

Report on an unannounced inspection of

HMP Highpoint

by HM Chief Inspector of Prisons

26 October – 6 November 2015

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Glossary of terms

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

Introduction

Highpoint is a large category C training prison located in rural Suffolk. The prison is an old RAF station, using many of the original buildings, and holds 1,300 men on two extensive and adjacent (North and South) sites. In addition to its training function, Highpoint has also been designated a resettlement prison serving the London and Essex regions. We last inspected Highpoint in 2012, when we described a complicated prison that was, in some ways, a microcosm of the issues in the prison system as a whole, but which was delivering some reasonable outcomes. This inspection found a similar picture. Despite some very serious challenges and contradictory evidence sources, we found a prison that was working hard to sustain generally reasonable outcomes.

In our survey many prisoners raised safety concerns and levels of violence were higher than we often see. The large extended site made supervision a challenge and there was clear evidence that new psychoactive substances (NPS), 'hooch' and the associated issues of debt, bullying and intimidation were serious concerns. This, however, was not the whole picture. The prison was well ordered and benefited from the confidence that comes through visible leadership. The reception of new prisoners needed some improvement but was reasonable. There were a number of initiatives in place to better understand and challenge violence and illicit drug supply. Prison staff were in control and intelligence was managed well. Prisoners told us that poor behaviour was dealt with robustly and there was a sense that enough prisoners felt incentivised, prepared and able to make some investment in their future while at the prison. The prison actively sought to improve safety, but would have benefited overall from a more considered and strategic coordination of these efforts.

Despite three self-inflicted deaths since 2012, self-harm was relatively low. Case management generally required improvement but the care of the most complicated cases was excellent. Use of force was relatively low and oversight had improved. Special accommodation was rarely used. Conditions in segregation had improved and it was not used excessively. The segregation regime was limited but reintegration planning was good. Staff in the unit dealt with a small number of very poorly behaved prisoners with sensitivity. There had been another death soon after our inspection which is the subject of investigation by the PPO.

Highpoint comprised many units of differing ages and types. Conditions on these units ranged from reasonable to very good, with a focus across the prison on maintaining or improving standards. Most cells were in good order and the grounds were well kept. Relationships between staff and prisoners were good, managers led by example and 82% of prisoners felt respected by staff. Consultation with prisoners was in place, although for prisoners with protected characteristics this required improvement. In general, however, the promotion of equality had improved, with some particularly useful support from the local Council for Race Equality in place. The chaplaincy was well integrated and appreciated by prisoners but the management of the high number of formal complaints, while improving, was still variable. Health provision was reasonable and also improving.

The amount of time prisoners spent out of their cells was adequate but some aspects of the daily routine were curtailed due to staff shortages. The provision and effectiveness of work and activity was judged by our Ofsted colleagues to be good overall with sufficient purposeful places for about 1,100 of the 1,300 prisoners. We found 67% engaged in activity but about 15% were still held in cell during the working day. The number formally recorded as unemployed was about 200, although this was mainly due to the tardiness of the work allocation process. The quality of teaching, learning and assessment was good and there was a very good learning environment and culture supported by respectful relationships between prisoners and tutors. Prisoner achievements were generally high.

Outcomes for prisoners remained weakest in resettlement. The prison lacked a meaningful assessment of prisoner need and offender management was ineffective and not well integrated. Many prisoners lacked a full assessment of their offending risk or a sentence plan. Public protection work and risk assessment concerning release on temporary licence decisions also required improvement.

In general, services provided across the resettlement pathways were better and improving. Immediate needs were being assessed by the two community rehabilitation companies (Essex and London) operating in the prison and pre-release planning was developing.

Highpoint could have been a problematic prison. Sprawling multiple sites, disparate accommodation, limited staff numbers and a large population held some distance from home in a remote rural location are big risk factors. Highpoint's achievement is that despite this, the prison is doing reasonably well and improving on many fronts. Good leadership, confident and reliable staff, a commitment to decency, a culture and approach that seems to incentivise prisoners, and a focus on the basics, makes Highpoint a competent institution, much to the credit of the governor and his staff.

Martin Lomas
HM Deputy Chief Inspector of Prisons

January 2016

Fact page

Task of the establishment

HMP Highpoint is a category C adult male training and resettlement prison.

