Report on an unannounced inspection of

HMP Rochester

by HM Chief Inspector of Prisons

I-II September 2015

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:







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Introduction

Rochester is a medium-sized category C training prison in Kent for 743 adult and young adult male prisoners. The prison however, is a sprawling mix of old and new accommodation situated on a large site, with prisoners serving a full range of sentences from the relatively short-term, up to life.

When we last inspected in 2013 the prison was undergoing significant management and operational change as an early adopter of a NOMS benchmarking and efficiency programme. The outcomes we observed at the time were mixed although the prison was better than we had previously found it and appeared to be both optimistic and energised by its 'early adopter' status. This inspection however, has been disappointing. The prison was emerging from another period of transition and was only now getting near to the full complement of staff needed, and a more consistent delivery of its daily routine. The prison was not progressing and resettlement services provision had deteriorated. Across all our healthy prison tests outcomes were insufficient.

Safety remained a significant concern. A fifth of prisoners reported feeling unsafe and over 40% had felt unsafe at some point during their stay, findings that were worse than similar establishments and than when we last inspected. First night and induction arrangements were inadequate and levels of violence were too high. About 40 prisoners were self isolating for their own protection. Mandatory drug testing suggested higher than expected levels of drug use and additionally, there was evidence of considerable amounts of new psychoactive substances (NPS), an as yet undetectable drug, in the prison. Some 57% of prisoners said to us in our survey, that it was easy to get drugs in Rochester. There was much evidence to suggest that the availability of NPS was having a significant destabilising effect, and yet the prison's response lacked coordination and too many staff seemed complacent of the issue and its impact. Confronting this drug problem demanded urgent attention.

Levels of self-harm in the prison were high. Care for those at risk was inadequate and many of those subject to case management (ACCT) felt unsupported. An observation cell in segregation used to hold those at developed risk was one of the worst we have seen. Many of the at-risk prisoners found themselves identified and the subject of case management interventions because of NPS-related debt.

Many other features of the prison that inform judgements about safety were similarly concerning. The use of formal disciplinary procedures was high; use of force was high and increasing, but insufficiently accountable. The use of the special cell was very high for a category C training prison, and of the 21 prisoners located in the facility during the six months prior to our inspection, unacceptably, nine were at risk of self-harm and on open ACCTs.

Living conditions in the prison were poor. Communal and cellular accommodation was dirty and many cells were poorly equipped. Prisoners complained repeatedly about their inability to obtain basic kit. Unusually, the prison was equipped for in-cell telephones, which brought advantages but only when they were available to buy, which they were not at the time of our inspection. Prisoners were generally positive about their relationship with staff although a compelling impression was that too much poor behaviour went unchallenged by staff. Work to promote equality was weak and the prison had no defined approach to meet the needs of the small number of young adults in the prison despite evidence to suggest this was needed. The chaplaincy ensured good outcomes in faith provision and health services were improving. The quality of the food provided was poor.

Prisoners had very good access to time out of cell but it was not always used purposefully. The prison had improved the amount of purposeful activity since the last inspection which was now sufficient to meet the needs of the population. The range of education, training and work places was good although the analysis of curriculum needs required improvement. Many indicators of quality had also improved with good vocational and classroom teaching, and good and improving achievements of qualifications for those engaged. All this progress was however, undermined by the poor attendance at activity. Our spot checks found just 7% of prisoners locked up during the working day,

but a third were found on the wings doing nothing. Staff were not sufficiently attentive in getting prisoners to work or education on time and failed to adequately challenge those malingering.

Resettlement work was disjointed. Offender management required improvement and prisoners were frustrated by the limited contact and communication they received from their offender supervisors. Many prisoners arrived without a full OASys risk assessment and sentence plans failed to address risk factors. Temporary release was little used despite the prison's role as a resettlement prison but public protection work was adequate. Work to support reintegration through the resettlement pathways was adequate but was limited in its support for family engagement and had deteriorated in respect of the provision of accommodation on release. It was a further disappointment that of the ten recommendations we made at our previous inspection concerning our resettlement healthy prison test, only one had been fully achieved in the intervening period.

Rochester is a prison which has gone through big changes in recent years but has not made the progress hoped for. It is a prison however, not without advantages. It is near to having the number of staff it needs, it has sufficient activity and it has a clear purpose serving as a resettlement prison to its local community. e were told of plans for the future but our overriding impression was that it was a prison that just needed to focus on the basics. A robust drug strategy, cleaning the prison up, getting prisoners to work on time and some joined-up thinking about their approach to resettling prisoners would be good places to start.

Nick Hardwick 2015

HM Chief Inspector of Prisons

Fact page

Task of the establishment

Category C resettlement prison for both adult male prisoners and young offenders.

Prison status

Public

Region

Kent and Sussex

Number held

724

Certified normal accommodation

743

Operational capacity

743

Date of last full inspection

21-25 January 2013

Brief history

Rochester prison was originally built in 1874 on a former military site above the Medway river. It was rebuilt in the early 20th century as the Borstal institution. Its pioneering methods were used as a model for other borstal institutions, which were given statutory authority in 1908 and lasted until their abolition in 1983, when Rochester converted to a youth custody centre. In 1988 it became a remand centre for the Kent courts and sentenced category C and D adult males. Further changes in role resulted in a mixed site holding immigration detainees, a resettlement unit for adult male prisoners at the end of their sentences, and a remand and allocation centre for under 21-year-old males. In June 2011, Rochester became a dual-purpose site catering for male young offenders and adult category C offenders.

Short description of residential units

There are nine residential units. A unit is a drug rehabilitation unit and H is a resettlement unit. The other seven units are general accommodation.

Name of governor

Andrew Hudson

Escort contractor

GEOAmey

Health service provider

Oxleas NHS Foundation Trust

Learning and skills provider

The Manchester College

Independent Monitoring Board chair

Godfrey Featherstone

Fact page	
	Community rehabilitation company (CRC) Kent, Surrey and Sussex Community Rehabilitation Company Ltd
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About this inspection and report

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

Safety prisoners, particularly the most vulnerable, are held safely

Respect prisoners are treated with respect for their human dignity

Purposeful activity prisoners are able, and expected, to engage in activity that is

likely to benefit them

Resettlement prisoners are prepared for their release into the community and

effectively helped to reduce the likelihood of reoffending.

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

There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

- outcomes for prisoners are reasonably good.

There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

- outcomes for prisoners are not sufficiently good.

There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- outcomes for prisoners are poor.

There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.

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

This report

- A9 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.
- All Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- All 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.

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

- Reception procedures were good but prisoners' experience of their early days at Rochester was poor. Prisoners reported feeling unsafe and levels of violence were high, particularly against staff. The wide availability of drugs, predominantly Spice, had led to bullying, debt and some poor behaviour that was not always challenged by staff. Too many victims of bullying were isolating themselves and perpetrators were not adequately managed. Incidents of self-harm were high. Security measures were proportionate. Use of force was high and monitoring was inadequate. The segregation unit environment was poor and too many vulnerable prisoners were held there. There was good psychosocial support for prisoners with substance misuse problems. Outcomes for prisoners were not sufficiently good against this healthy prison test.
- At the last inspection in 2013 we found that outcomes for prisoners in Rochester were not sufficiently good against this healthy prison test. We made 23 recommendations in the area of safety. At this follow-up inspection we found that five of the recommendations had been achieved, two had been partially achieved, and 16 had not been achieved.
- Most journey times to the prison for new arrivals were short but disembarkation from escort vehicles took far too long. Reception was clean and bright and staff were welcoming. Risk assessment procedures on arrival were good and new arrivals were met by prisoner peer supporters, who answered any concerns and showed them to their accommodation. There was no dedicated induction unit and no enhanced check of new arrivals on their first night. The first night cells were dirty and many were poorly equipped. Not all staff were aware of who the new arrivals were to provide them additional support in their first days. The induction programme was inadequate and took too long.
- In our survey, more prisoners than the comparator and at the last inspection said they felt unsafe at the time of the inspection. The number of violent incidents was higher than similar prisons and than at the last inspection, and we found some evidence of underreporting. Some incidents were serious, and there had been one homicide since the previous inspection. New psychoactive substances (NPS),² such as Spice, were a significant problem leading to debt and bullying, and urgent action was required to address this problem. Victims of bullying were reasonably well supported but many prisoners were self-isolating. Perpetrators of violence were not managed effectively, and there was little analysis of the underlying causes of violence.
- There had been three deaths in custody since the previous inspection, including one self-inflicted death. We were not assured that all subsequent recommendations from reports by the Prisons and Probation Ombudsman (PPO) had been adequately addressed. Self-harm had increased and was higher than at similar prisons and at our last inspection. Most prisoners in crisis were not positive about the care they received, documentation relating to assessment, care in custody and teamwork (ACCT) case management was often poor, and prisoners had inadequate access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). However, most prisoners on constant watch said they felt supported. Too many prisoners on an ACCT were located in the segregation unit.

² New drugs that mimic the effects of illegal drugs, such as cannabis, heroin or amphetamines, and may have unpredictable and life-threatening effects

- Security measures were generally proportionate and the security team had a good understanding of the current risks, although this was not communicated effectively to all staff. NPS was posing a significant threat to the safety of prisoners, yet some staff seemed indifferent to the number of prisoners clearly under the influence of drugs. Closed visits were administered well and used appropriately for visits-related matters.
- The incentives and earned privileges (IEP) policy was used appropriately to deal with some less serious infringements of the rules, although not all low-level bad behaviour was appropriately challenged. Some reviews for prisoners on the basic regime were late.
- The number of adjudications was higher than in similar prisons and than at our last inspection. Adjudication documentation showed that charges were appropriate, but we did find evidence of unregulated punishments in the segregation unit. Use of force was very high and had increased since our last inspection. Although there were some quality checks, oversight and monitoring were poor with no follow-up actions to address identified issues. Planned interventions were not video recorded. Nearly 40% of incident reports were incomplete, which made it difficult for us to assess the necessity or justification for use of force. The special accommodation cell was in a poor condition and was used too often, including for prisoners on open ACCTs. Not all uses were properly authorised or documented. The segregation environment was very poor, as was the regime, with prisoners forced to choose two out of three daily options of exercise, showers and telephone calls. Use of segregation had reduced since the last inspection but was still higher than in similar prisons. There was little care planning, with only one segregation monitoring meeting held recently, and analysis and learning were limited.
- The random mandatory drug testing positive rate was high at 12.5% and drugs were widely available. There was no prison-wide strategic approach to the Spice problem. The RAPt (Rehabilitation of Addicted Prisoners trust) team provided good clinical and psychosocial services that met the needs of substance misusers they were able to reach, but more was needed to engage the wider population of Spice users. The recovery wing provided a supportive environment for prisoners on clinical treatment.

Respect

- Living conditions for many prisoners were very poor with dirty accommodation, broken equipment and a lack of basic kit. Graffiti and displays of pornography were widespread and went unchallenged, as did other low-level bad behaviour. Most prisoners said that staff treated them decently and we saw examples of this but, as at the last inspection, prisoners from a black and minority ethnic background were more negative. The use of prisoner peer supporters across a range of areas was good. Equality and diversity work was weak but faith provision was generally good. Health services were improving and were mostly good, although too many hospital appointments were cancelled due to staff shortages. The food for prisoners was poor Outcomes for prisoners were not sufficiently good against this healthy prison test.
- At the last inspection in 2013 we found that outcomes for prisoners in Rochester were not sufficiently good against this healthy prison test. We made 23 recommendations in the area of respect. At this follow-up inspection we found that six of the recommendations had been achieved, eight had been partially achieved and nine had not been achieved.
- Living standards across most residential units were unacceptably poor. Many cells were dirty, with explicit pornography and extensive offensive graffiti on display. Staff and prisoners expressed concern about the lack of adequate furniture, bedding and clothing. Many

communal areas were also grubby and neglected, with broken equipment and laundry facilities out of order. In-cell telephones, when prisoners could afford them, were a positive initiative. Prisoner applications were generally well managed.

- In our survey, prisoners were more positive than at similar prisons about being treated with respect and having a member of staff to turn to with a problem, although prisoners from a black and minority ethnic background were less positive. We found interaction between staff and prisoners was mostly courteous, but staff did not always challenge some poor behaviour by prisoners who they allowed to swear openly and smoke freely on landings. There were few entries from residential staff in prisoners' case notes, other than to note warnings. The prisoner council was reasonably effective, and the use of peer supporters across a range of areas was very good.
- There was an equality and diversity policy but no effective action plan to lead improvement. Attendance at the equality meeting was poor and monitoring data were not analysed to prioritise work. There were no forums for prisoners with protected characteristics. In our survey, prisoners from a black and minority ethnic background and prisoners with disabilities were more negative than other prisoners, and had no means to raise their concerns as a group. Very few discrimination complaints were submitted, even though black and minority ethnic prisoners were more discontent than white prisoners. Investigations were adequate although not always timely. External support was available for the small number of foreign national prisoners, but not all who we spoke to were aware of it or how to access a free telephone call each month. There was no work to address the needs of the few young adults.
- Provision for faith and religious activity offered good support to prisoners, and the well-integrated chaplaincy provided an appropriate range of classes and services.
- Complaint forms were not available on all the units during the inspection. Responses to those that were submitted were generally appropriate, but the process took too long. There was no legal services officer, but basic support was available from offender supervisors.
- Health services had improved since our last visit and clinical governance and partnership working was mostly positive. Prisoners had reasonable access to an appropriate range of primary care services, although waiting times for the optician were too long. Management of prisoners with long-term conditions had improved, and the management of medicines was reasonably good. Too many external hospital appointments were cancelled due to a lack of escort staff. Integrated mental health services were good, and gave prisoners access to a multidisciplinary team and a wide range of therapeutic groups.
- In our survey, only 11% of prisoners, against the comparator of 29%, said that the food was good. The quality of some food and most portions was inadequate, and many prisoners told us they had to buy food from the prison shop to supplement the provision. Most servery areas were dirty. Prisoners were mostly satisfied with the range of goods available from the prison shop. The prison had responded well to the growth of online shopping by allowing some prisoners limited, supervised access to shop from online catalogues.

Purposeful activity

- Prisoners had extensive time out of cell and access to a range of work and education, although places on these were underused. The quality of education provision had improved and achievements were mostly good. College and prison staff worked well together. Prisoner attendance at activity was very poor and we found a third of prisoners doing nothing during the working day. Use of the library needed to be better promoted. Gym and PE facilities were good but attendance was low.

 Outcomes for prisoners were not sufficiently good against this healthy prison test.
- S20 At the last inspection in 2013 we found that outcomes for prisoners in Rochester were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of purposeful activity. At this follow-up inspection we found that six of the recommendations had been achieved, six had been partially achieved and two had not been achieved
- With the introduction of the new core day during the inspection, time out of cell was over 10 hours on a weekday for a fully employed prisoner and around seven hours for an unemployed prisoner, which was good. On average only 7% of prisoners were locked up during our roll checks, which was good, but we found that around a third of the population were not occupied.
- Managers from the prison and The Manchester College worked particularly well with each other. The college's performance management of weak teachers and trainers was robust and their curriculum managers were highly effective, but the curriculum needs analysis was weak. The prison provided sufficient activity places to meet the needs of the population, with a good range of vocational courses and prison work. However, too many places were not used and non-attendance was not challenged effectively.
- Achievement of qualifications on most education courses was good and prisoners on vocational training courses had made good progress. Achievement of functional skills qualifications in English and mathematics, especially at entry levels, was improving but achievement of English functional skills qualifications at level 2 was low. Some prison work remained menial and purposeless.
- The quality of classroom and vocational teaching and training had improved since the previous inspection. Support for prisoners with additional needs was readily available and there were good resources to support vocational training. Prisoners' behaviour in learning, skills and work was good, and those studying practical subjects developed good employment skills. Careers guidance met prisoners' short-term needs but was insufficiently focused on longer term plans for resettlement. The library was well stocked with a comprehensive range of resources, but there were insufficient activities to promote library use and too few prisoners regularly visited it.
- S25 PE and gym facilities were good and included a range of indoor and outdoor sports facilities, but sessions were too often cancelled due to redeployment of gym staff. Low numbers of prisoners participated in PE, and no accredited courses were available.

Resettlement

- Offender management and resettlement work was disjointed. The role of the offender management unit (OMU) was not clearly communicated to staff and prisoners. There was an unacceptable backlog of OASys (offender assessment system) assessments and no credible plan to correct this, placing a significant burden on OMU staff. Public protection arrangements were generally well managed but some prisoners who posed a risk did not have their risk management level set sufficiently early before release. Categorisation and home detention curfew were managed well. Outcomes across most resettlement pathways were adequate but provision for children and families and accommodation needs had deteriorated. Outcomes for prisoners were not sufficiently good against this healthy prison test.
- At the last inspection in 2013 we found that outcomes for prisoners in Rochester were reasonably good against this healthy prison test. We made 10 recommendations in the area of resettlement. At this follow-up inspection we found that one recommendation had been achieved, two had been partially achieved and seven had not been achieved.
- The overall management of resettlement was disjointed and required improvement. The reducing reoffending meetings were not sufficiently strategic and did not discuss the role of offender management. Communication with prisoners about the role of OMU and what they could expect from their offender supervisor was poor, which led to unnecessary frustrations among prisoners. Oversight, supervision and development of offender supervisors required improvement.
- The majority of prisoners arrived without an OASys assessment and many had not had a basic custody screen, which placed an unmanageable pressure on the OMU. There was no credible plan to address this. Prisoners' sentence plan targets were outcome-focused and time-bound but did not always reflect appropriate risk factors. In our survey, prisoners were negative about contact with their offender supervisor; we found that contact was variable but better in the high risk cases. Opportunities for release on temporary licence (ROTL) had ceased since the previous inspection. Home detention curfew and categorisation processes were good. Public protection work was reasonably good but too many prisoners likely to pose a risk did not have their multi-agency public protection arrangements (MAPPA) risk management level identified soon enough before release, and the prison did not chase this up.
- The Kent, Surrey and Sussex Community Rehabilitation Company (CRC)³ had subcontracted its work to the charity Depaul UK, which saw prisoners at relevant times throughout their sentence. Prisoners were positive about the support offered and arrangements for prisoners released from Rochester were developing, although communication with the college needed to improve. The number of prisoners released without accommodation had risen to 6% since the previous inspection.
- Initial interviews to identify prisoners' immediate short-term needs for education, training or employment and to inform allocations to activities were effective. Expert advice was readily available to prisoners on matters such as disclosure and improving CVs, but there was insufficient use of the 'virtual campus' (giving prisoners internet access to community education, training and employment opportunities) for pre-release Job search activity.

³ Since May 2015, rehabilitation services, both in custody and after release, have been organised through CRCs, which are responsible for work with medium- and low-risk offenders. The National Probation Service (NPS) has maintained responsibility for high- and very high-risk offenders.

- Resettlement outcomes for prisoners with substance misuse issues were good and included gate pick ups and post-release support.
- Provision under the children and families pathway was limited. Although the visits provision was reasonable, the weekly family visits for enhanced prisoners during the summer school holidays had been discontinued. However, the charity PACT (Prison Advice and Care Trust) had recently been funded to provide family support for hard-to-reach prisoners.
- There had been no needs analysis to identify any gaps in offending behaviour programme work, and the prison was unable to address the needs of prisoners with histories of domestic violence. There was adequate provision of the thinking skills programme (cognitive skills programme addressing offenders' thinking and behaviour) and Resolve (cognitive-behavioural intervention for violent offenders).

Main concerns and recommendations

Concern: The use and supply of drugs and new psychoactive substances was a significant threat to the safety of prisoners, and we observed prisoners clearly under the influence of illicit substances going unchallenged by staff. Levels of violence were higher than at the last inspection and similar prisons, and escalating. High numbers of prisoners were self-isolating, many because of debt-related bullying. Investigations, monitoring and interventions for perpetrators of violence were inadequate.

Recommendation: The prison should take urgent action to address the availability of new psychoactive substances and illicit drugs. Managers should ensure that staff challenge prisoners who are clearly under the influence of drugs, and work to reduce high levels of violence and debt-related bullying, ensuring that victims of violence are supported and perpetrators challenged.

Concern: Too many prisoners were living in very poor conditions without access to some basic facilities. Cells were dirty with extensive graffiti, and the offensive displays policy was not adhered to.

Recommendation: All cells and communal areas should be clean, free of graffiti and kept at a suitable temperature. Offensive displays should be removed. Prisoners should be able to get adequate clean clothes, bedding, towels and furniture in their cells.

S37 Concern: A significant number of prisoners across the diversity strands were negative about their treatment and access to the regime, and we found evidence to support some of these perceptions.

Recommendation: Diversity and equality plans should include strategic objectives to progress work across all diversity strands. They should identify and meet the needs of prisoners with protected characteristics. This should include regular consultation with prisoners and actions to improve perceptions and outcomes for these groups. Links with external community groups and agencies should be strengthened to provide support to prisoners with protected characteristics.

Concern: Too many prisoners failed to attend their allocated activities, and prison staff failed to challenge the reasons given by prisoners for returning to their cells when they should have been in learning, skills or work activities.

Recommendation: Prison managers should carry out a thorough analysis of prisoner attendance at activities, and implement robust strategies to ensure that they attend their scheduled activities.

S39 Concern: The overall management of resettlement was disjointed and required improvement; the strategic and operational links between resettlement pathways work and offender management were underdeveloped. The reducing reoffending strategy was not informed by an up-to-date prisoner needs analysis. The strategy did not reflect current practice in induction, the OMU or pathways work.

Recommendation: There should be a clear strategic direction for the offender management unit, which informs the reducing reoffending strategy, and an indepth prisoner needs analysis, using OASys (offender assessment system) data, induction information and prisoners' views, should inform annual reviews of resettlement provision.

Summary	
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Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- **1.1** Journey times for arriving prisoners were short but they had long delays in disembarking from vehicles at the prison.
- 1.2 Most new arrivals had short journeys to reach the prison. However, reception was closed over the lunch period and we saw prisoners held on escort vehicles inside the prison for well over an hour before they disembarked. Some escort vehicles were grubby. Sandwiches and drinks were available for prisoners during their journey. In our survey, prisoners were positive about the escort staff, and we observed good relationships.

Recommendation

1.3 Prisoners should be disembarked from escort vehicles swiftly.

Housekeeping point

1.4 Escort vehicles should be kept clean.

Early days in custody

Expected outcomes:

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

- **1.5** Reception was a positive environment, most prisoners were processed swiftly, and prisoner peer supporters provided a good service. First night accommodation was very poor, as were staff handover arrangements for new arrivals. Induction was inadequate.
- 1.6 The reception area was clean and bright, although the one large holding room was stark. In our survey, fewer respondents than the comparator said they spent less than two hours in reception, although the new arrivals we saw were processed in under two hours. Staff were welcoming, knowledgeable and put new arrivals at ease. All arrivals had transferred in from other prisons and were not routinely strip searched. Prisoner peer supporters saw all new arrivals in reception, gave them bedding and toiletries, and explained the regime. First night risk assessment processes were comprehensive and conducted in private. New arrivals were offered a telephone call and either a smoker's pack or grocery pack, which was reimbursed.

- 1.7 Peer supporters escorted new arrivals to their accommodation, which was positive. There was no designated first night accommodation and arrivals were located wherever there was a space. Cells were dirty, with extensive graffiti and no furniture or television. Most prisoners arrived before 6pm so were able to have a shower on their first night. The handover from day to night staff about new arrivals was inadequate. We spoke to some night staff who were unaware of the new arrivals on their wing and thus unable to give them additional support during their early days (see also paragraph 1.20). There were no enhanced staff checks on prisoners during their first night.
- Induction began the day following arrival and was peer-led. Although in our survey prisoners were positive about induction, the session we observed was very basic. New arrivals were left with many unanswered questions, and there was no induction booklet with relevant information to help them find their way around the prison. Although further modules took place over the following days, there was a gap of up to two weeks before prisoners had an education assessment, and a wait of up to four weeks before they were allocated to an activity; they were locked up in the mean time. The tracking system to ensure all prisoners had completed all the induction modules was inadequate.

Recommendations

- 1.9 First night cells should be clean, prepared and appropriately equipped for new arrivals. (Repeated recommendation 1.15)
- 1.10 There should be staff handover arrangements and enhanced checks to monitor new arrivals.
- 1.11 All prisoners should receive an induction that is comprehensive and timely.

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.

- Levels of violence were high and many prisoners felt unsafe. Analysis of data on violence was insufficient. The management of perpetrators of violence was inadequate but there was good support for victims. There was a major problem with high use of new psychoactive substances (NPS) and related debt and violence.
- 1.13 The number of violent incidents was high. Between March and August 2015 there had been 18 assaults against staff, 36 assaults against prisoners and 16 fights. These levels were higher than at the last inspection and at similar category C prisons and were escalating, with some resulting in serious injuries, and in one case a homicide. (See main recommendation S36.) We also found some evidence of underreporting. The prison held around 50 young adults who were overrepresented in incidents of violence. The establishment was aware of this issue but had not addressed it.
- 1.14 In our survey, responses across a range of safety indicators were more negative than the comparators and at the last inspection. For example, 43% of respondents said they felt

unsafe at some time compared with 29% at the previous inspection. The prison had conducted a safety survey and responses were more positive, although the number of respondents was low. Violence reduction peer supporters met all new arrivals and reported problems to the safer custody team, which was a good initiative.

- Investigations and monitoring of perpetrators of violence were inadequate and there were few interventions, apart from mediation. The support for victims of bullying was mostly good. The use of NPS new drugs, such as 'Spice', that mimic the effects of illegal drugs, such as cannabis, heroin or amphetamines, and may have unpredictable and life-threatening effects was a major problem. Around 40 prisoners were self-isolating because they were in fear for their safety, many for debt related to the use of NPS, and with some on open assessment, care in custody and teamwork (ACCT) documents (case management for those at risk of suicide or self-harm). The prison had plans for a 'community development unit' to locate self-isolating prisoners and offer enhanced peer-led support. However, the prison's overall action to address the significant issues underlying debt and violence had been ineffective, and urgent action was required to tackle this considerable problem. (See main recommendation \$35.)
- 1.16 Data about violence was discussed at the monthly safer custody meeting but there was inadequate analysis to draw meaningful conclusions, and the action plan did not reflect the issues. Attendance at the meeting was often poor and links with security were inadequate.

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.

