoners than the comparator but more than previously said they had emotional wellbeing or mental health problems, but fewer reported receiving help (32% against 44%). Working relationships between prison and mental health staff were effective. Only 16 officers (5% of operational staff) had received mental health awareness training in 2014.
- 2.89** A new provider was taking over the service from Surrey and Borders NHS Foundation Trust and a new service specification, including enhanced primary mental health provision, was to be effective from May 2015.
- 2.90** Discrete primary mental health services had only been commissioned in April 2014 and development had been slowed by recruitment issues and the retendering process. A clinical psychologist, counselling psychologist and cognitive behaviour practitioner provided the service. Waiting times were long, but decreasing. Psychologically informed groups ran regularly in house blocks and in the inpatients unit. There were no general counselling services.
- 2.91** The secondary team included mental health nurses, a learning disability nurse, support workers and psychiatrist. A duty worker was available Monday to Friday for advice, urgent assessments and in-reach support in the segregation unit. All referrals received through the open referral system were prioritised every day according to identified needs. The secondary team was supporting around 100 prisoners with moderate to severe mental health problems. Care planning and community liaison were generally good. The team provided support for

prisoners with substance misuse and mental health problems (dual diagnosis) but the pathway needed development.

- 2.92** The number of patients requiring a transfer under the Mental Health Act had increased significantly from 25 in 2013 to 45 in 2014. Most of the 18 patients transferred since June 2014 had waited up to nine weeks longer than the NHS-recommended transfer times, mainly due to a lack of available beds. However, a rapid transfer had been arranged for a patient who was being released.

## Recommendations

- 2.93** Custodial staff should receive regular mental health awareness training.
- 2.94** Mental health provision should include prompt access to the full range of primary care, counselling and dual diagnosis services.
- 2.95** Patients requiring a transfer under the Mental Health Act should be assessed promptly and transferred within the current transfer 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.**

- 2.96** *Catering arrangements were reasonably well managed. Meals were satisfactory; they were varied and balanced but served too early. There was evidence that food served to vulnerable prisoners in house block six had been tampered with and not enough was done to prevent contamination.*

- 2.97** The kitchen was large and well equipped but shabby, and some of the flooring was damaged. A published four-week menu cycle catered for different dietary needs and preferences. One hot meal was provided every day and prisoners could choose from up to five options at lunch and dinner. Meals provided a varied and balance diet, including fresh fruit and vegetables.
- 2.98** Breakfast packs were issued the evening before they were to be consumed and lunch and evening meals were served as early as 11.15am and 4.15pm. Portion sizes and the quality of food were satisfactory. Serveries were poorly managed: utensils were not always used, temperatures were not consistently taken and food often ran out. There were no facilities for prisoners to dine communally.
- 2.99** Staff and managers told us of a number of incidents in which food for vulnerable prisoners in house block six had been tampered with and contaminated with items such as nails, drawing pins and cigarette ends. Not enough was done to prevent this from happening or to alleviate vulnerable prisoners' legitimate concerns.
- 2.100** Consultation arrangements through a twice yearly survey, the prisoner consultation meeting and food comments books were good and responses were reasonable.

## Recommendations

- 2.101 Breakfast should be issued on the day it is to be eaten.**
- 2.102 There should be at least five hours between lunch and the evening meal being served.**
- 2.103 Prisoners should be able to take their meals in association.** (Repeated recommendation 2.14)
- 2.104 The prison should prevent the contamination of food served to vulnerable prisoners in house block six and provide assurance to these prisoners that this has been done.**

## Purchases

### Expected outcomes:

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

**2.105** *With the exception of new arrivals prisoners had good access to the shop, although consultation arrangements had lapsed. The range of catalogues remained limited.*

- 2.106** In our survey the number of prisoners agreeing that the shop sold a wide enough range of goods had fallen and was now similar to comparable prisons. We found prisoners could purchase a diverse range of goods but consultations on changes to the canteen list had lapsed. Most prisoners had weekly access to the prison shop. New prisoners could purchase telephone credit and tobacco in reception but they could then wait up to 13 days to receive their first shop order.
- 2.107** The catalogue system was underdeveloped; the range of catalogues available was poor and it was unacceptable that at the time of the inspection the prison was not processing deliveries of catalogue orders.

## Recommendations

- 2.108 All prisoners should have weekly access to the shop.** (Repeated recommendation 2.117)
- 2.109 Deliveries of catalogue orders should be processed promptly and issued to prisoners.**



## 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.<sup>7</sup>**

**3.1** *Too many prisoners were locked in their cells during the day with nothing to do. Access to domestic periods and association was restricted.*

**3.2** The prison had been operating a restricted regime since May 2014 owing to staff shortages. The published regime was 45 minutes shorter than the national core day and domestic periods were split on most house blocks. Regime curtailments occurred regularly in the afternoon. A fully employed prisoner could expect up to nine hours out of his cell each weekday which was good. However, over a third were unemployed and could spend 22 hours a day locked in their cells, which was poor. At roll checks during the morning and afternoon, we found an average of 35% of prisoners locked in their cells, which was too many (see main recommendation S50).

**3.3** In our survey, only 10% of prisoners said they exercised outside three or more times a week against the comparator of 41% and 46% at the previous inspection. Exercise periods were not available Monday to Thursday in house blocks three and five, the designated full-time worker units. Exercise in other house blocks was cancelled in bad weather. Exercise equipment had been purchased and was waiting to be fitted.

### Recommendation

**3.4 All prisoners should have access to a daily exercise period.**

<sup>7</sup> 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.**

**3.5** *The leadership and management of learning and skills and work required improvement. The quality of provision had declined since the previous inspection and managers were bringing about improvements from a low base. Managers mostly used quality improvement processes well to evaluate and improve the provision, but targets were not used well enough to inform key strategies or action plans. There were insufficient activity places and too many prisoners were unemployed, although the range of courses and the work available suited prisoners' needs well. A4e provision required improvement. Learners' achievements were high for the majority of qualifications but low for English and mathematics. Attendance at work was good, but poor on the Offender Learning and Skills Service (OLASS) provision. Prisoners' skills development and standards of work were good across most activities. The library provided an effective service and access was good for those attending education classes and adequate for those in work.*

**3.6** *Ofsted<sup>8</sup> 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

**3.7** *The management of learning and skills required improvement. Standards of teaching, learning and assessment, and outcomes for learners had declined markedly since the previous inspection. Over the previous 18 months, a new management team had accurately assessed the problems and put in place suitable measures to improve the provision. Consequently, the proportion of prisoners who successfully completed qualifications, while still low in a minority of subjects, had risen substantially from a very low base two years previously. Managers used information about prisoners' needs and local employment trends well to update the vision and strategy for education, training and work. They had improved opportunities for prisoners, but had not yet ensured teaching, learning and assessment were consistently good. The management of key processes, such as induction, the allocation of prisoners to purposeful activities and attendance at OLASS sessions, as well as the strategy to improve prisoners' skills in English and mathematics required further improvement.*

<sup>8</sup> 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>.

- 3.8** Managers accurately assessed the quality of the provision in the self-assessment report and identified most of the key strengths and areas for improvement. In their assessment of teaching, learning and assessment, they did not identify adequately how learners' outcomes would be affected by weaknesses in assessment, particularly in English and mathematics. Quality improvement action plans and key strategic documents focused well on actions to raise standards, but did not make sufficient use of precise targets to pace or review further improvements. Managers used data well to monitor performance on different courses, but failed to use them well enough to monitor or manage the attainment of different groups of learners. For example, managers were not sufficiently aware of the differences in performance between black and minority ethnic learners and white prisoners.
- 3.9** The observation of teaching, learning and assessment was good, and education managers reviewed staff frequently after observation to ensure they all developed their skills. Managers had successfully eradicated inadequate teaching and well planned staff training was continuing to raise standards.

## Recommendations

- 3.10** **Managers should implement a strategy to raise prisoners' skills and attainment in English and mathematics to prepare them better for employment on release.**
- 3.11** **Managers should improve the use of performance targets to monitor and pace further improvements, and use data to monitor and deal with differences in performance between different groups.**

## Provision of activities

- 3.12** The prison did not offer sufficient full-time purposeful activities to meet the needs of the population. As a result, approximately 38% of prisoners were unemployed at the time of the inspection.
- 3.13** Managers had extended the range of subjects taught and used data on local employment trends and prisoners' needs to re-shape the curriculum. For example, a business hub had been opened to provide training in business administration, and a call centre had been established. The prison's good range of prison-wide vocational training included horticulture, positions in the Clink training restaurant, painting and decorating, cleaning, plastering and brickwork. Most of the training was accredited. Training staff had extensive skills and expertise. Prisoners clearly enjoyed the opportunities available. Vulnerable prisoners could also participate in a good range of vocational training and education.
- 3.14** Work options included roles as orderlies, wing cleaners, serverly workers, peer mentors, Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), clothing exchange store workers, laundry workers and prisoner representatives. Other work was available in the call centre, kitchen, recycling unit, and carpentry and textiles workshops. Work for vulnerable prisoners was reasonably good and in some areas they worked well alongside main prisoners. Work settings were busy and all prisoners at work were fully occupied. The majority of the work provided prisoners with good job-related skills. However, in some areas, such as the laundry and recycling, prisoners' work and employment skills were not recognised or recorded. In a small number of workshops the qualifications offered were too low and staff and prisoners did not value them. Prison managers were aware of this and plans were in place to change the qualifications.

## Recommendation

- 3.15 Managers should increase the number of prisoners involved in purposeful activity and reduce the proportion of prisoners who are unemployed.**

## Quality of provision

- 3.16** The quality of teaching and learning required improvement in education and vocational training. Although many lessons and training sessions were well taught, teachers and trainers did not have consistently good skills. Many teachers and trainers planned sessions well and had clearly defined learning outcomes. In the majority of lessons, these included setting targets in individual learning plans (ILPs), which teachers ensured were achieved. However, in a minority of lessons less effective teachers made insufficient use of information recorded in ILPs and taught learners as if they were all at the same stage, which led to work that was too easy for some and too hard for others. Too often, teachers set targets that focused too narrowly on achieving qualifications, rather than challenging learners to develop skills that would help them in a job.
- 3.17** In vocational training workshops, instructors provided good coaching and training and prisoners quickly gained new skills, for example in plastering, rendering and bricklaying. Staff used demonstrations well to reinforce learning throughout the programmes. Prisoners that were more able developed their skills well through increasingly challenging tasks and activities. In all work areas, prisoners were industrious, displayed a good work ethic and collaborated well with each other. Staff in The Clink restaurant provided high quality training and prisoners received good support to ensure they met the exacting demands of the programme.
- 3.18** Learning resources were appropriate and, overall, many prisoners developed good independent learning skills while in lessons. The majority of teachers and trainers had access to IT in class and used it well. However, where they did not, the pace of learning was slow, for example, learners waited while the teacher wrote information on the board. Teachers had started to use the virtual campus (internet access for prisoners to community education, training and employment opportunities) for a few education courses, but this resource was underused.
- 3.19** The role of prisoner learning support assistants was underdeveloped. Too often, learners with additional learning needs or low attainment did not receive effective support in class and made slow progress. At times, teachers were too busy in lessons to resolve individual learners' queries, leaving some unclear about how they could progress.
- 3.20** Staff did not plan or manage prisoners' induction or their allocation to purposeful activities well enough to ensure they all took part in education or training that matched their needs in the future. Many prisoners were not aware of the work and education that was available at the prison. Staff did not always assess prisoners' skills in English and mathematics promptly enough and teachers did not use information from assessments well enough to plan learning that met individual needs.
- 3.21** The teaching, learning and assessment of English and mathematics required improvement. Managers' strategy for developing prisoners' skills in these subjects was underdeveloped. Staff allocated too many prisoners with low English and mathematics attainment to other purposeful activities without sufficient support for them to develop these skills. Teachers had started to embed English and mathematics into vocational courses, but this required further development; too many teachers still failed to check poor spelling and grammar.



- 3.22** There was considerable variation in the way teachers checked learners' progress. In the best cases they monitored learners' progress frequently and their feedback on marked work helped them improve. However, a minority of teachers did not check learners' progress adequately during lessons, which meant they might not have gained a full understanding of the topics taught. For too many, feedback on progress during the course focused solely on meeting the aims of the qualification and not on the development of wider employment skills, including English and mathematics.
- 3.23** A small number of learners were enrolled onto a range of distance learning programmes. They were generally self-sufficient and received appropriate administrative support when required.

## Recommendations

- 3.24** Teachers and trainers should set challenging targets in ILPs and progress reviews should relate to prisoners gaining job-related skills.
- 3.25** Managers should extend the use of prisoner learning support assistants to help prisoners develop their English and mathematics skills.
- 3.26** Managers should improve the induction process so that all prisoners have timely skills assessments and are allocated swiftly to activities that meet their future employment or training needs.

## Education and vocational achievements

- 3.27** The achievement rates in accredited qualifications on the majority of vocational training and education programmes had improved over the previous two years and were high. However, within subjects, achievement rates varied too much at different levels. For example, in IT achievement rates were high at entry level, but low at levels 1 and 2. Achievements in English and mathematics qualifications, while they had improved, were still too low.
- 3.28** The standard of most prisoners' practical work in vocational training and education was good. Prisoners gained skills quickly and responded well to the challenges of acquiring higher level skills, such as IT in music technology. Prisoners in workshops benefited from taking responsibility for leading teams. Learners' attendance and punctuality at non-OLASS vocational training sessions and in the workshops were good, but poor on OLASS vocational training programmes, averaging around 65% of those allocated to a session. Prisoners behaved very well in vocational training areas, workshops and classrooms and staff and prisoners showed mutual respect.

## Recommendations

- 3.29** Achievement rates in English and mathematics qualifications should be improved.
- 3.30** Prisoners' attendance and punctuality at OLASS education and vocational training should be improved.

## Library

- 3.31** A librarian, an assistant librarian and four prison orderlies managed the library effectively. Managers had moved the library to the education block, which had improved prisoners' access to the service. Library and education staff communicated better as a result and the library's support for prisoners in education had improved.
- 3.32** The library was compact, but offered an adequate range of resources to meet prisoners' diverse needs. Resources included fiction and non-fiction books, DVDs, CDs and a selection of newspapers. An appropriate range of books was available for speakers of other languages with at least 20 languages catered for. Up-to-date Prison Service Orders and legal texts were available. Two computers were available.
- 3.33** The library schedule indicated that prisoners had sufficient opportunities to access the facility from Monday to Friday; however, it was closed at weekends. Library staff had introduced the Six Book Challenge reading programme and a reading club within the previous six months. Prisoners with poor literacy skills received very good support through the well managed Toe by Toe mentoring scheme to help prisoners learn to read. Around two to three prisoners a week took advantage of the Storybook Dads service (in which prisoners record stories for their children). A fortnightly trolley book service was available for prisoners in the resettlement and health care units.
- 3.34** At the time of inspection, managers had only just started collecting data on library usage, but this had been disrupted because of a technical malfunction. The ability of managers to assess comprehensively the effectiveness of the service was particularly limited. Data that were available indicated marked differences in the extent to which prisoners from different house blocks used the library.

## Recommendation

- 3.35** **The prison should make better use of data to improve access for prisoners from house blocks where library use is infrequent.**

## 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.**

**3.36** *Physical education (PE) facilities were inadequate. Access to recreational PE was poor for all prisoners and the prison's good indoor and outdoor facilities were underused. PE sessions were frequently cancelled and participation rates had declined significantly since the previous inspection. Accredited courses were not offered. Links with the health care department and activities to promote health were inadequate, and remedial PE sessions were rarely offered.*

- 3.37** The PE provision was inadequate. There was one senior officer and six instructors, but on some occasions only two members of staff were on duty. The significant lack of PE staff because of recruitment delays and sickness meant that the advertised programme was unworkable. Sessions were cancelled every day, including evening sessions, which particularly affected prisoners in full-time work, and PE staff were unable to structure sessions at short

notice. PE staff were responsible for collecting prisoners from house blocks and returning them at the end of sessions. This meant that prisoners' PE time was reduced.