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

Public

Region/Department

East of England

Number held

1,292

Certified normal accommodation

1,299

Operational capacity

1,325

Date of last full inspection

10–14 September 2012

Brief history

The site of the prison was a Royal Air Force base from 1938 to 1970. It was then used as transit camp for Ugandan Asian refugees, before opening in 1977 as a prison. During the 1980s, there were a number of alterations to the fabric of the prison, and in 1997 Highpoint North was converted to hold women prisoners. Highpoint North and South formally separated in July 2001 and Highpoint North was renamed as HMP Edmunds Hill in 2003. In 2005, Edmunds Hill was returned to the male estate. In April 2011, Highpoint and Edmunds Hill formally merged and became HMP Highpoint North and South once more.

Short description of residential units

SOUTH SITE

Tempest unit (U1/U2)	Accommodates 248 prisoners, divided into four units. Integrated drug treatment system prisoners are located on two of the wings and another one is enhanced
Javelin (U3)	Accommodates 112 prisoners. Standard unit
Wellington (U4)	Accommodates 148 prisoners. Induction unit
Handley (U5)	Accommodates 120 prisoners. Standard unit
Vickers (U6)	Accommodates 40 enhanced prisoners. Includes category D outworkers
Halifax (U7)	Accommodates 40 enhanced prisoners. Includes category D outworkers
Blenheim (U8)	Accommodates 120 prisoners. Rehabilitation of Addicted Prisoners trust (RAPt) drug and alcohol programmes
Vulcan (U9)	Accommodates 64 enhanced prisoners
Lancaster (U10)	Accommodates 64 prisoners, including some life-sentenced prisoners
Stirling (Segregation)	Accommodates up to 17 prisoners

NORTH SITE

Lysander (U11)	Accommodates 69 enhanced prisoners
Hawker (U12)	Accommodates 69 prisoners
Dominie (U13)	Accommodates 69 prisoners
Gloster (U14)	Accommodates 80 prisoners
Meteor (U15)	Accommodates 80 prisoners

Name of governor/director

Nigel Smith

Escort contractor

Serco Wincanton

Health service provider

Care UK

Learning and skills providers

Novus

Independent Monitoring Board chair

Susan Feary

Community rehabilitation company (CRC)

London CRC and Essex CRC

About this inspection and report

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

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

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

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

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

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

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
 - **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
 - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A8 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.
- A10 Details of the inspection team and the prison population profile can be found in Appendices I and III, respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

- S1 *Reception, first night and induction arrangements were reasonable, with good support provided by peer workers, but attention to vulnerability and risk was inconsistent. The prison was generally well ordered but the strategy to make the prison safer required improvement. Many prisoners did not feel safe, and levels of prisoner assaults and victimisation were high, with specific hotspots on the South site. The number of prisoners at risk of self-harm was comparatively low. The quality of assessment, care in custody and teamwork (ACCT) documents for prisoners at risk of self-harm or suicide, was poor but some complex cases were managed well. Security arrangements were mostly proportionate. The availability of drugs, particularly Spice, presented a threat but there was no overarching strategy to reduce drug supply. There were effective measures to incentivise good behaviour. Levels of use of force were low and governance arrangements good. The use of segregation was relatively low and there was good reintegration planning. Substance misuse arrangements were good. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S2 *At the last inspection in 2012 we found that outcomes for prisoners in HMP Highpoint were reasonably good against this healthy prison test. We made 19 recommendations in the area of safety. At this follow-up inspection we found that 10 of the recommendations had been achieved, five had been partially achieved and four had not been achieved.*
- S3 Many prisoners had long journeys to the prison. Reception was orderly, clean and in good repair but prisoners spent too long there. New arrivals in reception received a reassuring welcome from orderlies and met a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) and Insider (a prisoner who introduces new arrivals to prison life).
- S4 We were not assured that staff identified all newly arrived prisoners' risks or supported them on their first night. First night accommodation had improved and cells were reasonably well prepared. The prisoner-led induction was informative but some prisoners spent too long on the induction unit with little to do.
- S5 More prisoners than at similar prisons and than at the time of the previous inspection said that they did not feel safe. Over 30% of prisoners said that they had been victimised either by other prisoners or staff, and the number of prisoner-on-prisoner assaults was higher than in similar prisons. Most violent incidents occurred on the South site and prisoners said that many were due to drugs, debt and gang issues. There was good analysis of trends in violent incidents but it had not been used to develop a strategy to reduce violence and there was no action plan. Many prisoners said that poor behaviour was dealt with robustly and a number of new initiatives to address violence had been introduced. However, planning for the support of victims was poor. There was insufficient engagement with prisoners who were afraid to leave their cells or their wings.
- S6 There had been three self-inflicted deaths since the previous inspection but not all Prisons and Probation Ombudsman recommendations had been implemented effectively. The number of prisoners at risk of self-harm was relatively low. The quality of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm was poor. Self-harm triggers were rarely identified, many care maps did not address key needs of the prisoner, reviews were poor and observations showed little