- **1.17** Levels of self-harm were high and case management of at-risk prisoners was poor. Most prisoners in crisis felt unsupported. Death in custody recommendations had not been implemented. Night procedures were poor, as were conditions in the segregation constant observation cell.
- 1.18 There had been five deaths in custody since our last inspection, including one self-inflicted death and one homicide. There had been 91 acts of self-harm in the previous six months, a figure that had doubled since the previous inspection, and was higher than in similar prisons. The prison had not implemented all the actions recommended by the Prisons and Probation Ombudsman (PPO) in a report into one of the natural deaths in custody.
- 1.19 Care for prisoners in crisis was inadequate. Most prisoners at risk who were subject to ACCT case management said they felt unsupported, although those who had been under constant supervision arrangements reported better care. Many had been placed on an ACCT because of Spice-related debt (see paragraph 1.15). Throughout the inspection, prisoners said that access to a Listener (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) was restricted, particularly at night. The Samaritans coordinator had raised concerns that Listener contact with those in crisis had significantly reduced in recent months. During our night visit we found that some staff were unaware of who the new arrivals were (see paragraph 1.7), some did not carry anti-ligature knives, and most were unaware of the code system to use in the event of a serious incident of self-harm.

- 1.20 Twenty-two prisoners had been located in the segregation unit while subject to ACCT case management, including eight in the constant observation cell, while five had been on constant observation on normal location. Justification for locating prisoners in crisis in segregation and, in particular, in the constant observation cell was often poor. The constant observation cell in segregation had a picture of a hanging man etched into the wall. We highlighted this disturbing graffiti to managers, but it had still not been removed by the end of our inspection.
- 1.21 There had been 196 ACCT documents opened in the six months to August 2015. The quality of staff entries in prisoners' ACCT documents was generally poor, with perfunctory care maps. The recording of observations indicated a lack of meaningful staff engagement with prisoners, and case reviews were poorly attended.
- 1.22 The monthly safer prison meeting was poorly attended by relevant staff, but the analysis of data about self-harm and subsequent actions was mostly good.

Recommendations

- 1.23 The prison should implement the recommendations arising from investigations into deaths in custody, and regularly check these for compliance.
- 1.24 Prisoners subject to assessment, care in custody and teamwork (ACCT) case management should only be held in the segregation unit in exceptional circumstances, and the constant observation cell should not be located there.
- 1.25 All staff who undertake night duty should carry anti-ligature knives and know the code system to use in the event of a serious incident of self-harm.

Housekeeping points

- **1.26** Prisoners should have better access to Listeners.
- **1.27** Attendance by security staff and prisoner representatives at the safer custody meeting should be consistent.

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.⁴

- **1.28** There were processes to identify prisoners at risk because of their health, disability or age, but no formal links with the local safeguarding adults board.
- 1.29 There was no safeguarding policy or formal link with the local authority safeguarding board, which represented a risk to prisoners with safeguarding needs. There were good procedures

⁴ We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

to identify prisoners with potential social care needs as a result of their health, disability or age. Health care staff saw all new arrivals and identified those at risk, sharing this information with the safer custody team. A weekly complex case meeting considered the needs of prisoners identified as at risk. Staff were aware of those prisoners who fell under the category of an adult at risk and their responsibility to protect them from harm. A memorandum of understanding was in development with Medway Council for the provision of social care, which we would encourage.

Recommendations

1.30 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (Repeated recommendation 1.37)

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.

- 1.31 Security measures were generally proportionate and did not impede prisoner movement to activities. Security information was well analysed. The security team had a good understanding of the current risks but objectives were not communicated effectively to staff. Drugs were very widely available, and the random mandatory drug testing (MDT) positive rate was high. NPS, particularly Spice, was a significant threat with many finds and incidents of prisoners under the influence of such drugs. Responses to the Spice problem were not well coordinated across the prison or strategic, and officers often seemed indifferent to the number of intoxicated prisoners. Closed visits were administered well and used appropriately.
- 1.32 Physical security measures were generally proportionate and additional measures had been taken to respond to packages thrown over the wall, which had reduced the number of illicit items entering the prison through this route. Prisoners had free movement to activities but staff did not challenge those who took their time to get to their work places punctually (see paragraph 3.13). Security staff contributed to prisoners' risk assessments for activities, and prisoners were not unduly restricted in allocation to work. All strip searching was based on a risk assessment.
- 1.33 There had been 2,389 information reports submitted in the previous six months. Intelligence was analysed quickly and the security department was well sighted on the current issues around drugs, including NPS (see also paragraph 1.15), mobile telephones and maintaining order and control. Some intelligence-led searching was not carried out quickly enough. Security objectives were not well communicated to all staff, and security committee minutes indicated insufficient feedback about them, which meant that the same ones were carried over from meeting to meeting. A recent security audit had highlighted flaws in the security committee, and there were new arrangements to improve the meetings and intelligence sharing.

- **1.34** The prison received good support from the police around criminal activity in the prison, illicit activity by visitors and anti-corruption matters. The prison had sound procedures to protect prisoners from misconduct by staff.
- 1.35 The use and supply of drugs and NPS was a significant threat to the safety of prisoners. There had been 62 drug finds in the previous six months, including some very large parcels that had been thrown over the wall, and during the inspection we observed prisoners obviously under the influence of these substances. However, some staff seemed indifferent to the number of prisoners clearly under the influence of drugs.
- 1.36 Drugs were widely available. In our survey, 16% of prisoners said they had developed a drug problem since they had been in the prison, against the comparator of 8% and 6% at the previous inspection, and 57% said it was easy to get drugs in the prison, more than double the response of 25% at the previous inspection. Prisoners told us it was easier to get Spice than tobacco. Anabolic steroids and illicit buprenorphine (Subutex) were also regularly found and detected in tests.
- 1.37 Although some individual departments, like RAPt (see paragraph 1.62), security and health care, were working on their own responses to the Spice problem, there was no coordinated prison-wide strategic approach. Senior managers did not attend drug strategy meetings and security meetings were very poorly minuted, which hampered the communication of key issues.
- 1.38 There had been no random mandatory drug testing (MDT) before April 2015, which we were told was due to staff shortages. For the four months from April to July 2015, the average positive rate was 12.5%.
- 1.39 Ten prisoners were subject to closed visits restrictions and four to banned visitors at the time of the inspection. All those on closed visits had been placed under the restrictions for visits-related illicit activity, which was appropriate. The appeal processes were explained and prisoners on closed visits were reviewed monthly. Most were removed from the restrictions within three months. Visitors who were the subject of an indication by a drug dog were offered a closed visit and warned that any future indication could lead to a ban or being placed on closed visits for a longer period.

Recommendations

- 1.40 Security objectives should be fully disseminated to all staff to ensure adequate feedback on areas of most concern.
- 1.41 Prisoners clearly under the influence of drugs should be challenged by staff or offered medical assistance if appropriate.

Incentives and earned privileges

Expected outcomes:

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

- **1.42** The incentives and earned privileges (IEP) policy was used appropriately to deal with less serious infringements of the rules. Staff and prisoners had a good knowledge of how the scheme worked. Some reviews for prisoners on basic regime were late.
- In our survey, more prisoners than the comparator said that the different levels of the IEP scheme encouraged them to change their behaviour. Prisoners could apply for enhanced status after three months at the prison, and could retain their enhanced status from a previous prison on arrival. These applications were dealt with in good time. Staff used the scheme appropriately to deal with some, but not all, less serious infringements of prison rules. The scheme was not used effectively to encourage prisoners to attend work activities. Although under the local policy, two warnings for poor behaviour should have resulted in an IEP review, we found examples of prisoners who had received many warnings for not attending work that had not resulted in a review of their IEP status. Quality checks by managers were not evident in any of the case notes we examined.
- 1.44 Prisoners on basic regime had reasonable access to time out of cell for telephone calls, showers and meals, and were not restricted from attending work or other purposeful activity. Reviews were recorded on the P-Nomis Prison Service IT system, and it was difficult to find out if prisoners attended reviews. In many cases, entries were vague, stating that a prisoner had been down- or upgraded on the scheme with little supporting detail. There were few targets recorded to help those on basic to improve their behaviour. Reviews for those on basic were often late, which meant that prisoners spent prolonged periods on that level.

Recommendation

1.45 The incentives and earned privileges (IEP) scheme should be fully implemented and reviews carried out at appropriate times.

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.

1.46 The number of adjudications was higher than in similar prisons and than at our last inspection. We found evidence of unregulated punishment in the segregation unit. The use of force was high and had increased since our last inspection. Oversight and accountability for use of force were poor. The special accommodation cell was in a poor condition and was used too often for prisoners in crisis. The segregation unit environment was very poor. Use of segregation was higher than at similar prisons but lower than our last inspection. There was little effective care planning, the regime was poor and segregated prisoners had limited access to even the most basic facilities.

Disciplinary procedures

- 1.47 The number of adjudications was higher than similar prisons and than at our last inspection, with 863 in the previous six months. Oversight, monitoring and quality assurance of adjudications were limited, and there had been only one meeting of the adjudications standardisation committee in 2015 to date to discuss disciplinary matters. The main charges were for unauthorised articles, disobedience, and threats and abuse. We found evidence of unregulated punishment in the segregation unit, where prisoners could be denied access to showers, exercise and telephone calls due poor behaviour. This included one prisoner who experienced this during our inspection.
- 1.48 The independent adjudicator attended weekly to hear an increasing number of the more serious charges (20 to 30 a week). The documentation we reviewed showed that prisoners were given the chance to give their version of events, and generally gave a reasonable account of the proceedings. Punishments were proportionate and in accordance with the published tariff. Use of cellular confinement as a punishment was higher than we normally see, with 37% of all prisoners in segregation held there for this reason.

Recommendation

1.49 There should be regular adjudications monitoring meetings, and regular quality assurance of individual records to ensure that they are appropriate.

The use of force

- 1.50 The use of force was high and much higher than similar prisons, and had increased since our last inspection. There had been 108 incidents in the previous six months. Oversight and accountability for use of force were poor with only two meetings of the use of force committee in the year to date with limited discussion and monitoring. Planned incidents, of which there had been 21 in the previous six months, were not video recorded.
- 1.51 Nearly 40% of written records of use of force were incomplete, which made it difficult for us to assess if all force was justified and used as a last resort. Those that were complete were well detailed and showed excellent use of de-escalation, both before and during the use of force.

1.52 Special accommodation had been overused, with 21 prisoners located in the cells in the previous six months. Nine incidents had involved prisoners on open ACCT documents (see paragraph 1.21and recommendation 1.25). The special cells were dirty and dark and not suitable accommodation for those in crisis. Documentation for use of the cell was poorly completed and we found two instances that were not appropriately authorised by a manager; several did not indicate the level of search or clothing the prisoner had, and some were missing written observations of the prisoner.

Recommendations

- 1.53 There should be quality assurance procedures and accountability for the use of force to ensure that all incidents, including planned interventions, are fully documented and reviewed quickly to assess if force was used proportionately and as a last resort.
- 1.54 All use of special accommodation should be authorised, and documentation should be fully completed and give a clear indication of the prisoner's level of search and the clothing they are given.

Segregation

- 1.55 The segregation unit environment was poor. Cells were dirty, graffiti was widespread (some offensive), showers were grimy and exercise yards were cage-like and littered. Some prisoners were living in squalid conditions one had been left overnight in a cell with a blocked sink and toilet, and another in a cell damaged by fire. The gated cell was not suitable for use for prisoners in crisis and should not have been located in the segregation unit (see recommendation 1.25). Cell name cards were rarely used, and we found one referring to a prisoner as 'Dave the minion' (without his agreement) a character in a children's animated film.
- 1.56 Use of segregation was higher than in similar prisons but lower than at our last inspection. In the previous six months, 169 prisoners had been segregated. It was used mostly for cellular confinement, prisoners awaiting adjudication and those seeking protection. There were 18 prisoners on the unit at the start of our inspection, eight serving cellular confinement, seven for their own protection and three for reasons of good order or discipline. Four were on open ACCT documents with little explanation about why segregation was the most appropriate place for them.
- 1.57 The segregation monitoring meeting (SMARG) had been held only once in the year to date and there had been little detailed analysis of any aspect of segregation. Reviews were timely but there was no formal reintegration policy, and the care plans we saw amounted to little more than management plans. Targets were perfunctory, such as one that stated that a prisoner should 'appreciate that his needs are not always paramount and have to be balanced'. For those in the unit for their own protection, there was no indication of how they would be kept safe or what support or services were available to them.
- 1.58 Staff-prisoner relationships in the unit were adequate, but as it was often short staffed staff struggled to ensure that all prisoners got access to even the most basic facilities. Prisoners had to choose between two out of three daily options of showers, telephone calls or exercise. Most prisoners spent most of their time locked in their cells, only coming out for their limited regime or to collect their evening meal. Prisoners could exercise together if it was safe for them to do so. There was an exercise bike on the unit but few used it. Education staff occasionally attended the unit and menial work was available when one

particular officer was on duty. Some prisoners had televisions in their cells, and some were authorised to attend religious services off the unit. The unit was noisy but staff failed to challenge prisoners playing loud music or shouting out of windows.

Recommendations

- 1.59 The role of the segregation unit should be clearly defined, with supporting policies and procedures that include individual assessments of prisoners for their access to regimes, care and reintegration planning, and realistic targets to challenge poor behaviour.
- 1.60 Cells and showers on the segregation unit should be cleaned, and graffiti in all areas should be removed.

Substance misuse

Expected outcomes:

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

- **1.61** The RAPt team provided good clinical and psychosocial services, including awareness and harm reduction interventions, although more was needed to reach Spice users and motivate staff to challenge illicit drug use. The recovery wing was a supportive environment for prisoners on clinical treatment, staffed by selected and specially trained officers.
- 1.62 RAPT (Rehabilitation of Addicted Prisoners trust) delivered both clinical and psychosocial substance misuse services. Over a quarter of the population, 202 prisoners (27.5%) were in structured psychosocial treatment. The RAPt team delivered a comprehensive and appropriate range of interventions at varying intensity levels. In our survey, more prisoners than the comparator said they had received help for alcohol problems.
- 1.63 Although there were awareness and harm reduction interventions aimed at Spice and steroid users, more needed to be done to engage with hard-to-reach recreational Spice users, who continued to use despite the awareness campaign. New interventions were planned to address prisoners' attitudes, including Spice use. However, we saw many prisoners under the influence of substances with staff taking little or no notice (see paragraph 1.37and main recommendation S35).
- 1.64 There were 35 prisoners on opiate substitution treatment, of whom 27 (77%) were on reducing doses, which was appropriate. 'A' unit housed the drug recovery wing, although a few prisoners were there for reasons not associated with recovery. Generally the unit was a supportive environment staffed, in part, by some specially selected and trained officers who were highly thought of by prisoners in their care.

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 Living standards across most units were unacceptably poor. Communal areas were grubby. Many cells were dirty with extensive graffiti. Many prisoners had inadequate furniture, no clean bedding or towels and insufficient clean clothes, and laundry facilities were out of order. The offensive displays policy was generally ignored. Some prisoners were wrongly charged for televisions they did not have. In-cell telephones were positive but not all prisoners could afford them. Applications and mail were well managed.
- 2.2 Although some of the accommodation, particularly H and other newer units, provided reasonable living conditions for prisoners, the quality of the older accommodation was unacceptably poor with dirty cells containing extensive graffiti. The conditions on D and E units were squalid (see main recommendation S35). Some cells were painted black or other dark colours, adding to the feeling of neglect. However, adequate pest control measures had been implemented since our last inspection.
- 2.3 The newer wings were too hot and the heat in cells was oppressive. The offensive displays policy was all but ignored, with explicit pornography on display in many cells. Most cells had inadequate or broken furniture. Most prisoners had limited access to clean bedding and towels, and they had difficulty in keeping their clothes clean as some of the laundry facilities on all wings had been out of order for lengthy periods. Communal areas were also grubby (see main recommendation S35). We saw one cleaning cupboard in total disarray with cleaning mops and buckets for different areas mixed up together. Not all cells had televisions and some prisoners who did not have them had been charged for them; this was still the situation at the end of our inspection.
- 2.4 In-cell telephones were a positive initiative but some prisoners could not afford to buy a telephone and were not able to pay for them by instalments. There was a backlog of applications to buy a telephone because responsibility for issuing them was not clear. There were sufficient pay phones for general use on all wings.
- 2.5 Prisoners could send and receive as much mail as they wanted. Mail was delivered to wings the day it arrived and outgoing mail was sent out promptly. There were few instances of legally privileged mail opened in error, but when this happened prisoners and the sender were notified in writing and a log kept.
- **2.6** Prisoners' additional property was stored in reception and they could make applications to access it within a reasonable time.
- 2.7 Prisoner applications were well managed across all wings, with a log of all applications made. Staff followed up responses when they took too long.

Recommendation

2.8 Prisoners should be able to pay for in-cell telephones by instalments, and applications to purchase them should be dealt with promptly.

Housekeeping point

2.9 Prisoners should only be charged for a television when they have been supplied with one.

Staff-prisoner relationships

Expected outcomes:

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

- **2.10** Prisoners were positive about staff in our survey but we found more mixed views during the inspection. We saw generally appropriate interactions between staff and prisoners, but too much poor behaviour by prisoners went unchallenged by staff. The personal officer scheme did not work well. Prisoner consultation arrangements were reasonable and the use of peer mentors was good.
- 2.11 In our survey, more prisoners than the comparator felt that most staff treated them with respect and said they had a member of staff to turn to with a problem. Prisoners from a black and minority ethnic background were less positive about staff (see paragraph 2.27). During the inspection, prisoners we spoke to were also less positive, and said that only some staff were helpful. We observed mostly decent interaction between prisoners and staff, and some staff knew the prisoners well. However, too often staff failed to challenge prisoners' poor behaviour. We observed prisoners swearing and smoking freely on landings, prisoner cleaners failing to work without challenge by staff, and pictures contravening the offensive displays policies that were not dealt with (see paragraph 2.3). Residential staff often reacted to events or prisoner requests rather than actively engage with them.
- 2.12 The personal officer scheme was not working well. Few prisoners knew who their personal officer was, and staff entries in prisoners' electronic case notes did not evidence regular contact. Many entries only recorded negative behaviour warnings and, as at the previous inspection, there was little evidence that wing staff were involved with sentence planning. There were few management checks of case note entries.
- 2.13 The prisoner council met monthly and was reasonably effective in resolving prisoner concerns, although some actions were carried over from month to month without being dealt with. There was good use of prisoner peer supporters in a variety of roles across the prison.

Recommendations

- 2.14 Rules and expected standards of prisoner behaviour should be clear and enforced by all staff.
- 2.15 Personal officer entries in prisoners' case notes should evidence good knowledge of the prisoners they are responsible for, and regular management checks should

assess the quality of staff records and encourage meaningful staff engagement with prisoners and their sentence plans.

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 characteristic⁵ 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.

2.16 The strategic management of equality and diversity needed strengthening, including the use of monitoring data and development of an equality action plan. The use of prisoner orderlies and peer advisers in equality work was positive, but there were no consultation or support forums for prisoners from minority groups, some of who held negative views of the prison which needed further investigation.

Strategic management

- 2.17 The prison's equality and diversity strategy was clear and covered all the protected characteristics, but the associated action plan detailing how the strategy would be delivered was still being developed and not used to lead improvement across the prison.
- 2.18 A senior manager took the lead on equality and diversity, supported by a full-time equality officer. Each residential unit had a diversity representative, and two equality and diversity orderlies supported the peer mentor who met new arrivals and were a link with the unit representatives. These prisoners reported good access to and support from the equality officer when issues needed to be raised. An equality and diversity team (EAT) meeting was scheduled to meet quarterly, although there had only been meetings in January and July 2015. The meeting was chaired by the head of safer custody and equality rather the governor or deputy governor. Attendance by prisoner representatives was good, but less so from prison managers. The minutes of the most recent meeting indicated some forward planning work, but it was not yet a strategic forum to improve equality and diversity outcomes across the prison.
- 2.19 The prison did not make enough use of equality of treatment monitoring data to determine priorities. Our analysis of quarterly monitoring data showed that young adults had been over-represented in adjudications and on the basic incentives and earned privileges (IEP) level, and that Muslim prisoners had been over-represented in the use of segregation. There was no work to understand and address the reasons for these over-representations. Some local monthly monitoring data (such as application of the incentives and earned privileges scheme by ethnicity) were shared with the senior management team and available in the library, but prisoners we spoke to were not aware of this.

⁵ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

- 2.20 Eight discrimination incident reporting forms (DIRFs) had been submitted in the previous six months, fewer than in comparable prisons. Investigations were adequate but were not always completed quickly enough, and there was no external quality assurance of investigations. It was positive that the secure complaints box was no longer opened by a uniformed member of staff (see section on complaints), and that prisoner diversity peer mentors replenished stocks of DIRFs on the residential units. The prison was concerned about the low number of DIRFs submitted and the July EAT meeting had discussed how confidence in the system could be raised, including the introduction of staff and prisoner 'champions' for different aspects of equality and diversity.
- 2.21 There were no arrangements to enable communication with prisoners with protected characteristics to improve provision for these groups. (See section below and main recommendation S37). There were few links with external community groups.
- 2.22 The prison maintained a comprehensive database of prisoners who were convicted of a discriminatory offence or had displayed discriminatory behaviour while in custody, which was available to all staff, but there were no interventions to challenge prisoners who engaged in discriminatory behaviour.

Recommendations

- 2.23 Equality monitoring data should be extended to more areas of prisoner treatment, analysed thoroughly and any patterns or trends fully investigated.
- 2.24 The prison should investigate and address the reasons for the low number of discrimination incident reporting forms submitted.
- 2.25 There should be formal interventions to challenge prisoners who engage in racist behaviour. (Repeated recommendation 2.33)

Housekeeping point

2.26 All core functions should be represented at equality and diversity team meetings.

Protected characteristics

- 2.27 Prisoners from a black and minority ethnic background made up 22% of the population. As at the previous inspection, in our survey they were negative across a range of indicators, including their perceptions of and relationships with staff. They perceived discrimination in allocation to activities and assessments for recategorisation and home detention curfew (HDC), but the prison did not monitor access to these areas by ethnicity to aid investigation of these perceptions (see recommendation 2.23). Some prisoners we spoke to felt that black and minority ethnic prisoners were seen as the source of poor behaviour on units. Prisoners from black and minority ethnic backgrounds did not have any means to discuss and address these perceptions. (See main recommendation S37.)
- 2.28 Thirty-nine prisoners identified themselves as being from a Gypsy, Romany or Traveller background. As at the previous inspection, there was no provision or specific consultation with these prisoners, although a member of the chaplaincy was setting up a consultative forum.

- 2.29 The number of foreign national prisoners held had decreased since the previous inspection, with 16 held during the inspection. The Home Office visited the prison monthly and Migrant Helpline visited fortnightly. Not all foreign national prisoners we spoke to were aware of these visits, or of their entitlement to a free five-minute international telephone call each month. The library stocked a range of books in foreign languages, but there were no courses in English for speakers of other languages (ESOL), and few staff we spoke to outside of the offender management unit had used telephone interpreting. There was no communication with foreign national prisoners as a group, to understand and address their needs and there were no consultative meetings. At the time of the inspection, no foreign prisoners were detained after their sentence had ended; two were due to be removed within a matter of days, one just after sentence expiry and the other on an early return (a Home Office scheme that allows a voluntary early return to the prisoner's country of origin).
- 2.30 Identification of prisoners with a disability had improved since the previous inspection. New arrivals completed a self-disclosure form as part of their induction. The proportion of prisoners who self-identified in our survey (23%) matched the 167 known to the prison. As at the previous inspection, prisoners who considered themselves to have a disability were negative across a number of indicators in our survey, and the prison did not consult with them. Some key areas of the prison, including the chapel and the library, were upstairs and not accessible to prisoners with mobility problems. One prisoner had an appropriate personal emergency evacuation plan, and some adaptations had been made for prisoners who needed them.
- **2.31** Eight per cent of the population were 50 or older. There was no specific provision for this group, other than a separate gym session. Retired prisoners and those unable to work because of disability were unlocked during the core day, but there was little for them to do.
- 2.32 Under 10% of the population were young adults, a decrease since the previous inspection. They were integrated across all the wings. There was no strategy to manage and address the needs of this group, who were disproportionately over-represented in violent incidents and use of formal disciplinary procedures.
- 2.33 In our survey, 2% of respondents identified themselves as gay or bisexual, which equated to 14 prisoners, although only four prisoners had identified themselves to the prison as gay or bisexual. There was no additional support for these prisoners, although a forum was planned for September 2015.

Faith and religious activity

Expected outcomes:

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

- **2.34** The chaplaincy was an integral part of the prison and offered good faith and pastoral support to prisoners, including a range of classes, services and personal support. Facilities were reasonably good, although the older multi-faith room needed some work.
- 2.35 The chaplaincy played an active role in the prison and the team of full-time, part-time and sessional chaplains provided support for a range of faiths. Chaplains met new arrivals as part of their induction, and made daily visits to prisoners in segregation. Prisoners who had suffered bereavement or were in crisis were offered one-to-one support. During the

inspection we observed a chaplain arrange for a prisoner to visit his seriously ill mother within a few hours of the prison being notified of her condition. In our survey, fewer prisoners than the comparator said that their religious beliefs were respected and that it was easy to attend services. As at the previous inspection, although prisoners had unrestricted access to services, the restricted regime at weekends meant that some who wanted to attend were not unlocked at the appropriate time.

2.36 The chapel and multi-faith facilities were widely used. The old multi-faith room needed some maintenance work, but the new multi-faith room and chapel were good facilities, although they were upstairs; only the new multi-faith room was accessible by lift. The range of services and classes was appropriate to the needs of the population, and included the Sycamore Tree victim awareness course, which had a lengthy waiting list for attendance.

Recommendation

2.37 Necessary maintenance work should be carried out in the old multi-faith room.

Housekeeping point

2.38 All prisoners who wish to attend group worship should be unlocked to do so, unless risk assessment indicates otherwise.

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.

- **2.39** Complaint forms were not available on all the units. More prisoners than the comparator thought complaints were dealt with fairly, but responses were not always prompt.
- 2.40 There had been 767 complaints in the previous six months, which was slightly below the rate at comparable prisons. The senior management team discussed relevant management information about complaints each month; access to stored property and recategorisation were the main issues.
- 2.41 We found that not all residential units had complaint forms readily available. Complaints boxes were now opened by a non-uniformed member of staff, rather than by uniformed staff as at the previous inspection. In our survey, more prisoners than the comparator, 43% against 33%, thought complaints were dealt with fairly. Most of the replies we sampled were generally appropriate and responded to the issue raised, although one was responded to by the member of staff named in the complaint, which was inappropriate. The business hub manager carried out random quality assurance of a sample of complaints each month. Timeliness of replies was an issue, with an average of 22% replied to outside the target date. In June 2015 over a third had waited too long for a response; this had been addressed by he governor and the situation had improved in July.

Recommendation

2.42 Responses to complaints should be prompt.

Housekeeping point

2.43 Complaint forms should be available on residential units and stocks checked.

Legal rights

Expected outcomes:

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

- **2.44** There was no legal services officer. The provision for legal visits was reasonable.
- 2.45 There were no trained legal services officers to help prisoners with their legal problems. Offender supervisors helped to signpost prisoners to a legal representative and could, if appropriate, facilitate legal telephone calls.
- 2.46 Prisoners could meet legal representatives during morning appointments, and seven small private rooms were available. The library stocked legal texts and Prison Service instructions, and library staff could print or photocopy material prisoners were allowed to have. Computers were available for prisoners to type and print correspondence to send out of the prison. One 'access to justice' laptop was available for prisoners to apply to have in possession to assist with legal representations.