- 3.38** Links with the health care department had ceased and remedial PE sessions were seldom offered. Staff were trained and keen to deliver accredited courses, but none were offered. Significantly fewer prisoners than at similar establishments said they visited the gym three or more times a week. Staff had insufficient data about prisoners' attendance at PE sessions, which meant they could not plan improvements or ensure all prisoners had equal access.
- 3.39** Prisoners' PE induction was adequate, but too many waited a long time to receive it, which delayed their access to PE. A number of orderlies supported PE staff well and worked with prisoners to help them use facilities safely. The indoor facilities comprised two well equipped weights rooms, a full-size sports hall and a cardiovascular area. Most of the facilities were underused, as were the outdoor resources, which included an artificial sports pitch.

## Recommendations

- 3.40** The prison should offer a full programme of recreational PE that meets all prisoners' needs.
- 3.41** The prison should offer a range of accredited programmes to provide prisoners with skills and qualifications that will help them gain appropriate employment on release.
- 3.42** Data on prisoners' participation in PE should be routinely collected and analysed to ensure that all prisoners have equal access to recreational PE and that their needs are met fully.



## 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** *Although offender management and reducing reoffending policies were up to date, the two departments did not work sufficiently well together and there was no 'whole-prison' approach to offender management or resettlement. The prison was changing the organisation of offender management to deal with difficulties it was experiencing in delivering an effective service. While officer offender supervisors now had a dedicated offender supervisory role, it was too early to evaluate the impact of the changes as they had only recently been implemented.*

**4.2** The reducing reoffending and offender management functions of the prison were managed separately. Although the probation department was part of the offender management unit (OMU) it had its own manager (a senior probation officer). The probation department was also located away from the main OMU. As a consequence, the work of the departments was not sufficiently well coordinated.

**4.3** The reducing reoffending and offender management policies were up to date. Strategic objectives relating to both were also up to date and broadly appropriate. The reducing reoffending strategy group was appropriately constituted and included representation from departments specifically involved in resettlement. However, meetings had not been sufficiently frequent in the previous year and there had been no meetings between July 2014 and January 2015. Some key prison departments were also not represented, which undermined the 'whole-prison' approach that resettlement and offender management should have had.

**4.4** The prison's offender management and resettlement function was going through a transition. Officer offender supervisors had been undertaking the dual function of both offender supervisor and unit-based supervisory officer. However, due to staffing shortages this had in fact meant that a huge proportion of the time allocated to offender management had in fact been redeployed elsewhere. Consequently, a large backlog of offender assessment system (OASys) documents had accumulated and officer offender supervisors rarely saw their prisoners outside the OASys process. As a result, the prison decided to revert to using officers solely dedicated to the offender supervisory role. This had only happened in the fortnight before the inspection and, although there was evidence that it was having a positive impact, it was too early to evaluate it.

**4.5** The resettlement function had also been reorganised in the previous six months; a resettlement centre had been set up so prisoners could speak to staff from individual pathway providers. While this was sensible, there were problems with its coordination (see section on reintegration planning). In our survey only 5% of prisoners, significantly fewer than at comparable establishments, said that someone had helped them prepare for release. Despite this the prison was endeavouring to prepare for the introduction of the community rehabilitation companies (CRC) under the Transforming Rehabilitation initiative. Senior managers had already met the CRC with the contract for High Down and a further meeting

was scheduled for the week after our inspection following which a clearer schedule for its introduction could be developed.

## Recommendation

- 4.6 The prison should pursue a whole-prison approach to resettlement, encouraging and supporting staff from all departments to take an active role in the work of the offender management unit in assessing and implementing prisoner objectives to reduce their risk of reoffending. (Repeated recommendation 4.7)**

## 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** *All prisoners were seen on their arrival, but the backlog in OASys documents and sentence plans was substantial. Documents varied, but those undertaken by uniformed offender supervisors were generally of a lower standard than those completed by probation staff. Contact between offender supervisors and prisoners outside the assessment process was also extremely variable. Quality assurance and case work supervision were inconsistent. Public protection arrangements were not sufficiently robust. Some indeterminate sentence prisoners remained at High Down for too long.*

- 4.8** The offender management department consisted of a combination of two and a half full-time-equivalent probation officers managing high- and very high-risk prisoners, two probation service officers managing prolific and priority offenders and 10 officer offender supervisors who managed all low- and medium-risk prisoners. The latter group was also responsible for all OASys processes for low- and medium-risk prisoners, home detention curfew (HDC) and re-categorisation reports. An officer offender supervisor saw all prisoners, including those on remand, within 48 hours of their arrival. The new basic custody screening tool (focusing on immediate offending-related needs) was completed in most cases, in anticipation of its national implementation later in the year.
- 4.9** There was a substantial backlog in OASys documents (see section on strategic management of resettlement, paragraph 4.4) held by the department. While it was less than 10% for those that were the responsibility of the probation service, 37% of documents for all those assessed as low- or medium-risk were missing or out of date. This meant sentence plans were also out of date, which affected prisoners' ability to progress. We came across a number of prisoners who had been at the prison for some months but still had no up-to-date document; two prisoners due to be released within the following fortnight had never had an OASys document or sentence plan. In our survey only 26% of prisoners, fewer than at comparable prisons, said they had a named offender supervisor.
- 4.10** During the inspection we looked at six offender management cases held by community offender managers and six that were the responsibility of the Prison Service. We also looked at a further 15 cases, mostly of prisoners due to be released in the near future. Overall the work undertaken by offender supervisors varied considerably; those managed by officer offender supervisors were generally of a lower standard compared with those managed by probation offender supervisors. Risk of serious harm assessments were less likely to have

been thorough or timely and risk management plans were missing or insufficient in all relevant low- and medium-risk cases. None of the risk management plans for low- and medium-risk cases had been reviewed. Where sentence plans were in place, they were generally good, although it was rare for staff from other prison departments to have contributed.

- 4.11 Across all cases we reviewed, contact between offender supervisors and prisoners, outside formal assessments, was, at best, irregular. Probation staff were more likely to have had contact with high risk offenders but contact with officers was rare. In our survey only 26% of prisoners compared with 33% at similar prisons, said their offender supervisor was supporting them to meet their sentence plan objectives.
- 4.12 Quality assurance was limited. Probation staff had regular professional supervision with their manager, which included case work reviews, but officers did not. A former probation officer had been providing officers some formal supervision but redeployment had meant that such work had been limited. It was hoped that this would be reintroduced.
- 4.13 Only 28 prisoners had been released in the previous six months on home detention curfew (HDC) and it was rare that releases occurred on their eligibility date. At the time of the inspection 78 prisoners were being considered or were waiting for their cases to be processed; all had passed their eligibility date. The limited availability of offender supervisors prior to January and delays in getting offender manager reports from the community were identified as the main reasons for delays. The department was now prioritising this work.

## Recommendations

- 4.14 **There should be reviews of offender assessment system (OASys) assessments and sentence plans in all relevant cases, including where there has been a significant change in the likelihood of the prisoner's reoffending or level of risk of harm.** (Repeated recommendation 4.23)
- 4.15 **The role of all offender supervisors should be clearly defined, including how they support prisoners, especially those identified as a low- or medium-risk of harm, in addressing their offending behaviour and achieving sentence plan targets.**
- 4.16 **Sentence planning and OASys documents should be informed by contributions from all relevant departments.**
- 4.17 **All offender supervisors should have regular professional supervision and casework reviews to aid personal development, and quality assurance should be extended across all offender management work.**
- 4.18 **The prison should ensure that HDC reviews are undertaken promptly to give prisoners the best possible chance of release on their eligibility date.**

## Public protection

- 4.19 Public protection arrangements were too variable. The prison's monthly interdepartmental risk management meeting focused primarily on work with sex offenders, which was generally good. However, this was less the case for others subject to multi-agency public protection arrangements (MAPPA). Offender supervisors were responsible for identifying and bringing those cases requiring a review within their last six months in custody to the attention of the meeting. However, staff had not adhered to this process consistently or promptly enough.

Administrative support was also poor. We found 11 cases due for release in the following four weeks whose MAPPA release level had yet to be identified, which meant there was not enough time to manage their return to the community effectively.

## Recommendation

- 4.20 There should be effective management oversight of all public protection arrangements and procedures, and the prison should ensure that in all cases MAPPA risk levels are identified six months in advance of prisoners' release dates.**

## Categorisation

- 4.21** Arrangements to review prisoners' categorisation were generally appropriate with only a small backlog at the time of the inspection. The progression of those re-categorised to D was relatively easy and the prison only held 12. Although prisoners had been moved about 900 times throughout 2014, most were part of standard transfer drafts rather than to promote their progression.

## Recommendation

- 4.22 Prisoners should be transferred to other prisons that are able to offer them provision that matches identified sentence plan targets.**

## Indeterminate sentence prisoners

- 4.23** The prison was holding 50 indeterminate sentence prisoners. There was no specific provision for this group, although all were allocated to one of the probation offender supervisors. Too many of them stayed at High Down for too long with little in most cases helping them progress (see section on attitudes, thinking and behaviour). Seventeen indeterminate sentence prisoners had been at High Down for over 12 months and two for over four years. In the two latter cases, there was no apparent reason for them not to have been progressed to an establishment that was more appropriate to their needs.



## Reintegration planning

### Expected outcomes:

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

**4.24** *All prisoners were seen during induction and appropriate referrals were made to pathway providers. Prisoners were subsequently invited to the resettlement department for follow-up referrals or to review plans for release; however, appointments were poorly coordinated and many appointments were missed. Offender supervisors were not sufficiently involved in pre-release planning. Accommodation support was generally good but the work of the National Careers Service required improvement as did the range of activities to support job searches and employment skills development. Palliative care was good but arrangements for take-home medication required improvement. Support for prisoners with substance misuse issues was good as was finance, benefits and debt assistance. The visits system had improved and was good. The prison did not provide any accredited offending behaviour programmes and there was no clear strategy for the management of the prison's sex offender or indeterminate sentence populations.*

**4.25** All prisoners were seen during induction by pathway providers or peer advisors working for them. Referrals were made, where appropriate, to various services. The resettlement centre now operated as a central point for all resettlement services and had a number of interview rooms and a waiting area. Prisoners went to the centre during 'free-flow' periods (which enable prisoners to move around the prison unescorted) to attend appointments. Although this was an appropriate approach, it required far better management. Each pathway provider made its own arrangements to see prisoners. Rather than making one appointment with a variety of pathway providers prior to a prisoner's release, separate arrangements were made, which meant he might be offered three or four different appointments. Often they were quite short potentially leaving the prisoner to wait a long time for the next free-flow opportunity back to the wing. It also meant that employed prisoners unnecessarily missed work. The prison's own monitoring suggested that prisoners only attended around 42% of all appointments.

**4.26** The role of offender supervisors in preparing prisoners for release was variable. Some high-risk prisoners had their release planned well in conjunction with community offender managers but offender supervisors working with lower-risk prisoners were rarely directly involved in such work or in liaising with pathway providers.

### Recommendations

**4.27** **The prison should streamline the resettlement centre appointment system to ensure that prisoners see everyone they need to, so an effective release plan can be developed.**

**4.28** **The prison should ensure that information regarding progress during sentences and plans for release are routinely shared with offender managers prior to a prisoner's release.**

## Accommodation

- 4.29** St Giles Trust, which provided accommodation support, offered a generally good service. Good links had been developed with London boroughs and, at the time of the inspection, the service was meeting its target of releasing 83% of prisoners to settled accommodation. Where supported accommodation places or relatively short-term housing were found, trust staff followed up cases to establish how sustainable they were. The trust also had a part-time worker who delivered a level 3 advice and guidance training programme to prisoners in peer adviser roles.

## Education, training and employment

- 4.30** The quality of the National Careers Service (NCS), provided by CfBT Education Trust, required improvement. Prisoners did not always receive induction promptly and it was not coordinated well enough. Consequently, staff did not allocate all prisoners to purposeful activity that met their individual needs (see also quality of provision, paragraph 3.20).
- 4.31** NCS staff invited all prisoners to interviews six weeks prior to their release, and those who attended were supported well by experienced and well qualified advisers. However, attendance was low and too few prisoners benefited from the service. Those who did attend spoke highly of the help they received, and advisers referred prisoners to additional services onsite and outside the prison to support them on release. However, the range and suitability of activities, including the use of the virtual campus (internet access for prisoners to community education, training and employment opportunities) were not yet sufficient.

## Recommendation

- 4.32 Staff should improve prisoners' access to, and attendance at, services that support prisoners with their resettlement on release.**

## Health care

- 4.33** All prisoners received advice on accessing community services from a health care assistant in reception prior to release. Five days' take home medication was only arranged for prisoners who had advised health staff they were being released and some prisoners left without medication. Discharge letters were not routinely sent to GPs, which adversely affected continuity of care. The secondary mental health team liaised appropriately with community mental health services.
- 4.34** Prisoners with palliative care and end of life needs received compassionate care, and joint working between the health provider, prison and community services was good.

## Recommendation

- 4.35 All prisoners receiving regular prescribed medication should have adequate supplies on release and a health care discharge summary should be sent to the prisoners' GP or given to the prisoner before release to ensure continuity of care.**

## Drugs and alcohol

- 4.36** In our survey, fewer men (38%) said they knew who could help them with drug and alcohol problems on release than at comparator prisons (44%). Pre-release arrangements were good and links with community prescribers were suitable. The five local drug intervention programme (DIP) teams came into the prison on a weekly basis; all the DIP link workers could contact prisoners and access records within the prison before their release.
- 4.37** A new transitional support programme assisted a small number of men before and after their release, and a Meet and Greet programme supported men in attending their initial community appointments.

## Finance, benefit and debt

- 4.38** Finance, benefit and debt support was reasonable. Staff from Citizens Advice attended the prison one day a week and offered prisoners general advice and guidance, including debt advice. The education department delivered a money management course and prisoners received support to open bank accounts or obtain citizen cards prior to their release. Access to services provided by Jobcentre Plus was also appropriate. Although prisoners in our survey were less positive than the comparator when asked if they knew whom to talk to about finances and benefits, we found that the amount of information available across the prison was generally good.

## Children, families and contact with the outside world

- 4.39** Volunteers and employees from the Downs Visitors' Centres Association ran the visitors' centre and visits booking service. The centre was extremely busy and was just adequate to meet demand. Staff provided a good service, offering support and advice particularly for those visiting for the first time. The centre was open before and after visits. Arrangements for booking visits had improved substantially over the previous 12 months and visitors said they no longer experienced delays. Visits could be booked by telephone, email, through the website or in person. Visitors we spoke to were positive about the visits experience and said staff treated them well.
- 4.40** Visits sessions were available Tuesday to Thursday. Morning sessions were for vulnerable prisoners, while afternoon sessions were for mainstream prisoners. There were also weekend afternoon sessions, which were mixed. The visits hall was very large and could accommodate 84 prisoners and their visitors. Most visitors arrived in the hall before the start of their visit. Afternoon sessions were extremely busy and sessions were fully booked at least a week in advance. A large well equipped crèche area and refreshment bar were available.
- 4.41** Prisoners attending visits no longer had to wear bibs; they wore a discreet identification armband instead. Prisoners were allowed reasonable contact with their visitors. Four closed visits rooms and one bereavement suite were available; they were adequately screened from the main visits area and allowed prisoners and visitors to communicate clearly. Arrangements for new arrivals to receive a visit in their first few days were good.
- 4.42** Children's visits were available three times a year for younger children and a further three times for older children; they were open to all prisoners. They took place in the Clink restaurant. There was no parenting or family course but plans were in place to reintroduce one.

## Attitudes, thinking and behaviour

- 4.43** There were no nationally accredited offending behaviour programmes, although the substance misuse service did provide a range of relevant courses, as did the education department. Education also delivered an assertiveness and decision-making programme, which was delivered fortnightly. The prison's victim awareness programme had ended about 12 months earlier.
- 4.44** The lack of available and relevant programmes for prisoners was a significant omission. In principle prisoners could transfer to other prisons to attend programmes but in reality relatively few did. This was a particular issue for the significant sex offender population. The prison had no specific strategy to manage this group of prisoners and did not know how many were in denial of their offence or who was prepared to attend a sex offender treatment programme (SOTP). There was a national shortage of spaces at specialist prisons working with sex offenders, which made transferring them difficult; nevertheless, the prison had transferred 20 sex offenders in the previous 12 months, but it was not clear how many of them had actually been transferred specifically to attend the SOTP. Many sex offenders completed their sentence at High Down without having had their attitudes thinking or behaviour challenged.