meaningful interaction with the prisoner. By contrast, the standard of complex care planning for the most vulnerable prisoners was excellent. Far too few staff were trained in ACCT procedures.

- S7 Physical security and most security processes were appropriate to the risks posed and the prison was well ordered. Dynamic security was effective, and underpinned by effective staff–prisoner relationships. This was further supported by a good flow of intelligence reports from across the prison which were analysed quickly and used to identify hotspots of activity.
- S8 In our survey, more respondents than at the time of the previous inspection said that drugs and alcohol were easily available at the prison, with the South site having the greater problem. The most serious problem was the availability of Spice, one of the new psychoactive substances (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects), its effect on prisoners’ behaviour and consequent issues of debt and bullying. A number of effective actions had been taken to disrupt the availability of Spice and other drugs but there was no detailed supply reduction strategy or action plan.
- S9 The incentives and earned privileges scheme had been developed since the previous inspection. Prisoners were relatively positive about the scheme and we found a culture and broad measures which incentivised good behaviour.
- S10 The number of adjudications was relatively high but monitoring and managerial oversight were adequate. Levels of use of force were relatively low, and lower than at time of the previous inspection. Managerial oversight had improved and the quality of completed paperwork, including that for the special cell, was good.
- S11 Levels of segregation were lower than at similar prisons. The condition of the segregation unit was much improved and it was clean and in good order, with well-equipped cells. Staff–prisoner interaction on the unit was good and we observed some very poor behaviour being managed well, but the regime was limited. Most prisoners did not stay for long periods and reintegration planning was good, with most prisoners returning to normal location.
- S12 Psychosocial services for those with substance use issues were easily accessible, with a wide range of interventions. An active peer support scheme was based on the drug-free wing but only half of prisoners located on the wing were engaged in drug treatment, which compromised the drug-free ethos. Clinical treatment was more recovery focused, with 76% of prisoners on reducing regimes, and we saw evidence of good-quality treatment and care, and fully integrated working between clinical and psychosocial staff.

Respect

- S13 *External areas were pleasant and generally litter free. The quality of prisoner accommodation had improved and most cells were well maintained, bright, clean and subject to ongoing refurbishment. Access to showers, telephones, laundry and bedding was good. The number of complaints submitted was high and many could have been dealt with by applications, although the latter were not tracked. Prisoners experienced difficulty in tracing and accessing their property. Staff–prisoner relationships were good. Diversity and equality arrangements had improved but there was no systematic assessment of the needs of those with protected characteristics and some needs were not being met. Faith provision was good. Health services were reasonably good. The food provided was adequate.*
Outcomes for prisoners were reasonably good against this healthy prison test.

S14 At the last inspection in 2012 we found that outcomes for prisoners in HMP Highpoint were reasonably good against this healthy prison test. We made 26 recommendations in the area of respect.² At this follow-up inspection we found that nine of the recommendations had been achieved, three had been partially achieved and 14 had not been achieved.