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.

2.47 Health services had improved, and clinical governance and partnership working were mostly positive. Prisoners had reasonable access to an appropriate range of primary care services, although waits to see the optician were too long. Management of long-term conditions had improved but some aspects required further review. The management of medicines was reasonably good. Too many external hospital appointments were cancelled due to lack of escort staff. Integrated mental health services were good with a multidisciplinary team and a wide range of therapeutic groups.

2.48 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁶ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

Governance arrangements

- 2.49 The Care Quality Commission found there were no breaches of the relevant regulations.
- 2.50 Health services were commissioned by NHS England and provided by Oxleas NHS Foundation Trust. Governance arrangements and partnership working were mostly effective, although recent changes to the regime core day which meant that prisoners had to choose between coming for their medication or attending a clinic and being late for work had not been fully discussed with the health care department, and had affected the timings of medication administration, clinics and staff shifts, to the detriment of service delivery. A health needs assessment published in February 2015 was too generic and did not fully inform current service delivery.
- **2.51** Experienced clinical managers were leading service delivery and improvement. There had been staffing shortages but new staff were now in post with two more due to commence. Vacancies had been filled by bank and regular agency staff. Mandatory training, access to professional development opportunities and staff appraisals were well managed. Staff valued the formal clinical and managerial supervision they received.
- **2.52** There was an appropriate range of policies, including safeguarding, and effective systems for the management of communicable diseases. There was age-appropriate screening, and a senior nurse had been identified to lead the overall care of older prisoners. Mobility and health aids were accessible.
- 2.53 The two health care units were mainly clean and tidy but some aspects did not meet infection control standards. Emergency equipment, including automated external defibrillators (AEDs), in both units had been streamlined since the last inspection and was well organised and regularly checked. AEDs were strategically positioned across the prison, although checks were not consistently recorded and the AED pads in the new gym were out of date. Some custody staff we spoke to were unaware of the emergency response protocol and the location of the AEDs, and too few had received AED and emergency first aid training.
- 2.54 Health care complaints were dealt with confidentially; 106 had been received between February and August 2015. The responses we sampled were prompt, courteous and addressed the issues, but they were scanned on to the prisoner's clinical record, which was inappropriate. Feedback to staff about lessons learned from complaints and clinical incidents was underdeveloped.
- **2.55** There was a health care focus group for prisoners, and health issues also featured in the main prisoner council, which was attended by health care staff.
- 2.56 Health promotion material was displayed in both health care units but not on the residential units, and was unavailable in an easy-read format or any foreign languages. Waiting times for

⁶ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: http://www.cqc.org.uk.

smoking cessation services were short, and prisoners had good access to immunisations and screening for blood-borne viruses. Barrier protection was available from health staff, although this was not well advertised.

Recommendations

- 2.57 The health care department should be fully involved in future changes to the prison regime and other prison issues that affect service delivery and patient safety.
- 2.58 There should be a comprehensive health needs assessment to ensure that the services commissioned meet the needs of the population.
- 2.59 All clinical areas should comply fully with infection control guidelines.
- 2.60 Prisoners requiring emergency first aid should have prompt access to appropriately trained custody staff and well-maintained equipment, including defibrillators that receive regular documented checks.

Housekeeping points

- **2.61** Health care complaints should be recorded separately from a prisoner's clinical record, and lessons learned from complaints and clinical incidents should be shared with health care staff.
- 2.62 Health promotion material should be available in an easy-read format and a range of languages, and health care notice boards on the units should display useful information about health care, including the availability of barrier protection.

Delivery of care (physical health)

- 2.63 New arrivals received a comprehensive health screening, including mental health and substance misuse, by a registered nurse and appropriate referrals were made. A health care assistant completed a basic physical health check. Telephone interpreting was used for prisoners with little English. During our inspection, a prisoner who had arrived on Friday evening did not receive health screening until health care were informed of this on Monday afternoon, which was too long and a potential risk.
- 2.64 The primary care service was available from 8am until 7.30pm, Monday to Thursday and from 8am till 6pm on Friday, Saturday and Sunday. GP appointments were available each morning, apart from Sunday, and were covered by a regular group of GPs from the Kent health care consortium. Waiting times for routine appointments were within an acceptable timescale, and same-day appointments were facilitated for urgent cases. Out-of-hours emergency cover was equivalent to that in the community.
- 2.65 The primary care team offered a variety of nurse-led clinics, including daily triage. The management of prisoners with long-term conditions had improved, and there were now regular reviews and a long-term conditions register. There were links with an external diabetic specialist nurse. However, assessment templates reflecting national clinical guidance and care plans needed to be developed.

- 2.66 The 'reading well books on prescription' scheme had just been introduced, which enabled prisoners to get self-help reading about their condition from the library, following discussion with health care staff about what literature would be most helpful.
- 2.67 There was an appropriate range of primary care services, including podiatry and an optician. Waiting times for most services were adequate, although the longest wait for the optician was 14 weeks, which was too long. Entries in patient records were of a reasonable standard but they were not regularly audited to ensure a consistent approach.
- 2.68 The failure-to-attend rate for some appointments was too high. During the inspection, the new regime had meant that prisoners arrived late for their appointments, or not at all, and some prisoners told us they did not receive their appointment slips.
- **2.69** Too many external hospital appointments had been rearranged due to lack of escort staff, which meant that several prisoners had long waits for appointments; this situation required more effective monitoring.

- 2.70 Prisoners should have prompt access to the optician, and the failure-to-attend rate for all clinics should be monitored and appropriate remedial action taken to reduce it.
- 2.71 There should be robust monitoring of external hospital appointments, and escort arrangements should be adequate to avoid unnecessary cancellations.

Housekeeping point

2.72 Prisoners with lifelong conditions should have an evidence-based care plan, and staff should use assessment templates based on national guidance. Clinical records should be audited to ensure a consistent approach.

Good practice

2.73 The 'reading well books on prescription' was a positive initiative that enhanced the individual's understanding of their health condition and promoted wellbeing.

Pharmacy

- 2.74 An on-site pharmacy provided medication promptly with appropriate patient information. There were four pharmacists and four pharmacy technicians, along with three dispensers and two delivery drivers who also provided pharmacy services to other prisons in the area. Prisoners could see a pharmacist for routine advice and there were plans to increase the uptake of this service.
- 2.75 The policy allowing prisoners to have their medications in possession was incomplete, and most of the patient group directions, which allow nurses to administer specific medications without an individual prescription, were out of date. We observed in-possession risk assessment for new arrivals in reception using a template on SystmOne (the electronic clinical information system), but these were not completed consistently. The GP also

- assessed whether a patient was to be given in-possession medicine or not. Stock control was well managed, with action taken on relevant drug alerts.
- 2.76 Supervised medication was administered by nurses from both health centres at 8am and 4pm. Administration was not well supervised by officers, which increased the risk of diversion and lacked confidentiality. Medicines required to be given at night or more frequently were given daily in possession, depending on a risk assessment, although the rationale was not always recorded. The medicines management committee was sited on some of the risks associated with the prescribing and administration of potentially tradable medication, although gabapentin was given daily in possession which is not recommended.
- 2.77 Most medicines were stored appropriately and refrigerator temperatures were well managed, although the medicines trolleys in the old health care unit were not chained to the wall. Nurses transported medications and prescription charts to the segregation unit in an unlocked bag when prisoners were moving around, which was a security risk.
- 2.78 The keys for healthcare's controlled drugs cabinets needed to be stored more securely with an audit trail of their use. The substance misuse team RAPt (see paragraph 1.63) had effective control of access to its controlled drugs cupboard and maintained the Methameasure (methadone dispensing device) well, although this needed to be recorded.

- 2.79 The medicines management committee should ensure there is a robust inpossession medication policy that reflects the needs of the patients, the medicines and the security issues in the prison, and which is regularly audited to ensure compliance, and that the patient group directions are up to date.
- 2.80 Discipline staff should regularly supervise all medicine administrations to ensure patient confidentiality and reduce the risk of bullying and trading.
- 2.81 Medicines taken to the segregation unit should be transported safely.

Housekeeping points

- **2.82** Access to the controlled drugs keys should be robustly recorded, and the medication trolley should be appropriately secured to the wall.
- **2.83** The RAPt team should record the daily cleaning and maintenance of the Methameasure machine.

Dentistry

2.84 In our survey, fewer prisoners than the comparator were satisfied with the quality of dental services, although we found they were of a good standard. A dentist supported by a dental nurse provided four sessions a week. Waiting times had been long but this had been well managed and the wait for routine appointments was now within six weeks. A full range of dental treatments was provided, appointments were allocated appropriately on need, and emergency provision was effective. Oral health promotion was provided during the session we observed. The dental surgery had good facilities, including a separate decontamination room.

Delivery of care (mental health)

- 2.85 A multidisciplinary mental health in-reach team, including nurses, counsellors and a creative therapist, provided a good integrated primary and secondary mental health service. The team was available from Monday to Saturday, 8am until 4pm, and had positive working relationships with the prison, primary care and RAPt services.
- 2.86 There was an impressive range of therapeutic groups, including social skills, 'feeling low and worried', and creative groups. Prisoners were proud of their artwork, which was displayed in the health care centre and was due to be displayed in the visitors' centre and at an exhibition in Sittingbourne. The prison had received four awards in 2015 from the Koestler Trust, a charity that helps detainees' lead more positive lives by motivating them to participate and achieve in the arts.
- 2.87 Prisoners attended individual sessions in the health care centre, and there was assertive outreach on the wings. Interventions included one-to-one psychological therapies and psychiatrists' clinics, including a monthly attention deficit hyperactivity disorder (ADHD) clinic. An effective weekly multidisciplinary team meeting reviewed ongoing care and new referrals.
- 2.88 There were approximately 53 referrals a month from self-referral or from staff. Mental health assessments were carried out within 10 working days, and within two working days if more urgent. Care planning and progress notes were of a good standard. The current team caseload was 68, and the therapeutic group caseload was 125. The care programme approach was used effectively for prisoners with serious and enduring mental health problems.
- 2.89 The team visited the segregation unit daily and provided a weekly enhanced review and a monthly complex case meeting, as well as input into the ACCT process (see section on self-harm and suicide prevention) The team had delivered mental health awareness training to a few custody staff and further sessions were planned when prison staff could be made available.
- 2.90 In the previous six months, there had been two transfers of patients to secure mental health units under the Mental Health Act, both within the 14-day timescale.

Recommendation

2.91 A rolling programme of mental health awareness refresher training should be provided for all custody staff.

Good practice

2.92 The promotion of arts as therapy contributed to the wellbeing and self-worth of participants in the creative therapy groups, and the display of visual arts in the prison and community and involvement with the Koestler Trust were positive initiatives.

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.

- **2.93** Prisoners did not like the food. The quality of some food and most portions were inadequate, some serveries were dirty, and too much servery equipment was defective.
- 2.94 Prisoners did not like the food; in our survey only 11% (against the comparator of 29%) said it was good. The food we sampled at lunch and dinner was mixed, and some was of an inadequate quality. Portions were much smaller than we see in other prisons that have the same budget of £2.02 per prisoner per day.
- 2.95 Menus were on a four-week cycle, with halal and other dietary needs catered for. Meal times were unpredictable, with only some being served around the times suggested in our previous recommendation. (2.103)
- 2.96 Some heated trolleys were defective and food arrived on the wings below the required temperature. We saw servery workers taking food for themselves from trolleys en route to the wings and going past staff without being challenged. We found dirty serveries on some wings, with broken equipment and leftover food out in trays and on surfaces overnight. Microwaves and toasters on the wings were widely used by prisoners cooking shop-bought food to supplement the small meals served.

Recommendations

- 2.97 The quality of the food and portions served should be of a better quality and adequate size.
- **2.98** All serveries should be kept clean and well maintained. (Repeated recommendation 2.102)

Purchases

Expected outcomes:

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

- **2.99** Most prisoners were satisfied with the range of goods available from the prison shop. The prison had responded to the growth in online shopping by allowing some prisoners limited supervised access to online catalogues.
- 2.100 The prison shop arrangements were generally effective. New arrivals were offered a reception pack, and a second top-up pack if they had missed the weekly shop order date. In our survey, only 41% of black and minority ethnic prisoners said the shop sold a wide enough range of goods to meet their needs, against 66% of white prisoners. However, across

- the prison as a whole, 62% of respondents felt the shop sold a wide enough range of goods, against the comparator of 48%. There was consultation about the shop at the monthly prisoner consultative meeting, and changes could be made to the shop list every 13 weeks.
- **2.101** Prisoners could shop from a small number of catalogues and order newspapers and magazines weekly. Many catalogue suppliers had moved to online trading, and the prison had responded well by allowing prisoners limited supervised access to online catalogues.

Good practice

2.102 Prisoners were allowed to shop from online catalogues, under supervision.

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.⁷

- **3.1** Most prisoners now had good access to time out of cell on weekdays. Access to exercise was good but the yards remained stark.
- 3.2 During our inspection, the restricted regime that had been operating for the previous 12 months was removed on weekdays. This meant that a fully employed prisoner could now achieve over 10 hours out of their cell on a weekday, while an unemployed prisoner had over seven hours, which was good. However, there was some slippage in the movement of prisoners to activities. Access to association was good during weekdays but time out of cell at the weekend was as little as four hours a day.
- 3.3 At roll checks during the core working day, we found an average of 7% of prisoners locked in their cells, which was better than we normally see, although around a third of those unlocked were not purposefully engaged. Access to exercise was good but exercise yards continued to be stark.

Recommendation

3.4 Exercise yards should contain seating and exercise equipment.

⁷ 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.

- Particularly effective partnership working between the college and prison managers had resulted in improvements in educational and vocational achievements, and in the quality of teaching, learning and assessment. However, too many prisoners failed to attend their allocated activities, especially in education. The prison had not considered a wide enough range of information when designing the curriculum. The Manchester College managed well the provision for which it was responsible. The prison provided sufficient activity places, with a good range of vocational courses and prison work, but far too many places were not used. Although teaching, training and assessment were now good, the teaching of activities and subjects were not always put into an appropriate context for prisoners. Prisoners developed employability skills and many gained self-confidence in their work, which helped to improve their chances of employment. The library was a useful resource but underused.
- **3.6** Ofsted⁸ made the following assessments about the learning and skills and work provision:

Overall effectiveness of learning and skills and work:

requires improvement

Achievements of prisoners engaged in learning and skills and work:

good

Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:

Personal development and behaviour

requires improvement

Leadership and management of learning and skills and work:

requires improvement

Management of learning and skills and work

- 3.7 The leadership and management of learning and skills and work had benefited from partnership working between prison and college managers, which had resulted in good achievements for prisoners and good teaching, learning and assessment. However, further improvements were required, particularly from prison managers who had been unable to ensure that prisoners attended scheduled activities. (See main recommendation S38.)
- 3.8 The Manchester College's (TMC) curriculum managers were highly effective and worked very hard to maintain the quality of provision, despite prison managers' failure to secure prisoners' attendance at activities. The college's education manager had implemented robust performance management procedures for identifying weak college teachers and trainers, and helping them improve through good quality professional support and development. This approach had resulted in the departure of several weak teaching and training staff and an overall improvement in the quality of teaching, training and assessment.

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.

- 3.9 Prison and college managers made good use of data on performance and course achievement to manage the overall quality of provision and to support self-assessment judgements, which were generally accurate and realistic. The observation of teaching and learning was effective in helping teachers and trainers to improve their practice, and college managers made good use of learner feedback to review the quality of provision.
- 3.10 Although the prison provided a range of learning and skills and work activities, this provision was not based on a sufficiently robust needs analysis that clearly related labour market information, regional priorities and employer needs to the curriculum. Prison and college managers had made good links with several employers that had led to a range of commercially-run and managed prison industries and, in a few cases, opportunities for men to gain employment on release. However, prison managers had not developed a long-term strategy for further developing employer links to promote effectively the prison's role in resettling prisoners.

3.11 The prison should carry out a comprehensive needs analysis and develop stronger links with employers to ensure that the curriculum is more closely matched to the needs of prisoners, employers and the regional economy.

Provision of activities

- 3.12 The prison provided around 720 activity places, which was sufficient to enable prisoners to engage in full-time or part-time activities throughout the week. The process of allocating prisoners to purposeful activities was effective, and took account of their interests and prior attainment. However, despite routine over-allocation, too many prisoners failed to attend their allotted activities. Custodial managers and wing officers did not always ensure that once prisoners were unlocked in the morning and afternoons that they actually arrived at their scheduled activity. In many cases, prison staff readily accepted the reasons given by prisoners for returning to their cells when they should have been in learning, skills or work activities. Prison managers acknowledged this problem but had not been able to resolve it satisfactorily. (See main recommendation S38.)
- 3.13 New arrivals received appropriate information on the learning opportunities available during their prison induction. However, the college staff's assessment of their mathematics and English skills during induction and subsequently was not consistently reliable. As a result, a few prisoners were studying these subjects at too low a level. Assessment was not sufficiently timely, and often did not take place until two weeks after the prisoner's arrival.
- 3.14 The range of courses was good. Prisoners could study at entry level and levels 1, 2 and 3, as well as at undergraduate level with the Open University. The range and quality of vocational work opportunities were also good.
- 3.15 The prison ran several workshops on a commercial basis, which provided opportunities for prisoners to work in realistic working environments in assembly, furniture recycling, bicycle maintenance and stonemasonry. However, on occasions there was not enough work to fully occupy prisoners. Prisoners also worked in the kitchens, laundry and gardens. A minority of work, such as wing cleaning and headphone refurbishment was menial and did not sufficiently contribute to prisoners' resettlement.

- 3.16 Prison managers should take swift action to ensure that all prisoners attend the activities to which they are allocated.
- 3.17 College managers should ensure that the initial assessment of prisoners' English and mathematics skills is accurate and timely.

Quality of provision

- 3.18 Learning and skills sessions had improved considerably since the previous inspection, and few lessons were now less than good. In the majority of classes, well-planned activities engaged and motivated prisoners effectively and enabled them to make at least reasonable and often good progress. In a minority of sessions, activities kept prisoners occupied but did not provide sufficient challenge, and the progress of a few prisoners in these sessions was too slow.
- 3.19 Training in vocational workshops was generally of better quality than taught classroom sessions, and prisoners were enthusiastic about the range of new skills and experiences that the workshops helped them to acquire. Vocational training workshops were well equipped, clean and provided a good purposeful work environment that prisoners responded to positively. Most prisoners made good progress and developed useful practical skills in cycle maintenance, waste management, plumbing, brickwork and carpentry. Prisoners enjoyed the time they spent in the workshops and were proud of their progress and achievements.
- 3.20 Tutors and workshop trainers had good knowledge and understanding of their subject areas, which they used effectively to help prisoners. The quality of feedback on prisoners' written and practical work was generally good and helped them understand how they could improve. Computer and specialist resources used in web design and radio production courses were good, and enabled prisoners to work productively and make good progress. In a few lessons, prisoners' tasks and assignments were set in contexts that meant little to them, which hampered their understanding of how they could apply their newly learned skills in their work or personal lives.
- **3.21** Support for prisoners with additional needs was readily available. Learning support assistants provided effective, short and focused interventions for learners diagnosed as needing additional support with dyslexia and other conditions. Most classes also benefited from prisoner mentors who provided useful subject-specific support to prisoners.

Recommendation

3.22 College managers should ensure that assignments and tasks are meaningful, and that prisoners are stretched and challenged in lessons.

Personal development and behaviour

3.23 Prisoners following courses in practical subjects, such as bookkeeping, web design, waste management and cycle maintenance, developed self-confidence and skills that prepared them well for education, employment and training on release. Their behaviour was good and they demonstrated an appropriate work ethic and respect for each other and for staff. However, the further development of prisoners' readiness for life after prison was hampered by the

- failure of too many of them to attend scheduled activities, especially classroom learning sessions. Their attendance at vocational training workshops and at prison work was generally better. Many prisoners chose to remain in their cell when they should have been attending education, often claiming that they were ill or that education staff had turned them away.
- 3.24 Most men were able to make informed decisions about the next steps in their education, employment, self-employment or training, but a minority did not have a clear idea of how their education, training and work in the prison linked to their future employment goals. (See also paragraph 4.34.)

- 3.25 All staff should actively promote a positive attitude to learning, skills and work, supported by effective prison-wide strategies that result in significantly improved attendance at purposeful activities, especially in education.
- 3.26 Careers advisers should ensure that they have all the information necessary to enable them to prepare long-term resettlement plans for prisoners.

Education and vocational achievements

- 3.27 Prisoners made good progress in learning and skills activities. Most prisoners' practical and written work was of good quality. However, a minority of prison work, such as in the commercially run plastic pipework assembly and headphone refurbishment workshops, continued to be insufficiently challenging.
- 3.28 Achievements of qualifications on college courses were good and much better than at the last inspection. Retention was high. The achievement of functional skills qualifications in English and mathematics, especially at entry levels, was also improving but was not yet good enough. The achievement of functional skills qualifications in English at level 2 was low.
- 3.29 In prison workshops, prisoners developed a range of useful employability skills and worked hard to complete the demanding tasks set. Prisoners had a good understanding of health and safety, which trainers and prison staff routinely reinforced.
- **3.30** There were few performance differences between different groups of prisoners, and the few disparities found at the last inspection had been largely eradicated.

Recommendations

- 3.31 College managers should identify and take action to address the reasons for prisoners' poor achievement in functional skills qualifications in English at level 2.
- 3.32 Prison managers should ensure that the commercially run prison industries work is more challenging and realistic enough to prepare prisoners for employment.

Library

3.33 The library service, provided by Medway Council, was effectively run and managed. It offered a range of attractively displayed fiction and non-fiction, including in foreign languages. Prisoners could also read magazines and daily newspapers, as well as textbooks to support

- vocational training courses and physical education. Copies of Prison Service Instructions and Orders and legal texts were readily available. There were enough computers for private study and research.
- 3.34 Library opening hours were appropriate and provision for prisoners who worked full time was satisfactory. A drop-in service allowed prisoners to exchange or return books when they were moving to morning or afternoon activities in work or education. However, fewer than half of prisoners took up the opportunity to use the library. Library staff collected basic data on the number of prisoners using the library but there was little analysis of this to improve attendance. In our survey, only 25% of respondents said that they used the library once a week, against the comparator of 44%. There was a library outreach service to the segregation unit, as well as for older prisoners and those with disabilities on their wing.
- 3.35 The library staff actively promoted literacy and reading through encouraging prisoners to participate in activities such as Storybook Dads (enabling prisoners to record a story for their children) and the Six-Book Challenge (where participants choose and review six reads, and enter prize draws). However, there were not enough activities for prisoners who did not visit the library regularly.

3.36 Library staff should make better use of the available data to promote improved use of library resources.

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.

- 3.37 The PE department provided a range of equipment and resources, although one of the gyms lacked showers. Activities were often cancelled as gym staff were redeployed to other prison duties. No PE-related qualifications were offered. There was limited use of data to promote gym attendance through targeted activities.
- 3.38 The physical education (PE) department provided reasonably good facilities, which included three separate areas for free weights, resistance and cardiovascular equipment, and two good-sized multi-use sports halls. Outside facilities included an all-weather sports area as well as a grass pitch. There were sufficient shower facilities in the upper gym but there were no showers in the lower gym, and prisoners had to shower on their wings after activities instead.
- 3.39 Relations between the PE staff and prisoners were positive and courteous. PE staff made good use of gym orderlies to provide peer support during gym sessions. However, too many gym sessions were cancelled because prison managers redeployed PE staff to other duties. The PE department did not offer any sport or health-related qualifications.
- 3.40 Induction into the gym was appropriate, with an emphasis on the safe use of equipment and on healthy lifestyles. Prisoners who wanted to use the gym were allocated two sessions a week, with evening sessions available to prisoners employed in the prison, in full-time education or on enhanced status. Weekend access was available on request, but depended

on staff availability. The gym was not promoted enough to prisoners who did not attend. Data on gym use were not used sufficiently well to identify if specific groups of prisoners were not using it or to develop strategies to encourage more prisoners to use the facilities for their health and wellbeing.

Recommendations

- 3.41 The PE department should provide industry-recognised qualifications to improve prisoners' employability on release.
- 3.42 Prison managers should significantly reduce the number of gym sessions cancelled as a result of the redeployment of PE staff to other duties.
- 3.43 PE staff should actively promote PE and the health benefits to encourage greater participation.

Section 3. Purposeful activity	
50	HMP Rochester

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

Planning for a prisoner's release or transfer starts on their arrival at the prison. Resettlement underpins the work of the whole prison, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need. Good planning ensures a seamless transition into the community.

- 4.1 The overall management of resettlement was disjointed and required improvement. The reducing reoffending meetings were not sufficiently strategic and did not adequately discuss the role of offender management. The role of the offender management unit (OMU) was poorly communicated to prisoners and residential staff. Oversight, supervision and development of offender supervisors were poor.
- 4.2 Since the previous inspection, Rochester had been designated as a resettlement prison for Kent, Surry and Sussex, and the Kent, Surrey and Sussex Community Rehabilitation Company Ltd (CRC)⁹ had taken over responsibility for some resettlement and through-thegate provision. The impact of these changes was limited as the CRC had subcontracted this work to the existing provider, Depaul. This work was still in the planning stage, and the through-the-gate service had not yet been implemented.
- 4.3 The overall management of resettlement was disjointed and required improvement; the strategic and operational links between resettlement pathways work and offender management were underdeveloped. The reducing reoffending strategy was not informed by an up-to-date prisoner needs analysis, although this was taking place at the time of the inspection. The strategy was reasonably wide-ranging but did not reflect current practice in induction, the OMU or pathways work.
- 4.4 Monthly reducing reoffending meetings, chaired by the functional head, did not always take place and were often poorly attended by staff from a wide range of departments, including OMU. The meetings concentrated on some pathways work and rarely discussed the role of offender management.
- 4.5 There was poor communication with prisoners and residential staff about the role of the OMU and what could be expected from offender supervisors, which led to unnecessary frustrations among prisoners (see recommendation 4.20). As at the previous inspection, management oversight, supervision and development of all offender supervisors were poor.
- 4.6 Provision for prisoners to work outside the prison through release on temporary licence (ROTL) had reduced significantly since the last inspection, and no prisoners had been out on ROTL in the previous six months. Although this was partially explained by the prison's swift movement of category D prisoners to open conditions (see paragraph 4.26), the lack of ROTL was a significant gap in this type of prison.

⁹ Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs, which are responsible for work with medium- and low-risk offenders. The National Probation Service (NPS) has maintained responsibility for high- and very high-risk offenders.