## Recommendations

- 4.45** **The prison should address the shortfall in offending behaviour provision to meet the needs of the population.**
- 4.46** **A clear strategy for the management of sex offenders and indeterminate sentence prisoners should be developed.**
- 4.47** **There should be sufficient appropriate interventions available to address the offending behaviour of those prisoners convicted of a sexual offence.**

## Section 5. Summary of recommendations and housekeeping points

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

### Main recommendations

To the governor

- 5.1 There should be improvements in the governance of the use of force, particularly regarding logging of incidents, quality of documentation, special accommodation, planned interventions, scrutiny of drawing/use of batons and the use of force committee. (S48, repeated recommendation 1.72)
- 5.2 Management oversight of diversity should be prioritised to ensure that the needs of all prisoners from minority groups are identified, assessed and met, and that any negative monitoring data and prisoner perceptions relating to particular groups are understood and acted on. (S49)
- 5.3 There should be sufficient purposeful activity to meet the needs of the population, attendance should be improved and prisoners' access to time out of cells should be increased. (S50, repeated recommendation HP50)
- 5.4 Implementation of the reducing re-offending strategy should be effectively co-ordinated, backlogs should be cleared and quality improvement measures implemented. (S51)

### Recommendation

To NOMS

- 5.5 There should be sufficient appropriate interventions available to address the offending behaviour of those prisoners convicted of a sexual offence. (4.47)

### Recommendations

To the governor

#### Early days in custody

- 5.6 First night cells should be fully prepared and handover arrangements improved. (1.10)
- 5.7 New arrivals should be offered a phone call and shower on their first night. (1.11)
- 5.8 The regime in the induction unit should be improved. (1.12)

#### Bullying and violence reduction

- 5.9 The management of perpetrators of bullying or violence should be improved and a formal system to support victims should be implemented. (1.18)

### Self-harm and suicide prevention

- 5.10** The quality and consistency of ACCT documentation should be improved. (1.26)
- 5.11** There should be better staff support for prisoners in crises. (1.27)
- 5.12** The prison should reinforce that prisoners on an open ACCT document should only be segregated in exceptional circumstances and where necessary to ensure their own or others' safety. (1.28, repeated recommendation HP47)

### Safeguarding

- 5.13** The governor should work with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.31)

### Security

- 5.14** All strip-searching of prisoners should be intelligence-led or based on a specific suspicion. (1.39)
- 5.15** Prisoners should only be placed on and remain on closed visits when there is sufficient intelligence relating to visits to support this. (1.40, repeated recommendation 1.56)
- 5.16** The MDT programme should be appropriately resourced to enable suspicion tests to be conducted. (1.41)

### Incentives and earned privileges

- 5.17** The IEP scheme should be applied fairly and consistently. (1.47)

### Discipline

- 5.18** Records of adjudications should record a thorough exploration of charges before a finding of guilt and formal quality assurance measures should be introduced. (1.50)
- 5.19** Adjudication standardisation meetings should use data meaningfully to identify and act on trends and patterns. (1.51)
- 5.20** All cells in the segregation unit should be clean, well maintained and free of graffiti. (1.63)
- 5.21** The regime in the segregation unit should be improved. (1.64)

### Substance misuse

- 5.22** Drug and alcohol issues should be prioritised and monitored regularly; an action plan should ensure there is a direct link between prisoners' offending behaviour and substance use. (1.77)
- 5.23** Vulnerable prisoners should have access to the full range of programmes. (1.78)

## Residential units

- 5.24** Single cells should not be used to accommodate two prisoners. (2.7, repeated recommendation 2.11)
- 5.25** Prisoners should be able to shower in private. (2.8, repeated recommendation 2.13)
- 5.26** Cell bells should receive a prompt response. (2.9)
- 5.27** The application process should be robust, timely and have the confidence of prisoners. (2.10, repeated recommendation 2.15)

## Staff-prisoner relationships

- 5.28** The prison should explore and address the negative perceptions of some groups of prisoners about relationships with staff. (2.16, repeated recommendation 2.21)
- 5.29** The prison should address issues raised through consultation effectively. (2.17)

## Equality and diversity

- 5.30** The Home Office should serve all decisions to detain a prisoner at least one month before the end of their sentence. (2.35)
- 5.31** Unit staff should make greater use of the telephone interpreting service to communicate with foreign national prisoners who do not speak or understand English. (2.36)
- 5.32** All older prisoners and those with disabilities should have an assessment to determine if they need a care plan, which should be reviewed regularly. (2.37, repeated recommendation 2.47)
- 5.33** All prisoners requiring help to evacuate their units in the event of an emergency should have a bespoke evacuation plan and staff on duty should know who they are. (2.38)
- 5.34** Retired prisoners should not have to pay to use their TVs. (2.39, repeated recommendation 2.49)

## Complaints

- 5.35** The establishment should put in place an effective and thorough quality assurance system for complaints and the results should be communicated to prisoners. (2.50)

## Health services

- 5.36** Health staff carrying out tasks beyond their usual role should receive competency-based initial and refresher training, regular supervision and ongoing practice assessments from senior staff. (2.63)
- 5.37** All clinical environments should comply with infection control standards. (2.64)
- 5.38** Sufficient custodial staff should be trained in emergency first aid and defibrillation to ensure a prompt response in emergencies. (2.65)
- 5.39** All prisoners should receive a separate secondary health assessment within 72 hours of arrival. (2.73)

- 5.40** Prisoners should be able to access all primary care clinics including dental and external hospital appointments within community equivalent waiting times. (2.74)
- 5.41** The non-attendance rates for all clinics should be reduced to under 12%. (2.75)
- 5.42** Methadone administration should comply with professional standards and only approved glass measures should be used. (2.81)
- 5.43** Custodial staff should supervise the medicine administration queues adequately to maintain patient confidentiality and reduce potential bullying. (2.82)
- 5.44** The dental surgery should comply with best practice standards for dental infection control. (2.87)
- 5.45** Custodial staff should receive regular mental health awareness training. (2.93)
- 5.46** Mental health provision should include prompt access to the full range of primary care, counselling and dual diagnosis services. (2.94)
- 5.47** Patients requiring a transfer under the Mental Health Act should be assessed promptly and transferred within the current transfer guidelines. (2.95)

#### Catering

- 5.48** Breakfast should be issued on the day it is to be eaten. (2.101)
- 5.49** There should be at least five hours between lunch and the evening meal being served. (2.102)
- 5.50** Prisoners should be able to take their meals in association. (2.103, repeated recommendation 2.14)
- 5.51** The prison should prevent the contamination of food served to vulnerable prisoners in house block six and provide assurance to these prisoners that this has been done. (2.104)

#### Purchases

- 5.52** All prisoners should have weekly access to the shop. (2.108, repeated recommendation 2.117)
- 5.53** Deliveries of catalogue orders should be processed promptly and issued to prisoners. (2.109)

#### Time out of cell

- 5.54** All prisoners should have access to a daily exercise period. (3.4)

#### Learning and skills and work activities

- 5.55** Managers should implement a strategy to raise prisoners' skills and attainment in English and mathematics to prepare them better for employment on release. (3.10)
- 5.56** Managers should improve the use of performance targets to monitor and pace further improvements, and use data to monitor and deal with differences in performance between different groups. (3.11)



- 5.57** Managers should increase the number of prisoners involved in purposeful activity and reduce the proportion of prisoners who are unemployed. (3.15)
- 5.58** Teachers and trainers should set challenging targets in ILPs and progress reviews should relate to prisoners gaining job-related skills. (3.24)
- 5.59** Managers should extend the use of prisoner learning support assistants to help prisoners develop their English and mathematics skills. (3.25)
- 5.60** Managers should improve the induction process so that all prisoners have timely skills assessments and are allocated swiftly to activities that meet their future employment or training needs. (3.26)
- 5.61** Achievement rates in English and mathematics qualifications should be improved. (3.29)
- 5.62** Prisoners' attendance and punctuality at OLASS education and vocational training should be improved. (3.30)
- 5.63** The prison should make better use of data to improve access for prisoners from house blocks where library use is infrequent. (3.35)

#### **Physical education and healthy living**

- 5.64** The prison should offer a full programme of recreational PE that meets all prisoners' needs. (3.40)
- 5.65** The prison should offer a range of accredited programmes to provide prisoners with skills and qualifications that will help them gain appropriate employment on release. (3.41)
- 5.66** Data on prisoners' participation in PE should be routinely collected and analysed to ensure that all prisoners have equal access to recreational PE and that their needs are met fully. (3.42)

#### **Strategic management of resettlement**

- 5.67** The prison should pursue a whole-prison approach to resettlement, encouraging and supporting staff from all departments to take an active role in the work of the offender management unit in assessing and implementing prisoner objectives to reduce their risk of reoffending. (4.6, repeated recommendation 4.7)

#### **Offender management and planning**

- 5.68** There should be reviews of offender assessment system (OASys) assessments and sentence plans in all relevant cases, including where there has been a significant change in the likelihood of the prisoner's reoffending or level of risk of harm. (4.14, repeated recommendation 4.23)
- 5.69** The role of all offender supervisors should be clearly defined, including how they support prisoners, especially those identified as a low- or medium-risk of harm, in addressing their offending behaviour and achieving sentence plan targets. (4.15)
- 5.70** Sentence planning and OASys documents should be informed by contributions from all relevant departments. (4.16)

- 5.71** All offender supervisors should have regular professional supervision and casework reviews to aid personal development, and quality assurance should be extended across all offender management work. (4.17)
- 5.72** The prison should ensure that HDC reviews are undertaken promptly to give prisoners the best possible chance of release on their eligibility date. (4.18)
- 5.73** There should be effective management oversight of all public protection arrangements and procedures, and the prison should ensure that in all cases MAPPA risk levels are identified six months in advance of prisoners' release dates. (4.20)
- 5.74** Prisoners should be transferred to other prisons that are able to offer them provision that matches identified sentence plan targets. (4.22)

### Reintegration planning

- 5.75** The prison should streamline the resettlement centre appointment system to ensure that prisoners see everyone they need to, so an effective release plan can be developed. (4.27)
- 5.76** The prison should ensure that information regarding progress during sentences and plans for release are routinely shared with offender managers prior to a prisoner's release. (4.28)
- 5.77** Staff should improve prisoners' access to, and attendance at, services that support prisoners with their resettlement on release. (4.32)
- 5.78** All prisoners receiving regular prescribed medication should have adequate supplies on release and a health care discharge summary should be sent to the prisoners' GP or given to the prisoner before release to ensure continuity of care. (4.35)
- 5.79** The prison should address the shortfall in offending behaviour provision to meet the needs of the population. (4.45)
- 5.80** A clear strategy for the management of sex offenders and indeterminate sentence prisoners should be developed. (4.46)

## Housekeeping points

### Discipline

- 5.81** Review documentation should be completed thoroughly and include meaningful targets to assist with effective reintegration. (1.65)

### Residential units

- 5.82** The offensive displays policy should be enforced consistently. (2.11)

### Staff-prisoner relationships

- 5.83** Staff should use preferred names when addressing prisoners. (2.18)

## Health services

- 5.84** Vulnerable prisoners should have a discrete private waiting area in health care where they feel safe. (2.66)
- 5.85** Refrigerator temperatures should be recorded daily and appropriate documented remedial action taken when required. (2.83)

## Example of good practice

- 5.86** The impressive range of pharmacy clinics gave prisoners prompt access to specialist services and reduced the demand for GP appointments. (2.84)



## Section 6. Appendices

### Appendix I: Inspection team

Nick Hardwick	Chief inspector
Kieron Taylor	Team leader
Deri Hughes-Roberts	Inspector
Andrew Lund	Inspector
Keith McInnis	Inspector
Angus Mulready-Jones	Inspector
Kellie Reeve	Inspector
Colette Daoud	Researcher
Jessica Kelly	Researcher
Alissa Redmond	Researcher

#### **Specialist inspectors**

Nicola Rabjohns	Substance misuse inspector
Majella Pearce	Health services inspector
Nicola Carlisle	Pharmacist
Jan Fooks-Bale	Care Quality Commission inspector
Richard Beaumont	Ofsted inspector
Bob Cowdrey	Ofsted inspector
Rieks Drijver	Ofsted inspector
Sue McGrath	Offender management inspector
Ian Simpkins	Offender management inspector



## Appendix II: Progress on recommendations from the last report

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

### Safety

#### **Prisoners, particularly the most vulnerable, are held safely.**

*At the last inspection, in 2011, prisoners' early days in custody were generally well managed, although prisoners could be unreasonably delayed in court cells before transfer and reception procedures took too long. There was frequently insufficient space on the vulnerable prisoner wing and many of them were held on the segregation unit. Induction arrangements for vulnerable prisoners were also limited. Violence reduction and self-harm procedures were effective and most prisoners felt safe, except for some minority groups. Security procedures were proportionate and illicit drug use, although still a challenge was not excessive. Governance of use of force was reasonably good. Use of segregation was high, although the regime was better than we normally see. A concerning number of prisoners on self-harm monitoring were segregated. Integrated drug treatment system (IDTS) procedures were well managed. Outcomes for prisoners were reasonably good against this healthy prison test.*

#### **Main recommendations**

The prison should reinforce that prisoners on an open assessment, care in custody and teamwork (ACCT) document should only be segregated in exceptional circumstances and where necessary to ensure their own or others' safety. (HP47)

**Not achieved** (recommendation repeated, 1.28)

The prison should implement a specific safeguarding strategy that ensures vulnerable prisoners are appropriately located and have access to a purposeful regime that is free from harm and abuse and includes formal reintegration planning. (HP48)

**Not achieved**

#### **Recommendations**

Reception procedures should be expedited and much shorter. (1.18)

**Achieved**

First night handover arrangements for vulnerable prisoners should be improved and their induction should be more thorough and equitable. (1.19)

**Not achieved**

The monthly safer custody meeting should analyse patterns and trends for violent incidents. (1.32)

**Achieved**

Prisoners should only be placed on and remain on closed visits when there is sufficient intelligence relating to visits to support this. (1.56)

**Not achieved** (recommendation repeated, 1.40)

Strip searching of prisoners on reception and after visits should be intelligence-led or based on specific suspicion. (1.57)

**Not achieved**

All disciplinary charges should be fully investigated with clear reasons given for the decisions reached. (1.65)

**Not achieved**

There should be improvements in the governance of the use of force, particularly regarding special accommodation, planned interventions, scrutiny of drawing/use of batons and the use of force committee. (1.72)

**Partially achieved** (recommendation repeated, S48)

There should be care plans for longer term residents of the separation and reintegration unit (SRU). (1.79)

**Not achieved**

All staff who in the SRU should undertake mental health awareness training. (1.80)

**Not achieved**

The drug and alcohol strategies should contain detailed action plans. (1.90)

**Not achieved**

## Respect

**Prisoners are treated with respect for their human dignity.**

*At the last inspection, in 2011, the environment and accommodation were generally good, as was prisoner access to basic amenities and facilities, although the switching off in cell-electricity during the working day was unnecessary. Staff-prisoner relationships were respectful and personal officer work, although variable, had some constructive features. There was no strategy to manage young adult prisoners, whose views were more negative than adults. The perceptions of other minority groups were variable. The promotion of diversity was limited and work on some strands very underdeveloped. Prisoners lacked confidence in application and complaints arrangements, although complaints were properly addressed. Health care provision was very good. The quality of food was reasonable. Prisoners' access to the shop was limited by their very low pay. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Main recommendations

The prison should implement a specific young adult strategy and policy that address the specific needs of this population and is informed by data gathering and consultation with young adults. This strategy should include staff training. (HP49)

**Not achieved**

### Recommendations

Single cells should not be used to accommodate two prisoners. (2.11)

**Not achieved** (recommendation repeated, 2.7)

The policy of isolating in-cell electricity during normal activity periods should not unnecessarily disadvantage prisoners who are not able or do not have to attend activities. (2.12)

**No longer relevant**



Prisoners should be able to shower in private. (2.13)

**Not achieved** (recommendation repeated, 2.8)

Prisoners should be able to take their meals in association. (2.14)

**Not achieved** (recommendation repeated, 2.103)

The application process should be robust, timely and have the confidence of prisoners. (2.15)

**Not achieved** (recommendation repeated, 2.10)

The prison should explore and address the negative perceptions of some groups of prisoners, including young adults, about relationships with staff. (2.21)

**Not achieved** (recommendation repeated, 2.16)

All prisoners should have weekly access to the shop. (2.117)

**Not achieved** (recommendation repeated, 2.108)

The equality and diversity policy should be revised to ensure the delivery of support to all diversity strands. (2.43)