- S15 The external grounds were pleasant and mostly litter free. The cleanliness and condition of prisoner accommodation had improved considerably and ranged from reasonable to very good, with most cells being well maintained, bright, clean and subject to ongoing refurbishment. Prisoners had good access to telephones, showers, and clean clothing and bedding. There were chronic problems with prisoners being able to access their stored property; however, staff worked hard to address individual cases where property was lost or missing following transfer. Most prisoners said that it was easy to make an application but responses to applications were not tracked for timeliness or quality assured.
- S16 Most prisoners said that staff treated them respectfully and we saw competent staff and examples of good interactions. Staff displayed a good level of knowledge of the prisoners in their care. Senior managers were visible around the prison and led by example through their positive engagement with prisoners. General consultation with prisoners about wing and domestic matters was mostly good, but some re-emerging issues were not dealt with promptly.
- S17 There was a comprehensive equality and diversity policy, and an action plan. The equality action team meeting was effective in monitoring equality concerns identified from the monitoring tool and directing investigations. An external consultant played a valuable role in supporting and guiding the prison's approach to equality and diversity, and prisoner equality orderlies and representatives provided useful support and advice. Discrimination incident complaint forms were mostly well investigated and responses were informative.
- S18 In our survey, the responses of black and minority ethnic and Muslim prisoners were more negative than those of their white and non-Muslim counterparts in important areas such as safety, treatment by staff and employment. Some work had been done to investigate their concerns and to consult through prisoner representatives but the negative perception remained.
- S19 There was a large foreign national population and insufficient attention was paid to interpretation and provision of translated material. Immigration services had been extended but there was no independent advice service.
- S20 In our survey, prisoners who identified themselves as having a disability were more negative than other prisoners about safety and their treatment by staff. Such prisoners were identified on induction but their needs were not met systematically. Although we found adequate provision for some, with reasonable adjustments, care plans and prisoner carers, there were others whose needs had not been recognised or met.
- S21 At the time of the inspection, there was one transgender prisoner and her needs were being met through good planning and consultation.
- S22 Faith provision was good. There was an active and effective chaplaincy, which met the faith needs of the whole population and provided a wide range of support. The community

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

engagement strategy was developing useful links with faith groups to support the work of the chaplaincy and the resettlement of prisoners.

- S23 The number of complaints submitted was relatively high and some could have been dealt with through the application system, or were about unanswered applications. The quality of replies was variable; many were polite but others were perfunctory and did not answer the issues.
- S24 Health services were reasonable and well governed. The lead provider delivered integrated and effective health services, which continued to improve. We saw positive engagement between health services staff and prisoners. There was reasonable access to a wide range of clinics but prisoners waited too long to see the dentist, optician and physiotherapist. Chronic disease management was developing and complex cases were considered routinely by the multidisciplinary team. Care planning and record keeping needed improvement. Pharmacy services and medicines management were generally effective, with good use of in-possession medication. The collection of in-possession medicines on the wings presented a risk. The quality of dental services was good, with an appropriate range of treatments available. Mental health provision was adequate to meet current prisoner need.
- S25 The quality of the food provided had improved but the food we tasted was variable and breakfast packs were inadequate. Consultation arrangements were good.

Purposeful activity

S26 *The amount of time out of cell was adequate for most but there was too little evening association. The management of learning and skills and work was good, with an appropriate focus on English, mathematics and employability. There were sufficient activity places for most of the population but too many prisoners were unemployed, waiting to be allocated to an activity. The quality of teaching and learning was good. Peer workers were used effectively. Achievements were mostly high. The library was good. Access to PE was very good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S27 *At the last inspection in 2012 we found that outcomes for prisoners in HMP Highpoint were reasonably good against this healthy prison test. We made 10 recommendations in the area of purposeful activity. At this follow-up inspection we found that two of the recommendations had been achieved, four had been partially achieved, three had not been achieved and one was no longer relevant.*

- S28 For most prisoners in full-time work, the amount of time out of cell was adequate during the working week, at around nine hours; for unemployed prisoners, it was around four hours. Owing to staff shortages in the evening and at weekends, association was not provided reliably, and prisoners were mostly locked up at 6.15pm. In our spot checks, about 15% were locked up during the working day.
- S29 The management of learning, skills and work was good. Labour market intelligence was used well to identify and provide a wide range of relevant work, and vocational training opportunities had increased. Self-assessment and quality improvement planning ensured that the education curriculum was rightly focused on improving prisoners' English and mathematics skills.
- S30 The number of activity places had increased and there were sufficient places available for most of the population. On average, however, only 67% of prisoners were engaged in

activities and too many, around 200, were unemployed, mostly waiting to be allocated to an activity.