4.7 The prison should develop its release on temporary licence provision.

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.

- 4.8 Most prisoners arrived without an OASys assessment, and many had not had a basic custody screen, which placed unnecessary pressure on the OMU and had increased the backlog of OASys documents. Sentence plan targets were outcome-focused and time-bound but they did not always reflect appropriate risk factors. Offender supervisor contact with prisoners was variable, and in most cases we reviewed there was no current or sufficient risk management plan. Home detention curfew (HDC) processes were good.
- 4.9 Since the previous inspection, the prison had moved to the 'dual role' model for offender supervisors, who also now worked on the residential wings as well as in the OMU. Although there had been significant staffing shortages, at the time of the inspection the department was fully staffed with 16 prison offender supervisors spending approximately 50% of their time in the OMU. Cross-deployment was now low and the OMU also had one probation service officer and one probation officer. A part-time senior probation officer had recently been appointed.
- **4.10** Most prison offender supervisors had received no training, apart from how to complete OASys assessments, and had no professional oversight or quality assurance of their work.
- 4.11 Nearly all prisoners were transferred to Rochester before they had undergone an OASys assessment. This placed an unnecessary burden on the OMU and had led to a significant backlog of OASys assessments. At the time of the inspection, over 160 prisoners did not have an OASys, including 17 high risk prisoners who were the responsibility of external offender managers. Around 100 other prisoners had OASys assessments that were overdue, including 65 who were the responsibility of external offender managers. One prisoner we spoke to had waited 13 months for an OASys assessment, despite putting in numerous applications. In our survey, 58% of prisoners, against the comparator of 65%, said they had a sentence plan. Prisoners were negative about contact with their offender supervisor.
- 4.12 Individual offender supervisor caseloads were around 40-60, which included a mixture of prisoners both in scope and out of scope for offender management. Offender supervisors were responsible for prioritising their own workloads and in practice focused on the high risk cases (around 160), who were seen monthly. However, while contact was well recorded it was not always formal or appropriately focused on risk. There was no prescribed minimum frequency of contact for the majority of prisoners who were medium or low risk, and who had little contact with their offender supervisor. The OMU was not included in the induction for new arrivals, and there were no leaflets or posters around the prison explaining its role.
- **4.13** During the inspection, we reviewed 12 prisoner cases in detail. We saw two cases where prison staff had completed assessments that should have been done by outside probation

- staff; there was no effective process for chasing external probation staff to complete the OASys assessments for which they were responsible.
- 4.14 All the cases we sampled had a completed OASys, but nearly half did not have a sufficient and timely assessment of the prisoner's likelihood of reoffending. Sentence planning objectives were meant to be jointly with the prisoner but this did not happen. Despite this, we found that the objectives set by the offender supervisors were outcome-focused, and most prisoners we spoke to said that they understood their targets.
- 4.15 In several cases, the offender supervisor's understanding of risk was underdeveloped. A few assessments lacked the necessary detail and analysis, and some had not picked up crucial information that was available. All the relevant cases had a current risk management plan, but none of those completed by prison staff were of sufficient quality.
- 4.16 The management of HDC applications was good. Approximately 40% of prisoners eligible for HDC in the previous six months had been granted it. We found that assessments generally took place on time, and the few delayed beyond the prisoner's eligibility date were outside the prison's control.

- 4.17 All offender supervisors should receive regular reviews and personal development support, particularly around risk reduction, through supervision and casework management. (Repeated recommendation 4.18)
- 4.18 The prison should undertake a full review of outstanding OASys assessments and reviews, and implement a plan to address the backlog.
- 4.19 Prisoners should be informed about the role of the offender management unit and what they could expect from their offender supervisor on arrival at Rochester.
- 4.20 The prison should hold regular sentence planning boards, with contributions from all relevant departments, that set outcome-focused objectives for each prisoner, which are recorded on the case management system.
- 4.21 The prison should ensure that external offender managers complete assessments for high risk prisoners.

Public protection

- 4.22 Management of child safeguarding arrangements and implementation of communications and monitoring were robust and demonstrated very good links between public protection and other departments. The public protection policy was comprehensive and screening procedures for new arrivals remained appropriate. Prisoners requiring mail and/or telephone monitoring for child protection purposes or because of harassment were identified and appropriate action taken.
- 4.23 Well-attended interdepartmental risk meetings were held monthly with their minutes distributed to relevant departments. All high risk prisoners were discussed on their reception, then again at seven months and two months before their release. However, there was no system to identify the number of prisoners subject to multi-agency public protection

- arrangements (MAPPA) who did not have a current OASys assessment or to prioritise them for OASys completion.
- 4.24 The process to ensure that MAPPA levels were assigned sufficiently close to release was ineffective. We found some MAPPA-eligible prisoners who were very close to release who had not been assigned a MAPPA risk management level which impeded effective resettlement planning.

4.25 The prison should ensure that all multi-agency public protection arrangements (MAPPA) eligible prisoners are identified and are assigned a MAPPA risk management level at least six months before their release.

Categorisation

4.26 Recategorisation reviews were timely and the decisions we reviewed were reasonable. The pressure on space in the open estate had eased since the previous inspection, and prisoners recategorised to category D were now moved swiftly to open conditions.

Indeterminate sentence prisoners

4.27 The prison held a small number of indeterminate sentence prisoners, who were appropriately managed by a probation officer. There was little specific provision for this group, but prisoners were assisted individually to prepare for parole hearings through mock boards.

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.

- **4.28** Prisoners' immediate needs were assessed on their arrival but not all prisoners were offered support before release. Most resettlement pathway work was adequate but uncoordinated, and provision for maintaining family ties and accommodation outcomes had deteriorated.
- 4.29 Since the previous inspection, Rochester had been designated a resettlement prison and released approximately 50 prisoners a month. The community rehabilitation company had subcontracted resettlement provision to the charity Depaul UK, which was well established at the prison. There were plans to enhance through-the-gate provision but these had not yet been implemented.
- 4.30 All new arrivals received a needs assessment, but only those identified as in need were followed up before their release, when Depaul saw them 12 weeks beforehand. Although there was meant to be a meeting for all prisoners with their offender supervisor and Depaul four weeks before release, this rarely happened. Communication between Depaul, the

college and other providers required improvement to reduce the duplication of work and ensure that all prisoner needs were met before release.

Recommendations

- 4.31 All prisoners should have a pre-release assessment, informed by contributions from departments across the establishment, before their release. (Repeated recommendation 4.25)
- 4.32 Agencies involved in resettlement should improve the coordination of their activities and information sharing to avoid duplication.

Accommodation

4.33 Depaul UK provided accommodation services and consistently worked with around 20 prisoners at a time. All new arrivals had their needs assessed during induction, and issues that required immediate attention were addressed. In our survey, more prisoners than the comparator said they knew who in the prison they could turn to for help with accommodation. Despite this, the number of prisoners who left with no accommodation to go to had risen to 6% in the previous six months, and we found some of these had not been offered support before release.

Education, training and employment

- 4.34 The quality of the careers service, subcontracted to CXK by the National Careers Service, required improvement. CXK advisers interviewed prisoners soon after they arrived at the prison, and drew up useful action plans to meet their short-term learning and skills and work needs. However, CXK advisers rarely had access to prisoners' sentence plans at these interviews, and as a result they did not address prisoners' longer term resettlement needs. Interviews with prisoners were not sufficiently confidential as they took place in a room where other prisoners were often within earshot. The current contract had been in place for too short a time to assess the scope and frequency of any subsequent interviews.
- 4.35 The college had recently introduced a well-conceived pre-release course, with CXK advisers offering expert help to prisoners on matters such as disclosure and improving CVs, but it was too early to assess its impact. While there were useful links with Depaul and The Manchester College in the prison, activity and information sharing was not yet well enough coordinated. For example, much of the information and guidance CXK provided at prisoners' initial interviews duplicated The Manchester College's earlier induction, while DePaul carried out similar interviews with prisoners in the weeks before their release (see recommendation 4.31).
- 4.36 The use and effectiveness of the prison's 'virtual campus' to give prisoners internet access to community education, training and employment opportunities were very limited. The prison had good links with several employers, which were effective in helping prisoners obtain work on release, but had yet to establish a clear strategy for developing its employer involvement.

Recommendations

4.37 CXK advisers should have timely access to prisoners' sentence plans to ensure that they can consider their longer term resettlement needs.

4.38 The virtual campus should be used regularly used to help prisoners prepare for resettlement.

Housekeeping point

4.39 The prison should provide suitable locations for careers guidance interviews to be carried out in private.

Health care

4.40 Health care discharge planning arrangements were timely and appropriate, with prisoners given a week's supply of medication on a risk-assessed basis, where relevant. Pre-release planning for patients with enduring mental health problems was effective.

Drugs and alcohol

4.41 Resettlement outcomes for prisoners with substance misuse issues were good. A RAPt transitional support worker offered support for six weeks before and after release, and linked into the trust's national transitional support volunteer network. The network provided a meet-and-greet service for the prisoner on release at the gate, transport to his home and/or first appointments and post-release mentoring support.

Good practice

4.42 The consistency of the pre- and post-release support offered by the RAPt transitional support worker was effective for prisoners with substance misuse problems.

Finance, benefit and debt

4.43 Prisoners' finance, benefit and debt needs were assessed during their induction and Depaul staff assisted with immediate issues. Depaul continued to be successful in arranging the write-off or suspension of significant sums of outstanding debt. Prisoners could now open bank accounts before release, and Depaul facilitated around 10 applications a month. Specialist debt advice previously available through Citizens Advice had ceased.

Children, families and contact with the outside world

- 4.44 Provision to support prisoners' family ties was limited and had deteriorated since our last inspection. Although there had been family visits for enhanced-status prisoners during the school summer holidays, these had stopped due to lack of resources.
- 4.45 General visits took place Monday to Thursday and Sunday afternoons and Saturday mornings. It was easy to book visits, which could now also be booked by email. The visitors' centre provided few facilities, apart from a booking-in service, toilets and lockers, but the staff were friendly and particularly helpful to new visitors. Visitors we spoke to said that staff generally treated them well. The process for visitors to go into visits and be searched was lengthy and sometimes delayed the start of the visits session.

- 4.46 The visits hall was small but clean and bright. A refreshment facility provided hot and cold food and drinks as well as vending machines. The children's play area was poorly equipped and not staffed. Visits staff were informed of any restrictions on visitors and prisoners, such as child protection matters and closed visits. There were four closed visits booths, which were away from the main visits hall. Prisoner and visitors had access to toilet facilities during visits without their visit being curtailed.
- 4.47 The charity PACT (Prison Advice and Care Trust) had begun a welcome initiative with a family worker, and was funded to support difficult-to-reach prisoners and their families, including through groupwork and mediation. Prisoners could take advantage of the Storybook Dads scheme (see also paragraph 3.37) and record stories on CDs and DVDs for their children.

4.48 Provision under the children and families pathway should be developed to provide a comprehensive service to enable prisoners to maintain, develop and renew family ties.

Attitudes, thinking and behaviour

4.49 The interventions available to address the likelihood of reoffending and risk of harm were the thinking skills programme (a cognitive skills programme addressing offenders' thinking and behaviour) and Resolve (a cognitive-behavioural intervention for violent offenders). There were no delays in prisoners accessing these interventions. There was a waiting list for the Sycamore Tree victim awareness course run by the chaplaincy. Contact logs showed evidence of staff preparing and motivating prisoners before they attended these programmes. There was no one-to-one work for prisoners who did not meet the criteria for specific programmes, such as those convicted of domestic violence offences. Too many prisoners who did not have an up-to-date OASys assessment could not access offending behaviour programmes (see recommendation 4.19).

Section 4. Resettlement	
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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 The prison should take urgent action to address the availability of new psychoactive substances and illicit drugs. Managers should ensure that staff challenge prisoners who are clearly under the influence of drugs, and work to reduce high levels of violence and debt-related bullying, ensuring that victims of violence are supported and perpetrators challenged. (S35)
- 5.2 All cells and communal areas should be clean, free of graffiti and kept at a suitable temperature. Offensive displays should be removed. Prisoners should be able to get adequate clean clothes, bedding, towels and furniture in their cells. (\$36)
- 5.3 Diversity and equality plans should include strategic objectives to progress work across all diversity strands. They should identify and meet the needs of prisoners with protected characteristics. This should include regular consultation with prisoners and actions to improve perceptions and outcomes for these groups. Links with external community groups and agencies should be strengthened to provide support to prisoners with protected characteristics. (S37)
- **5.4** Prison managers should carry out a thorough analysis of prisoner attendance at activities, and implement robust strategies to ensure that they attend their scheduled activities. (S38)
- There should be a clear strategic direction for the offender management unit, which informs the reducing reoffending strategy, and an in-depth prisoner needs analysis, using OASys (offender assessment system) data, induction information and prisoners' views, should inform annual reviews of resettlement provision. (S39)

Recommendations

To the governor

Courts, escort and transfers

5.6 Prisoners should be disembarked from escort vehicles swiftly. (1.3)

Early days in custody

- **5.7** First night cells should be clean, prepared and appropriately equipped for new arrivals. (1.9, repeated recommendation 1.15)
- **5.8** There should be staff handover arrangements and enhanced checks to monitor new arrivals. (1.10)

5.9 All prisoners should receive an induction that is comprehensive and timely. (1.11)

Self-harm and suicide

- **5.10** The prison should implement the recommendations arising from investigations into deaths in custody, and regularly check these for compliance. (1.23)
- 5.11 Prisoners subject to assessment, care in custody and teamwork (ACCT) case management should only be held in the segregation unit in exceptional circumstances, and the constant observation cell should not be located there. (1.24)
- 5.12 All staff who undertake night duty should carry anti-ligature knives and know the code system to use in the event of a serious incident of self-harm. (1.25)

Safeguarding

5.13 The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.30, repeated recommendation 1.37)

Security

- **5.14** Security objectives should be fully disseminated to all staff to ensure adequate feedback on areas of most concern. (1.40)
- **5.15** Prisoners clearly under the influence of drugs should be challenged by staff or offered medical assistance if appropriate. (1.41)

Incentives and earned privileges

5.16 The incentives and earned privileges (IEP) scheme should be fully implemented and reviews carried out at appropriate times. (1.45)

Discipline

- **5.17** There should be regular adjudications monitoring meetings, and regular quality assurance of individual records to ensure that they are appropriate. (1.49)
- 5.18 There should be quality assurance procedures and accountability for the use of force to ensure that all incidents, including planned interventions, are fully documented and reviewed quickly to assess if force was used proportionately and as a last resort. (1.53)
- 5.19 All use of special accommodation should be authorised, and documentation should be fully completed and give a clear indication of the prisoner's level of search and the clothing they are given. (1.54)
- 5.20 The role of the segregation unit should be clearly defined, with supporting policies and procedures that include individual assessments of prisoners for their access to regimes, care and reintegration planning, and realistic targets to challenge poor behaviour. (1.59)
- **5.21** Cells and showers on the segregation unit should be cleaned, and graffiti in all areas should be removed. (1.60)

Residential units

5.22 Prisoners should be able to pay for in-cell telephones by instalments, and applications to purchase them should be dealt with promptly. (2.8)

Staff-prisoner relationships

- Fig. 8.23 Rules and expected standards of prisoner behaviour should be clear and enforced by all staff. (2.14)
- Personal officer entries in prisoners' case notes should evidence good knowledge of the prisoners they are responsible for, and regular management checks should assess the quality of staff records and encourage meaningful staff engagement with prisoners and their sentence plans. (2.15)

Equality and diversity

- **5.25** Equality monitoring data should be extended to more areas of prisoner treatment, analysed thoroughly and any patterns or trends fully investigated. (2.23)
- **5.26** The prison should investigate and address the reasons for the low number of discrimination incident reporting forms submitted. (2.24)
- There should be formal interventions to challenge prisoners who engage in racist behaviour. (2.25, repeated recommendation 2.33)

Faith and religious activity

5.28 Necessary maintenance work should be carried out in the old multi-faith room. (2.37)

Complaints

5.29 Responses to complaints should be prompt. (2.42)

Health services

- 5.30 The health care department should be fully involved in future changes to the prison regime and other prison issues that affect service delivery and patient safety. (2.57)
- There should be a comprehensive health needs assessment to ensure that the services commissioned meet the needs of the population. (2.58)
- **5.32** All clinical areas should comply fully with infection control guidelines. (2.59)
- 5.33 Prisoners requiring emergency first aid should have prompt access to appropriately trained custody staff and well-maintained equipment, including defibrillators that receive regular documented checks. (2.60)
- Prisoners should have prompt access to the optician, and the failure-to-attend rate for all clinics should be monitored and appropriate remedial action taken to reduce it. (2.70)
- There should be robust monitoring of external hospital appointments, and escort arrangements should be adequate to avoid unnecessary cancellations. (2.71)

- 5.36 The medicines management committee should ensure there is a robust in-possession medication policy that reflects the needs of the patients, the medicines and the security issues in the prison, and which is regularly audited to ensure compliance, and that the patient group directions are up to date. (2.79)
- **5.37** Discipline staff should regularly supervise all medicine administrations to ensure patient confidentiality and reduce the risk of bullying and trading. (2.80)
- **5.38** Medicines taken to the segregation unit should be transported safely. (2.81)
- **5.39** A rolling programme of mental health awareness refresher training should be provided for all custody staff. (2.91)

Catering

- **5.40** The quality of the food and portions served should be of a better quality and adequate size. (2.97)
- **5.41** All serveries should be kept clean and well maintained. (2.98, repeated recommendation 2.102)

Time out of cell

5.42 Exercise yards should contain seating and exercise equipment. (3.4)

Learning and skills and work activities

- 5.43 The prison should carry out a comprehensive needs analysis and develop stronger links with employers to ensure that the curriculum is more closely matched to the needs of prisoners, employers and the regional economy. (3.11)
- **5.44** Prison managers should take swift action to ensure that all prisoners attend the activities to which they are allocated. (3.16)
- **5.45** College managers should ensure that the initial assessment of prisoners' English and mathematics skills is accurate and timely. (3.17)
- **5.46** College managers should ensure that assignments and tasks are meaningful, and that prisoners are stretched and challenged in lessons. (3.22)
- **5.47** All staff should actively promote a positive attitude to learning, skills and work, supported by effective prison-wide strategies that result in significantly improved attendance at purposeful activities, especially in education. (3.25)
- **5.48** Careers advisers should ensure that they have all the information necessary to enable them to prepare long-term resettlement plans for prisoners. (3.26)
- **5.49** College managers should identify and take action to address the reasons for prisoners' poor achievement in functional skills qualifications in English at level 2. (3.31)
- Prison managers should ensure that the commercially run prison industries work is more challenging and realistic enough to prepare prisoners for employment. (3.32)

5.51 Library staff should make better use of the available data to promote improved use of library resources. (3.36)

Physical education and healthy living

- The PE department should provide industry-recognised qualifications to improve prisoners' employability on release. (3.41)
- 5.53 Prison managers should significantly reduce the number of gym sessions cancelled as a result of the redeployment of PE staff to other duties. (3.42)
- **5.54** PE staff should actively promote PE and the health benefits to encourage greater participation. (3.43)

Strategic management of resettlement

5.55 The prison should develop its release on temporary licence provision. (4.7)

Offender management and planning

- 5.56 All offender supervisors should receive regular reviews and personal development support, particularly around risk reduction, through supervision and casework management. (4.17, repeated recommendation 4.17)
- The prison should undertake a full review of outstanding OASys assessments and reviews, and implement a plan to address the backlog. (4.18)
- **5.58** Prisoners should be informed about the role of the offender management unit and what they could expect from their offender supervisor on arrival at Rochester. (4.19)
- **5.59** The prison should hold regular sentence planning boards, with contributions from all relevant departments, that set outcome-focused objectives for each prisoner, which are recorded on the case management system. (4.20)
- The prison should ensure that external offender managers complete assessments for high risk prisoners. (4.21)
- 5.61 The prison should ensure that all multi-agency public protection arrangements (MAPPA) eligible prisoners are identified and are assigned a MAPPA risk management level at least six months before their release. (4.25)

Reintegration planning

- 5.62 All prisoners should have a pre-release assessment, informed by contributions from departments across the establishment, before their release. (4.31, repeated recommendation 4.25)
- **5.63** Agencies involved in resettlement should improve the coordination of their activities and information sharing to avoid duplication. (4.32)
- **5.64** CXK advisers should have timely access to prisoners' sentence plans to ensure that they can consider their longer term resettlement needs. (4.37)

- 5.65 The virtual campus should be used regularly used to help prisoners prepare for resettlement. (4.38)
- **5.66** Provision under the children and families pathway should be developed to provide a comprehensive service to enable prisoners to maintain, develop and renew family ties. (4.48)

Housekeeping points

Courts, escort and transfers (To Prisoner Escort and Custody Services)

5.67 Escort vehicles should be kept clean. (1.4)

Self-harm and suicide

- **5.68** Prisoners should have better access to Listeners. (1.26)
- **5.69** Attendance by security staff and prisoner representatives at the safer custody meeting should be consistent. (1.27)

Residential units

5.70 Prisoners should only be charged for a television when they have been supplied with one. (2.9)

Equality and diversity

5.71 All core functions should be represented at equality and diversity team meetings. (2.26)

Faith and religious activity

5.72 All prisoners who wish to attend group worship should be unlocked to do so, unless risk assessment indicates otherwise. (2.38)

Complaints

5.73 Complaint forms should be available on residential units and stocks checked. (2.43)

Health services

- 5.74 Health care complaints should be recorded separately from a prisoner's clinical record, and lessons learned from complaints and clinical incidents should be shared with health care staff.(2.61)
- Health promotion material should be available in an easy-read format and a range of languages, and health care notice boards on the units should display useful information about health care, including the availability of barrier protection. (2.62)
- 5.76 Prisoners with lifelong conditions should have an evidence-based care plan, and staff should use assessment templates based on national guidance. Clinical records should be audited to ensure a consistent approach. (2.72)

- **5.77** Access to the controlled drugs keys should be robustly recorded, and the medication trolley should be appropriately secured to the wall. (2.82)
- **5.78** The RAPt team should record the daily cleaning and maintenance of the Methameasure machine. (2.83)

Reintegration planning

5.79 The prison should provide suitable locations for careers guidance interviews to be carried out in private. (4.39)

Examples of good practice

- **5.80** The 'reading well books on prescription' was a positive initiative that enhanced the individual's understanding of their health condition and promoted wellbeing. (2.73)
- 5.81 The promotion of arts as therapy contributed to the wellbeing and self-worth of participants in the creative therapy groups, and the display of visual arts in the prison and community and involvement with the Koestler Trust were positive initiatives. (2.92)
- **5.82** Prisoners were allowed to shop from online catalogues, under supervision. (2.102)
- 5.83 The consistency of the pre- and post-release support offered by the RAPt transitional support worker was effective for prisoners with substance misuse problems. (4.42)

Section 5. Summary of recommendations and housekeeping points	
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Section 6. Appendices

Appendix I: Inspection team

Martin Lomas Deputy Chief inspector

Deborah Butler Team leader Karen Dillon Inspector Angela Johnson Inspector Andrew Lund Inspector Angus Mulready-Jones Inspector Alissa Redmond Researcher Joe Simmonds Researcher Sophie Skinner Researcher Heidi Webb Researcher

Specialist inspectors

Paul Roberts Substance misuse inspector Maureen Jamieson Health services inspector

Sue Melvin Pharmacist

Huw Jenkins Care Quality Commission inspector

Jai Sharda Ofsted inspector Steve Hunsley Ofsted inspector Alistair Pearson Ofsted inspector

Yvette Howson Offender management inspector Nicola McCloskey Offender management inspector

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Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, Prisoners we spoke to described the transfer and reception process as respectful and supportive. Feedback from their first night experience was mainly positive but some complained that first night cells were dirty and we observed such cells during the inspection. Induction provided relevant information. The number of violent incidents had decreased but was still too high. Prisoners at risk of self-harm or suicide were well supported and the number of self-harm incidents had reduced. Security measures were proportionate and conducive to a category C regime. There were inconsistencies regarding the administration of the incentives and earned privileges (IEP) scheme and quality assurance arrangements were weak. Disciplinary measures were reasonable and the use of force had fallen, but this trend needed to continue. While the segregation unit offered prisoners good support, we were not convinced all uses of segregation were justified. The mandatory drug testing (MDT) rate was high and more needed to be done to reduce the drug supply but therapeutic and clinical interventions were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

The prison should ensure that systems for reporting and recording violence and antisocial behaviour are robust and incidents of violence and bullying are reduced significantly. (HP60)

Not achieved

Recommendations

First night cells should be clean, prepared and appropriately equipped for new arrivals. (1.15, repeated recommendation 1.23)

Not achieved (recommendation repeated, 1.9)

All prisoners should receive induction. (1.16)

Not achieved

Information collated on violence and antisocial behaviour should be analysed and used more effectively to inform the strategy and ensure suitable interventions are in place and utilised. (1.25)

Not achieved (recommendation repeated, 1.17)

Governance arrangements for the violence reduction strategy should be improved to ensure that all incidents of violence and antisocial behaviour are investigated before sanctions are applied and sanctions should not fall below those of the basic privilege level. (1.26)

Partially achieved

The constant observation cell should not be located in the segregation unit and the governance arrangements for the use of the constant observation and safer cells should be improved. (1.33)

Partially achieved

The prison should introduce care suites. (1.34)

Not achieved

The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to further develop local safeguarding processes. (1.37)

Not achieved (recommendation repeated, 1.31)

Prisoners should only be placed on closed visits when there is sufficient intelligence to support this. (1.43, repeated recommendation 7.19)

Achieved

The mandatory drug testing (MDT) programme should be sufficiently resourced to undertake suspicion testing within the required time. (1.44, repeated recommendation 3.69)

Not achieved

Managers should carry out a weekly quality check of all prisoners recorded as basic on the P-Nomis system and ensure that the IEP policy is being adhered to for them. (1.48, repeated recommendation 7.70)

Not achieved

Information collated on disciplinary charges should be analysed and used more effectively to inform strategy. (1.51)

Not achieved

Governance arrangements of use of force and particularly the use of special accommodation should be improved including the recording of use relating explicitly to the removal of clothing in the special cell or constant observation cell. (1.56)

Not achieved

Information collated on the use of force should be analysed and used more effectively to inform strategy. (1.57)

Not achieved

All planned interventions should be video-recorded and subsequently reviewed, with appropriate action taken where necessary. (1.58, repeated recommendation 7.43)

Not achieved

The special accommodation log should record explicitly whether use relates to the special cell or gated cell or safer cell. (1.59, repeated recommendation 7.44)

Achieved

Information collated on segregation should be analysed and used more effectively to inform strategy. (1.65)

Not achieved

The communal showers in the segregation unit should be refurbished. (1.66)