**Not achieved**

The foreign national policy should be revised and procedures fully implemented and monitored. (2.44)

**Not achieved**

The prison should regularly consult with minority groups to understand and address their poor perceptions of safety and other aspects of prison life. (2.45)

**Not achieved**

The personal emergency and evacuation plan (PEEP) system should be re-launched and regularly monitored. (2.46)

**Not achieved**

All older prisoners and those with disabilities should be assessed for their need for care plans, which should be regularly reviewed as necessary. (2.47)

**Not achieved** (recommendation repeated 2.37)

Older prisoners and those with disabilities who do not go to activities should remain unlocked during the working part of the day. (2.48)

**Not achieved**

Retired prisoners should receive their televisions free of charge. (2.49)

**Not achieved** (recommendation repeated as housekeeping point 2.39)

The prison should investigate and address prisoners' perceived lack of confidence in the complaints system. (2.65)

**Partially achieved**

Officers providing legal services should receive relevant training. (2.70)

**No longer relevant**

The role of the chaplaincy in the general life of the prison and the level of faith provision should be developed. (2.61)

**Achieved**

Information about health services and health promotion should be available in the health care centre and on the house blocks in a range of languages. (2.86)

**Partially achieved**

All inpatients cells should be removed from the certified normal accommodation. (2.87)

**Not achieved**

Patients should be able to see a dentist for routine treatment within a timescale equivalent to that in the NHS. (2.101)

**Not achieved**

Prisoners should have access to dedicated counselling services. (2.104)

**Partially achieved**

## Purposeful activity

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

*At the last inspection, in 2011, time out of cell was limited and many prisoners were locked in their cell during the working day. Many association sessions were also cancelled. There were broadly sufficient activity places to meet the needs of the population, although too much was menial wing orderly work. Many activity places were underused and allocation arrangements, although informed by need, did not address this problem. The range of education courses was satisfactory although vocational training provision was narrow. Achievements in learning and skills were at least satisfactory or better. The Clink training restaurant was very impressive. Vulnerable prisoners had limited activity. Prisoner pay was very low. There was no accredited provision in PE and under half of the population went to PE regularly. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendations

Prisoners' access to time out of cell should be improved. (HP50)

**Not achieved** (recommendation repeated, S50)

Prisoner pay rates should be improved. (HP51)

**No longer relevant**

The prison should ensure better attendance across the learning and skills provision. (HP52)

**Partially achieved**

### Recommendations

The prison should make better use of learning and skills data to identify trends and inform changes to the provision. (3.13)

**Achieved**

There should be sufficient staffing to provide cover for absences in education and vocational training workshops. (3.14)

**Achieved**

The prison should establish a quality improvement process to cover all the learning and skills provision, and re-introduce the quality improvement group to maintain a focus on quality and share good practice. (3.18)

**Partially achieved**

Processes for allocation to activities should be improved to ensure that individual prisoner needs are met. (3.23)

**Not achieved**

The prison should improve the range of activities for vulnerable prisoners. (3.24)

**Achieved**

There should be a wider range of vocational training and education opportunities, including courses above level 2 for more capable prisoners. (3.25)

**Partially achieved**

The prison should improve the careers information and advice support for all prisoners. (3.26)

**Not achieved**

The prison should re-establish a range of accredited PE qualifications for prisoners. (3.37)

**Not achieved**

More prisoners should be encouraged to use the PE facilities. (3.38)

**Not achieved**

All prisoners should have equitable access to PE. (3.39)

**Not 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 2011, resettlement and offender management were well managed strategically, with objectives consistent with the findings of needs analyses. Offender supervision work was generally of a good standard, and there was sentence or custody planning for nearly all prisoners, with priority for those who were in scope or short stay. Public protection arrangements were well managed. There was a useful pre-release resettlement clinic that benefited all prisoners, except the vulnerable. Provision across the resettlement pathways was generally very good, and in some cases impressive. Outcomes for prisoners were good against this healthy prison test.*

## Recommendations

The prison should pursue a whole-prison approach to resettlement, encouraging and supporting staff from all departments to take an active role in the work of the offender management unit in assessing and implementing prisoner objectives to reduce their risk of reoffending. (4.7)

**Not achieved** (recommendation repeated, 4.6)

All prisoners, including those in health care or on the vulnerable prisoner wing, should have access to custody or sentence planning and to the resettlement clinic or its alternative. (4.20)

**Partially achieved**

Personal officers and staff from other departments should receive training and ongoing support to develop their involvement in custody and sentence planning processes, as well as public protection work. (4.21)

**Not achieved**

Prisoners serving over 12 months but out of scope for offender management should receive support to encourage their engagement in sentence planning targets. (4.22)

**Not achieved**

There should be reviews of offender assessment system (OASys) assessments and sentence plans in all relevant cases, including where there has been a significant change in the likelihood of the prisoner's reoffending or level of risk of harm. (4.23)

**Not achieved** (recommendation repeated, 4.14)

Prisoner applications for home detention curfew should not be hampered by delays in the completion of necessary paperwork. (4.24)

**Not achieved**

Alcoholics Anonymous, Narcotics Anonymous and Cocaine Anonymous should be available to all prisoners regardless of their location in the prison. (4.50)

**Not achieved**

Prisoners should be able to open a bank account before release. (4.54)

**Achieved**

Visitors' position in the queue for visits should be determined at the time of booking rather than on the day of the visit. (4.65)

**Not achieved**

Places in the enhanced visits room should be bookable at the time of booking a visit. (4.66)

**No longer relevant**

Prisoners should not have to wear bibs during visits. (4.67)

**Achieved**

Programmes to address domestic violence should always be available. (4.72)

**Not achieved**

## Appendix III: Prison population profile

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

### Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	47	640	60.5
Recall	10	117	11.2
Convicted unsentenced	7	56	5.5
Remand	31	210	21.2
Civil prisoners	0	0	0
Detainees	0	11	1.0
<b>Total</b>	<b>95</b>	<b>1034</b>	<b>99.4</b>

Sentence	18–20 yr olds	21 and over	%
Unsentenced	39	286	28.6
Less than 6 months	3	74	6.8
6 months to less than 12 months	5	48	4.7
12 months to less than 2 years	17	102	10.5
2 years to less than 4 years	18	161	14
4 years to less than 10 years	10	234	21.5
10 years and over (not life)	2	87	7.8
ISPP (indeterminate sentence for public protection)	0	19	1.7
Life	1	30	4.4
<b>Total</b>	<b>95</b>	<b>1041</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here: 18		
Under 21 years	95	8.4
21 years to 29 years	371	32.7
30 years to 39 years	327	28.8
40 years to 49 years	199	17.5
50 years to 59 years	91	8
60 years to 69 years	32	2.8
70 plus years	21	1.8
Please state maximum age here: 94		
<b>Total</b>	<b>1136</b>	<b>100</b>

Nationality	18–20 yr olds	21 and over	%
British	78	874	83.8
Foreign nationals	14	160	15.3
<b>Total</b>	<b>92</b>	<b>1034</b>	<b>99.1</b>

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	44	357	35.3
Uncategorised sentenced	1	0	0.1
Category A	0	0	0
Category B	0	90	7.9
Category C	0	384	33.8
Category D	0	12	1.1
Other	50	198	21.8
<b>Total</b>	<b>95</b>	<b>1041</b>	<b>100</b>

<b>Ethnicity</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
<b>White</b>			
British	31	536	50
Irish	1	10	1.0
Gypsy/Irish Traveller	5	37	3.7
Other white	5	73	6.9
<b>Mixed</b>			
White and black Caribbean	10	23	2.9
White and black African	0	8	0.7
White and Asian	1	1	0.2
Other mixed	2	13	1.3
<b>Asian or Asian British</b>			
Indian	1	15	1.4
Pakistani	0	11	1.0
Bangladeshi	4	6	0.9
Chinese	0	3	0.2
Other Asian	2	23	2.2
<b>Black or black British</b>			
Caribbean	16	115	11.5
African	5	58	5.5
Other black	5	48	4.7
<b>Other ethnic group</b>			
Arab	1	3	0.3
Other ethnic group	2	6	0.7
Not stated	4	52	4.9
<b>Total</b>	<b>95</b>	<b>1041</b>	<b>100</b>

<b>Religion</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Baptist	0	3	0.3
Church of England	13	254	23.5
Roman Catholic	19	228	21.7
Other Christian denominations	15	129	12.7
Muslim	29	156	16.3
Sikh	0	3	0.3
Hindu	1	8	0.8
Buddhist	0	18	1.6
Jewish	0	5	0.4
Other	1	20	1.8
No religion	17	216	20.5
<b>Total</b>	<b>95</b>	<b>1040</b>	<b>99.9</b>

<b>Other demographics</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Veteran (ex-armed services)	0	3	100
<b>Total</b>	<b>0</b>	<b>3</b>	<b>100</b>

**Sentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	12	1.1	119	10.5
1 month to 3 months	16	1.4	193	17
3 months to 6 months	15	1.3	184	16.2
6 months to 1 year	8	0.7	146	12.9
1 year to 2 years	5	0.4	97	8.5
2 years to 4 years	0	0	14	1.2
4 years or more	0	0	2	0.2
<b>Total</b>	<b>56</b>	<b>4.9</b>	<b>755</b>	<b>66.5</b>

**Sentenced prisoners only**

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	16	218	20.6
<b>Total</b>	<b>16</b>	<b>218</b>	<b>20.6</b>

**Unsentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	15	4.6	87	26.8
1 month to 3 months	18	5.5	108	33.2
3 months to 6 months	6	1.8	63	19.4
6 months to 1 year	0	0	18	5.5
1 year to 2 years	0	0	5	1.5
2 years to 4 years	0	0	1	0.3
4 years or more	0	0	4	1.2
<b>Total</b>	<b>39</b>	<b>3.4</b>	<b>286</b>	<b>25.2</b>

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





## 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<sup>9</sup>. 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 12 January 2015 the prisoner population at HMP High Down was 1128. Using the method described above, questionnaires were distributed to a sample of 234 prisoners.

We received a total of 196 completed questionnaires, a response rate of 84%. This included one questionnaire completed via interview. Seven respondents refused to complete a questionnaire, 15 questionnaires were not returned and 16 were returned blank.

House block	Number of completed survey returns
1	28
2	34
3	35
4	31

<sup>9</sup> 95% confidence interval with a sampling error of 3%. The formula assumes a 75% response rate (65% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

5	31
6	36
Segregation unit	1

### Presentation of survey results and analyses

Over the following pages we present the survey results for HMP High Down.

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant<sup>10</sup> 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 High Down in 2015 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 34 local prisons since April 2006.
- The current survey responses from HMP High Down in 2015 compared with the responses of prisoners surveyed at HMP High Down in 2011.
- A comparison within the 2015 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2015 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2015 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2015 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 2015 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2015 survey between the VP house block (six) and the rest of the establishment.
- A comparison within the 2015 survey between the unemployed house block (one) and the rest of the establishment.

<sup>10</sup> 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

<b>Q1.2</b>	<b>How old are you?</b>		
	Under 21 .....	13 (7%)	
	21 - 29.....	69 (36%)	
	30 - 39.....	54 (28%)	
	40 - 49.....	32 (16%)	
	50 - 59.....	17 (9%)	
	60 - 69.....	4 (2%)	
	70 and over .....	5 (3%)	
<b>Q1.3</b>	<b>Are you sentenced?</b>		
	Yes .....	125 (65%)	
	Yes - on recall.....	16 (8%)	
	No - awaiting trial.....	30 (16%)	
	No - awaiting sentence .....	22 (11%)	
	No - awaiting deportation.....	0 (0%)	
<b>Q1.4</b>	<b>How long is your sentence?</b>		
	Not sentenced .....	52 (28%)	
	Less than 6 months .....	17 (9%)	
	6 months to less than 1 year .....	9 (5%)	
	1 year to less than 2 years .....	17 (9%)	
	2 years to less than 4 years .....	34 (18%)	
	4 years to less than 10 years .....	40 (21%)	
	10 years or more .....	12 (6%)	
	IPP (indeterminate sentence for public protection) .....	4 (2%)	
	Life.....	4 (2%)	
<b>Q1.5</b>	<b>Are you a foreign national? (i.e. do not have UK citizenship.)</b>		
	Yes .....	20 (10%)	
	No.....	174 (90%)	
<b>Q1.6</b>	<b>Do you understand spoken English?</b>		
	Yes .....	191 (98%)	
	No.....	3 (2%)	
<b>Q1.7</b>	<b>Do you understand written English?</b>		
	Yes .....	189 (97%)	
	No.....	5 (3%)	
<b>Q1.8</b>	<b>What is your ethnic origin?</b>		
	White - British (English/ Welsh/ Scottish/ Northern Irish).....	103 (53%)	Asian or Asian British - Chinese .....
	White - Irish .....	6 (3%)	Asian or Asian British - other .....
	White - other.....	14 (7%)	Mixed race - white and black Caribbean
	Black or black British - Caribbean.....	23 (12%)	Mixed race - white and black African...
	Black or black British - African .....	10 (5%)	Mixed race - white and Asian.....
	Black or black British - other .....	6 (3%)	Mixed race - other .....
	Asian or Asian British - Indian .....	1 (1%)	Arab .....
	Asian or Asian British - Pakistani.....	3 (2%)	Other ethnic group.....
	Asian or Asian British - Bangladeshi.....	2 (1%)	

<b>Q1.9</b>	<b>Do you consider yourself to be Gypsy/ Romany/ Traveller?</b>		
	Yes .....	14 (7%)	
	No.....	176 (93%)	
<b>Q1.10</b>	<b>What is your religion?</b>		
	None.....	46 (24%)	Hindu..... 1 (1%)
	Church of England .....	58 (30%)	Jewish..... 0 (0%)
	Catholic .....	43 (22%)	Muslim..... 26 (13%)
	Protestant.....	2 (1%)	Sikh .....
	Other Christian denomination .....	10 (5%)	Other .....
	Buddhist.....	3 (2%)	4 (2%)
<b>Q1.11</b>	<b>How would you describe your sexual orientation?</b>		
	Heterosexual/ Straight .....	185 (96%)	
	Homosexual/Gay.....	4 (2%)	
	Bisexual.....	4 (2%)	
<b>Q1.12</b>	<b>Do you consider yourself to have a disability? (i.e do you need help with any long term physical, mental or learning needs.)</b>		
	Yes .....	38 (20%)	
	No.....	156 (80%)	
<b>Q1.13</b>	<b>Are you a veteran (ex- armed services)?</b>		
	Yes .....	7 (4%)	
	No.....	183 (96%)	
<b>Q1.14</b>	<b>Is this your first time in prison?</b>		
	Yes .....	72 (37%)	
	No.....	123 (63%)	
<b>Q1.15</b>	<b>Do you have children under the age of 18?</b>		
	Yes .....	104 (53%)	
	No.....	91 (47%)	

## Section 2: Courts, transfers and escorts

<b>Q2.1</b>	<b>On your most recent journey here, how long did you spend in the van?</b>		
	Less than 2 hours .....	137 (71%)	
	2 hours or longer .....	39 (20%)	
	Don't remember .....	18 (9%)	
<b>Q2.2</b>	<b>On your most recent journey here, were you offered anything to eat or drink?</b>		
	My journey was less than two hours .....	137 (71%)	
	Yes .....	24 (13%)	
	No.....	30 (16%)	
	Don't remember .....	1 (1%)	
<b>Q2.3</b>	<b>On your most recent journey here, were you offered a toilet break?</b>		
	My journey was less than two hours .....	137 (70%)	
	Yes .....	4 (2%)	
	No.....	53 (27%)	
	Don't remember .....	1 (1%)	
<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>		
	Yes .....	122 (62%)	
	No.....	63 (32%)	
	Don't remember .....	11 (6%)	

<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes .....	140 (71%)
	No.....	48 (24%)
	Don't remember .....	8 (4%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>	
	Very well.....	39 (20%)
	Well.....	91 (46%)
	Neither .....	51 (26%)
	Badly.....	10 (5%)
	Very badly .....	4 (2%)
	Don't remember .....	1 (1%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (please tick all that apply to you.)</b>	
	Yes, someone told me .....	114 (59%)
	Yes, I received written information .....	4 (2%)
	No, I was not told anything .....	71 (37%)
	Don't remember .....	7 (4%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>	
	Yes .....	147 (76%)
	No.....	40 (21%)
	Don't remember .....	7 (4%)