- S31 Teaching, learning and assessment were good. Skilful and experienced tutors and trainers ensured that most learners made good progress and succeeded. Peer mentors and other, more experienced prisoners supported tutors and trainers well. The use of individual learning plans was variable and did not always provide prisoners with clear targets to improve.
- S32 Attendance and punctuality at activities were mostly good. Prisoners were enthusiastic, displayed a good attitude to learning and behaved respectfully.
- S33 Success rates on most programmes were high but further improvement was needed on level 2 mathematics programmes. Standards of prisoners' work were good, particularly in the vocational training areas. Prisoners' achievements of non-accredited work skills were not recognised or recorded sufficiently.
- S34 The library offered good facilities and a wide range of books. Staff activity engaged and involved prisoners in a range of initiatives that promoted literacy effectively.
- S35 The quality of recreational PE was good and access for prisoners was excellent. Facilities were good but some needed maintenance or repair. There were no longer any accredited vocational PE qualifications offered.

Resettlement

S36 *Offender management was ineffective and not well integrated within the prison, and offender supervisors were not sufficiently involved in critical areas of their work. Delivery was compromised by staff shortages and prisoners received too little contact, support and motivation from offender supervisors. Too many prisoners were without an offender assessment system (OASys) assessment and sentence plan, and this limited their opportunities to progress. Public protection arrangements required improvement. Reintegration planning with the community rehabilitation companies was developing reasonably well. Resettlement pathway provision had improved and good support was provided for prisoners to address their finance and debt issues, and find accommodation and employment on release. Visits and families provision had improved and was developing further.*
Outcomes for prisoners were not sufficiently good against this healthy prison test.

S37 *At the last inspection in 2012 we found that outcomes for prisoners in HMP Highpoint were not sufficiently good against this healthy prison test. We made 10 recommendations in the area of resettlement. At this follow-up inspection we found that three of the recommendations had been achieved, six had not been achieved and one was no longer relevant.*

- S38 The reducing reoffending delivery plan set clear priorities across the resettlement pathways but there was no overarching strategy and the needs analysis was limited. There was a lack of a whole-prison approach to offender management; the offender management unit did not have a high enough profile within the establishment and was not well integrated with other functions.
- S39 Redeployment of uniformed offender supervisors and probation staff vacancies undermined the effectiveness of offender management, and many prisoners were frustrated about the lack of support and contact provided. A quarter of eligible prisoners did not have a current offender assessment system (OASys) assessment or sentence plan, and many arrived without

these. Almost half the population presented a high risk of harm but too many completed OASys assessments and plans were of an inadequate quality, too often missing important information.

- S40 Public protection arrangements required improvement. Release on temporary licence assessments for prisoners working outside of the prison were inadequate. Decisions on child contact were not always informed by an up-to-date risk assessment or adequate consultation with the offender supervisor. However, the interdepartmental risk management team meeting provided good oversight in preparation for the release of multi-agency public protection arrangements (MAPPA) and high-risk cases.
- S41 Recategorisation reviews were up to date and category D prisoners did not wait too long to move to open conditions. Transfers were rarely influenced by sentence plan needs or prioritised by offender supervisors.
- S42 Indeterminate-sentenced prisoners had access to family days and a recently reintroduced support forum but offender supervisors struggled to maintain regular contact with them.
- S43 Despite its rural location, the establishment was a resettlement prison for London and Essex prisoners in the last three months of their sentence, and around 60% of prisoners were released to London. Resettlement pathway provision had improved. The community rehabilitation company provision was developing as required and enabled prisoners to access a wide range of support throughout their sentence. Demand for resettlement services was reasonably high, with around 60 prisoners being released each month.
- S44 There was good range of support for prisoners with accommodation needs. For those needing help in finding employment, education and training on release, the work of the National Careers Service provider was good and provided prisoners with clear action plans during their sentence. The range of vocational training had improved and provided good employability skills, linked to local and national employment opportunities. The virtual campus was unavailable on the South site.
- S45 Health care arrangements for prisoners on release were good. There were good links with local community mental health teams to facilitate discharge planning for men with ongoing mental health needs but there were delays in transferring prisoners to psychiatric facilities. Good release planning was provided for prisoners with substance misuse issues, including the provision of harm reduction information and 'through-the-gate' mentoring and support.
- S46 Finance, benefit and debt provision had improved and was good.
- S47 Support for prisoners to re-establish or maintain relationships with children and families had improved and was good. The children and family days were greatly valued by prisoners, and the 'dad's day' was a promising initiative (see paragraph 4.47). Visits provision was generally good but the visits hall on the North site and the visitors centre on the South site were shabby. The children's crèche on the South site was excellent.
- S48 The range of offending behaviour programmes was adequate for the population but the selection and prioritisation of prisoners was difficult due to the lack of OASys assessments. The Getting it Right Programme was a promising additional way of developing problem-solving skills.