Not achieved

The segregation unit and, in particular, special accommodation should only be used for prisoners on assessment, care in custody and teamwork (ACCT) monitoring in exceptional and justifiable circumstances. (1.67, repeated recommendation 7.60)

Not achieved

Good order or discipline paperwork should contain meaningful individual behaviour improvement targets. (1.68)

Not achieved

Suitable opiate substitution treatment administration facilities should be made available so that prisoners have adequate privacy and sufficient time to talk to nurses. (1.76)

Achieved

MDT positive test results data for prisoners on opiate substitution should always be shared between the primary health care team and the IDTS team. (1.77)

Achieved

The drug strategy document should include alcohol services and contain up-to-date performance measures and detailed action plans that are informed by the needs analysis. (1.78, repeated recommendation 9.65)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, accommodation varied greatly, from clean well-furnished newer accommodation in what was locally referred to as the bottom site, to the older wings in the top site that were less well maintained and dirty. Many cells in the old accommodation were in very poor condition. Most prisoners were positive about staff although this was less so among prisoners from a black and minority ethnic background. Black and minority ethnic prisoners held similarly negative perceptions of equality and diversity and we were not assured that the needs of minority groups generally were being fully met. Many young adults also reported negative experiences. Arrangements to meet prisoners' faith needs were reasonable. Prisoners expressed concerns about the complaints system and most prisoners complained about the food. We found that health care provision was reasonably good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Diversity and equality action plans should include strategic objectives to drive forward work across all diversity strands, identifying and meeting the needs of prisoners from all protected characteristics. (HP59)

Not achieved

A programme of refurbishment is required in the older accommodation with priority given to repairing broken windows. Effective pest control measures need to be implemented with immediate effect. (HP62)

Partially achieved

Recommendations

There should be a programme of cell painting and maintenance to ensure cells are of a decent standard. (2.11, repeated recommendation 2.13)

Not achieved

B wing cell toilet areas should be adequately screened to provide privacy. (2.12, repeated recommendation 2.14)

Achieved

The prison should ensure that effective pest control measures are in place. (2.13)

Achieved

The prison should develop a strategy that focuses on developing trust and respect between staff and prisoners. (2.22, repeated recommendation 2.34)

Partially achieved

The personal officer scheme should be re-launched with the emphasis on better interaction between staff and prisoners to ensure a more rounded view of individual prisoners and with links to the offender management unit further developed. (2.23, repeated recommendation 2.40)

Not achieved

There should be formal interventions to challenge prisoners who engage in racist behaviour. (2.33, repeated recommendation 4.19)

Not achieved (recommendation repeated, 2.25)

The prison should work to understand the negative perceptions of minority groups, introduce regular and meaningful consultation with them and include prisoners in celebratory cultural events. (2.43)

Not achieved

Support mechanisms for gay and bisexual prisoners should be developed. (2.44, repeated recommendation 4.45)

Not achieved

The complaint boxes should be emptied by the complaints clerk. (2.50, repeated recommendation 3.45)

Achieved

There should be a clear protocol for identifying, reporting, investigating and reviewing serious and problem incidents. (2.64)

Partially achieved

Health care emergency response equipment should be reviewed, rationalised and checked regularly. (2.65)

Achieved

A senior nurse should be responsible for the strategic development of older prisoner services. (2.66) **Achieved**

The governor should ensure there is a whole-prison health promotion strategy. (2.67)

Partially achieved

Triage algorithms should be used to support and standardise nurses' clinical decision-making. (2.77)

Partially achieved

Patients with lifelong conditions should receive regular reviews that generate an evidence based care plan. (2.78)

Partially achieved

Prisoners should be able to see a pharmacist. (2.83)

Achieved

The prescribing and administration of potentially tradable medication should reflect best practice guidelines. (2.84)

Partially achieved

All medication should be stored securely and Nursing and Midwifery Council medication management guidance should be followed consistently. (2.85)

Partially achieved

All serveries should be kept clean and well maintained. (2.102, repeated recommendation 8.8) **Not achieved** (recommendation repeated, 2.98)

Lunch should be served no earlier than 12 noon and dinner no earlier than 5pm. (2.103, repeated recommendation 8.9)

Not achieved

Prices for prison shop items should reflect the level of prison wages. (2.107, repeated recommendation 8.18)

Not achieved

Purposeful activity

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

At the last inspection, in 2013, time out of cell had improved considerably. Overall, there were sufficient activity places for the size of the population but too many remained menial or unchallenging. The management of learning and skills had become more focused, effective, collaborative and strategic, but more work was still required to meet the needs of the high and rapidly increasing proportion of adult prisoners. The number of purposeful activity places had increased, but take-up was low. The allocations process was more effective, but there were some inequities in allocating prisoners to certain activities. Prison employment was still over dependent on menial work, although some more skilled and developmental options were being introduced. Vocational teaching and learning were generally good and prisoners' achievements high. The library and its materials were good but access was poor and it was operating well below full capacity. Health promotion and gym services were good. Outcomes for prisoners were not sufficiently good against this healthy prison test. .

Main recommendation

Sufficient high quality activity that meets prisoners' needs and better equips them for progression or training and employment on release should be provided. Work and training sessions should be of a duration that makes them useful, and attendance and punctuality should be improved. (HP61)

Partially achieved

Recommendations

All prisoners should have access to exercise. (3.3, repeated recommendation 6.9)

Achieved

The environment and amenities in exercise yards should be improved. (3.4, repeated recommendation 6.10)

Not achieved

The profile of teaching and learning should be reviewed and a more accurate assessment made of the true picture of its quality in each relevant activity area taking into account, for example, the thoroughness of observation practice and assessment, the impact of teaching on learning and planning for individual learning. (3.11)

Achieved

There should be clear, consistently applied and robust procedures for the allocation of prisoners to all activities, whether education, training or work, in order to ensure consistency of practice, fairness, equality and transparency. (3.12)

Achieved

Appropriate strategies should be devised and implemented to identify the causes of and eliminate the differences in the pass rates of minority groups. (3.13)

Achieved

The range of education and training courses should be developed further to match the adult and category profile of the prison. (3.17)

Achieved

The number of advanced level education and training courses should be increased in line with adult prisoners' needs, skills and expectations. (3.18)

Partially achieved

Employment with opportunities for meaningful personal, social and employability skills development should become the norm in all prison workshops. (3.19)

Partially achieved

Punctuality should be monitored closely for signs of improvement following the introduction of the revised working day. (3.20)

Not achieved

The prison should raise the quality of teaching, learning and assessment, notably in education, through a development programme that identifies and shares consistent good practice with all teaching staff; it should also ensure that individual teachers' professional development needs are met. (3.26)

Achieved

Strategies to incorporate themes relating to equality and diversity seamlessly within the curriculum should be devised and implemented. (3.27)

Partially achieved

The pass rates on education courses in ICT and functional skills courses at intermediate and higher levels should be improved significantly from their current and historical low levels. (3.29)

Partially achieved

The prison should review and improve the appointments systems so that all prisoners have good, equitable access to the library. (3.33)

Partially achieved

Resettlement

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

At the last inspection, in 2013, strategies and policies for resettlement, public protection and offender management were in place, but were not working cohesively and were not informed by a comprehensive needs analysis. In spite of this, these strands worked reasonably effectively. Release on temporary licence (ROTL) arrangements were developing but required more focus to improve opportunities for prisoners. All prisoners had offender supervisors and resources were appropriately directed towards the management of higher risk offenders, but more focus on risk reduction was required. No formal pre-discharge planning was in place. Reintegration needs were generally being met, but there was a noticeable gap in accredited programmes. Children and families provision was good. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

A comprehensive needs analysis should be completed and used to inform the development of service provision. (4.4)

Not achieved

Additional community work placements should be found to meet the needs of the population. (4.5) **Not achieved**

All prisoners should have a completed an up-to-date OASys assessment. (4.16, repeated recommendation 9.19)

Not achieved

Sentence planning boards should include contributions from all relevant departments. (4.17, repeated recommendation 9.20)

Not achieved

All offender supervisors should receive regular reviews and personal development support, particularly around risk reduction, through supervision and casework management. (4.18) **Not achieved** (recommendation repeated, 4.18)

The transfer of category D prisoners to open establishments should be expedited. (4.6) **Achieved**

All prisoners should have a pre-release assessment, informed by contributions from departments across the establishment, before their release. (4.25)

Not achieved (recommendation repeated, 4.32)

Further links should be developed with employers, external training providers and education establishments to support prisoners in applying for and going on to courses when they leave. (4.28, repeated recommendation 9.41)

Partially achieved

Visitors should be able to purchase hot drinks in the visitors' centre and the provision of activities and refreshments in the main visits hall should be reviewed. (4.37)

Partially 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	45	576	84.7
Recall	3	45	6.5
Convicted unsentenced	0	I	0.1
Total	55	678	100

Sentence	18-20 yr olds	21 and over	%
Six months to less than 12	3	6	1.2
months			
12 months to less than 2 years	13	109	16.6
2 years to less than 4 years	28	292	43.6
4 years to less than 10 years	10	199	28.5
10 years and over (not life)	0	49	6.7
ISPP (indeterminate sentence for	0	П	1.5
public protection)			
Life	I	12	3.3
Total	55	678	100

Age	Number of prisoners	%
Under 21 years	55	7.5
21 years to 29 years	283	38.6
30 years to 39 years	226	30.8
40 years to 49 years	110	15.0
50 years to 59 years	51	7.0
60 years to 69 years: maximum	8	1.1
age=68		
Total	733	100

Nationality	18-20 yr olds	21 and over	%
British	52	661	97.3
Foreign nationals	3	17	2.7
Total	55	678	100

Security category	18-20 yr olds	21 and over	%
Category B	0		0.1
Category C	I	667	91.1
Category D	0	5	0.7
Other	54	5	8.0
Total	55	678	100

Ethnicity	18-20 yr olds	21 and over	%
White			
British	38	514	75.3
Irish	0	4	0.5
Gypsy/Irish Traveller	3	36	5.3
Other white	4	16	2.7
	45	570	83.9
Mixed			
White and black Caribbean	1	12	1.8
White and black African	0	4	0.5
White and Asian	1	1	0.3
Other mixed	0	8	1.1
	2	25	3.7
Asian or Asian British			
Indian	0	1	0.1
Pakistani	0	1	0.1
Bangladeshi	1	2	0.4
Other Asian	0	9	1.2
	1	13	1.9
Black or black British			
Caribbean	3	38	5.6
African	4	15	2.6
Other black	0	14	1.9
	7	67	10.1
Other ethnic group	0	3	0.4
Total	55	678	100

Religion	18-20 yr olds	21 and over	%
Baptist	0	2	0.3
Church of England	4	169	23.6
Roman Catholic	7	108	15.7
Other Christian denominations	13	61	10.1
Muslim	10	51	8.3
Sikh	0	1	0.1
Buddhist	0	10	1.4
Jewish	0	8	1.1
Other	0	10	1.4
No religion / not stated	21	258	38
Total	55	678	100

Sentenced prisoners only

Length of stay	18–20 yr old	18–20 yr olds		21 and over	
	Number	%	Number	%	
Less than I month	9	1.2	89	12.1	
I month to 3 months	20	2.7	154	21.0	
3 months to six months	14	1.9	159	21.7	
Six months to I year	8	1.1	180	24.6	
I year to 2 years	4	0.5	86	11.7	
2 years to 4 years	0	0	10	1.4	
Total	55	7.5	678	92.5	

Sentenced prisoners only

·	18-20 yr olds	21 and over	%
Foreign nationals detained post	0	0	0
sentence expiry			
Public protection cases	14	179	26.3
(this does not refer to public			
protection sentence categories			
but cases requiring monitoring/			
restrictions).			
Total	14	179	26.3

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Section 6 – Appendix II: Progress on recommendations from the last report	
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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 establishment¹⁰. 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 I September 2015 the prisoner population at HMP Rochester was 733. Using the method described above, questionnaires were distributed to a sample of 220 prisoners.

We received a total of 172 completed questionnaires, a response rate of 78%. Thirteen respondents refused to complete a questionnaire, 25 questionnaires were not returned and 10 were returned blank.

¹⁰ 95% confidence interval with a sampling error of 3%. The formula assumes an 80% response rate (70% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

Wing/Unit	Number of completed survey returns
Α	16
В	20
С	20
D	25
E	19
F	16
G	14
Н	28
R	9
Segregation unit	5

Presentation of survey results and analyses

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

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 differences¹¹ 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 Rochester 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 35 category C trainers since April 2011.
- The current survey responses from HMP Rochester in 2015 compared with the responses of prisoners surveyed at HMP Rochester in 2013.
- 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 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 C unit and the rest of the establishment.
- A comparison within the 2015 survey between A, B, C, D and E units and F, G, H and R units.

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

Survey summary

	Section I: About you	
Q1.2	How old are you?	
	Under 21	11 (6%)
	21 - 29	67 (39%)
	30 - 39	53 (31%)
	40 - 49	26 (15%)
	50 - 59	13 (8%)
	60 - 69	2 (1%)
	70 and over	0 (0%)
Q1.3	Are you sentenced?	
	Yes	156 (91%)
	Yes - on recall	15 (9%)
	No - awaiting trial	0 (0%)
	No - awaiting sentence	0 (0%)
	No - awaiting deportation	0 (0%)
Q1.4	How long is your sentence?	
	Not sentenced	0 (0%)
	Less than 6 months	11 (6%)
	6 months to less than 1 year	14 (8%)
	I year to less than 2 years	27 (16%)
	2 years to less than 4 years	58 (34%)
	4 years to less than 10 years	45 (26%)
	10 years or more	12 (7%)
	IPP (indeterminate sentence for public protection)	2 (1%)
	Life	3 (2%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes	5 (3%)
	No	162 (97%)
Q1.6	Do you understand spoken English?	
	Yes	167 (99%)
	No	2 (1%)
Q1.7	Do you understand written English?	
	Yes	167 (99%)
	No	2 (1%)

Q1.8	What is your ethnic origin?	125 (740()	A : A : D ::: 1	0 (00()
	White - British (English/ Welsh/	125 (74%)	Asian or Asian British - Chinese	0 (0%)
	Scottish/ Northern Irish)	((49/)	Asian an Asian Buitish athan	1 /19/)
	White - Irish	6 (4%)	Asian or Asian British - other	1 (1%)
	White - other	10 (6%)	Mixed race - white and black Caribbean	4 (2%)
	Black or black British - Caribbean	9 (5%)	Mixed race - white and black African	2 (1%)
	Black or black British - African	2 (1%)	Mixed race - white and Asian	0 (0%)
	Black or black British - other	3 (2%)	Mixed race - other	I (Ì%)
	Asian or Asian British - Indian	0 (0%)	Arab	0 (0%)
	Asian or Asian British - Pakistani	I (I%)	Other ethnic group	3 (2%)
	Asian or Asian British - Bangladeshi	2 (1%)	• • • •	- ()
Q1.9	Do you consider yourself to be Gy	nsv/Romany	/Traveller?	
Q1.7	Yes	psy/itorriany/	Travener:	15 (9%)
	No			15 (7%)
	140			131 (71%)
Q1.10	What is your religion?			
~ 1.10	None	71 (43%)	Hindu	0 (0%)
	Church of England	49 (29%)	Jewish	0 (0%)
	Catholic	26 (16%)	Muslim	10 (6%)
		, ,		` ,
	Protestant	0 (0%)	Sikh	0 (0%)
	Other Christian denomination Buddhist	4 (2%) 2 (1%)	Other	5 (3%)
	buddiist	2 (1/0)		
Q1.11	How would you describe your sexu	ual orientatio	on?	
Q	Heterosexual/ Straight		····	166 (98%)
	Homosexual/Gay			3 (2%)
	Bisexual			I (I%)
	DISCAGO			. (170)
Q1.12	Do you consider yourself to have a physical, mental or learning needs		e do you need help with any long	g term
	Yes	,,		39 (23%)
	No			129 (77%)
	, , ,			127 (77,0)
Q1.13	Are you a veteran (ex-armed servi	ices)?		
	Yes	-		6 (4%)
	No			164 (96%)
Q1.14	Is this your first time in prison?			
~	Yes			47 (28%)
	No			123 (72%)
				()
Q1.15	Do you have children under the ag	ge of 18?		
	Yes			93 (55%)
	No			75 (45%)
Section 2: Courts, transfers and escorts				
	2000000	,		
Q2.1	On your most recent journey here	, how long d	lid you spend in the van?	
	Less than 2 hours	_		110 (64%)
	2 hours or longer			53 (3Ì%) [°]
	Don't remember			8 (5%)
				` /

Q2.2	On your most recent journey here, were you offered anything to eat or drink? My journey was less than two hours Yes No Don't remember	110 (64%) 51 (30%) 8 (5%) 2 (1%)	
Q2.3	On your most recent journey here, were you offered a toilet break? My journey was less than two hours Yes No Don't remember	110 (64%) 4 (2%) 55 (32%) 2 (1%)	
Q2.4	On your most recent journey here, was the van clean? Yes No Don't remember	105 (62%) 51 (30%) 14 (8%)	
Q2.5	On your most recent journey here, did you feel safe? Yes No Don't remember	137 (80%) 32 (19%) 3 (2%)	
Q2.6	On your most recent journey here, how were you treated by the escort staff? Very well Well Neither Badly Very badly Don't remember	43 (25%) 91 (53%) 25 (15%) 6 (3%) 4 (2%) 3 (2%)	
Q2.7	Before you arrived, were you given anything or told that you were coming here tick all that apply to you.) Yes, someone told me Yes, I received written information No, I was not told anything Don't remember	86 (50%) 56 (33%) 27 (16%) 3 (2%)	
Q2.8	When you first arrived here did your property arrive at the same time as you? Yes No Don't remember	143 (85%) 26 (15%) 0 (0%)	
Section 3: Reception, first night and induction			
Q3.1	How long were you in reception? Less than 2 hours 2 hours or longer Don't remember	79 (46%) 85 (49%) 8 (5%)	
Q3.2	When you were searched, was this carried out in a respectful way? Yes No Don't remember	149 (87%) 16 (9%) 6 (4%)	

Q3.3 Overall, how were you treated in reception?

Very well	38 (22%)
Well	96 (56%)
Neither	28 (16%)
Badly	4 (2%)
Very badly	6 (3%)
Don't remember	0 (0%)

Q3.4 Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)

Loss of property	30 (18%)	Physical health	21 (13%)
Housing problems	31 (19%)	Mental health	31 (19%)
Contacting employers	4 (2 [°] %)	Needing protection from other	12 (7%)
		prisoners	
Contacting family	29 (18%)	Getting phone numbers	21 (13%)
Childcare	3 (2%)	Other	5 (3%)
Money worries	19 (12%)	Did not have any problems	71 (43%)
Feeling depressed or suicidal	24 (15%)		

Q3.5 Did you receive any help/support from staff in dealing with these problems when you first arrived here?

Yes	32 (20%)
No	58 (36%)
Did not have any problems	71 (44%)

Q3.6 When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)

Tobacco	137 (80%)
A shower	38 (22%)
A free telephone call	52 (30%)
Something to eat	117 (68%)
PIN phone credit	101 (59%)
Toiletries/ basic items	92 (54%)
Did not receive anything	5 (3%)

Q3.7 When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)

Chaplain	115 (69%)
Someone from health services	124 (74%)
A Listener/Samaritans	66 (40%)
Prison shop/ canteen	39 (23%)
Did not have access to any of these	12 (7%)

Q3.8 When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)

What was going to happen to you	94 (58%)
What support was available for people feeling depressed or suicidal	60 (37%)
How to make routine requests (applications)	76 (47%)
Your entitlement to visits	59 (36%)
Health services	89 (55%)
Chaplaincy	90 (55%)
Not offered any information	28 (17%)

Q3.9 Did you feel safe on your first night here?

Yes	137 (81%)
No	29 (17%)
Don't remember	3 (2%)

Q3.10 How soon after you arrived here did you go on an induction course?

Have not been on an induction course	9 (5%)
Within the first week	106 (64%)
More than a week	44 (27%)
Don't remember	7 (4%)

Q3.11 Did the induction course cover everything you needed to know about the prison?

Have not been on an induction course	9 (5%)
Yes	104 (63%)
No	43 (26%)
Don't remember	10 (6%)

Q3.12 How soon after you arrived here did you receive an education ('skills for life') assessment?

Did not receive an assessment	23 (14%)
Within the first week	62 (38%)
More than a week	47 (28%)
Don't remember	33 (20%)

Section 4: Legal rights and respectful custody

Q4.1 How easy is it to......

,	Very easy	Easy	Neither	Difficult	Very difficult	N/A
Communicate with your solicitor or	21 (13%)	42 (25%)	26 (16%)	23 (14%)	21 (13%)	32 (19%)
legal representative?						
Attend legal visits?	18 (12%)	55 (36%)	26 (17%)	9 (6%)	9 (6%)	35 (23%)
Get bail information?	6 (4%)	17 (12%)	28 (19%)	17 (12%)	13 (9%)	64 (44%)

Q4.2 Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?

Not had any letters	30 (18%)
Yes	54 (33%)
No	81 (49%)

Q4.3 Can you get legal books in the library?

Yes	67 (40%)
No	9 (5%)
Don't know	91 (54%)

Q4.4	Please answer the following questions about the wing/unit y		-	
	Do you normally have enough clean, suitable clothes for the week?	Yes 73	No 89 (54%)	Don't know 4
	Are you normally able to have a shower every day?	(44%) 158 (95%)	(54%) 7 (4%)	(2%) (1%)
	Do you normally receive clean sheets every week?	40 (24%)	122 (73%)	(178) 4 (2%)
	Do you normally get cell cleaning materials every week?	109	53 (32%)	2 (1%)
	Is your cell call bell normally answered within five minutes?	72 (44%)	77 (47%)	14 (9%)
	Is it normally quiet enough for you to be able to relax or sleep in your cell night time?	(69%)	50 (30%)	1 (1%)
	If you need to, can you normally get your stored property?	50 (31%)	69 (42%)	44 (27%)
Q4.5	What is the food like here?			2 (1%)
	Very good Good Neither Bad Very bad			2 (1%) 16 (10%) 39 (23%) 53 (32%) 58 (35%)
Q4.6	Does the shop/canteen sell a wide enough range of goods to Have not bought anything yet/ don't know	meet you	ur needs?	2 (1%)
	Yes No			105 (62%) 62 (37%)
Q4.7	Can you speak to a Listener at any time, if you want to? Yes			89 (53%)
	No Don't know			18 (11%) 61 (36%)
Q4.8	Are your religious beliefs respected?			//0
	Yes No Don't know/ N/A			72 (43%) 20 (12%) 76 (45%)
Q4.9	Are you able to speak to a chaplain of your faith in private in Yes No Don't know/ N/A	f you wan	t to?	93 (55%) 9 (5%) 66 (39%)
Q4.10	How easy or difficult is it for you to attend religious services I don't want to attend Very easy Easy Neither Difficult Very difficult Don't know	s?		45 (27%) 47 (29%) 26 (16%) 10 (6%) 6 (4%) 2 (1%) 28 (17%)

Section 5: Applications and complaints

Q5.1 Is it easy to make an application
--

Yes	140 (86%)
No	17 (10%)
Don't know	6 (4%)

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

	Not made	Yes	No
	one		
Are applications dealt with fairly?	12 (8%)	82 (54%)	58 (38%)
Are applications dealt with quickly (within seven days)?	12 (8%)	50 (34%)	84 (58%)

Q5.3 Is it easy to make a complaint?