### Section 3: Reception, first night and induction

<b>Q3.1</b>	<b>How long were you in reception?</b>			
	Less than 2 hours .....	77 (39%)		
	2 hours or longer .....	111 (57%)		
	Don't remember .....	7 (4%)		
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>			
	Yes .....	147 (76%)		
	No .....	39 (20%)		
	Don't remember .....	7 (4%)		
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>			
	Very well.....	24 (12%)		
	Well.....	76 (39%)		
	Neither .....	52 (27%)		
	Badly.....	27 (14%)		
	Very badly .....	12 (6%)		
	Don't remember .....	3 (2%)		
<b>Q3.4</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>			
	Loss of property .....	29 (15%)	Physical health .....	29 (15%)
	Housing problems.....	42 (22%)	Mental health .....	43 (22%)
	Contacting employers .....	10 (5%)	Needing protection from other prisoners	13 (7%)
	Contacting family .....	87 (45%)	Getting phone numbers.....	72 (38%)
	Childcare .....	3 (2%)	Other .....	12 (6%)
	Money worries.....	46 (24%)	Did not have any problems.....	46 (24%)
	Feeling depressed or suicidal .....	45 (23%)		

<b>Q3.5</b>	<b>Did you receive any help/support from staff in dealing with these problems when you first arrived here?</b>	
	Yes .....	34 (18%)
	No.....	107 (57%)
	Did not have any problems .....	46 (25%)
<b>Q3.6</b>	<b>When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)</b>	
	Tobacco.....	132 (68%)
	A shower .....	16 (8%)
	A free telephone call.....	30 (15%)
	Something to eat.....	134 (69%)
	PIN phone credit.....	95 (49%)
	Toiletries/ basic items .....	110 (57%)
	Did not receive anything .....	10 (5%)
<b>Q3.7</b>	<b>When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)</b>	
	Chaplain .....	63 (33%)
	Someone from health services.....	110 (57%)
	A Listener/Samaritans .....	50 (26%)
	Prison shop/ canteen .....	32 (17%)
	Did not have access to any of these.....	46 (24%)
<b>Q3.8</b>	<b>When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)</b>	
	What was going to happen to you .....	77 (40%)
	What support was available for people feeling depressed or suicidal.....	57 (30%)
	How to make routine requests (applications) .....	57 (30%)
	Your entitlement to visits.....	54 (28%)
	Health services .....	73 (38%)
	Chaplaincy .....	72 (38%)
	Not offered any information.....	72 (38%)
<b>Q3.9</b>	<b>Did you feel safe on your first night here?</b>	
	Yes .....	126 (65%)
	No.....	54 (28%)
	Don't remember .....	13 (7%)
<b>Q3.10</b>	<b>How soon after you arrived here did you go on an induction course?</b>	
	Have not been on an induction course .....	50 (26%)
	Within the first week.....	72 (38%)
	More than a week.....	65 (34%)
	Don't remember .....	3 (2%)
<b>Q3.11</b>	<b>Did the induction course cover everything you needed to know about the prison?</b>	
	Have not been on an induction course .....	50 (27%)
	Yes .....	61 (33%)
	No.....	67 (36%)
	Don't remember .....	7 (4%)
<b>Q3.12</b>	<b>How soon after you arrived here did you receive an education ('skills for life') assessment?</b>	
	Did not receive an assessment.....	51 (27%)
	Within the first week.....	36 (19%)
	More than a week.....	92 (49%)
	Don't remember .....	10 (5%)

### Section 4: Legal rights and respectful custody

<b>Q4.1</b>	<b>How easy is it to...</b>						
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	17 (9%)	34 (19%)	38 (21%)	40 (22%)	37 (20%)	16 (9%)
	<i>Attend legal visits?</i>	24 (13%)	57 (32%)	41 (23%)	17 (9%)	10 (6%)	31 (17%)
	<i>Get bail information?</i>	6 (3%)	15 (9%)	26 (15%)	31 (18%)	38 (22%)	56 (33%)
<b>Q4.2</b>	<b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b>						
	<i>Not had any letters.....</i>						26 (14%)
	<i>Yes.....</i>						90 (48%)
	<i>No.....</i>						71 (38%)
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>						
	<i>Yes.....</i>						45 (24%)
	<i>No.....</i>						30 (16%)
	<i>Don't know.....</i>						113 (60%)
<b>Q4.4</b>	<b>Please answer the following questions about the wing/unit you are currently living on:</b>						
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>			
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	98 (52%)	86 (46%)	5 (3%)			
	<i>Are you normally able to have a shower every day?</i>	121 (63%)	69 (36%)	1 (1%)			
	<i>Do you normally receive clean sheets every week?</i>	142 (75%)	48 (25%)	0 (0%)			
	<i>Do you normally get cell cleaning materials every week?</i>	91 (48%)	92 (48%)	7 (4%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	34 (18%)	127 (67%)	28 (15%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	99 (53%)	89 (47%)	0 (0%)			
	<i>If you need to, can you normally get your stored property?</i>	37 (20%)	112 (59%)	40 (21%)			
<b>Q4.5</b>	<b>What is the food like here?</b>						
	<i>Very good.....</i>						1 (1%)
	<i>Good.....</i>						41 (22%)
	<i>Neither.....</i>						52 (28%)
	<i>Bad.....</i>						51 (27%)
	<i>Very bad.....</i>						44 (23%)
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>						
	<i>Have not bought anything yet/ don't know.....</i>						5 (3%)
	<i>Yes.....</i>						87 (46%)
	<i>No.....</i>						99 (52%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>						
	<i>Yes.....</i>						108 (56%)
	<i>No.....</i>						22 (11%)
	<i>Don't know.....</i>						63 (33%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>						
	<i>Yes.....</i>						103 (54%)
	<i>No.....</i>						30 (16%)
	<i>Don't know/ N/A.....</i>						59 (31%)
<b>Q4.9</b>	<b>Are you able to speak to a Chaplain of your faith in private if you want to?</b>						
	<i>Yes.....</i>						107 (56%)
	<i>No.....</i>						12 (6%)
	<i>Don't know/ N/A.....</i>						72 (38%)

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

<i>I don't want to attend</i> .....	41 (22%)
<i>Very easy</i> .....	28 (15%)
<i>Easy</i> .....	58 (31%)
<i>Neither</i> .....	15 (8%)
<i>Difficult</i> .....	17 (9%)
<i>Very difficult</i> .....	6 (3%)
<i>Don't know</i> .....	25 (13%)

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

<i>Yes</i> .....	120 (64%)
<i>No</i> .....	56 (30%)
<i>Don't know</i> .....	11 (6%)

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

	<i>Not made one</i>	<i>Yes</i>	<i>No</i>
<i>Are applications dealt with fairly?</i>	21 (12%)	67 (37%)	91 (51%)
<i>Are applications dealt with quickly (within seven days)?</i>	21 (12%)	41 (23%)	118 (66%)

**Q5.3 Is it easy to make a complaint?**

<i>Yes</i> .....	82 (44%)
<i>No</i> .....	54 (29%)
<i>Don't know</i> .....	51 (27%)

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

	<i>Not made one</i>	<i>Yes</i>	<i>No</i>
<i>Are complaints dealt with fairly?</i>	73 (39%)	31 (17%)	83 (44%)
<i>Are complaints dealt with quickly (within seven days)?</i>	73 (40%)	27 (15%)	84 (46%)

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

<i>Yes</i> .....	36 (20%)
<i>No</i> .....	140 (80%)

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

<i>Don't know who they are</i> .....	66 (35%)
<i>Very easy</i> .....	6 (3%)
<i>Easy</i> .....	32 (17%)
<i>Neither</i> .....	40 (22%)
<i>Difficult</i> .....	27 (15%)
<i>Very difficult</i> .....	15 (8%)

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

<i>Don't know what the IEP scheme is</i> .....	28 (15%)
<i>Yes</i> .....	70 (36%)
<i>No</i> .....	69 (36%)
<i>Don't know</i> .....	26 (13%)



<b>Q6.2</b>	<b>Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels)</b>	
	<i>Don't know what the IEP scheme is</i> .....	28 (15%)
	<i>Yes</i> .....	67 (36%)
	<i>No</i> .....	71 (39%)
	<i>Don't know</i> .....	18 (10%)
<b>Q6.3</b>	<b>In the last six months have any members of staff physically restrained you (C&amp;R)?</b>	
	<i>Yes</i> .....	25 (13%)
	<i>No</i> .....	164 (87%)
<b>Q6.4</b>	<b>If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?</b>	
	<i>I have not been to segregation in the last 6 months</i> .....	145 (77%)
	<i>Very well</i> .....	6 (3%)
	<i>Well</i> .....	7 (4%)
	<i>Neither</i> .....	8 (4%)
	<i>Badly</i> .....	6 (3%)
	<i>Very badly</i> .....	17 (9%)

### Section 7: Relationships with staff

<b>Q7.1</b>	<b>Do most staff treat you with respect?</b>	
	<i>Yes</i> .....	125 (66%)
	<i>No</i> .....	64 (34%)
<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	<i>Yes</i> .....	120 (64%)
	<i>No</i> .....	68 (36%)
<b>Q7.3</b>	<b>Has a member of staff checked on you personally in the last week to see how you are getting on?</b>	
	<i>Yes</i> .....	41 (21%)
	<i>No</i> .....	151 (79%)
<b>Q7.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<i>Do not go on association</i> .....	12 (6%)
	<i>Never</i> .....	64 (34%)
	<i>Rarely</i> .....	48 (25%)
	<i>Some of the time</i> .....	41 (21%)
	<i>Most of the time</i> .....	18 (9%)
	<i>All of the time</i> .....	8 (4%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i> .....	159 (83%)
	<i>In the first week</i> .....	8 (4%)
	<i>More than a week</i> .....	6 (3%)
	<i>Don't remember</i> .....	19 (10%)
<b>Q7.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<i>Do not have a personal officer/ I have not met him/ her</i> .....	159 (87%)
	<i>Very helpful</i> .....	6 (3%)
	<i>Helpful</i> .....	8 (4%)
	<i>Neither</i> .....	4 (2%)
	<i>Not very helpful</i> .....	1 (1%)
	<i>Not at all helpful</i> .....	4 (2%)

## Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>		
	Yes .....	87 (45%)	
	No.....	105 (55%)	
<b>Q8.2</b>	<b>Do you feel unsafe now?</b>		
	Yes .....	36 (19%)	
	No.....	154 (81%)	
<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>		
	Never felt unsafe .....	105 (56%)	At meal times .....
	Everywhere .....	20 (11%)	At health services .....
	Segregation unit .....	13 (7%)	Visits area.....
	Association areas .....	21 (11%)	In wing showers.....
	Reception area .....	14 (8%)	In gym showers.....
	At the gym .....	10 (5%)	In corridors/stairwells .....
	In an exercise yard .....	24 (13%)	On your landing/wing.....
	At work.....	4 (2%)	In your cell.....
	During movement.....	24 (13%)	At religious services .....
	At education .....	10 (5%)	
<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>		
	Yes .....	54 (28%)	
	No.....	137 (72%)	
<b>Q8.5</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>		
	Insulting remarks (about you or your family or friends) .....	27 (14%)	
	Physical abuse (being hit, kicked or assaulted) .....	14 (7%)	
	Sexual abuse .....	2 (1%)	
	Feeling threatened or intimidated .....	36 (19%)	
	Having your canteen/property taken.....	10 (5%)	
	Medication.....	10 (5%)	
	Debt .....	10 (5%)	
	Drugs.....	6 (3%)	
	Your race or ethnic origin.....	5 (3%)	
	Your religion/religious beliefs .....	5 (3%)	
	Your nationality .....	6 (3%)	
	You are from a different part of the country than others.....	2 (1%)	
	You are from a traveller community .....	5 (3%)	
	Your sexual orientation .....	2 (1%)	
	Your age.....	4 (2%)	
	You have a disability.....	3 (2%)	
	You were new here.....	10 (5%)	
	Your offence/ crime .....	14 (7%)	
	Gang related issues.....	6 (3%)	
<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>		
	Yes .....	63 (34%)	
	No.....	124 (66%)	

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

<i>Insulting remarks (about you or your family or friends)</i> .....	20 (11%)
<i>Physical abuse (being hit, kicked or assaulted)</i> .....	9 (5%)
<i>Sexual abuse</i> .....	2 (1%)
<i>Feeling threatened or intimidated</i> .....	25 (13%)
<i>Medication</i> .....	11 (6%)
<i>Debt</i> .....	3 (2%)
<i>Drugs</i> .....	5 (3%)
<i>Your race or ethnic origin</i> .....	8 (4%)
<i>Your religion/religious beliefs</i> .....	4 (2%)
<i>Your nationality</i> .....	3 (2%)
<i>You are from a different part of the country than others</i> .....	2 (1%)
<i>You are from a traveller community</i> .....	4 (2%)
<i>Your sexual orientation</i> .....	1 (1%)
<i>Your age</i> .....	2 (1%)
<i>You have a disability</i> .....	5 (3%)
<i>You were new here</i> .....	5 (3%)
<i>Your offence/ crime</i> .....	13 (7%)
<i>Gang related issues</i> .....	3 (2%)

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

<i>Not been victimised</i> .....	106 (64%)
<i>Yes</i> .....	25 (15%)
<i>No</i> .....	35 (21%)

**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	20 (11%)	4 (2%)	35 (19%)	25 (14%)	72 (39%)	29 (16%)
The nurse	17 (10%)	25 (14%)	58 (33%)	27 (15%)	33 (19%)	18 (10%)
The dentist	32 (18%)	1 (1%)	9 (5%)	11 (6%)	37 (20%)	91 (50%)

**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	34 (19%)	19 (10%)	44 (24%)	29 (16%)	28 (15%)	28 (15%)
The nurse	19 (10%)	26 (14%)	58 (32%)	31 (17%)	28 (15%)	19 (10%)
The dentist	71 (40%)	14 (8%)	18 (10%)	18 (10%)	21 (12%)	35 (20%)

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

<i>Not been</i> .....	11 (6%)
<i>Very good</i> .....	14 (8%)
<i>Good</i> .....	52 (28%)
<i>Neither</i> .....	31 (17%)
<i>Bad</i> .....	48 (26%)
<i>Very bad</i> .....	29 (16%)

**Q9.4 Are you currently taking medication?**

<i>Yes</i> .....	95 (50%)
<i>No</i> .....	94 (50%)

**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> .....	94 (50%)
<i>Yes, all my meds</i> .....	50 (27%)
<i>Yes, some of my meds</i> .....	25 (13%)
<i>No</i> .....	19 (10%)

<b>Q9.6</b>	<b>Do you have any emotional or mental health problems?</b>	
	Yes .....	65 (35%)
	No.....	122 (65%)
<b>Q9.7</b>	<b>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).</b>	
	<i>Do not have any emotional or mental health problems.....</i>	122 (67%)
	Yes .....	19 (10%)
	No.....	41 (23%)

### Section 10: Drugs and alcohol

<b>Q10.1</b>	<b>Did you have a problem with drugs when you came into this prison?</b>	
	Yes .....	44 (24%)
	No.....	143 (76%)
<b>Q10.2</b>	<b>Did you have a problem with alcohol when you came into this prison?</b>	
	Yes.....	29 (15%)
	No .....	159 (85%)
<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	Very easy.....	37 (20%)
	Easy .....	27 (15%)
	Neither .....	7 (4%)
	Difficult.....	8 (4%)
	Very difficult.....	9 (5%)
	Don't know .....	97 (52%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy.....	21 (11%)
	Easy .....	20 (11%)
	Neither .....	13 (7%)
	Difficult.....	7 (4%)
	Very difficult.....	13 (7%)
	Don't know .....	112 (60%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	Yes .....	12 (6%)
	No.....	175 (94%)
<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	Yes .....	6 (3%)
	No.....	182 (97%)
<b>Q10.7</b>	<b>Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?</b>	
	<i>Did not / do not have a drug problem .....</i>	135 (75%)
	Yes .....	29 (16%)
	No.....	17 (9%)
<b>Q10.8</b>	<b>Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?</b>	
	<i>Did not / do not have an alcohol problem.....</i>	159 (86%)
	Yes .....	16 (9%)
	No.....	10 (5%)

<b>Q10.9</b>	<b>Was the support or help you received, whilst in this prison, helpful?</b>	
	<i>Did not have a problem/ did not receive help</i> .....	148 (83%)
	<i>Yes</i> .....	28 (16%)
	<i>No</i> .....	3 (2%)