Main concerns and recommendations

S49 Concern: Too many prisoners, and more than in similar prisons, said that they felt unsafe and were victimised by other prisoners, and the number of prisoner-on-prisoner assaults was relatively high, particularly on the South site. Analysis of violent incidents was good but this did not inform a prison-wide strategy or action plan to make the prison safer.

Recommendation: The analysis of violent incidents should be used to develop a clear strategy and action plan to manage and reduce violence.

S50 Concern: In our survey, the perceptions of black and minority ethnic and Muslim prisoners, and those with disabilities, were considerably worse than their white, non-Muslim and able-bodied counterparts across key areas of their treatment and conditions. Across other protected characteristics, we found that provision was lacking.

Recommendation: More needs to be done to consult prisoners with protected characteristics, to understand and address their needs and perceptions, and then inform them of the findings and action taken.

S51 Concern: Offender management was ineffective. A substantial number of prisoners lacked an OASys assessment and sentence plan, which restricted their opportunities to progress. Prisoner contact with offender supervisors was limited and failed consistently to support and motivate prisoners towards progression.

Recommendation: All prisoners should have an offender assessment system (OASys) assessment and sentence plan which identifies targets for progression and reducing reoffending. Contact between prisoners and offender supervisors should be regular, meaningful, and encourage and monitor progression.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Many prisoners had long journeys to the prison. In our survey, many were negative about their escorting experience, and their property did not always arrive with them. Prisoners disembarked from vehicles quickly on arrival.*

I.2 Many prisoners had long journeys to the prison. In our survey, more prisoners than at comparator establishments (63% versus 44%) said that they had had a journey of over two hours. The vehicles we inspected were clean but some had graffiti scratched into surfaces and none had seat belts. In our survey, when asked about their most recent journey, fewer prisoners than elsewhere said that they had been offered a toilet break, felt safe or been treated well by escort staff.

I.3 Many prisoners' property did not arrive with them (see also paragraph 2.6). On arrival at the prison, prisoners disembarked from vans quickly. The prison's cellular vehicle used to transfer prisoners between the North and South sites was in a reasonable condition.

Recommendation

I.4 **All prisoners' property should arrive with them when they are transferred to the prison.**

Early days in custody

Expected outcomes:

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

I.5 *Reception was calm, clean and in good repair but too many prisoners spent long periods there. Support from other prisoners in reception was very good. Not all first night assessments were completed and night staff were not always aware of the location of new arrivals. The condition of cells on the induction unit had improved and was reasonably good. Induction was delivered by prisoners and was reasonably informative. Prisoners spent too long on the induction unit without work or education.*

- I.6** The reception area was bright, well decorated and in a good state of repair. The atmosphere was orderly and calm. Holding rooms were austere but clean and contained televisions and some reading material. Curtains obscured officers' views of holding rooms, and closed-circuit television images of the rooms were not monitored adequately.
- I.7** Peer support was very good. A prisoner orderly greeted new arrivals, gave them a reassuring welcome and offered hot drinks and sandwiches. Prisoners also met an Insider (a prisoner who introduces new arrivals to prison life) and Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners). They could make a telephone call shortly after arrival.
- I.8** In our survey, fewer prisoners than elsewhere and than at the time of the previous inspection said that they had been treated well in reception. During the inspection, reception staff were courteous to prisoners and attentive to their needs. However, prisoners spent too long in reception and we saw some waiting there for three hours.
- I.9** Staff interviewed new arrivals in reception to assess their risks and completed the first part of the prison's initial screening form, but did not assess cell sharing risks. Instead, they relied on the sending establishment's cell sharing risk assessment, which had sometimes been completed many months previously.
- I.10** An officer and prisoner accompanied newly arrived prisoners to the induction unit. Officers on this unit allocated prisoners to a cell and provided them with bedding and toiletries. In theory, officers on the unit should have completed the second part of the 'initial screening form'. In practice, we found that this was not always done. Details of first night prisoners were recorded in a log book held in the unit office; however, during our night visit the first night officer was unaware of which prisoners had arrived that day or the existence of the log book. In our survey, fewer prisoners than elsewhere and than at the time of the previous inspection (73% versus 82% and 77%, respectively) said that they had felt safe on their first night. The condition of the first night cells had improved and they were reasonably well prepared.
- I.11** The two-day induction programme started on the next working day after arrival, and was prisoner led and reasonably informative. In our survey, 71% of prisoners who had attended the induction said that it had covered everything they needed to know about the prison, which was better than the comparator (59%) and than at the time of the previous inspection (66%). The programme was mainly delivered orally, with no visual aids, and the prison had plans to revise it.
- I.12** Following induction, too many prisoners remained on the induction unit without work or education, which meant that they spent most of the day locked in their cells with little to do (see also paragraph 3.19 and recommendation 3.20).