Yes	88 (55%)
No	29 (18%)
Don't know	42 (26%)

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

	Not made Yes		No	
	one			
Are complaints dealt with fairly?	63 (39%)	43 (27%)	56 (35%)	
Are complaints dealt with quickly (within seven days)?	63 (40%)	30 (19%)	64 (41%)	

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

Yes	30 (19%)
No	124 (81%)

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

Don't know who they are	51 (32%)
Very easy	22 (14%)
Easy	24 (15%)
Neither	37 (23%)
Difficult	18 (11%)
Very difficult	9 (6%)

Section 6: Incentive and earned privileges scheme

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

Don't know what the IEP scheme is	11 (7%)
Yes	81 (48%)
No	60 (36%)
Don't know	16 (10%)

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

Don't know what the IEP scheme is	II (7%)
Yes	86 (53%)
No	48 (30%)
Don't know	16 (10%)

Q6.3	In the last six months have any members of staff physically restrained you (C a			
	Yes	16 (10%)		
	No	152 (90%)		
Q6.4	If you have spent a night in the segregation/care and separation unit in the last how were you treated by staff?	six months,		
	I have not been to segregation in the last 6 months	119 (78%)		
	Very well	4 (3%)		
	Well	4 (3%)		
	Neither	9 (6%)		
	Badly Very badly	10 (7%) 6 (4%)		
	very budiy	0 (1/0)		
	Section 7: Relationships with staff			
Q7.1	Do most staff treat you with respect?			
	Yes	141 (85%)		
	No	25 (15%)		
Q7.2	Is there a member of staff you can turn to for help if you have a problem?			
	Yes	128 (78%)		
	No	37 (22%)		
Q7.3	Has a member of staff checked on you personally in the last week to see how you	ou are		
Q 7.3	getting on?	ou ai c		
	Yes	52 (31%)		
	No	116 (69%)		
Q7.4	How often do staff normally speak to you during association?			
Q7.7	Do not go on association	5 (3%)		
	Never	19 (11%)		
	Rarely	36 (21%)		
	Some of the time	69 (41%)		
	Most of the time	23 (14%)		
	All of the time	16 (10%)		
Q7.5	When did you first meet your personal (named) officer?			
~	I have not met him/her	85 (51%)		
	In the first week	30 (18%)		
	More than a week	27 (16%)		
	Don't remember	24 (14%)		
Q7.6	How helpful is your personal (named) officer?			
•	Do not have a personal officer/ I have not met him/ her	85 (54%)		
	Very helpful	23 (15%)		
	Helpful	24 (15%)		
	Neither	14 (9%)		
	Not very helpful Not at all helpful	8 (5%) 3 (2%)		
	Not at all helpful	3 (2/8)		
Section 8: Safety				
Q8.1	Have you ever felt unsafe here?			
-	Yes	71 (43%)		
	No	94 (57%)		

125 (75%)

Q8.2 Do you feel unsafe now? Yes 31 (19%) 132 (81%) No In which areas have you felt unsafe? (Please tick all that apply to you.) Q8.3 At meal times Never felt unsafe 94 (57%) 9 (5%) Everywhere 31 (19%) At health services 9 (5%) Segregation unit 2 (1%) Visits area 2 (1%) Association areas 19 (12%) In wing showers 13 (8%) Reception area 6 (4%) In gym showers 4 (2%) In corridors/stairwells At the gym 7 (4%) 10 (6%) 8 (5%) In an exercise yard On your landing/wing 17 (10%) At work 12 (7%) In your cell 13 (8%) During movement 25 (15%) At religious services 4 (2%) At education 10 (6%) **Q8.4** Have you been victimised by other prisoners here? Yes 56 (34%) No 110 (66%) **Q8.5** If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.) Insulting remarks (about you or your family or friends) 22 (13%) Physical abuse (being hit, kicked or assaulted) 29 (17%) Sexual abuse 2 (1%) Feeling threatened or intimidated 37 (22%) Having your canteen/property taken 20 (12%) Medication 9 (5%) Debt 16 (10%) Drugs 12 (7%) Your race or ethnic origin 7 (4%) Your religion/religious beliefs 3 (2%) Your nationality 5 (3%) You are from a different part of the country than others 4 (2%) You are from a traveller community 3 (2%) Your sexual orientation 2 (1%) 6 (4%) Your age You have a disability 5 (3%) You were new here 13 (8%) Your offence/ crime I (I%) Gang related issues 8 (5%) Q8.6 Have you been victimised by staff here? Yes 42 (25%)

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No

Q8.7 If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.) Insulting remarks (about you or your family or friends) 15 (9%) 10 (6%) Physical abuse (being hit, kicked or assaulted) Sexual abuse 3 (2%) Feeling threatened or intimidated 20 (12%) Medication 4 (2%) Debt 6 (4%) Drugs 4 (2%) 2 (1%) Your race or ethnic origin Your religion/religious beliefs 1 (1%) Your nationality 3 (2%) You are from a different part of the country than others 3 (2%) You are from a traveller community 2 (1%) Your sexual orientation 3 (2%) Your age 2 (1%) You have a disability 4 (2%) You were new here 6 (4%) Your offence/ crime 2 (1%) Gang related issues I (I%) **Q8.8** If you have been victimised by prisoners or staff, did you report it? Not been victimised 98 (68%) Yes 15 (10%) No 32 (22%) Section 9: Health services Q9.1 How easy or difficult is it to see the following people? **Don't know** Very easy Neither Difficult Very difficult Easy 44 (27%) 40 (24%) 19 (12%) The doctor 16 (10%) 11 (7%) 34 (21%) The nurse 18 (11%) 18 (11%) 61 (38%) 29 (18%) 20 (13%) 13 (8%) The dentist 27 (17%) 16 (10%) 25 (16%) 38 (24%) 49 (31%) 5 (3%) Q9.2 What do you think of the quality of the health service from the following people? Not been Very good Good Neither Bad Very bad The doctor 24 (15%) 11 (7%) 48 (30%) 30 (19%) 27 (17%) 20 (13%) The nurse 18 (11%) 29 (18%) 51 (32%) 29 (18%) 20 (13%) 11 (7%) The dentist 40 (26%) 14 (9%) 30 (19%) 28 (18%) 25 (16%) 19 (12%) Q9.3 What do you think of the overall quality of the health services here? Not been 13 (8%) Very good 13 (8%) Good 50 (31%) Neither 31 (19%) Bad 35 (22%) Very bad 19 (12%) Q9.4 Are you currently taking medication? Yes 74 (45%) No 90 (55%)

Q9.5	If you are taking medication, are you allowed to keep some/ all of it in you	ır own cell?
	Not taking medication	90 (56%)
	Yes, all my meds	46 (28%)
	Yes, some of my meds	II (7%)
	No	15 (9%)
Q9.6	Do you have any emotional or mental health problems?	
Q7.0	Yes	51 (31%)
	No	` '
	INO	113 (69%)
Q9.7	Are your being helped/ supported by anyone in this prison (e.g. a psycholonurse, mental health worker, counsellor or any other member of staff)?	gist, psychiatrist,
	Do not have any emotional or mental health problems	113 (70%)
	Yes	29 (l [°] 8%)
	No	20 (12%)
	Section 10: Drugs and alcohol	
Q10.1	Did you have a problem with drugs when you came into this prison?	
Q10.1	Yes	50 (31%)
	No	112 (69%)
	NO	112 (07%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	24 (15%)
	No	139 (85%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	75 (46%)
	Easy	17 (10%)
	Neither	8 (5%)
	Difficult	3 (2%)
	Very difficult	3 (2%)
	Don't know	56 (35%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	25 (15%)
	Easy	19 (12%)
	Neither	20 (12%)
	Difficult	14 (9%)
	Very difficult	7 (4%)
	Don't know	77 (48%)
0105		
Q10.5	Have you developed a problem with illegal drugs since you have been in the Yes	26 (16%)
	No	138 (84%)
		, ,
Q10.6	Have you developed a problem with diverted medication since you have b	-
	Yes	9 (6%)
	No	154 (94%)

Q10.7 Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?

Did not / do not have a drug problem	99 (62%)
Yes	41 (26%)
No	19 (12%)

Q10.8 Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?

Did not / do not have an alcohol problem	139 (86%)
Yes	18 (11%)
No	5 (3%)

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

Did not have a problem/ did not receive help	113 (73%)
Yes	33 (21%)
No	9 (6%)

Section II: Activities

Q11.1 How easy or difficult is it to get into the following activities, in this prison?

	Don't	Very easy	Easy	Neither	Difficult	Very
	know					difficult
Prison job	12	27	64	23	26	10
	(7%)	(17%)	(40%)	(14%)	(16%)	(6%)
Vocational or skills training	22	23	57	23	17	Ш
	(14%)	(15%)	(37%)	(15%)	(11%)	(7%)
Education (including basic skills)	16	28	67	18	12	10
	(11%)	(19%)	(44%)	(12%)	(8%)	(7%)
Offending behaviour programmes	29	14	34	27	27	20
	(19%)	(9%)	(23%)	(18%)	(18%)	(13%)

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

Not involved in any of these	37 (24%)
Prison job	88 (56%)
Vocational or skills training	25 (16%)
Education (including basic skills)	37 (24%)
Offending behaviour programmes	24 (15%)

Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?

	Not been	Yes	No	Don't know
	involved			
Prison job	18 (13%)	58 (40%)	53 (37%)	15 (10%)
Vocational or skills training	27 (22%)	53 (44%)	23 (19%)	18 (15%)
Education (including basic skills)	20 (16%)	72 (56%)	25 (19%)	12 (9%)
Offending behaviour programmes	28 (23%)	54 (44%)	23 (19%)	19 (15%)

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

Don't want to go	31 (20%)
Never	47 (30%)
Less than once a week	40 (25%)
About once a week	32 (20%)
More than once a week	8 (5%)

Q11.5	Does the library have a wide enough range of materials to meet your needs?	
	Don't use it	60 (38%)
	Yes	70 (44%)
	No	28 (18%)
Q11.6	How many times do you usually go to the gym each week?	
C 1 1 1 1	Don't want to go	42 (26%)
	0	31 (19%)
	I to 2	36 (22%)
	3 to 5	37 (23%)
	More than 5	16 (10%)
Q11.7	How many times do you usually go outside for exercise each week?	
••••	Don't want to go	14 (9%)
	0	18 (11%)
	I to 2	40 (25%)
	3 to 5	40 (25%)
	More than 5	48 (30%)
Q11.8	How many times do you usually have association each week?	
Q11.0	Don't want to go	7 (4%)
	0	5 (3%)
	I to 2	9 (6%)
	3 to 5	31 (19%)
	More than 5	108 (68%)
Q11.9	How many hours do you usually spend out of your cell on a weekday? (Please in	clude hours
	at education, at work etc.)	12 (00()
	Less than 2 hours	13 (8%)
	2 to less than 4 hours	35 (22%)
	4 to less than 6 hours	42 (26%)
	6 to less than 8 hours	33 (21%)
	8 to less than 10 hours	14 (9%)
	10 hours or more	14 (9%)
	Don't know	9 (6%)
	Section 12: Contact with family and friends	
Q12.1	Have staff supported you and helped you to maintain contact with your family/f	riends while
	in this prison?	(2.20)
	Yes	60 (38%)
	No	99 (62%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	71 (44%)
	No	91 (56%)
Q12.3	Have you had any problems getting access to the telephones?	
	Yes	28 (18%)
	No	132 (83%)

How easy or difficult is it for your family and friends to get here?

Q12.4

Q12.4	I don't not visite	20 (10%)
	I don't get visits	28 (18%)
	Very easy	17 (11%)
	Easy	32 (20%)
	Neither	19 (12%)
	Difficult	30 (19%)
	Very difficult	32 (20%)
	Don't know	2 (1%)
	Don't know	2 (176)
	Section 13: Preparation for release	
Q13.1	Do you have a named offender manager (home probation officer) in the	probation service?
	Not sentenced	0 (0%)
	Yes	128 (79%)
	No	35 (21%) [*]
0122	Miles of the second sec	• . • • •
Q13.2	What type of contact have you had with your offender manager since be (please tick all that apply)	eing in prison?
	Not sentenced/ NA	35 (22%)
		• • • • • • • • • • • • • • • • • • • •
	No contact	55 (35%)
	Letter	40 (25%)
	Phone	16 (10%)
	Visit	34 (22%)
Q13.3	Do you have a named offender supervisor in this prison?	
Q.3.3	Yes	108 (69%)
		• •
	No	48 (31%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	0 (0%)
	Yes	93 (5 á %)
	No	67 (42%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/ not sentenced	67 (42%)
	Very involved	22 (14%)
	Involved	29 (18%)
	Neither	7 (à %) ´
	Not very involved	14 (9%)
	Not at all involved	21 (13%)
	Not at all involved	21 (13/8)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please	tick all that apply
	to you.) Do not have a sentence plan/ not sentenced	47 (A)9/\
	•	67 (42%)
	Nobody	52 (33%)
	Offender supervisor	23 (14%)
	Offender manager	21 (13%)
	Named/ personal officer	8 (5%)
	Staff from other departments	8 (5%)
013.7	Can you achieve any of your contones plan towasts in this prices?	
Q13.7	Can you achieve any of your sentence plan targets in this prison?	/7 /ADD/\
	Do not have a sentence plan/ not sentenced	67 (42%)
	Yes	64 (40%)
	No	17 (11%)
	Don't know	12 (8%)
		. ,

Q13.8 Are there plans for you to achieve any of your sentence plan targets in another prison?

Do not have a sentence plan/ not sentenced	67 (42%)
Yes	14 (9%)
No	60 (37%)
Don't know	20 (12%)

Q13.9 Are there plans for you to achieve any of your sentence plan targets in the community?

Do not have a sentence plan/ not sentenced	67 (42%)
Yes	24 (15%)
No	37 (23%)
Don't know	32 (20%)

Q13.10 Do you have a needs based custody plan?

Yes	6 (4%)
No	76 (49%)
Don't know	73 (47%)

Q13.11 Do you feel that any member of staff has helped you to prepare for your release?

Yes	24 (15%)
No	131 (85%)

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

	Do not need help Yes		No	
Employment	37 (25%)	47 (32%)	63 (43%)	
Accommodation	30 (20%)	60 (40%)	60 (40%)	
Benefits	31 (21%)	52 (35%)	65 (44%)	
Finances	33 (24%)	40 (29%)	67 (48%)	
Education	36 (25%)	51 (35%)	58 (40%)	
Drugs and alcohol	43 (29%)	56 (38%)	48 (33%)	

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

Not sentenced	0 (0%)
Yes	95 (61%)
No	62 (39%)



Prisoner survey responses HMP Rochester 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.

ney	to tables		
	Any percentage highlighted in green is significantly better	15	ng or
	Any percentage highlighted in blue is significantly worse	ster 20	rainir parato
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	oches	ory C T s com
	Percentages which are not highlighted show there is no significant difference	HMP Rochester 2015	Category C Training prisons comparator
Num	ber of completed questionnaires returned	172	6,185
SEC	TION 1: General information		
1.2	Are you under 21 years of age?	6%	2%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	9%	9%
1.4	Is your sentence less than 12 months?	15%	6%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	9%
1.5	Are you a foreign national?	3%	9%
1.6	Do you understand spoken English?	99%	99%
		99%	
1.7	Do you understand written English? Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white		98%
1.8	other categories.)	17%	26%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	9%	4%
1.1	Are you Muslim?	6%	13%
1.11	Are you homosexual/gay or bisexual?	2%	4%
1.12	Do you consider yourself to have a disability?	23%	20%
1.13	Are you a veteran (ex-armed services)?	4%	6%
1.14	Is this your first time in prison?	28%	38%
1.15	Do you have any children under the age of 18?	55%	51%
SEC	TION 2: Transfers and escorts		
On y	our most recent journey here:		
2.1	Did you spend more than 2 hours in the van?	31%	45%
	For those who spent two or more hours in the escort van:		
2.2	Were you offered anything to eat or drink?	84%	72%
2.3	Were you offered a toilet break?	7%	8%
2.4	Was the van clean?	62%	63%
2.5	Did you feel safe?	80%	80%
2.6	Were you treated well/very well by the escort staff?	78%	72%
2.7	Before you arrived here were you told that you were coming here?	50%	61%
2.7	Before you arrived here did you receive any written information about coming here?	33%	14%
2.8	When you first arrived here did your property arrive at the same time as you?	85%	86%
SEC	TION 3: Reception, first night and induction		
3.1	Were you in reception for less than 2 hours?	46%	53%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	85%
3.3	Were you treated well/very well in reception?	78%	75%
	When you first arrived:		
3.4	Did you have any problems?	57%	61%
3.4	Did you have any problems with loss of property?	18%	18%
3.4	Did you have any housing problems?	19%	13%

HMP Rochester 2015	HMP Rochester 2012
172	178
6%	29%
100%	100%
9%	14%
15%	5%
1%	1%
3%	5%
99%	99%
99%	99%
17%	36%
9%	4%
6%	19%
2%	1%
23%	18%
4%	5%
28%	34%
55%	42%
31%	34%
2.10/	
84%	74%
7%	7%
62%	70%
80%	77%
78%	64%
50%	62%
33%	31%
85%	92%
46%	47%
87%	84%
78%	71%
57%	59%
18%	16%
19%	22%

Key	to tables		
	Any percentage highlighted in green is significantly better	15	ig or
	Any percentage highlighted in blue is significantly worse	HMP Rochester 2015	Category C Training prisons comparator
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Roches	ory C
	Percentages which are not highlighted show there is no significant difference	HMP R	Category prisons c
3.4	Did you have any problems contacting employers?	2%	2%
3.4	Did you have any problems contacting family?	18%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	1%
3.4	Did you have any money worries?	12%	14%
3.4	Did you have any problems with feeling depressed or suicidal?	15%	14%
3.4	Did you have any physical health problems?	13%	12%
3.4	Did you have any mental health problems?	19%	15%
3.4	Did you have any problems with needing protection from other prisoners?	7%	5%
3.4	Did you have problems accessing phone numbers?	13%	16%
	For those with problems:		
3.5	Did you receive any help/ support from staff in dealing with these problems?	36%	36%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	80%	75%
3.6	A shower?	22%	27%
3.6	A free telephone call?	31%	41%
3.6	Something to eat?	68%	56%
3.6	PIN phone credit?	59%	52%
3.6	Toiletries/ basic items?	54%	46%
SEC	TION 3: Reception, first night and induction continued		
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	69%	52%
3.7	Someone from health services?	74%	69%
3.7	A Listener/Samaritans?	40%	33%
3.7	Prison shop/ canteen?	23%	23%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	58%	50%
3.8	Support was available for people feeling depressed or suicidal?	37%	40%
3.8	How to make routine requests?	47%	44%
3.8	Your entitlement to visits?	36%	41%
3.8	Health services?	55%	52%
3.8	The chaplaincy?	55%	48%
3.9	Did you feel safe on your first night here?	81%	82%
3.10	Have you been on an induction course?	95%	90%
	For those who have been on an induction course:		
3.11	Did the course cover everything you needed to know about the prison?	66%	59%
3.12	Did you receive an education (skills for life) assessment?	86%	83%

HMP Rochester 2015	HMP Rochester 2012
2%	2%
18%	11%
2%	1%
12%	16%
15%	7%
13%	11%
19%	12%
7%	2%
13%	16%
36%	39%
80%	83%
22%	19%
31%	58%
68%	71%
59%	71%
54%	39%
69%	60%
74%	77%
40%	34%
23%	22%
E00/	E00/
58%	52%
37%	41%
47%	52%
36%	48%
55%	61%
	50%
55%	
55% 81%	84%
81% 95%	84%
81%	84%

Key	to tables		
	Any percentage highlighted in green is significantly better	15	<u>ق</u> ۔
	Any percentage highlighted in blue is significantly worse	ter 20	Training nparator
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Rochester 2015	ပ
	Percentages which are not highlighted show there is no significant difference	HMP	Category prisons c
SEC	TION 4: Legal rights and respectful custody		
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	38%	46%
4.1	Attend legal visits?	48%	48%
4.1	Get bail information?	16%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	33%	40%
4.3	Can you get legal books in the library?	40%	42%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	44%	66%
4.4	Are you normally able to have a shower every day?	95%	92%
4.4	Do you normally receive clean sheets every week?	24%	75%
4.4	Do you normally get cell cleaning materials every week?	67%	65%
4.4	Is your cell call bell normally answered within five minutes?	44%	36%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	69%
4.4	Can you normally get your stored property, if you need to?	31%	23%
4.5	Is the food in this prison good/very good?	11%	29%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	62%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	53%	56%
4.8	Are your religious beliefs are respected?	43%	53%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	55%	58%
4.10	Is it easy/very easy to attend religious services?	45%	50%
SEC	TION 5: Applications and complaints		
5.1	Is it easy to make an application?	86%	82%
	For those who have made an application:		
5.2	Do you feel applications are dealt with fairly?	59%	58%
5.2	Do you feel applications are dealt with quickly (within seven days)?	37%	41%
5.3	Is it easy to make a complaint?	55%	59%
	For those who have made a complaint:		
5.4	Do you feel complaints are dealt with fairly?	43%	33%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	32%	29%
5.5	Have you ever been prevented from making a complaint when you wanted to?	20%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	29%	29%

HMP Rochester 2015	HMP Rochester 2012
38%	39%
48%	49%
16%	18%
33%	39%
40%	37%
44%	76%
95%	97%
24%	90%
67%	75%
44%	41%
69%	70%
31%	17%
11%	16%
62%	44%
53%	54%
43%	52%
55%	51%
45%	46%
86%	88%
59%	55%
37%	46%
55%	64%
43%	32%
32%	30%
20%	17%
29%	31%

ney	to tables		
	Any percentage highlighted in green is significantly better	15	ig or
	Any percentage highlighted in blue is significantly worse	ter 20	Training nparator
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	HMP Rochester 2015	ory C T s com
	Percentages which are not highlighted show there is no significant difference	HMP R	Category C Training prisons comparator
SEC	TION 6: Incentives and earned privileges scheme		
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	48%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	46%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	7%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	24%	38%
SEC	TION 7: Relationships with staff		
7.1	Do most staff, in this prison, treat you with respect?	85%	79%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	78%	73%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	31%	30%
7.4	Do staff normally speak to you most of the time/all of the time during association?	23%	20%
7.5	Do you have a personal officer?	49%	66%
	For those with a personal officer:		
7.6	Do you think your personal officer is helpful/very helpful?	65%	63%
SEC	TION 8: Safety		
8.1	Have you ever felt unsafe here?	43%	35%
8.2	Do you feel unsafe now?	19%	15%
8.4	Have you been victimised by other prisoners here?	34%	27%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	13%	12%
8.5	Hit, kicked or assaulted you?	18%	7%
8.5	Sexually abused you?	1%	1%
8.5	Threatened or intimidated you?	22%	16%
8.5	Taken your canteen/property?	12%	6%
8.5	Victimised you because of medication?	5%	4%
8.5	Victimised you because of debt?	10%	4%
8.5	Victimised you because of drugs?	7%	4%
8.5	Victimised you because of your race or ethnic origin?	4%	3%
8.5	Victimised you because of your religion/religious beliefs?	2%	3%
8.5	Victimised you because of your nationality?	3%	2%
8.5	Victimised you because you were from a different part of the country?	2%	4%
8.5	Victimised you because you are from a Traveller community?	2%	1%
8.5	Victimised you because of your sexual orientation?	1%	2%
8.5	Victimised you because of your age?	4%	3%
8.5	Victimised you because you have a disability?	3%	3%
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HMP Rochester 2015	HMP Rochester 2012
48%	54%
53%	47%
10%	7%
24%	40%
85%	75%
78%	77%
31%	28%
23%	15%
49%	64%
65%	59%
43%	29%
19%	11%
34%	21%
13%	7%
18%	8%
1%	0%
22%	9%
12%	3%
5%	4%
10%	5%
7%	2%
4%	1%
2%	1%
3%	2%
2%	4%
2%	1%
1%	1%
4%	2%
3%	2%

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8.7 Victimised you because of drugs? 8.7 Victimised you because of drugs? 8.8 Victimised you because of your race or ethnic origin? 8.9 Victimised you because of your race or ethnic origin? 8.0 Victimised you because of your nationality? 8.1 Victimised you because of your nationality? 8.2 Victimised you because you were from a different part of the country? 8.7 Victimised you because you are from a Traveller community? 8.8 Victimised you because of your sexual orientation? 8.9 Victimised you because of your age? 8.0 Victimised you because of your age? 8.1 Victimised you because you have a disability? 8.2 Victimised you because you were new here? 8.3 Victimised you because you were new here? 8.4 Victimised you because of your offence/crime? 8.5 Victimised you because of your offence/crime? 8.6 Victimised you because of your offence/crime? 8.7 Victimised you because of gang related issues? 8.8 Did you report any victimisation that you have experienced? 8.9 SECTION 9: Health services 9.1 Is it easylvery easy to see the doctor? 9.2 It is it easylvery easy to see the dentist? 9.3 The doctor? 9.4 The dentist? 9.5 The dentist? 9.6 The overall quality of health services? 9.7 The dentist? 9.8 The overall quality of health services? 9.9 The overall quality of health services? 9.1 For those currently taking medication? 9.2 For those currently taking medication? 9.3 The overall quality of health services? 9.4 Are you currently taking medication:	8.7	Threatened or intimidated you?	12%	12%
2% 8.7 Victimised you because of drugs? 8.7 Victimised you because of your race or ethnic origin? 8.8 Victimised you because of your religion/religious beliefs? 8.9 Victimised you because of your nationality? 8.1 Victimised you because of your nationality? 8.2 Victimised you because you were from a different part of the country? 8.8 Victimised you because you are from a Traveller community? 8.9 Victimised you because of your sexual orientation? 8.0 Victimised you because of your sexual orientation? 8.1 Victimised you because of your age? 8.2 Victimised you because you have a disability? 8.3 Victimised you because you were new here? 8.4 Victimised you because you were new here? 8.5 Victimised you because of your offence/crime? 8.6 Victimised you because of your offence/crime? 8.7 Victimised you because of gang related issues? 8.8 Did you report any victimisation that you have experienced? 8.8 Did you report any victimisation that you have experienced? 8.8 ECCTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the dentist? 9.2 The 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? 9.2 The dentist? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? 9.5 For those currently taking medication? 9.6 For those currently taking medication? 9.7 For those currently taking medication? 9.8 For those currently taking medication? 9.9 For those currently taking medication?	8.7	Victimised you because of medication?	2%	3%
8.7 Victimised you because of your race or ethnic origin? 8.7 Victimised you because of your religion/religious beliefs? 8.7 Victimised you because of your nationality? 8.7 Victimised you because you were from a different part of the country? 8.7 Victimised you because you are from a Traveller community? 8.8 Victimised you because you are from a Traveller community? 8.7 Victimised you because of your sexual orientation? 8.8 Victimised you because of your age? 8.7 Victimised you because you have a disability? 8.8 Victimised you because you were new here? 8.7 Victimised you because you were new here? 8.8 Victimised you because of your offence/crime? 8.9 Victimised you because of gang related issues? 8.9 For those who have been victimised by staff or other prisoners: 8.8 Did you report any victimisation that you have experienced? 8.8 ECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.2 Is it easy/very easy to see the dentist? 9.3 The othose 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? 9.2 The dentist? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? For those currently taking medication:	8.7	Victimised you because of debt?	4%	2%
8.7 Victimised you because of your religion/religious beliefs? 8.7 Victimised you because of your nationality? 8.7 Victimised you because you were from a different part of the country? 8.7 Victimised you because you are from a Traveller community? 8.7 Victimised you because of your sexual orientation? 8.7 Victimised you because of your age? 8.7 Victimised you because of your age? 8.8 Victimised you because you have a disability? 8.7 Victimised you because you were new here? 8.8 Victimised you because of your offence/crime? 8.8 Did you because of gang related issues? 8.8 Did you report any victimisation that you have experienced? 8.8 Did you report any victimisation that you have experienced? 8.8 SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the dentist? 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? 9.2 The doctor? 9.2 The dentist? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? For those currently taking medication:	8.7	Victimised you because of drugs?	2%	2%
8.7 Victimised you because of your nationality? 2% 8.7 Victimised you because you were from a different part of the country? 2% 8.7 Victimised you because you are from a Traveller community? 11% 8.7 Victimised you because of your sexual orientation? 2.7 Victimised you because of your age? 11% 8.7 Victimised you because you have a disability? 2.7 Victimised you because you were new here? 3.7 Victimised you because you were new here? 3.8 Victimised you because of your offence/crime? 3.7 Victimised you because of your offence/crime? 3.8 Victimised you because of gang related issues? 3.8 Did you report any victimised by staff or other prisoners: 3.8 Did you report any victimisation that you have experienced? 3.7 Victimised you because of gang related issues? 3.8 Did you report any victimisation that you have experienced? 3.9 SECTION 9: Health services 3.1 Is it easy/very easy to see the doctor? 3.1 Is it easy/very easy to see the dentist? 4.1 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: 3.1 The doctor? 3.2 The dentist? 3.2 The dentist? 3.3 The overall quality of health services? 3.4 Are you currently taking medication? 4.5 For those currently taking medication:	8.7	Victimised you because of your race or ethnic origin?	1%	4%
8.7 Victimised you because you were from a different part of the country? 2% 8.7 Victimised you because you are from a Traveller community? 11% 8.7 Victimised you because of your sexual orientation? 2.7 Victimised you because of your age? 11% 8.7 Victimised you because you have a disability? 2.8 Victimised you because you have a disability? 2.9 Victimised you because you were new here? 3.7 Victimised you because you were new here? 3.8 Victimised you because of your offence/crime? 3.7 Victimised you because of gang related issues? 3.8 Did you report any victimisation that you have experienced? 3.8 Did you report any victimisation that you have experienced? 3.8 SECTION 9: Health services 3.9 It is it easy/very easy to see the doctor? 3.1 Is it easy/very easy to see the doctor? 3.1 Is it easy/very easy to see the dentist? 4.2 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: 3.9 The doctor? 3.9 The nurse? 3.9 The overall quality of health services? 3.9 The overall quality of health services? 3.9 A Are you currently taking medication:	8.7	Victimised you because of your religion/religious beliefs?	1%	3%
8.7 Victimised you because you were from a different part of the country? 1.7 Victimised you because you are from a Traveller community? 1.8 Victimised you because of your sexual orientation? 2.9 8.7 Victimised you because of your age? 1.9 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2	8.7	Victimised you because of your nationality?	2%	2%
8.7 Victimised you because you are from a Traveller community? 8.7 Victimised you because of your sexual orientation? 8.7 Victimised you because of your age? 8.7 Victimised you because you have a disability? 8.7 Victimised you because you were new here? 8.7 Victimised you because you were new here? 8.8 Victimised you because of your offence/crime? 8.7 Victimised you because of gang related issues? 8.8 Did you report any victimisation that you have experienced? 8.8 Did you report any victimisation that you have experienced? 8.8 SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the dentist? 9.2 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? 9.2 The doctor? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? For those currently taking medication:	8.7		2%	3%
8.7 Victimised you because of your sexual orientation? 8.7 Victimised you because of your age? 8.8 Victimised you because you have a disability? 8.7 Victimised you because you were new here? 8.8 Victimised you because of your offence/crime? 8.7 Victimised you because of your offence/crime? 8.8 Victimised you because of gang related issues? 8.8 Did you report any victimisation that you have experienced? SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the dentist? 9.2 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? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? For those currently taking medication:	87			1%
8.7 Victimised you because of your age? 1% 8.7 Victimised you because you have a disability? 2% 8.7 Victimised you because you were new here? 4% 8.7 Victimised you because of your offence/crime? 1% 8.7 Victimised you because of gang related issues? 1% For those who have been victimised by staff or other prisoners: 8.8 Did you report any victimisation that you have experienced? 32% SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the dentist? 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? 9.2 The doctor? 9.3 The dentist? 9.4 The overall quality of health services? 9.5 The overall quality of health services? 9.6 Are you currently taking medication? 9.7 For those currently taking medication:				
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8.7 Victimised you because you were new here? 4% 8.7 Victimised you because of your offence/crime? 11% 8.7 Victimised you because of gang related issues? For those who have been victimised by staff or other prisoners: 8.8 Did you report any victimisation that you have experienced? SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the nurse? 50% 9.1 Is it easy/very easy to see the dentist? 13% 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? 9.2 The nurse? 57% 9.2 The dentist? 9.3 The overall quality of health services? 43% 9.4 Are you currently taking medication? For those currently taking medication:				2%
8.7 Victimised you because of your offence/crime? 8.7 Victimised you because of gang related issues? For those who have been victimised by staff or other prisoners: 8.8 Did you report any victimisation that you have experienced? SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the dentist? 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? 9.3 The dentist? 9.4 Are you currently taking medication? 45% For those currently taking medication:	8.7	Victimised you because you have a disability?	2%	3%
8.7 Victimised you because of gang related issues? For those who have been victimised by staff or other prisoners: 8.8 Did you report any victimisation that you have experienced? SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the dentist? 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? 9.2 The nurse? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? 9.5 For those currently taking medication:	8.7	Victimised you because you were new here?	4%	4%
For those who have been victimised by staff or other prisoners: 8.8 Did you report any victimisation that you have experienced? SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the dentist? 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? 9.2 The nurse? 9.3 The dentist? 9.3 The overall quality of health services? 9.43% 9.4 Are you currently taking medication? For those currently taking medication:	8.7	Victimised you because of your offence/crime?	1%	4%
8.8 Did you report any victimisation that you have experienced? SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the dentist? 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? 9.2 The nurse? 9.3 The dentist? 9.4 Are you currently taking medication? 9.4 Are you currently taking medication:	8.7	Victimised you because of gang related issues?	1%	3%
SECTION 9: Health services 9.1 Is it easy/very easy to see the doctor? 9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the nurse? 9.2 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? 9.2 The nurse? 9.2 The dentist? 9.3 The overall quality of health services? 9.43% 9.5 Are you currently taking medication? 9.6 For those currently taking medication:		For those who have been victimised by staff or other prisoners:		
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9.1 Is it easy/very easy to see the nurse? 9.1 Is it easy/very easy to see the dentist? 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% 9.2 The nurse? 57% 9.2 The dentist? 38% 9.3 The overall quality of health services? 43% 9.4 Are you currently taking medication? For those currently taking medication:	SEC	TION 9: Health services		
9.1 Is it easy/very easy to see the dentist? 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? 9.2 The nurse? 9.2 The dentist? 9.3 The overall quality of health services? 9.4 Are you currently taking medication: 45% For those currently taking medication:	9.1	Is it easy/very easy to see the doctor?	34%	30%
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% 9.2 The nurse? 57% 9.2 The dentist? 38% 9.3 The overall quality of health services? 43% 9.4 Are you currently taking medication? For those currently taking medication:	9.1	Is it easy/very easy to see the nurse?	50%	52%
following is good/very good: 9.2 The doctor? 43% 9.2 The nurse? 57% 9.2 The dentist? 38% 9.3 The overall quality of health services? 43% 9.4 Are you currently taking medication? For those currently taking medication:	9.1	Is it easy/very easy to see the dentist?	13%	14%
9.2 The doctor? 43% 9.2 The nurse? 57% 9.2 The dentist? 38% 9.3 The overall quality of health services? 43% 9.4 Are you currently taking medication? 45% For those currently taking medication: ————————————————————————————————————				
9.2 The dentist? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? For those currently taking medication:	9.2		43%	48%
9.2 The dentist? 9.3 The overall quality of health services? 9.4 Are you currently taking medication? For those currently taking medication:	9.2	The nurse?	57%	57%
9.3 The overall quality of health services? 43% 9.4 Are you currently taking medication? 45% For those currently taking medication:				43%
9.4 Are you currently taking medication? For those currently taking medication:				
For those currently taking medication:				44%
	9.4		45%	49%
, , , , , , , , , , , , , , , , , , , ,	9.5	· · · ·	79%	83%
9.6 Do you have any emotional well being or mental health problems? 31%				30%
For those who have problems:	5.5	· · · · · · · · · · · · · · · · · · ·	3170	30%
9.7 Are you being helped or supported by anyone in this prison? 59%	9.7	·	59%	53%