### Section 11: Activities

<b>Q11.1</b>	<b>How easy or difficult is it to get into the following activities, in this prison?</b>						
		<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%)	10 (5%)	29 (16%)	14 (8%)	58 (32%)	56 (31%)
	Vocational or skills training	40 (23%)	12 (7%)	26 (15%)	31 (18%)	37 (21%)	30 (17%)
	Education (including basic skills)	16 (9%)	18 (10%)	48 (27%)	36 (20%)	33 (19%)	27 (15%)
	Offending behaviour programmes	62 (35%)	5 (3%)	12 (7%)	26 (15%)	34 (19%)	38 (21%)

<b>Q11.2</b>	<b>Are you currently involved in the following? (Please tick all that apply to you.)</b>	
	<i>Not involved in any of these</i> .....	61 (34%)
	<i>Prison job</i> .....	73 (41%)
	<i>Vocational or skills training</i> .....	11 (6%)
	<i>Education (including basic skills)</i> .....	58 (33%)
	<i>Offending behaviour programmes</i> .....	11 (6%)

<b>Q11.3</b>	<b>If you have been involved in any of the following, while in this prison, do you think they will help you on release?</b>				
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	56 (33%)	46 (27%)	45 (27%)	21 (13%)
	Vocational or skills training	71 (50%)	33 (23%)	29 (20%)	9 (6%)
	Education (including basic skills)	50 (32%)	57 (37%)	35 (23%)	12 (8%)
	Offending behaviour programmes	74 (51%)	26 (18%)	34 (24%)	10 (7%)

<b>Q11.4</b>	<b>How often do you usually go to the library?</b>	
	<i>Don't want to go</i> .....	26 (14%)
	<i>Never</i> .....	85 (47%)
	<i>Less than once a week</i> .....	33 (18%)
	<i>About once a week</i> .....	34 (19%)
	<i>More than once a week</i> .....	4 (2%)

<b>Q11.5</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	<i>Don't use it</i> .....	69 (40%)
	<i>Yes</i> .....	39 (23%)
	<i>No</i> .....	64 (37%)

<b>Q11.6</b>	<b>How many times do you usually go to the gym each week?</b>	
	<i>Don't want to go</i> .....	32 (18%)
	<i>0</i> .....	103 (58%)
	<i>1 to 2</i> .....	38 (21%)
	<i>3 to 5</i> .....	5 (3%)
	<i>More than 5</i> .....	1 (1%)

<b>Q11.7</b>	<b>How many times do you usually go outside for exercise each week?</b>	
	<i>Don't want to go</i> .....	29 (16%)
	<i>0</i> .....	36 (20%)
	<i>1 to 2</i> .....	97 (54%)
	<i>3 to 5</i> .....	17 (9%)
	<i>More than 5</i> .....	1 (1%)

<b>Q11.8</b>	<b>How many times do you usually have association each week?</b>	
	<i>Don't want to go</i> .....	5 (3%)
	<i>0</i> .....	15 (8%)
	<i>1 to 2</i> .....	63 (35%)
	<i>3 to 5</i> .....	61 (34%)
	<i>More than 5</i> .....	37 (20%)
<b>Q11.9</b>	<b>How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc)</b>	
	<i>Less than 2 hours</i> .....	67 (36%)
	<i>2 to less than 4 hours</i> .....	39 (21%)
	<i>4 to less than 6 hours</i> .....	29 (16%)
	<i>6 to less than 8 hours</i> .....	29 (16%)
	<i>8 to less than 10 hours</i> .....	5 (3%)
	<i>10 hours or more</i> .....	9 (5%)
	<i>Don't know</i> .....	7 (4%)

### Section 12: Contact with family and friends

<b>Q12.1</b>	<b>Have staff supported you and helped you to maintain contact with your family/friends while in this prison?</b>	
	<i>Yes</i> .....	50 (28%)
	<i>No</i> .....	130 (72%)
<b>Q12.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	<i>Yes</i> .....	105 (58%)
	<i>No</i> .....	77 (42%)
<b>Q12.3</b>	<b>Have you had any problems getting access to the telephones?</b>	
	<i>Yes</i> .....	58 (32%)
	<i>No</i> .....	122 (68%)
<b>Q12.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	<i>I don't get visits</i> .....	25 (14%)
	<i>Very easy</i> .....	20 (11%)
	<i>Easy</i> .....	38 (21%)
	<i>Neither</i> .....	25 (14%)
	<i>Difficult</i> .....	44 (24%)
	<i>Very difficult</i> .....	27 (15%)
	<i>Don't know</i> .....	2 (1%)

### Section 13: Preparation for release

<b>Q13.1</b>	<b>Do you have a named offender manager (home probation officer) in the probation service?</b>	
	<i>Not sentenced</i> .....	52 (28%)
	<i>Yes</i> .....	76 (41%)
	<i>No</i> .....	56 (30%)
<b>Q13.2</b>	<b>What type of contact have you had with your offender manager since being in prison? (please tick all that apply to you.)</b>	
	<i>Not sentenced/ NA</i> .....	108 (60%)
	<i>No contact</i> .....	21 (12%)
	<i>Letter</i> .....	31 (17%)
	<i>Phone</i> .....	7 (4%)
	<i>Visit</i> .....	26 (14%)

<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes .....	46 (26%)
	No.....	133 (74%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	Not sentenced .....	52 (28%)
	Yes .....	45 (24%)
	No.....	87 (47%)
<b>Q13.5</b>	<b>How involved were you in the development of your sentence plan?</b>	
	Do not have a sentence plan/ not sentenced.....	139 (76%)
	Very involved.....	19 (10%)
	Involved .....	16 (9%)
	Neither .....	1 (1%)
	Not very involved .....	3 (2%)
	Not at all involved.....	6 (3%)
<b>Q13.6</b>	<b>Who is working with you to achieve your sentence plan targets? (please tick all that apply to you.)</b>	
	Do not have a sentence plan/ not sentenced.....	139 (77%)
	Nobody.....	19 (10%)
	Offender supervisor .....	11 (6%)
	Offender manager .....	12 (7%)
	Named/ personal officer .....	3 (2%)
	Staff from other departments .....	9 (5%)
<b>Q13.7</b>	<b>Can you achieve any of your sentence plan targets in this prison?</b>	
	Do not have a sentence plan/ not sentenced.....	139 (76%)
	Yes .....	24 (13%)
	No.....	13 (7%)
	Don't know .....	6 (3%)
<b>Q13.8</b>	<b>Are there plans for you to achieve any of your sentence plan targets in another prison?</b>	
	Do not have a sentence plan/ not sentenced.....	139 (76%)
	Yes .....	19 (10%)
	No.....	13 (7%)
	Don't know .....	11 (6%)
<b>Q13.9</b>	<b>Are there plans for you to achieve any of your sentence plan targets in the community?</b>	
	Do not have a sentence plan/ not sentenced.....	139 (76%)
	Yes .....	10 (5%)
	No.....	20 (11%)
	Don't know .....	15 (8%)
<b>Q13.10</b>	<b>Do you have a needs based custody plan?</b>	
	Yes .....	11 (6%)
	No.....	78 (45%)
	Don't know .....	86 (49%)
<b>Q13.11</b>	<b>Do you feel that any member of staff has helped you to prepare for your release?</b>	
	Yes .....	9 (5%)
	No.....	168 (95%)

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

	<i>Do not need help</i>	<i>Yes</i>	<i>No</i>
Employment	41 (24%)	33 (19%)	96 (56%)
Accommodation	39 (23%)	46 (27%)	84 (50%)
Benefits	35 (21%)	43 (25%)	91 (54%)
Finances	34 (20%)	25 (15%)	107 (64%)
Education	37 (23%)	41 (25%)	85 (52%)
Drugs and alcohol	51 (31%)	42 (26%)	69 (43%)

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

<i>Not sentenced</i> .....	52 (29%)
<i>Yes</i> .....	62 (35%)
<i>No</i> .....	65 (36%)



## Main comparator and comparator to last time



### Prisoner survey responses HMP High Down 2015

**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

Key to tables		HMP High Down 2015	Local Prisons Comparator	HMP High Down 2015	HMP High Down 2011
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					
<b>Number of completed questionnaires returned</b>		<b>196</b>	<b>5922</b>	<b>196</b>	<b>171</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	7%	5%	7%	15%
1.3	Are you sentenced?	73%	66%	73%	68%
1.3	Are you on recall?	8%	9%	8%	9%
1.4	Is your sentence less than 12 months?	14%	20%	14%	18%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	3%	2%	1%
1.5	Are you a foreign national?	10%	13%	10%	11%
1.6	Do you understand spoken English?	99%	97%	99%	
1.7	Do you understand written English?	97%	96%	97%	
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	37%	24%	37%	40%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	7%	5%	7%	7%
1.1	Are you Muslim?	14%	11%	14%	15%
1.11	Are you homosexual/gay or bisexual?	4%	3%	4%	2%
1.12	Do you consider yourself to have a disability?	20%	24%	20%	21%
1.13	Are you a veteran (ex-armed services)?	4%	5%	4%	
1.14	Is this your first time in prison?	37%	32%	37%	33%
1.15	Do you have any children under the age of 18?	53%	54%	53%	61%
<b>SECTION 2: Transfers and escorts</b>					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	20%	21%	20%	14%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	44%	37%	44%	
2.3	Were you offered a toilet break?	7%	9%	7%	
2.4	Was the van clean?	62%	58%	62%	
2.5	Did you feel safe?	71%	75%	71%	
2.6	Were you treated well/very well by the escort staff?	66%	67%	66%	59%
2.7	Before you arrived here were you told that you were coming here?	59%	65%	59%	
2.7	Before you arrived here did you receive any written information about coming here?	2%	3%	2%	

## Main comparator and comparator to last time

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2.8	When you first arrived here did your property arrive at the same time as you?	76%	80%	76%	81%
<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	40%	42%	40%	
3.2	When you were searched in reception, was this carried out in a respectful way?	76%	78%	76%	71%
3.3	Were you treated well/very well in reception?	52%	63%	52%	47%
	When you first arrived:				
3.4	Did you have any problems?	76%	75%	76%	77%
3.4	Did you have any problems with loss of property?	15%	14%	15%	18%
3.4	Did you have any housing problems?	22%	20%	22%	26%
3.4	Did you have any problems contacting employers?	5%	5%	5%	8%
3.4	Did you have any problems contacting family?	45%	31%	45%	34%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	3%	2%	8%
3.4	Did you have any money worries?	24%	23%	24%	22%
3.4	Did you have any problems with feeling depressed or suicidal?	23%	22%	23%	24%
3.4	Did you have any physical health problems?	15%	18%	15%	
3.4	Did you have any mental health problems?	22%	22%	22%	
3.4	Did you have any problems with needing protection from other prisoners?	7%	7%	7%	6%
3.4	Did you have problems accessing phone numbers?	38%	31%	38%	34%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	24%	33%	24%	
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	68%	80%	68%	86%
3.6	A shower?	8%	32%	8%	14%
3.6	A free telephone call?	16%	58%	16%	35%
3.6	Something to eat?	69%	72%	69%	82%
3.6	PIN phone credit?	49%	55%	49%	
3.6	Toiletries/ basic items?	57%	59%	57%	
<b>SECTION 3: Reception, first night and induction continued</b>					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	33%	46%	33%	
3.7	Someone from health services?	57%	68%	57%	
3.7	A Listener/Samaritans?	26%	33%	26%	
3.7	Prison shop/ canteen?	17%	22%	17%	5%

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	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	40%	43%	40%	43%
3.8	Support was available for people feeling depressed or suicidal?	30%	39%	30%	58%
3.8	How to make routine requests?	30%	36%	30%	36%
3.8	Your entitlement to visits?	28%	37%	28%	47%
3.8	Health services?	38%	46%	38%	50%
3.8	The chaplaincy?	38%	40%	38%	38%
3.9	Did you feel safe on your first night here?	65%	73%	65%	65%
3.10	Have you been on an induction course?	74%	75%	74%	88%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	45%	52%	45%	64%
3.12	Did you receive an education (skills for life) assessment?	73%	72%	73%	
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	28%	39%	28%	39%
4.1	Attend legal visits?	45%	54%	45%	55%
4.1	Get bail information?	12%	19%	12%	21%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	48%	41%	48%	39%
4.3	Can you get legal books in the library?	24%	37%	24%	
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	52%	51%	52%	70%
4.4	Are you normally able to have a shower every day?	63%	75%	63%	82%
4.4	Do you normally receive clean sheets every week?	75%	73%	75%	90%
4.4	Do you normally get cell cleaning materials every week?	48%	55%	48%	54%
4.4	Is your cell call bell normally answered within five minutes?	18%	29%	18%	35%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	53%	61%	53%	59%
4.4	Can you normally get your stored property, if you need to?	20%	21%	20%	28%
4.5	Is the food in this prison good/very good?	22%	21%	22%	22%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46%	47%	46%	53%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	53%	56%	59%
4.8	Are your religious beliefs are respected?	54%	49%	54%	52%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	56%	50%	56%	42%
4.10	Is it easy/very easy to attend religious services?	45%	43%	45%	

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<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	64%	74%	64%	
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	42%	52%	42%	54%
5.2	Do you feel applications are dealt with quickly (within seven days)?	26%	38%	26%	43%
5.3	Is it easy to make a complaint?	44%	50%	44%	
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	27%	30%	27%	20%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	24%	28%	24%	29%
5.5	Have you ever been prevented from making a complaint when you wanted to?	20%	20%	20%	
5.6	Is it easy/very easy to see the Independent Monitoring Board?	20%	19%	20%	18%
<b>SECTION 6: Incentives and earned privileges scheme</b>					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	36%	41%	36%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	36%	42%	36%	46%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	13%	8%	13%	5%
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?	30%	36%	30%	
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	66%	74%	66%	70%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	64%	70%	64%	71%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	21%	28%	21%	
7.4	Do staff normally speak to you most of the time/all of the time during association?	14%	17%	14%	13%
7.5	Do you have a personal officer?	17%	39%	17%	44%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	61%	66%	61%	66%
<b>SECTION 8: Safety</b>					
8.1	Have you ever felt unsafe here?	45%	42%	45%	38%
8.2	Do you feel unsafe now?	19%	19%	19%	15%
8.4	Have you been victimised by other prisoners here?	28%	29%	28%	16%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	14%	12%	14%	7%
8.5	Hit, kicked or assaulted you?	7%	8%	7%	7%
8.5	Sexually abused you?	1%	2%	1%	1%
8.5	Threatened or intimidated you?	18%	15%	18%	

## Main comparator and comparator to last time

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8.5	Taken your canteen/property?	5%	7%	5%	3%
8.5	Victimised you because of medication?	5%	5%	5%	
8.5	Victimised you because of debt?	5%	4%	5%	
8.5	Victimised you because of drugs?	3%	4%	3%	2%
8.5	Victimised you because of your race or ethnic origin?	3%	4%	3%	3%
8.5	Victimised you because of your religion/religious beliefs?	3%	3%	3%	2%
8.5	Victimised you because of your nationality?	3%	3%	3%	
8.5	Victimised you because you were from a different part of the country?	1%	4%	1%	4%
8.5	Victimised you because you are from a Traveller community?	3%	1%	3%	
8.5	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.5	Victimised you because of your age?	2%	2%	2%	2%
8.5	Victimised you because you have a disability?	2%	3%	2%	1%
8.5	Victimised you because you were new here?	5%	6%	5%	5%
8.5	Victimised you because of your offence/crime?	7%	6%	7%	4%
8.5	Victimised you because of gang related issues?	3%	5%	3%	3%
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	34%	31%	34%	24%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	11%	11%	11%	12%
8.7	Hit, kicked or assaulted you?	5%	5%	5%	3%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	14%	12%	14%	
8.7	Victimised you because of medication?	6%	5%	6%	
8.7	Victimised you because of debt?	2%	2%	2%	
8.7	Victimised you because of drugs?	3%	3%	3%	5%
8.7	Victimised you because of your race or ethnic origin?	5%	4%	5%	7%
8.7	Victimised you because of your religion/religious beliefs?	2%	3%	2%	6%
8.7	Victimised you because of your nationality?	2%	3%	2%	
8.7	Victimised you because you were from a different part of the country?	1%	3%	1%	1%
8.7	Victimised you because you are from a Traveller community?	2%	1%	2%	
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.7	Victimised you because of your age?	1%	2%	1%	2%
8.7	Victimised you because you have a disability?	3%	3%	3%	1%