Recommendation

- I.13 All newly arrived prisoners should have a comprehensive first night risk assessment completed, including a review of cell sharing risks.**

Housekeeping point

- I.14** Reception staff should have clear views of the holding rooms to ensure that prisoners are held safely.

Bullying and violence reduction

Expected outcomes:

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

- I.15** *Many prisoners did not feel safe. The number of assaults on prisoners was higher than we usually find, and most occurred in a number of hotspots on the South site. There was good analysis of trends in violent incidents but it had not been used to develop a clear strategy to reduce violence and there was no action plan. Many prisoners commented that poor behaviour was dealt with robustly but interventions to address such behaviour were underdeveloped. There was insufficient systematic planning and support for victims – particularly those afraid to leave their units.*
- I.16** In our survey, almost a quarter (23%) of prisoners said that they felt unsafe currently, which was far higher more than at similar prisons (15%) and than at the time of the previous inspection (20%). Over 30% of prisoners said that they had been victimised either by other prisoners or staff.
- I.17** There had been 75 prisoner-on-prisoner assaults in the previous six months, which was much higher than we usually see. The numbers of fights and assaults on staff were lower, and similar to those at comparable prisons. In our survey, more prisoners on the South site than the North site said that they felt unsafe (26% versus 16%). Data on violence showed that there were a number of hotspots on the South site.
- I.18** Prisoners told us that many incidents were due to drugs, debt and gang issues, and this was supported by the data. Most violent incidents were low level but 15% of incidents involved the use of weapons.
- I.19** There was good analysis of trends in violent incidents. However, it was not used to develop a clear strategy to reduce violence and there was no action plan (see main recommendation S49). The monthly safer custody meeting was generally well attended but generated only a few actions, mostly of an operational nature. Nonetheless, there had been some good initiatives. The prison had hosted research into gang membership, and a working group was being formed to consider how this could be taken forward. A prisoner-led mediation service, 'Leap', had been launched. This aimed to resolve minor disputes between prisoners before they escalated, and initial outcomes looked encouraging. There had recently been a useful violence reduction forum; it was intended that this would be a regular event.
- I.20** The safer custody team was supported by a safer custody orderly and two gang peer support orderlies. All performed a valuable role in keeping the safer custody team informed of emerging issues and concerns with specific prisoners. However, the management of victims required further development. Victims of bullying or violence were supposed to be placed on a victim support plan but entries in the case management system did not give assurance that any meaningful planning took place. Victims were mainly supported through unit moves. A small number of prisoners were afraid to leave their cells. More were afraid to leave their units and were disadvantaged considerably in terms of access to activities and rehabilitation. There was insufficient monitoring of these prisoners, no strategy to address their needs and insufficient engagement (see main recommendation S49).
- I.21** Many prisoners told us that poor behaviour was dealt with robustly. This appeared to contribute well to the sense of order in the establishment. However, beyond the use of

normal disciplinary measures and the incentives and earned privileges (IEP) scheme, planning was limited and there were few interventions to deal with bullying and address violent behaviour (see main recommendation S49).

- I.22** Victims of bullying or violence were supposed to be placed on a victim support plan but entries in the case management system did not give assurance that any meaningful planning took place. Victims were mainly supported through unit moves. A small number of prisoners were afraid to leave their cells. More were afraid to leave their units and were disadvantaged considerably in terms of access to activities and rehabilitation. There was insufficient monitoring of these prisoners, no strategy to address their needs and insufficient engagement (see main recommendation S49).