HMP Rochester 2015	HMP Rochester 2012
8%	5%
1%	2%
5%	4%
25%	26%
9%	6%
6%	3%
2%	1%
12%	10%
2%	2%
4%	2%
2%	1%
1%	4%
1%	3%
2%	2%
2%	3%
1%	1%
2%	1%
1%	2%
2%	2%
4%	3%
1%	5%
1%	2%
32%	52%
34%	39%
50%	61%
13%	12%
43%	43%
57%	56%
38%	33%
43%	46%
45%	36%
79%	89%
31%	25%
59%	68%

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	Any percentage highlighted in green is significantly better	315	ng or
	Any percentage highlighted in blue is significantly worse	ster 20	Frainii
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	coches	s com
	Percentages which are not highlighted show there is no significant difference	HMP Rochester 2015	Category C Training prisons comparator
SEC	TION 10: Drugs and alcohol	_	
10.1	Did you have a problem with drugs when you came into this prison?	31%	25%
10.2	Did you have a problem with alcohol when you came into this prison?	15%	16%
10.3	Is it easy/very easy to get illegal drugs in this prison?	57%	37%
10.4	Is it easy/very easy to get alcohol in this prison?	27%	23%
10.5	Have you developed a problem with drugs since you have been in this prison?	16%	8%
	Have you developed a problem with diverted medication since you have been in this prison?	6%	7%
	For those with drug or alcohol problems:	0,0	. ,,
10.7	Have you received any support or help with your drug problem while in this prison?	68%	63%
10.8	Have you received any support or help with your alcohol problem while in this prison?	79%	64%
	For those who have received help or support with their drug or alcohol problem:		
10.9	Was the support helpful?	79%	77%
SEC	TION 11: Activities		
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	56%	44%
11.1	Vocational or skills training?	52%	40%
11.1	Education (including basic skills)?	63%	55%
11.1	Offending behaviour programmes?	32%	22%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	56%	58%
11.2	Vocational or skills training?	16%	15%
11.2	Education (including basic skills)?	24%	24%
11.2	Offending behaviour programmes?	15%	12%
11.3	Have you had a job while in this prison?	88%	82%
	For those who have had a prison job while in this prison:		
11.3	Do you feel the job will help you on release?	46%	43%
11.3	Have you been involved in vocational or skills training while in this prison?	78%	73%
	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?	56%	55%
11.3	Have you been involved in education while in this prison?	85%	78%
	For those who have been involved in education while in this prison:		
11.3	Do you feel the education will help you on release?	66%	58%
11.3	Have you been involved in offending behaviour programmes while in this prison?	78%	69%
	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?	56%	50%
11.4	Do you go to the library at least once a week?	25%	44%
11.5	Does the library have a wide enough range of materials to meet your needs?	44%	46%
11.6	Do you go to the gym three or more times a week?	33%	33%
11.7	Do you go outside for exercise three or more times a week?	55%	51%
11.8	Do you go on association more than five times each week?	67%	68%
11.9	Do you spend ten or more hours out of your cell on a weekday?	9%	17%

HMP Rochester 2015	HMP Rochester 2012
31%	21%
15%	15%
57%	25%
27%	14%
16%	6%
6%	2%
68%	74%
79%	75%
79%	85%
56%	54%
52%	44%
63%	57%
32%	31%
JZ /6	31%
	66%
56%	66%
56% 16%	66%
56% 16% 24%	66% 18% 25%
56% 16% 24% 15% 88%	66% 18% 25% 9% 85%
56% 16% 24% 15% 88% 46%	66% 18% 25% 9% 85% 38%
56% 16% 24% 15% 88% 46% 78%	66% 18% 25% 9% 85% 38% 65%
56% 16% 24% 15% 88% 46% 78%	66% 18% 25% 9% 85% 65% 60% 73%
56% 16% 24% 15% 88% 46% 78% 56%	66% 18% 25% 9% 85% 65% 60% 73%
56% 16% 24% 15% 88% 46% 78% 56%	66% 18% 25% 9% 85% 65% 73% 60% 71%
56% 16% 24% 15% 88% 46% 78% 66% 78%	66% 18% 25% 9% 85% 65% 73% 62%
56% 16% 24% 15% 88% 46% 78% 56% 56%	66% 18% 9% 85% 38% 65% 73% 71% 62%
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56% 16% 24% 15% 88% 46% 78% 56% 85% 66% 25% 44% 33%	66% 18% 9% 85% 65% 60% 73% 62% 58% 38% 33%

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	Any percentage highlighted in green is significantly better	15	
	Any percentage highlighted in blue is significantly worse	er 20'	ainin
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	chest	y C Tr comp
	Percentages which are not highlighted show there is no significant difference	HMP Rochester 2015	Category C Training prisons comparator
SEC	TION 12: Friends and family	I	0 5
		200/	240/
	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	38%	34%
12.2	Have you had any problems with sending or receiving mail?	44%	43%
12.3	Have you had any problems getting access to the telephones?	18%	23%
12.4	Is it easy/ very easy for your friends and family to get here?	31%	29%
SEC	TION 13: Preparation for release		
	For those who are sentenced:		
13.1	Do you have a named offender manager (home probation officer) in the probation service?	79%	82%
	For those who are sentenced what type of contact have you had with your offender manager:		
13.2	No contact?	45%	36%
13.2	Contact by letter?	33%	35%
13.2	Contact by phone?	13%	25%
13.2	Contact by visit?	28%	33%
13.3	Do you have a named offender supervisor in this prison?	69%	72%
	For those who are sentenced:		
13.4	Do you have a sentence plan?	58%	65%
	For those with a sentence plan:		
13.5	Were you involved/very involved in the development of your plan?	55%	52%
	Who is working with you to achieve your sentence plan targets:		
13.6	Nobody?	57%	48%
13.6	Offender supervisor?	25%	35%
13.6	Offender manager?	23%	26%
13.6	Named/ personal officer?	9%	12%
13.6	Staff from other departments?	9%	15%
	For those with a sentence plan:		
13.7	Can you achieve any of your sentence plan targets in this prison?	69%	62%
13.8	Are there plans for you to achieve any of your targets in another prison?	15%	20%
13.9	Are there plans for you to achieve any of your targets in the community?	26%	29%
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?	16%	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?	43%	34%
13.12	' '	50%	38%
13.12		45%	40%
13.12		37%	28%
13.12		47%	34%
13.12	3	54%	44%
	For those who are sentenced: Have you done anything, or has anything happened to you here to make you less likely to offend in	0404	F 404
13.13	future?	61%	54%

HMP Rochester 2015	HMP Rochester 2012
38%	37%
44%	60%
18%	20%
31%	39%
79%	83%
1070	0070
45%	38%
33%	36%
13%	19%
28%	27%
69%	66%
58%	69%
30 /6	0378
55%	62%
57%	48%
25%	38%
23%	28%
23% 9%	28% 9%
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23% 9% 9% 69% 15% 26% 4%	28% 9% 13% 70% 13% 33% 6%
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23% 9% 9% 69% 15% 26% 4% 16%	28% 9% 13% 70% 13% 6% 16% 35%
23% 9% 9% 69% 15% 4% 4% 43% 43%	28% 9% 13% 70% 13% 6% 16% 35% 35% 33%
23% 9% 9% 69% 15% 26% 4% 16% 50% 45%	28% 9% 13% 70% 33% 6% 16% 35% 35% 35%
23% 9% 9% 69% 15% 4% 46% 43% 45% 45% 47%	28% 9% 13% 70% 13% 6% 16% 35% 33% 26% 33%



Key question responses (ethnicity) HMP Rochester 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.

	Any percentage highlighted in green is significantly better	nic	
	Any percentage highlighted in blue is significantly worse	rity eth	"
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Black and minority ethnic prisoners	White prisoners
	Percentages which are not highlighted show there is no significant difference	Black and prisoners	White p
Numb	er of completed questionnaires returned	28	141
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	8%	2%
1.6	Do you understand spoken English?	97%	99%
1.7	Do you understand written English?	92%	100%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	9%
1.1	Are you Muslim?	30%	2%
1.12	Do you consider yourself to have a disability?	25%	23%
1.13	Are you a veteran (ex-armed services)?	0%	4%
1.14	Is this your first time in prison?	43%	25%
2.6	Were you treated well/very well by the escort staff?	71%	79%
2.7	Before you arrived here were you told that you were coming here?	54%	50%
3.2	When you were searched in reception, was this carried out in a respectful way?	78%	89%
3.3	Were you treated well/very well in reception?	68%	79%
3.4	Did you have any problems when you first arrived?	61%	56%
3.7	Did you have access to someone from health care when you first arrived here?	66%	76%
3.9	Did you feel safe on your first night here?	82%	81%
3.10	Have you been on an induction course?	89%	96%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	56%	34%

Diversity analysis

Ney it			
	Any percentage highlighted in green is significantly better	nic	
	Any percentage highlighted in blue is significantly worse	rity eth	.
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Black and minority ethnic prisoners	White prisoners
	Percentages which are not highlighted show there is no significant difference	Black and prisoners	White p
4.4	Are you normally offered enough clean, suitable clothes for the week?	48%	43%
4.4	Are you normally able to have a shower every day?	100%	94%
4.4	Is your cell call bell normally answered within five minutes?	36%	46%
4.5	Is the food in this prison good/very good?	15%	9%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	41%	66%
4.7	Are you able to speak to a Listener at any time, if you want to?	37%	55%
4.8	Do you feel your religious beliefs are respected?	59%	38%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	56%	56%
5.1	Is it easy to make an application?	69%	89%
5.3	Is it easy to make a complaint?	54%	55%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme	? 41%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	63%	52%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	19%	8%
7.1	Do most staff, in this prison, treat you with respect?	74%	87%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	67%	79%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	26%	22%
7.4	Do you have a personal officer?	37%	50%
8.1	Have you ever felt unsafe here?	23%	47%
8.2	Do you feel unsafe now?	19%	19%
8.3	Have you been victimised by other prisoners?	20%	36%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	12%	25%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	12%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	8%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	12%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	4%	3%
	•		

Rey to tables			
	Any percentage highlighted in green is significantly better	nic	
	Any percentage highlighted in blue is significantly worse	rity eth	s
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	ack and minority ethnic isoners	White prisoners
	Percentages which are not highlighted show there is no significant difference	Black and prisoners	White p
8.6	Have you been victimised by a member of staff?	35%	24%
8.7	Have you ever felt threatened or intimidated by staff here?	12%	12%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	8%	0%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	4%	0%
8.7	Have you been victimised because of your nationality? (By staff)	8%	1%
8.7	Have you been victimised because you have a disability? (By staff)	4%	2%
9.1	Is it easy/very easy to see the doctor?	44%	32%
9.1	Is it easy/ very easy to see the nurse?	56%	49%
9.4	Are you currently taking medication?	39%	47%
9.6	Do you feel you have any emotional well being/mental health issues?	23%	33%
10.3	Is it easy/very easy to get illegal drugs in this prison?	48%	59%
11.2	Are you currently working in the prison?	52%	57%
11.2	Are you currently undertaking vocational or skills training?	21%	15%
11.2	Are you currently in education (including basic skills)?	27%	24%
11.2	Are you currently taking part in an offending behaviour programme?	13%	16%
11.4	Do you go to the library at least once a week?	37%	23%
11.6	Do you go to the gym three or more times a week?	54%	29%
11.7	Do you go outside for exercise three or more times a week?	35%	58%
11.8	On average, do you go on association more than five times each week?	66%	67%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	4%	9%
12.2	Have you had any problems sending or receiving mail?	58%	41%
12.3	Have you had any problems getting access to the telephones?	20%	17%



Key question responses (disability) HMP Rochester 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.

	Any percentage highlighted in green is significantly better	але	es
		s to h	mselv
	Any percentage highlighted in blue is significantly worse	selve	er the
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	Consider themselves to have a disability	Do not consider themselves to have a disability
	Percentages which are not highlighted show there is no significant difference	Consider t a disability	Do not to have
Numb	er of completed questionnaires returned	39	129
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	0%	4%
1.6	Do you understand spoken English?	100%	98%
1.7	Do you understand written English?	98%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	18%	17%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	13%	8%
1.1	Are you Muslim?	6%	6%
1.13	Are you a veteran (ex-armed services)?	8%	2%
1.14	Is this your first time in prison?	26%	29%
2.6	Were you treated well/very well by the escort staff?	69%	81%
2.7	Before you arrived here were you told that you were coming here?	43%	52%
3.2	When you were searched in reception, was this carried out in a respectful way?	74%	92%
3.3	Were you treated well/very well in reception?	64%	81%
3.4	Did you have any problems when you first arrived?	83%	50%
3.7	Did you have access to someone from health care when you first arrived here?	80%	72%
3.9	Did you feel safe on your first night here?	61%	88%
3.10	Have you been on an induction course?	98%	94%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	30%	40%

Diversity Analysis

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 in prisoners' background details Percentages which are not highlighted show there is no significant difference in prisoners' background details 4.4 Are you normally offered enough clean, suitable clothes for the week? 39% 45% 4.4. Is your cell call bell normally answered within five minutes? 39% 46% 4.5. Is the food in this prison good/very good? 4.6. Does the shop /canteen sell a wide enough range of goods to meet your needs? 4.7. Are you able to speak to a Listener at any time, if you want to? 4.8. Do you feel your religious beliefs are respected? 4.9. Are you able to speak to a religious leader of your faith in private if you want to? 4.9. Are you able to speak to a religious leader of your faith in private if you want to? 4.9. Is it easy to make an application? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel you have been treated fairly in your experience of the IEP scheme? 4.9. Do you feel with the prison treat you with respect? 4.9. Do you feel with the prison treat you with res				
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4.6 Does the shop /canteen sell a wide enough range of goods to meet your needs? 4.7 Are you able to speak to a Listener at any time, if you want to? 4.8 Do you feel your religious beliefs are respected? 4.9 Are you able to speak to a religious leader of your faith in private if you want to? 5.1 Is it easy to make an application? 5.2 Is it easy to make an application? 5.3 Is it easy to make a complaint? 5.4 58% 5.5 Ib Do you feel you have been treated fairly in your experience of the IEP scheme? 6.1 Do you feel you have been treated fairly in your experience of the IEP scheme? 6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 6.3 In the last six months have any members of staff physically restrained you (CRR)? 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff you can turn to for help if you have a problem in this prison? 7.3 Do staff normally speak to you at least most of the time during association time? (most/all of the time) 7.4 Do you have a personal officer? 8.5 Have you ever felt unsafe here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.8 Have you been victimised because of your nationality? (By prisoners)	4.4	Is your cell call bell normally answered within five minutes?	39%	46%
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5.3 Is it easy to make a complaint? 6.1 Do you feel you have been treated fairly in your experience of the IEP scheme? 48% 49% 6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 6.3 In the last six months have any members of staff physically restrained you (C&R)? 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff you can turn to for help if you have a problem in this prison? 7.3 Do staff normally speak to you at least most of the time during association time? (most/all of the time) 7.4 Do you have a personal officer? 7.5 3% 48% 8.1 Have you ever felt unsafe here? 8.2 Do you feel unsafe now? 8.3 Have you been victimised by other prisoners? 8.4 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your age? (By prisoners) 8.8 Have you been victimised because of your age? (By prisoners) 8.9 Have you been victimised because of your age? (By prisoners) 8.9 Have you been victimised because of your age? (By prisoners)	4.9		48%	58%
6.1 Do you feel you have been treated fairly in your experience of the IEP scheme? 48% 49% 6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 58% 53% 10 the last six months have any members of staff physically restrained you (C&R)? 77% 87% 10 most staff, in this prison, treat you with respect? 77% 87% 12 Is there a member of staff you can turn to for help if you have a problem in this prison? 78% 10 po staff normally speak to you at least most of the time during association time? (most/all of the time) 23% 24% 10 po you have a personal officer? 53% 48% 11 Have you ever felt unsafe here? 12% 10 po you feel unsafe now? 12% 12% 12% 12% 12% 12% 12% 12% 12% 12%	5.1	Is it easy to make an application?	79%	88%
6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? 6.3 In the last six months have any members of staff physically restrained you (C&R)? 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff you can turn to for help if you have a problem in this prison? 7.3 Do staff normally speak to you at least most of the time during association time? (most/all of the time) 7.4 Do you have a personal officer? 7.5 Do you feel unsafe here? 8.1 Have you ever felt unsafe here? 8.2 Do you feel unsafe now? 8.3 Have you been victimised by other prisoners? 8.4 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.8 Have you been victimised because of your age? (By prisoners) 8.9 Have you been victimised because of your age? (By prisoners) 8.9 Have you been victimised because of your age? (By prisoners)	5.3	Is it easy to make a complaint?	45%	58%
behaviour? In the last six months have any members of staff physically restrained you (C&R)? 7.1 Do most staff, in this prison, treat you with respect? 7.2 Is there a member of staff you can turn to for help if you have a problem in this prison? 7.3 Do staff normally speak to you at least most of the time during association time? (most/all of the time) 7.4 Do you have a personal officer? 7.5 Do you feel unsafe here? 8.1 Have you ever felt unsafe here? 8.2 Do you feel unsafe now? 8.3 Have you been victimised by other prisoners? 8.4 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your age? (By prisoners) 8.7 Have you been victimised because of your age? (By prisoners) 8.8 Have you been victimised because of your age? (By prisoners) 8.9 Have you been victimised because of your age? (By prisoners)	6.1	Do you feel you have been treated fairly in your experience of the IEP scheme	? 48%	49%
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1.2 Is there a member of staff you can turn to for help if you have a problem in this prison? 1.3 Do staff normally speak to you at least most of the time during association time? (most/all of the time) 1.4 Do you have a personal officer? 1.5 Same and a personal officer? 1.6 It was you ever felt unsafe here? 1.7 Do you feel unsafe now? 1.7 Do you feel unsafe now? 1.8 Do you feel unsafe now? 1.8 Do you feel unsafe now? 1.8 Have you been victimised by other prisoners? 1.8 Do you feel unsafe now? 1.8 Do you feel unsafe now? 1.8 Do you feel unsafe now? 1.8 Have you been victimised by other prisoners? 1.8 Do you feel unsafe now? 1.8 Do you feel unsafe here? 1.8 Same here? 1.8 Do you feel unsafe here? 1.8 Same here	6.3		8%	10%
prison? 7.3 Do staff normally speak to you at least most of the time during association time? (most/all of the time) 7.4 Do you have a personal officer? 53% 48% 8.1 Have you ever felt unsafe here? 53% 29% 8.2 Do you feel unsafe now? 53% 29% 8.3 Have you been victimised by other prisoners? 53% 29% 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.8 Have you been victimised because of your nationality? (By prisoners)	7.1	Do most staff, in this prison, treat you with respect?	77%	87%
time? (most/all of the time) 7.4 Do you have a personal officer? 53% 48% 8.1 Have you ever felt unsafe here? 61% 38% 8.2 Do you feel unsafe now? 8.3 Have you been victimised by other prisoners? 53% 29% 8.5 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.8 Have you been victimised because of your nationality? (By prisoners) 8.9 Average	7.2	, , , , , , , , , , , , , , , , , , , ,	77%	78%
8.1 Have you ever felt unsafe here? 8.2 Do you feel unsafe now? 8.3 Have you been victimised by other prisoners? 8.5 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8% 2% 8.5 Have you been victimised because of your age? (By prisoners) 6% 3%	7.3		23%	24%
8.2 Do you feel unsafe now? 8.3 Have you been victimised by other prisoners? 8.5 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your nationality? (By prisoners) 8.8 Description of the work of t	7.4	Do you have a personal officer?	53%	48%
8.3 Have you been victimised by other prisoners? 8.5 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your age? (By prisoners) 8.8 Alaye you been victimised because of your age? (By prisoners)	8.1	Have you ever felt unsafe here?	61%	38%
8.5 Have you ever felt threatened or intimidated by other prisoners here? 8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your age? (By prisoners) 8.8 As Have you been victimised because of your age? (By prisoners)	8.2	Do you feel unsafe now?	30%	16%
8.5 Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8% 2% 8.5 Have you been victimised because of your age? (By prisoners) 6% 3%	8.3	Have you been victimised by other prisoners?	53%	29%
have been here? (By prisoners) 8.5 Have you been victimised because of your religion/religious beliefs? (By prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your nationality? (By prisoners) 8.7 Have you been victimised because of your age? (By prisoners) 8.8 3%	8.5	Have you ever felt threatened or intimidated by other prisoners here?	39%	18%
8.5 prisoners) 8.5 Have you been victimised because of your nationality? (By prisoners) 8.6 Have you been victimised because of your age? (By prisoners) 6% 3%	8.5	,	14%	2%
8.5 Have you been victimised because of your age? (By prisoners) 6% 3%	8.5	, , , , , , , , , , , , , , , , , , , ,	6%	1%
	8.5	Have you been victimised because of your nationality? (By prisoners)	8%	2%
8.5 Have you been victimised because you have a disability? (By prisoners) 11% 1%	8.5	Have you been victimised because of your age? (By prisoners)	6%	3%
	8.5	Have you been victimised because you have a disability? (By prisoners)	11%	1%

noy ic	tables		
	Any percentage highlighted in green is significantly better	o have	elves
	Any percentage highlighted in blue is significantly worse	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in orange shows a significant difference in prisoners' background details	er thems Ility	Do not consider th to have a disability
	Percentages which are not highlighted show there is no significant difference	Conside a disabil	Do not to have
8.6	Have you been victimised by a member of staff?	50%	18%
8.7	Have you ever felt threatened or intimidated by staff here?	27%	8%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	1%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	0%
8.7	Have you been victimised because of your nationality? (By staff)	3%	2%
8.7	Have you been victimised because of your age? (By staff)	3%	1%
8.7	Have you been victimised because you have a disability? (By staff)	11%	0%
9.1	Is it easy/very easy to see the doctor?	28%	36%
9.1	Is it easy/ very easy to see the nurse?	48%	52%
9.4	Are you currently taking medication?	68%	39%
9.6	Do you feel you have any emotional well being/mental health issues?	65%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	58%	57%
11.2	Are you currently working in the prison?	39%	61%
11.2	Are you currently undertaking vocational or skills training?	15%	16%
11.2	Are you currently in education (including basic skills)?	27%	22%
11.2	Are you currently taking part in an offending behaviour programme?	18%	15%
11.4	Do you go to the library at least once a week?	33%	24%
11.6	Do you go to the gym three or more times a week?	28%	34%
11.7	Do you go outside for exercise three or more times a week?	40%	59%
11.8	On average, do you go on association more than five times each week?	69%	69%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	11%	8%
12.2	Have you had any problems sending or receiving mail?	52%	40%
12.3	Have you had any problems getting access to the telephones?	31%	13%