## Main comparator and comparator to last time

### Key to tables

		HMP High Down 2015	Local Prisons Comparator	HMP High Down 2015	HMP High Down 2011
	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 you were new here?	3%	5%	3%	7%
8.7	Victimised you because of your offence/crime?	7%	4%	7%	7%
8.7	Victimised you because of gang related issues?	2%	3%	2%	1%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	42%	31%	42%	33%
<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	21%	22%	21%	30%
9.1	Is it easy/very easy to see the nurse?	47%	44%	47%	70%
9.1	Is it easy/very easy to see the dentist?	6%	9%	6%	5%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	43%	39%	43%	58%
9.2	The nurse?	52%	52%	52%	55%
9.2	The dentist?	30%	30%	30%	23%
9.3	The overall quality of health services?	38%	35%	38%	45%
9.4	Are you currently taking medication?	50%	51%	50%	53%
	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%	60%	80%	
9.6	Do you have any emotional well being or mental health problems?	35%	38%	35%	30%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	32%	44%	32%	
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	24%	33%	24%	34%
10.2	Did you have a problem with alcohol when you came into this prison?	15%	22%	15%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	35%	34%	35%	22%
10.4	Is it easy/very easy to get alcohol in this prison?	22%	14%	22%	
10.5	Have you developed a problem with drugs since you have been in this prison?	6%	8%	6%	6%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	9%	3%	
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	63%	60%	63%	
10.8	Have you received any support or help with your alcohol problem while in this prison?	61%	57%	61%	
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	90%	75%	90%	84%

## Main comparator and comparator to last time

### Key to tables

		HMP High Down 2015	Local Prisons Comparator	HMP High Down 2015	HMP High Down 2011
	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				
<b>SECTION 11: Activities</b>					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	21%	31%	21%	
11.1	Vocational or skills training?	22%	30%	22%	
11.1	Education (including basic skills)?	37%	45%	37%	
11.1	Offending behaviour programmes?	10%	18%	10%	
	Are you currently involved in any of the following activities:				
11.2	A prison job?	41%	43%	41%	52%
11.2	Vocational or skills training?	6%	9%	6%	12%
11.2	Education (including basic skills)?	33%	24%	33%	36%
11.2	Offending behaviour programmes?	6%	7%	6%	8%
11.3	Have you had a job while in this prison?	67%	67%	67%	80%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	41%	39%	41%	46%
11.3	Have you been involved in vocational or skills training while in this prison?	50%	55%	50%	58%
	For those who have had vocational or skills training while in this prison:				
11.3	Do you feel the vocational or skills training will help you on release?	47%	45%	47%	58%
11.3	Have you been involved in education while in this prison?	68%	66%	68%	74%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	55%	50%	55%	68%
11.3	Have you been involved in offending behaviour programmes while in this prison?	49%	52%	49%	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?	37%	42%	37%	45%
11.4	Do you go to the library at least once a week?	21%	29%	21%	45%
11.5	Does the library have a wide enough range of materials to meet your needs?	23%	34%	23%	
11.6	Do you go to the gym three or more times a week?	3%	27%	3%	20%
11.7	Do you go outside for exercise three or more times a week?	10%	41%	10%	46%
11.8	Do you go on association more than five times each week?	20%	43%	20%	39%
11.9	Do you spend ten or more hours out of your cell on a weekday?	5%	9%	5%	5%
<b>SECTION 12: Friends and family</b>					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	28%	32%	28%	29%
12.2	Have you had any problems with sending or receiving mail?	58%	49%	58%	51%
12.3	Have you had any problems getting access to the telephones?	32%	35%	32%	29%
12.4	Is it easy/ very easy for your friends and family to get here?	32%	37%	32%	

## Main comparator and comparator to last time

### Key to tables

Any percentage highlighted in green is significantly better		HMP High Down 2015	Local Prisons Comparator	HMP High Down 2015	HMP High Down 2011
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					
<b>SECTION 13: Preparation for release</b>					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	58%	61%	58%	
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	29%	41%	29%	
13.2	Contact by letter?	43%	49%	43%	
13.2	Contact by phone?	10%	13%	10%	
13.2	Contact by visit?	36%	37%	36%	
13.3	Do you have a named offender supervisor in this prison?	26%	30%	26%	
For those who are sentenced:					
13.4	Do you have a sentence plan?	34%	35%	34%	37%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	78%	56%	78%	57%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	45%	44%	45%	
13.6	Offender supervisor?	26%	33%	26%	
13.6	Offender manager?	29%	27%	29%	
13.6	Named/ personal officer?	7%	11%	7%	
13.6	Staff from other departments?	22%	18%	22%	
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	56%	53%	56%	61%
13.8	Are there plans for you to achieve any of your targets in another prison?	44%	25%	44%	
13.9	Are there plans for you to achieve any of your targets in the community?	22%	33%	22%	
13.10	Do you have a needs based custody plan?	6%	7%	6%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	5%	11%	5%	15%
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?	26%	28%	26%	
13.12	Accommodation?	35%	35%	35%	
13.12	Benefits?	32%	39%	32%	
13.12	Finances?	19%	24%	19%	
13.12	Education?	33%	29%	33%	
13.12	Drugs and alcohol?	38%	44%	38%	
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in the future?	49%	47%	49%	45%



## Diversity analysis



### Key question responses (ethnicity, foreign national and religion) HMP High Down 2015

**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		Foreign national prisoners		Muslim prisoners	
		White prisoners	British 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						
<b>Number of completed questionnaires returned</b>		<b>71</b>	<b>123</b>	<b>20</b>	<b>174</b>	<b>26</b>	<b>167</b>
1.3	Are you sentenced?	62%	80%	70%	74%	64%	75%
1.5	Are you a foreign national?	16%	7%			24%	9%
1.6	Do you understand spoken English?	96%	100%	95%	99%	96%	99%
1.7	Do you understand written English?	96%	98%	90%	98%	92%	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.)			55%	34%	81%	29%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	11%	15%	6%	0%	9%
1.1	Are you Muslim?	31%	4%	30%	11%		
1.12	Do you consider yourself to have a disability?	16%	21%	16%	20%	11%	20%
1.13	Are you a veteran (ex-armed services)?	3%	4%	0%	4%	0%	4%
1.14	Is this your first time in prison?	39%	36%	55%	35%	46%	36%
2.6	Were you treated well/very well by the escort staff?	66%	66%	60%	67%	73%	65%
2.7	Before you arrived here were you told that you were coming here?	50%	65%	47%	60%	56%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	71%	80%	60%	78%	69%	78%
3.3	Were you treated well/very well in reception?	50%	53%	58%	50%	44%	53%
3.4	Did you have any problems when you first arrived?	82%	72%	74%	76%	72%	76%
3.7	Did you have access to someone from health care when you first arrived here?	54%	60%	70%	55%	50%	59%
3.9	Did you feel safe on your first night here?	59%	70%	50%	67%	64%	67%
3.10	Have you been on an induction course?	78%	73%	89%	72%	71%	74%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	25%	30%	37%	27%	26%	29%

## Diversity analysis

### Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	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?	47%	54%	63%	50%	40%	55%
4.4	Are you normally able to have a shower every day?	64%	63%	68%	63%	60%	64%
4.4	Is your cell call bell normally answered within five minutes?	15%	20%	26%	17%	20%	18%
4.5	Is the food in this prison good/very good?	25%	21%	35%	20%	25%	22%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	32%	54%	40%	47%	38%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	38%	66%	35%	59%	40%	58%
4.8	Do you feel your religious beliefs are respected?	55%	54%	65%	52%	52%	55%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	46%	62%	63%	55%	48%	58%
5.1	Is it easy to make an application?	55%	70%	84%	61%	44%	67%
5.3	Is it easy to make a complaint?	34%	50%	40%	45%	42%	45%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	22%	45%	40%	36%	28%	38%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	29%	41%	39%	37%	35%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	19%	10%	6%	14%	25%	11%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	58%	72%	60%	66%	42%	70%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	58%	68%	70%	63%	44%	67%
7.3	Do staff normally speak to you at least most of the time during association time (most/all of the time)	9%	17%	10%	14%	8%	15%
7.4	Do you have a personal officer?	13%	20%	25%	16%	8%	19%
8.1	Have you ever felt unsafe here?	46%	44%	40%	46%	40%	45%
8.2	Do you feel unsafe now?	25%	15%	15%	20%	28%	17%
8.3	Have you been victimised by other prisoners?	28%	28%	35%	28%	28%	28%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	15%	20%	15%	19%	20%	18%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	2%	0%	3%	0%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	2%	5%	2%	0%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	3%	15%	2%	0%	4%

## Diversity analysis

### Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	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%	2%	0%	2%	0%	2%
8.6	Have you been victimised by a member of staff?	47%	26%	20%	35%	48%	30%
8.7	Have you ever felt threatened or intimidated by staff here?	19%	11%	10%	15%	24%	13%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	10%	1%	0%	5%	5%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	1%	0%	3%	5%	2%
8.7	Have you been victimised because of your nationality? (By staff)	3%	1%	10%	1%	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	5%	2%	0%	3%	5%	3%
9.1	Is it easy/very easy to see the doctor?	18%	23%	28%	21%	24%	21%
9.1	Is it easy/ very easy to see the nurse?	36%	54%	53%	46%	46%	47%
9.4	Are you currently taking medication?	38%	57%	42%	52%	40%	53%
9.6	Do you feel you have any emotional well being/mental health issues?	30%	37%	42%	34%	28%	36%
10.3	Is it easy/very easy to get illegal drugs in this prison?	31%	37%	32%	35%	21%	36%
11.2	Are you currently working in the prison?	34%	45%	44%	41%	32%	43%
11.2	Are you currently undertaking vocational or skills training?	2%	8%	0%	7%	0%	7%
11.2	Are you currently in education (including basic skills)?	32%	32%	38%	32%	36%	33%
11.2	Are you currently taking part in an offending behaviour programme?	2%	9%	0%	7%	0%	7%
11.4	Do you go to the library at least once a week?	15%	25%	21%	21%	9%	23%
11.6	Do you go to the gym three or more times a week?	2%	5%	0%	4%	0%	4%
11.7	Do you go outside for exercise three or more times a week?	6%	12%	0%	11%	13%	10%
11.8	On average, do you go on association more than five times each week?	11%	26%	16%	21%	17%	21%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	3%	6%	6%	5%	0%	6%
12.2	Have you had any problems sending or receiving mail?	63%	56%	47%	59%	50%	58%
12.3	Have you had any problems getting access to the telephones?	37%	30%	21%	34%	46%	30%

## Diversity Analysis



### Key question responses (disability, aged over 50) HMP High Down 2015

**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				
<b>Number of completed questionnaires returned</b>		<b>38</b>	<b>156</b>	<b>26</b>	<b>168</b>
1.3	Are you sentenced?	76%	72%	89%	70%
1.5	Are you a foreign national?	8%	10%	0%	12%
1.6	Do you understand spoken English?	100%	98%	100%	98%
1.7	Do you understand written English?	94%	98%	100%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	30%	38%	16%	39%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	11%	7%	8%	7%
1.1	Are you Muslim?	8%	15%	4%	15%
1.12	Do you consider yourself to have a disability?			23%	18%
1.13	Are you a veteran (ex-armed services)?	8%	3%	4%	3%
1.14	Is this your first time in prison?	29%	39%	58%	34%
2.6	Were you treated well/very well by the escort staff?	69%	66%	89%	63%
2.7	Before you arrived here were you told that you were coming here?	51%	61%	58%	59%
3.2	When you were searched in reception, was this carried out in a respectful way?	76%	77%	85%	75%
3.3	Were you treated well/very well in reception?	53%	51%	61%	51%
3.4	Did you have any problems when you first arrived?	92%	72%	77%	76%
3.7	Did you have access to someone from health care when you first arrived here?	61%	57%	64%	56%
3.9	Did you feel safe on your first night here?	50%	69%	73%	64%
3.10	Have you been on an induction course?	68%	75%	80%	73%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	33%	27%	29%	27%

## Diversity Analysis

### 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				
4.4	Are you normally offered enough clean, suitable clothes for the week?	49%	53%	89%	46%
4.4	Are you normally able to have a shower every day?	46%	67%	69%	63%
4.4	Is your cell call bell normally answered within five minutes?	16%	19%	27%	16%
4.5	Is the food in this prison good/very good?	16%	24%	40%	20%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	40%	47%	64%	43%
4.7	Are you able to speak to a Listener at any time, if you want to?	62%	55%	72%	53%
4.8	Do you feel your religious beliefs are respected?	45%	55%	81%	50%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	54%	56%	77%	53%
5.1	Is it easy to make an application?	56%	66%	89%	60%
5.3	Is it easy to make a complaint?	34%	47%	56%	42%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	19%	40%	54%	34%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	20%	41%	41%	36%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	22%	11%	8%	14%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	59%	69%	92%	62%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	56%	67%	89%	61%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	14%	14%	23%	12%
7.4	Do you have a personal officer?	19%	16%	40%	14%
8.1	Have you ever felt unsafe here?	76%	39%	50%	45%
8.2	Do you feel unsafe now?	33%	16%	4%	21%
8.3	Have you been victimised by other prisoners?	50%	23%	31%	27%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	28%	16%	23%	18%
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)	11%	1%	0%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	3%	4%	3%
8.5	Have you been victimised because of your age? (By prisoners)	8%	0%	8%	1%

## 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)	8%	0%	0%	1%
8.6	Have you been victimised by a member of staff?	68%	26%	28%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	27%	11%	12%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	12%	3%	4%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	2%	0%	2%
8.7	Have you been victimised because of your nationality? (By staff)	0%	2%	0%	2%
8.7	Have you been victimised because of your age? (By staff)	6%	0%	8%	0%
8.7	Have you been victimised because you have a disability? (By staff)	15%	0%	0%	3%
9.1	Is it easy/very easy to see the doctor?	15%	23%	35%	19%
9.1	Is it easy/ very easy to see the nurse?	41%	48%	69%	42%
9.4	Are you currently taking medication?	69%	46%	77%	45%
9.6	Do you feel you have any emotional well being/mental health issues?	70%	27%	32%	34%
10.3	Is it easy/very easy to get illegal drugs in this prison?	41%	33%	16%	37%
11.2	Are you currently working in the prison?	23%	46%	52%	39%
11.2	Are you currently undertaking vocational or skills training?	10%	6%	12%	5%
11.2	Are you currently in education (including basic skills)?	48%	30%	48%	30%
11.2	Are you currently taking part in an offending behaviour programme?	0%	8%	4%	7%
11.4	Do you go to the library at least once a week?	16%	22%	50%	16%
11.6	Do you go to the gym three or more times a week?	3%	4%	9%	3%
11.7	Do you go outside for exercise three or more times a week?	13%	10%	21%	8%
11.8	On average, do you go on association more than five times each week?	13%	22%	20%	21%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	3%	5%	4%	5%
12.2	Have you had any problems sending or receiving mail?	64%	56%	36%	61%
12.3	Have you had any problems getting access to the telephones?	43%	30%	24%	34%



## Prisoner survey responses (Houseblock 1) HMP High Down 2015

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

### Key to tables

	Any percentage highlighted in green is significantly better	Houseblock 1	All Other Houseblocks (2, 3, 4, 5, 6)
	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		
<b>Number of completed questionnaires returned</b>		<b>28</b>	<b>167</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	8%	7%
1.3	Are you sentenced?	60%	75%
1.3	Are you on recall?	8%	8%
1.4	Is your sentence less than 12 months?	25%	12%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	2%
1.5	Are you a foreign national?	8%	11%
1.6	Do you understand spoken English?	93%	99%
1.7	Do you understand written English?	93%	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.)	61%	33%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	8%
1.1	Are you Muslim?	30%	11%
1.11	Are you homosexual/gay or bisexual?	4%	4%
1.12	Do you consider yourself to have a disability?	22%	19%
1.13	Are you a veteran (ex-armed services)?	4%	4%
1.14	Is this your first time in prison?	32%	38%
1.15	Do you have any children under the age of 18?	63%	52%
<b>SECTION 2: Transfers and escorts</b>			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	29%	19%
2.5	Did you feel safe?	61%	73%
2.6	Were you treated well/very well by the escort staff?	61%	67%
2.7	Before you arrived here were you told that you were coming here?	57%	59%
2.8	When you first arrived here did your property arrive at the same time as you?	82%	75%
<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	32%	41%
3.2	When you were searched in reception, was this carried out in a respectful way?	64%	78%

**Key to tables**

	Any percentage highlighted in green is significantly better	Houseblock 1	All Other Houseblocks (2, 3, 4, 5, 6)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.3	Were you treated well/very well in reception?	47%	52%
	When you first arrived:		
3.4	Did you have any problems?	67%	78%
3.4	Did you have any problems with loss of property?	11%	16%
3.4	Did you have any housing problems?	19%	22%
3.4	Did you have any problems contacting employers?	0%	6%
3.4	Did you have any problems contacting family?	41%	46%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	1%
3.4	Did you have any money worries?	22%	24%
3.4	Did you have any problems with feeling depressed or suicidal?	19%	24%
3.4	Did you have any physical health problems?	26%	13%
3.4	Did you have any mental health problems?	22%	23%
3.4	Did you have any problems with needing protection from other prisoners?	8%	7%
3.4	Did you have problems accessing phone numbers?	37%	38%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	67%	68%
3.6	A shower?	15%	7%
3.6	A free telephone call?	19%	15%
3.6	Something to eat?	45%	73%
3.6	PIN phone credit?	56%	48%
3.6	Toiletries/ basic items?	33%	60%
<b>SECTION 3: Reception, first night and induction continued</b>			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	30%	34%
3.7	Someone from health services?	59%	57%
3.7	A Listener/Samaritans?	30%	26%
3.7	Prison shop/ canteen?	11%	18%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	36%	41%
3.8	Support was available for people feeling depressed or suicidal?	36%	29%
3.8	How to make routine requests?	32%	29%
3.8	Your entitlement to visits?	29%	28%
3.8	Health services?	36%	39%



## Key to tables

	Any percentage highlighted in green is significantly better	Houseblock 1	All Other Houseblocks (2, 3, 4, 5, 6)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.8	The chaplaincy?	39%	37%
3.9	Did you feel safe on your first night here?	61%	66%
3.10	Have you been on an induction course?	74%	73%
3.12	Did you receive an education (skills for life) assessment?	70%	73%
<b>SECTION 4: Legal rights and respectful custody</b>			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	19%	30%
4.1	Attend legal visits?	23%	49%
4.1	Get bail information?	11%	12%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	48%	49%
4.3	Can you get legal books in the library?	14%	25%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	22%	58%
4.4	Are you normally able to have a shower every day?	32%	69%
4.4	Do you normally receive clean sheets every week?	61%	77%
4.4	Do you normally get cell cleaning materials every week?	22%	53%
4.4	Is your cell call bell normally answered within five minutes?	14%	19%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	61%	52%
4.4	Can you normally get your stored property, if you need to?	18%	20%
4.5	Is the food in this prison good/very good?	11%	24%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	39%	46%
4.7	Are you able to speak to a Listener at any time, if you want to?	50%	57%
4.8	Are your religious beliefs are respected?	59%	53%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	59%	55%
4.10	Is it easy/very easy to attend religious services?	32%	47%
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	54%	66%
5.3	Is it easy to make a complaint?	30%	46%
5.5	Have you ever been prevented from making a complaint when you wanted to?	18%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	8%	22%
<b>SECTION 6: Incentive and earned privileges scheme</b>			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	26%	38%

**Key to tables**

	Any percentage highlighted in green is significantly better	Houseblock 1	All Other Houseblocks (2, 3, 4, 5, 6)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	31%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	26%	11%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	48%	69%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	42%	67%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	15%	22%
7.4	Do staff normally speak to you most of the time/all of the time during association?	4%	15%
7.5	Do you have a personal officer?	19%	17%
<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	35%	47%
8.2	Do you feel unsafe now?	23%	18%
8.4	Have you been victimised by other prisoners here?	15%	30%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	8%	14%
8.5	Hit, kicked or assaulted you?	0%	7%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	0%	21%
8.5	Taken your canteen/property?	0%	6%
8.5	Victimised you because of medication?	0%	6%
8.5	Victimised you because of debt?	0%	6%
8.5	Victimised you because of drugs?	0%	4%
8.5	Victimised you because of your race or ethnic origin?	0%	3%
8.5	Victimised you because of your religion/religious beliefs?	4%	2%
8.5	Victimised you because of your nationality?	0%	4%
8.5	Victimised you because you were from a different part of the country?	0%	1%
8.5	Victimised you because you are from a traveller community?	0%	3%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	0%	2%
8.5	Victimised you because you have a disability?	4%	1%
8.5	Victimised you because you were new here?	4%	5%
8.5	Victimised you because of your offence/crime?	4%	8%

## Key to tables

	Any percentage highlighted in green is significantly better	Houseblock 1	All Other Houseblocks (2, 3, 4, 5, 6)
	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 gang related issues?	0%	4%
<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	52%	31%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	14%	11%
8.7	Hit, kicked or assaulted you?	9%	5%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	18%	14%
8.7	Victimised you because of medication?	5%	7%
8.7	Victimised you because of debt?	0%	2%
8.7	Victimised you because of drugs?	0%	3%
8.7	Victimised you because of your race or ethnic origin?	9%	4%
8.7	Victimised you because of your religion/religious beliefs?	9%	1%
8.7	Victimised you because of your nationality?	5%	1%
8.7	Victimised you because you were from a different part of the country?	0%	1%
8.7	Victimised you because you are from a traveller community?	0%	3%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	0%	1%
8.7	Victimised you because you have a disability?	5%	3%
8.7	Victimised you because you were new here?	0%	3%
8.7	Victimised you because of your offence/crime?	0%	8%
8.7	Victimised you because of gang related issues?	0%	2%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	11%	23%
9.1	Is it easy/very easy to see the nurse?	36%	48%
9.1	Is it easy/very easy to see the dentist?	4%	6%
9.4	Are you currently taking medication?	42%	51%
9.6	Do you have any emotional well being or mental health problems?	38%	34%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	16%	24%
10.2	Did you have a problem with alcohol when you came into this prison?	8%	16%

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	Percentages which are not highlighted show there is no significant difference		
10.3	Is it easy/very easy to get illegal drugs in this prison?	32%	35%
10.4	Is it easy/very easy to get alcohol in this prison?	24%	22%
10.5	Have you developed a problem with drugs since you have been in this prison?	4%	7%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	0%	4%
<b>SECTION 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	12%	23%
11.1	Vocational or skills training?	20%	22%
11.1	Education (including basic skills)?	21%	40%
11.1	Offending Behaviour Programmes?	8%	10%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	21%	45%
11.2	Vocational or skills training?	4%	7%
11.2	Education (including basic skills)?	25%	34%
11.2	Offending Behaviour Programmes?	4%	7%
11.4	Do you go to the library at least once a week?	5%	23%
11.5	Does the library have a wide enough range of materials to meet your needs?	14%	24%
11.6	Do you go to the gym three or more times a week?	0%	4%
11.7	Do you go outside for exercise three or more times a week?	9%	10%
11.8	Do you go on association more than five times each week?	12%	22%
11.9	Do you spend ten or more hours out of your cell on a weekday?	0%	6%
<b>SECTION 12: Friends and family</b>			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	17%	30%
12.2	Have you had any problems with sending or receiving mail?	52%	59%
12.3	Have you had any problems getting access to the telephones?	35%	32%
12.4	Is it easy/ very easy for your friends and family to get here?	25%	33%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	12%	28%
13.10	Do you have a needs based custody plan?	4%	7%
13.11	Do you feel that any member of staff has helped you to prepare for release?	4%	5%



## Prisoner survey responses HMP High Down 2015 (Vulnerable prisoner wing vs main population)

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

### Key to tables

Any percentage highlighted in green is significantly better	Vulnerable prisoner houseblock (6)	All other houseblocks (1, 2, 3, 4, 5)
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		
<b>Number of completed questionnaires returned</b>	<b>36</b>	<b>159</b>
<b>SECTION 1: General information</b>		
1.2 Are you under 21 years of age?	0%	8%
1.3 Are you sentenced?	81%	71%
1.3 Are you on recall?	3%	10%
1.4 Is your sentence less than 12 months?	6%	16%
1.4 Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	1%
1.5 Are you a foreign national?	3%	12%
1.6 Do you understand spoken English?	100%	98%
1.7 Do you understand written English?	97%	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.)	22%	40%
1.9 Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	9%
1.1 Are you Muslim?	11%	14%
1.11 Are you homosexual/gay or bisexual?	17%	1%
1.12 Do you consider yourself to have a disability?	28%	18%
1.13 Are you a veteran (ex-armed services)?	12%	2%
1.14 Is this your first time in prison?	64%	31%
1.15 Do you have any children under the age of 18?	30%	58%
<b>SECTION 2: Transfers and escorts</b>		
On your most recent journey here:		
2.1 Did you spend more than 2 hours in the van?	26%	19%
2.5 Did you feel safe?	64%	73%
2.6 Were you treated well/very well by the escort staff?	70%	65%
2.7 Before you arrived here were you told that you were coming here?	43%	62%
2.8 When you first arrived here did your property arrive at the same time as you?	80%	75%
<b>SECTION 3: Reception, first night and induction</b>		
3.1 Were you in reception for less than 2 hours?	46%	38%
3.2 When you were searched in reception, was this carried out in a respectful way?	70%	77%

**Key to tables**

	Any percentage highlighted in green is significantly better	Vulnerable prisoner houseblock (6)	All other houseblocks (1, 2, 3, 4, 5)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.3	Were you treated well/very well in reception?	52%	51%
	When you first arrived:		
3.4	Did you have any problems?	88%	73%
3.4	Did you have any problems with loss of property?	12%	16%
3.4	Did you have any housing problems?	6%	25%
3.4	Did you have any problems contacting employers?	3%	6%
3.4	Did you have any problems contacting family?	56%	43%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%
3.4	Did you have any money worries?	18%	25%
3.4	Did you have any problems with feeling depressed or suicidal?	38%	20%
3.4	Did you have any physical health problems?	20%	14%
3.4	Did you have any mental health problems?	32%	20%
3.4	Did you have any problems with needing protection from other prisoners?	20%	4%
3.4	Did you have problems accessing phone numbers?	47%	36%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	52%	72%
3.6	A shower?	6%	9%
3.6	A free telephone call?	3%	18%
3.6	Something to eat?	60%	71%
3.6	PIN phone credit?	17%	56%
3.6	Toiletries/ basic items?	66%	54%
<b>SECTION 3: Reception, first night and induction continued</b>			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	30%	34%
3.7	Someone from health services?	56%	58%
3.7	A Listener/Samaritans?	24%	27%
3.7	Prison shop/ canteen?	15%	17%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	44%	40%
3.8	Support was available for people feeling depressed or suicidal?	30%	30%
3.8	How to make routine requests?	30%	30%
3.8	Your entitlement to visits?	32%	27%
3.8	Health services?	41%	38%

**Key to tables**

	Any percentage highlighted in green is significantly better	Vulnerable prisoner houseblock (6)	All other houseblocks (1, 2, 3, 4, 5)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.8	The chaplaincy?	41%	37%
3.9	Did you feel safe on your first night here?	57%	67%
3.10	Have you been on an induction course?	79%	72%
3.12	Did you receive an education (skills for life) assessment?	70%	74%
<b>SECTION 4: Legal rights and respectful custody</b>			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	29%	28%
4.1	Attend legal visits?	49%	45%
4.1	Get bail information?	4%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	37%	51%
4.3	Can you get legal books in the library?	19%	25%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	80%	46%
4.4	Are you normally able to have a shower every day?	65%	64%
4.4	Do you normally receive clean sheets every week?	91%	71%
4.4	Do you normally get cell cleaning materials every week?	82%	41%
4.4	Is your cell call bell normally answered within five minutes?	24%	17%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	39%	56%
4.4	Can you normally get your stored property, if you need to?	9%	22%
4.5	Is the food in this prison good/very good?	38%	19%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	64%	41%
4.7	Are you able to speak to a Listener at any time, if you want to?	77%	51%
4.8	Are your religious beliefs are respected?	60%	53%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	57%	56%
4.10	Is it easy/very easy to attend religious services?	52%	44%
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	80%	61%
5.3	Is it easy to make a complaint?	47%	43%
5.5	Have you ever been prevented from making a complaint when you wanted to?	9%	23%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	24%	19%
<b>SECTION 6: Incentive and earned privileges scheme</b>			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	46%	34%

## Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	35%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	11%	14%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	88%	61%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	80%	60%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	29%	19%
7.4	Do staff normally speak to you most of the time/all of the time during association?	20%	12%
7.5	Do you have a personal officer?	20%	17%
<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	63%	41%
8.2	Do you feel unsafe now?	9%	21%
8.4	Have you been victimised by other prisoners here?	38%	26%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	30%	10%
8.5	Hit, kicked or assaulted you?	6%	7%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	32%	15%
8.5	Taken your canteen/property?	6%	5%
8.5	Victimised you because of medication?	6%	5%
8.5	Victimised you because of debt?	3%	5%
8.5	Victimised you because of drugs?	0%	4%
8.5	Victimised you because of your race or ethnic origin?	0%	3%
8.5	Victimised you because of your religion/religious beliefs?	0%	3%
8.5	Victimised you because of your nationality?	3%	3%
8.5	Victimised you because you were from a different part of the country?	0%	1%
8.5	Victimised you because you are from a traveller community?	0%	3%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	6%	1%
8.5	Victimised you because you have a disability?	0%	2%
8.5	Victimised you because you were new here?	6%	5%
8.5	Victimised you because of your offence/crime?	27%	3%



## Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.5	Victimised you because of gang related issues?	0%	4%
<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	35%	34%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	16%	10%
8.7	Hit, kicked or assaulted you?	3%	6%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	19%	13%
8.7	Victimised you because of medication?	3%	7%
8.7	Victimised you because of debt?	0%	2%
8.7	Victimised you because of drugs?	0%	4%
8.7	Victimised you because of your race or ethnic origin?	3%	5%
8.7	Victimised you because of your religion/religious beliefs?	0%	3%
8.7	Victimised you because of your nationality?	0%	2%
8.7	Victimised you because you were from a different part of the country?	0%	1%
8.7	Victimised you because you are from a traveller community?	0%	3%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	7%	0%
8.7	Victimised you because you have a disability?	0%	4%
8.7	Victimised you because you were new here?	3%	3%
8.7	Victimised you because of your offence/crime?	19%	5%
8.7	Victimised you because of gang related issues?	0%	2%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	20%	21%
9.1	Is it easy/very easy to see the nurse?	55%	45%
9.1	Is it easy/very easy to see the dentist?	9%	5%
9.4	Are you currently taking medication?	77%	44%
9.6	Do you have any emotional well being or mental health problems?	35%	34%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	9%	26%
10.2	Did you have a problem with alcohol when you came into this prison?	6%	17%

## Key to tables

	Any percentage highlighted in green is significantly better	Vulnerable prisoner houseblock (6)	All other houseblocks (1, 2, 3, 4, 5)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
10.3	Is it easy/very easy to get illegal drugs in this prison?	9%	40%
10.4	Is it easy/very easy to get alcohol in this prison?	21%	22%
10.5	Have you developed a problem with drugs since you have been in this prison?	3%	7%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	0%	4%
<b>SECTION 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	29%	20%
11.1	Vocational or skills training?	22%	22%
11.1	Education (including basic skills)?	55%	34%
11.1	Offending Behaviour Programmes?	4%	11%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	45%	41%
11.2	Vocational or skills training?	13%	5%
11.2	Education (including basic skills)?	55%	28%
11.2	Offending Behaviour Programmes?	3%	7%
11.4	Do you go to the library at least once a week?	47%	15%
11.5	Does the library have a wide enough range of materials to meet your needs?	39%	19%
11.6	Do you go to the gym three or more times a week?	0%	4%
11.7	Do you go outside for exercise three or more times a week?	23%	7%
11.8	Do you go on association more than five times each week?	20%	21%
11.9	Do you spend ten or more hours out of your cell on a weekday?	3%	5%
<b>SECTION 12: Friends and family</b>			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	45%	24%
12.2	Have you had any problems with sending or receiving mail?	47%	60%
12.3	Have you had any problems getting access to the telephones?	22%	35%
12.4	Is it easy/ very easy for your friends and family to get here?	38%	31%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	17%	28%
13.10	Do you have a needs based custody plan?	0%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	0%	6%