Prisoner survey responses HMP Rochester 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		and R
	Any percentage highlighted in blue is significantly worse		G, H &
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		, E, F,
	Percentages which are not highlighted show there is no significant difference	C unit	A, B, D, units
Nun	nber of completed questionnaires returned	20	147
SEC	TION 1: General information		
1.2	Are you under 21 years of age?	5%	5%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	5%	10%
1.4	Is your sentence less than 12 months?	20%	14%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	1%
1.5	Are you a foreign national?	0%	4%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	95%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	15%	17%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	11%	9%
1.1	Are you Muslim?	5%	6%
1.11	Are you homosexual/gay or bisexual?	5%	2%
1.12	Do you consider yourself to have a disability?	20%	24%
1.13	Are you a veteran (ex-armed services)?	5%	3%
1.14	Is this your first time in prison?	37%	27%
1.15	Do you have any children under the age of 18?	65%	56%
SEC	TION 2: Transfers and escorts		
On y	your most recent journey here:		
2.1	Did you spend more than 2 hours in the van?	20%	31%
2.5	Did you feel safe?	85%	80%
2.6	Were you treated well/very well by the escort staff?	65%	81%
2.7	Before you arrived here were you told that you were coming here?	30%	53%
2.8	When you first arrived here did your property arrive at the same time as you?	80%	86%
SEC	TION 3: Reception, first night and induction		
3.1	Were you in reception for less than 2 hours?	60%	42%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	88%
3.3	Were you treated well/very well in reception?	55%	80%
	ı		

Key	to tables		
	Any percentage highlighted in green is significantly better		and R
	Any percentage highlighted in blue is significantly worse		G, H
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		D, E, F,
	Percentages which are not highlighted show there is no significant difference	C unit	A, B, E
	When you first arrived:		
3.4	Did you have any problems?	39%	59%
3.4	Did you have any problems with loss of property?	12%	19%
3.4	Did you have any housing problems?	5%	21%
3.4	Did you have any problems contacting employers?	5%	2%
3.4	Did you have any problems contacting family?	22%	17%
3.4	Did you have any problems ensuring dependants were being looked after?	5%	2%
3.4	Did you have any money worries?	5%	12%
3.4	Did you have any problems with feeling depressed or suicidal?	5%	15%
3.4	Did you have any physical health problems?	0%	15%
3.4	Did you have any mental health problems?	5%	21%
3.4	Did you have any problems with needing protection from other prisoners?	0%	8%
3.4	Did you have problems accessing phone numbers?	5%	14%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	80%	79%
3.6	A shower?	30%	22%
3.6	A free telephone call?	15%	32%
3.6	Something to eat?	75%	66%
3.6	PIN phone credit?	65%	58%
3.6	Toiletries/ basic items?	60%	53%
SEC	TION 3: Reception, first night and induction continued		
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	80%	69%
3.7	Someone from health services?	85%	73%
3.7	A Listener/Samaritans?	45%	40%
3.7	Prison shop/ canteen?	30%	22%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	55%	60%
3.8	Support was available for people feeling depressed or suicidal?	55%	35%
3.8	How to make routine requests?	50%	48%
3.8	Your entitlement to visits?	45%	36%
3.8	Health services?	60%	55%
3.8	The chaptaincy?	60%	55%
3.9	Did you feel safe on your first night here?	75%	83%
3.10	Have you been on an induction course?	95%	94%
3.12	Did you receive an education (skills for life) assessment?	90%	86%
		1	<u> </u>

Key	to tables		
	Any percentage highlighted in green is significantly better		and R
	Any percentage highlighted in blue is significantly worse		, С, Н
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		D, E, F,
	Percentages which are not highlighted show there is no significant difference	C unit	A, B, I units
SEC	TION 4: Legal rights and respectful custody		
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	35%	39%
4.1	Attend legal visits?	47%	48%
4.1	Get bail information?	18%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	35%	31%
4.3	Can you get legal books in the library?	25%	43%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	21%	48%
4.4	Are you normally able to have a shower every day?	95%	96%
4.4	Do you normally receive clean sheets every week?	17%	25%
4.4	Do you normally get cell cleaning materials every week?	88%	65%
4.4	Is your cell call bell normally answered within five minutes?	28%	47%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	50%	73%
4.4	Can you normally get your stored property, if you need to?	17%	34%
4.5	Is the food in this prison good/very good?	20%	8%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	65%	62%
4.7	Are you able to speak to a Listener at any time, if you want to?	60%	54%
4.8	Are your religious beliefs are respected?	35%	44%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	53%
4.10	Is it easy/very easy to attend religious services?	45%	44%
SEC	TION 5: Applications and complaints		
5.1	Is it easy to make an application?	70%	88%
5.3	Is it easy to make a complaint?	44%	57%
5.5	Have you ever been prevented from making a complaint when you wanted to?	6%	20%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	30%	26%
SEC	TION 6: Incentive and earned privileges scheme		
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	55%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	15%	6%
SEC	TION 7: Relationships with staff		
7.1	Do most staff, in this prison, treat you with respect?	80%	85%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	75%	78%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	20%	32%
7.4	Do staff normally speak to you most of the time/all of the time during association?	25%	23%
7.5	Do you have a personal officer?	47%	50%
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Any percentage highlighted in green is significantly better Any percentage highlighted in blue is significantly worse Any percentage highlighted in orange shows a significant difference in prisoners' background details Percentages which are not highlighted show there is no significant difference. SECTION 8: Safety a. Have you ever felt unsafe here? 4. Have you ever felt unsafe here? 5. 50% 30% Since you have been here, have other prisoners here? 5. 50% 30% Since you have been here. Prisoners here? 5. 50% 30%	Key	to tables		
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8.5 Victimised you because you have a disability? 8.5 Victimised you because you were new here? 8.5 Victimised you because of your offence/crime? 8.6 Victimised you because of gang related issues? 8.7 Victimised you been victimised by staff here? 8.8 Have you been victimised by staff here? 8.9 Since you have been here, have staff: 8.0 Made insulting remarks about you, your family or friends? 8.1 Hit, kicked or assaulted you? 8.2 Sexually abused you? 8.3 Foretained or intimidated you? 8.4 Victimised you because of medication? 8.5 Victimised you because of debt? 8.7 Victimised you because of drugs? 8.8 Victimised you because of your race or ethnic origin? 8.9 Victimised you because of your race or ethnic origin?	8.5	Victimised you because of your sexual orientation?	0%	2%
8.5 Victimised you because you were new here? 8.5 Victimised you because of your offence/crime? 8.5 Victimised you because of gang related issues? 5% 4% SECTION 8: Safety continued 8.6 Have you been victimised by staff here? 8.7 Made insulting remarks about you, your family or friends? 8.7 Hit, kicked or assaulted you? 8.8 Examples a Sexually abused you? 8.9 Threatened or intimidated you? 8.10 Victimised you because of medication? 8.10 Victimised you because of debt? 8.11 Victimised you because of drugs? 8.2 Victimised you because of your race or ethnic origin? 8.3 Victimised you because of your race or ethnic origin? 8.4 Victimised you because of your race or ethnic origin?	8.5	Victimised you because of your age?	0%	4%
8.5 Victimised you because of your offence/crime? 8.5 Victimised you because of gang related issues? 5% 4% SECTION 8: Safety continued 8.6 Have you been victimised by staff here? 30% 23% Since you have been here, have staff: 8.7 Made insulting remarks about you, your family or friends? 11% 9% 8.7 Hit, kicked or assaulted you? 5% 6% 8.7 Sexually abused you? 11% 13% 8.7 Victimised you because of medication? 8.7 Victimised you because of debt? 8.8 Victimised you because of drugs? 0% 3% 8.7 Victimised you because of your race or ethnic origin? 0% 1%	8.5	Victimised you because you have a disability?	5%	3%
8.5 Victimised you because of gang related issues? SECTION 8: Safety continued 8.6 Have you been victimised by staff here? 8.7 Made insulting remarks about you, your family or friends? 8.8 Hit, kicked or assaulted you? 8.9 Sexually abused you? 8.1 Threatened or intimidated you? 8.2 Victimised you because of medication? 8.3 Victimised you because of debt? 8.4 Victimised you because of drugs? 8.5 Victimised you because of your race or ethnic origin? 8.6 Hit, kicked or assaulted you? 8.7 Victimised you because of debt? 8.8 Victimised you because of drugs? 8.9 Victimised you because of your race or ethnic origin? 8.1 Victimised you because of your race or ethnic origin?	8.5	Victimised you because you were new here?	0%	9%
SECTION 8: Safety continued 8.6 Have you been victimised by staff here? Since you have been here, have staff: 8.7 Made insulting remarks about you, your family or friends? 11% 9% 8.7 Hit, kicked or assaulted you? 5% 6% 8.7 Sexually abused you? 7% Threatened or intimidated you? 11% 13% 8.7 Victimised you because of medication? 8.7 Victimised you because of debt? 8.8 Victimised you because of drugs? 8.9 Victimised you because of your race or ethnic origin? 8.10 Victimised you because of your race or ethnic origin?	8.5	Victimised you because of your offence/crime?	0%	1%
8.6 Have you been victimised by staff here? Since you have been here, have staff: 8.7 Made insulting remarks about you, your family or friends? 11% 9% 8.7 Hit, kicked or assaulted you? 5% 6% 8.7 Sexually abused you? 0% 2% 8.7 Threatened or intimidated you? 11% 13% 8.7 Victimised you because of medication? 0% 3% 8.7 Victimised you because of debt? 5% 4% 8.7 Victimised you because of drugs? 0% 3% 8.7 Victimised you because of your race or ethnic origin? 0% 1%	8.5	Victimised you because of gang related issues?	5%	4%
Since you have been here, have staff: 8.7 Made insulting remarks about you, your family or friends? 8.7 Hit, kicked or assaulted you? 8.7 Sexually abused you? 8.7 Threatened or intimidated you? 8.7 Victimised you because of medication? 8.7 Victimised you because of debt? 8.7 Victimised you because of drugs? 8.7 Victimised you because of your race or ethnic origin? 8.8 Victimised you because of your race or ethnic origin? 8.9 Victimised you because of your race or ethnic origin?	SEC	TION 8: Safety continued		
8.7 Made insulting remarks about you, your family or friends? 8.7 Hit, kicked or assaulted you? 8.7 Sexually abused you? 8.7 Threatened or intimidated you? 8.7 Victimised you because of medication? 8.7 Victimised you because of debt? 8.7 Victimised you because of debt? 8.8 Victimised you because of drugs? 8.9 Victimised you because of your race or ethnic origin? 8.10 Victimised you because of your race or ethnic origin? 8.11% 9% 6% 8.2 Victimised you because of drugs? 9% 8.3 Victimised you because of your race or ethnic origin?	8.6	Have you been victimised by staff here?	30%	23%
8.7Hit, kicked or assaulted you?5%6%8.7Sexually abused you?0%2%8.7Threatened or intimidated you?11%13%8.7Victimised you because of medication?0%3%8.7Victimised you because of debt?5%4%8.7Victimised you because of drugs?0%3%8.7Victimised you because of your race or ethnic origin?0%1%		Since you have been here, have staff:		
8.7Sexually abused you?0%2%8.7Threatened or intimidated you?11%13%8.7Victimised you because of medication?0%3%8.7Victimised you because of debt?5%4%8.7Victimised you because of drugs?0%3%8.7Victimised you because of your race or ethnic origin?0%1%	8.7	Made insulting remarks about you, your family or friends?	11%	9%
8.7 Threatened or intimidated you?11%13%8.7 Victimised you because of medication?0%3%8.7 Victimised you because of debt?5%4%8.7 Victimised you because of drugs?0%3%8.7 Victimised you because of your race or ethnic origin?0%1%	8.7	Hit, kicked or assaulted you?	5%	6%
8.7 Victimised you because of medication? 0% 3% 8.7 Victimised you because of debt? 5% 4% 8.7 Victimised you because of drugs? 0% 3% 8.7 Victimised you because of your race or ethnic origin? 0% 1%	8.7	Sexually abused you?	0%	2%
8.7Victimised you because of debt?5%4%8.7Victimised you because of drugs?0%3%8.7Victimised you because of your race or ethnic origin?0%1%	8.7	Threatened or intimidated you?	11%	13%
8.7 Victimised you because of drugs? 8.7 Victimised you because of your race or ethnic origin? 0% 3% 1%	8.7	Victimised you because of medication?	0%	3%
8.7 Victimised you because of your race or ethnic origin? 0% 1%	8.7	Victimised you because of debt?	5%	4%
	8.7	Victimised you because of drugs?	0%	3%
8.7 Victimised you because of your religion/religious beliefs? 0% 1%	8.7	Victimised you because of your race or ethnic origin?	0%	1%
	8.7	Victimised you because of your religion/religious beliefs?	0%	1%

Key	to tables		
	Any percentage highlighted in green is significantly better		and R
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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		D, E, F,
	Percentages which are not highlighted show there is no significant difference	C unit	A, B, E units
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%	2%
8.7	Victimised you because you are from a traveller community?	0%	2%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	0%	1%
8.7	Victimised you because you have a disability?	5%	2%
8.7	Victimised you because you were new here?	0%	4%
8.7	Victimised you because of your offence/crime?	0%	2%
8.7	Victimised you because of gang related issues?	0%	0%
SEC	TION 9: Health services		
9.1	Is it easy/very easy to see the doctor?	37%	34%
9.1	Is it easy/very easy to see the nurse?	47%	51%
9.1	Is it easy/very easy to see the dentist?	12%	13%
9.4	Are you currently taking medication?	44%	44%
9.6	Do you have any emotional well being or mental health problems?	5%	33%
SEC	TION 10: Drugs and alcohol		
10.1	Did you have a problem with drugs when you came into this prison?	34%	30%
10.2	Did you have a problem with alcohol when you came into this prison?	0%	16%
10.3	Is it easy/very easy to get illegal drugs in this prison?	61%	57%
10.4	Is it easy/very easy to get alcohol in this prison?	28%	27%
10.5	Have you developed a problem with drugs since you have been in this prison?	28%	14%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	0%	6%
SEC	TION 11: Activities		
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	34%	60%
11.1	Vocational or skills training?	44%	53%
11.1	Education (including basic skills)?	44%	66%
11.1	Offending Behaviour Programmes?	29%	32%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	56%	58%
11.2	Vocational or skills training?	12%	17%

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	Percentages which are not highlighted show there is no significant difference	C unit	A, B, E units
11.2	Education (including basic skills)?	17%	25%
11.2	Offending Behaviour Programmes?	0%	18%
11.4	Do you go to the library at least once a week?	17%	27%
11.5	Does the library have a wide enough range of materials to meet your needs?	39%	46%
11.6	Do you go to the gym three or more times a week?	28%	34%
11.7	Do you go outside for exercise three or more times a week?	78%	51%
11.8	Do you go on association more than five times each week?	83%	66%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	9%
SEC	TION 12: Friends and family		
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	39%
12.2	Have you had any problems with sending or receiving mail?	56%	42%
12.3	Have you had any problems getting access to the telephones?	28%	15%
12.4	Is it easy/ very easy for your friends and family to get here?	22%	31%
SEC	TION 13: Preparation for release		
13.3	Do you have a named offender supervisor in this prison?	66%	70%
13.10	Do you have a needs based custody plan?	0%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	12%	16%



Prisoner survey responses (A, B, C, D and E Wing vs F, G, H and R Wing) HMP Rochester 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		
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	Percentages which are not highlighted show there is no significant difference	A, B, (F, G, H
Nun	nber of completed questionnaires returned	100	67
SEC	TION 1: General information		
1.2	Are you under 21 years of age?	8%	1%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	11%	6%
1.4	Is your sentence less than 12 months?	14%	15%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	0%
1.5	Are you a foreign national?	4%	1%
1.6	Do you understand spoken English?	99%	99%
1.7	Do you understand written English?	99%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	21%	9%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	14%
1.1	Are you Muslim?	7%	3%
1.11	Are you homosexual/gay or bisexual?	1%	5%
1.12	Do you consider yourself to have a disability?	21%	26%
1.13	Are you a veteran (ex-armed services)?	2%	6%
1.14	Is this your first time in prison?	28%	28%
1.15	Do you have any children under the age of 18?	59%	54%
SEC	CTION 2: Transfers and escorts		
On :	your most recent journey here:		
2.1	Did you spend more than 2 hours in the van?	32%	25%
2.5	Did you feel safe?	81%	79%
2.6	Were you treated well/very well by the escort staff?	76%	84%
2.7	Before you arrived here were you told that you were coming here?	46%	57%
2.8	When you first arrived here did your property arrive at the same time as you?	83%	88%
SEC	CTION 3: Reception, first night and induction		
3.1	Were you in reception for less than 2 hours?	44%	45%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	90%
3.3	Were you treated well/very well in reception?	72%	85%

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	When you first arrived:		
3.4	Did you have any problems?	58%	54%
3.4	Did you have any problems with loss of property?	24%	11%
3.4	Did you have any housing problems?	23%	15%
3.4	Did you have any problems contacting employers?	4%	0%
3.4	Did you have any problems contacting family?	17%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	3%	0%
3.4	Did you have any money worries?	10%	14%
3.4	Did you have any problems with feeling depressed or suicidal?	16%	11%
3.4	Did you have any physical health problems?	13%	14%
3.4	Did you have any mental health problems?	21%	17%
3.4	Did you have any problems with needing protection from other prisoners?	11%	1%
3.4	Did you have problems accessing phone numbers?	12%	15%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	81%	78%
3.6	A shower?	22%	24%
3.6	A free telephone call?	25%	37%
3.6	Something to eat?	73%	60%
3.6	PIN phone credit?	58%	61%
3.6	Toiletries/ basic items?	58%	48%
SEC	TION 3: Reception, first night and induction continued		
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	77%	61%
3.7	Someone from health services?	74%	76%
3.7	A Listener/Samaritans?	37%	45%
3.7	Prison shop/ canteen?	19%	30%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	58%	61%
3.8	Support was available for people feeling depressed or suicidal?	38%	38%
3.8	How to make routine requests?	47%	48%
3.8	Your entitlement to visits?	34%	41%

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	Percentages which are not highlighted show there is no significant difference	A, B,	F, G, I
3.8	Health services?	52%	61%
3.8	The chaplaincy?	57%	54%
3.9	Did you feel safe on your first night here?	79%	87%
3.10	Have you been on an induction course?	94%	95%
3.12	Did you receive an education (skills for life) assessment?	84%	89%
SEC	TION 4: Legal rights and respectful custody		
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	38%	40%
4.1	Attend legal visits?	51%	44%
4.1	Get bail information?	14%	17%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	31%	34%
4.3	Can you get legal books in the library?	37%	46%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	33%	62%
4.4	Are you normally able to have a shower every day?	94%	99%
4.4	Do you normally receive clean sheets every week?	15%	36%
4.4	Do you normally get cell cleaning materials every week?	58%	80%
4.4	Is your cell call bell normally answered within five minutes?	39%	54%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	61%	83%
4.4	Can you normally get your stored property, if you need to?	25%	42%
4.5	Is the food in this prison good/very good?	11%	8%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	63%	61%
4.7	Are you able to speak to a Listener at any time, if you want to?	52%	59%
4.8	Are your religious beliefs are respected?	42%	44%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	55%	54%
4.10	Is it easy/very easy to attend religious services?	49%	38%
SEC	TION 5: Applications and complaints		
5.1	Is it easy to make an application?	82%	91%
5.3	Is it easy to make a complaint?	53%	58%
5.5	Have you ever been prevented from making a complaint when you wanted to?	16%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	30%	22%
SEC	TION 6: Incentive and earned privileges scheme		
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	62%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	49%	60%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	3%
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SEC	TION 7: Relationships with staff		
7.1	Do most staff, in this prison, treat you with respect?	81%	89%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	72%	86%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	27%	35%
7.4	Do staff normally speak to you most of the time/all of the time during association?	28%	17%
7.5	Do you have a personal officer?	42%	61%
SEC	TION 8: Safety		
8.1	Have you ever felt unsafe here?	52%	30%
8.2	Do you feel unsafe now?	25%	9%
8.4	Have you been victimised by other prisoners here?	41%	20%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	15%	8%
8.5	Hit, kicked or assaulted you?	24%	6%
8.5	Sexually abused you?	1%	1%
8.5	Threatened or intimidated you?	27%	12%
8.5	Taken your canteen/property?	18%	1%
8.5	Victimised you because of medication?	7%	1%
8.5	Victimised you because of debt?	15%	1%
8.5	Victimised you because of drugs?	12%	0%
8.5	Victimised you because of your race or ethnic origin?	4%	5%
8.5	Victimised you because of your religion/religious beliefs?	2%	1%
8.5	Victimised you because of your nationality?	3%	3%
8.5	Victimised you because you were from a different part of the country?	3%	1%
8.5	Victimised you because you are from a traveller community?	2%	1%
8.5	Victimised you because of your sexual orientation?	0%	3%
8.5	Victimised you because of your age?	5%	1%
8.5	Victimised you because you have a disability?	5%	0%
8.5	Victimised you because you were new here?	9%	6%
8.5	Victimised you because of your offence/crime?	1%	0%
8.5	Victimised you because of gang related issues?	5%	3%
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	Any percentage highlighted in orange shows a significant difference in prisoners' background details	C, D and E Wings	H and R Wings			
	Percentages which are not highlighted show there is no significant difference	A, B, (F, G, I			
SECTION 8: Safety continued						
8.6	Have you been victimised by staff here?	24%	24%			
	Since you have been here, have staff:					
8.7	Made insulting remarks about you, your family or friends?	13%	5%			
8.7	Hit, kicked or assaulted you?	6%	5%			
8.7	Sexually abused you?	2%	1%			
8.7	Threatened or intimidated you?	15%	9%			
8.7	Victimised you because of medication?	4%	0%			
8.7	Victimised you because of debt?	6%	0%			
8.7	Victimised you because of drugs?	3%	1%			
8.7	Victimised you because of your race or ethnic origin?	1%	0%			
8.7	Victimised you because of your religion/religious beliefs?	1%	0%			
8.7	Victimised you because of your nationality?	1%	1%			
8.7	Victimised you because you were from a different part of the country?	1%	1%			
8.7	Victimised you because you are from a traveller community?	0%	3%			
8.7	Victimised you because of your sexual orientation?	1%	3%			
8.7	Victimised you because of your age?	1%	0%			
8.7	Victimised you because you have a disability?	3%	1%			
8.7	Victimised you because you were new here?	4%	3%			
8.7	Victimised you because of your offence/crime?	1%	1%			
8.7	Victimised you because of gang related issues?	0%	0%			
SECTION 9: Health services						
9.1	Is it easy/very easy to see the doctor?	32%	36%			
9.1	Is it easy/very easy to see the nurse?	46%	58%			
9.1	Is it easy/very easy to see the dentist?	11%	16%			
9.4	Are you currently taking medication?	37%	54%			
9.6	Do you have any emotional well being or mental health problems?	31%	29%			
SEC	SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	37%	22%			
10.2	Did you have a problem with alcohol when you came into this prison?	15%	12%			
10.3	Is it easy/very easy to get illegal drugs in this prison?	62%	50%			
10.4	Is it easy/very easy to get alcohol in this prison?	27%	27%			
10.5	Have you developed a problem with drugs since you have been in this prison?	20%	8%			
10.6	Have you developed a problem with diverted medication since you have been in this prison?	7%	3%			
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	Any percentage highlighted in green is significantly better	ings	S	
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	Percentages which are not highlighted show there is no significant difference	A, B, (F, G, ŀ	
SECTION 11: Activities				
	Is it very easy/ easy to get into the following activities:			
11.1	A prison job?	53%	61%	
11.1	Vocational or skills training?	48%	57%	
11.1	Education (including basic skills)?	57%	71%	
11.1	Offending Behaviour Programmes?	26%	39%	
	Are you currently involved in any of the following activities:			
11.2	A prison job?	51%	68%	
11.2	Vocational or skills training?	15%	19%	
11.2	Education (including basic skills)?	22%	27%	
11.2	Offending Behaviour Programmes?	15%	18%	
11.4	Do you go to the library at least once a week?	26%	25%	
11.5	Does the library have a wide enough range of materials to meet your needs?	43%	47%	
11.6	Do you go to the gym three or more times a week?	24%	46%	
11.7	Do you go outside for exercise three or more times a week?	53%	57%	
11.8	Do you go on association more than five times each week?	70%	65%	
11.9	Do you spend ten or more hours out of your cell on a weekday?	8%	11%	
SECTION 12: Friends and family				
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	41%	34%	
12.2	Have you had any problems with sending or receiving mail?	43%	43%	
12.3	Have you had any problems getting access to the telephones?	18%	16%	
12.4	Is it easy/ very easy for your friends and family to get here?	30%	31%	
SECTION 13: Preparation for release				
13.3	Do you have a named offender supervisor in this prison?	62%	80%	
13.10	Do you have a needs based custody plan?	3%	4%	
13.11	Do you feel that any member of staff has helped you to prepare for release?	14%	17%	
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