Self-harm and suicide prevention

Expected outcomes:

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

I.23 *There had been three self-inflicted deaths since the previous inspection but not all Prisons and Probation Ombudsman recommendations had been implemented effectively. The number of prisoners at risk of self-harm was relatively low. Far too few staff were trained in assessment, care in custody and teamwork (ACCT) procedures, and the quality of ACCT documentation was very poor. For the most vulnerable prisoners, the standard of complex care planning was excellent.*

- I.24** There had been three self-inflicted deaths since the previous inspection. Action plans had been put into place to address Prisons and Probation Ombudsman recommendations, but not all actions had been implemented effectively, particularly those relating to the quality of support for prisoners at risk of self-harm.
- I.25** The numbers of prisoners who had self-harmed, and of assessment, care in custody and teamwork (ACCT) case management documents opened were lower than we usually see. Although there was some good trend analysis in relation to prisoners on ACCTs, it was not used sufficiently to develop a strategy and planning to prevent suicide and self-harm.
- I.26** Only 76 out of 419 staff had been trained in ACCT procedures, and quality assurance of care was ineffective. The quality of documentation was very poor. Triggers for self-harm were rarely identified, many care maps did not address the key needs of the prisoner, reviews were poor and observations showed little meaningful interaction with the prisoner.
- I.27** However, there was evidence that particularly vulnerable prisoners were cared for well. There was a useful weekly multidisciplinary safeguarding meeting, where issues regarding vulnerable prisoners were discussed. Safer custody complex needs meetings for the most vulnerable were excellent and showed some very good care.
- I.28** A total of 19 prisoners on ACCTs had been held in segregation in the previous six months, which was too many. Documented reasons provided insufficient detail to show that segregation had been justified.

- I.29** There was a gated observation cell in the segregation unit, which was an inappropriate location for someone in crisis. One prisoner had been held there for just over a day. Conditions in gated cells had improved, and they were clean and adequately furnished.
- I.30** The team of Listeners felt well supported by staff and the Samaritans.

Recommendations

- I.31** **Recommendations from Prisons and Probation Ombudsman reports should be reviewed regularly to ensure that they are fully implemented in practice.**
- I.32** **A strategy to prevent self-harm and suicide should be developed using trend analysis data and other intelligence.**
- I.33** **Prisoners at risk of self-harm or suicide should be cared for effectively. Good standards of care should be maintained by a programme of refresher training and robust quality assurance of assessment, care in custody and teamwork (ACCT) documentation.**
- I.34** **Segregation should only be used exceptionally and as a last resort for prisoners in crisis and at risk of suicide and self-harm. (Repeated recommendation I.33)**

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.³

- I.35** *Considerable progress had been made in developing safeguarding provision but training for staff had not yet been delivered.*

- I.36** Considerable progress had been made in developing adult safeguarding measures. A Suffolk safeguarding policy had been agreed with other prisons in the county and the local social care commissioners. Notices had been issued to staff regarding their responsibilities, and to prisoners telling them how to make a self-referral.
- I.37** Referrals were coordinated through the health care provider, Care UK, and a memorandum of understanding with the social care commissioners outlined the detail of responsibilities for providing care for prisoners.
- I.38** Training for staff in identifying and referring prisoners had not been provided at the time of the inspection, although we were told that it had been requested by the social care commissioners.

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

Security

Expected outcomes:

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

- I.39** *Security was mostly proportionate and security information was well managed. There was a good awareness of the threats to the prison, notably drugs and mobile telephones and related activity, which had resulted in some large finds of both. Drugs and alcohol were easily available and there were some good local initiatives to disrupt supply, but no formal supply reduction policy or action plan.*
- I.40** Physical and procedural security arrangements across both sites were mostly appropriate and there was an appropriate freedom of movement within the internally zoned-off areas. However, the use of closed visits for non-visits-related issues was disproportionate.
- I.41** Dynamic security was good, and underpinned by effective staff–prisoner relationships (see section on staff–prisoner relationships) and a good flow of intelligence reports (IRs) from across the prison. IRs were processed efficiently and intelligence was collated to provide a clear picture of the key threats to security and identify hotspots. Most IRs related to drugs (especially Spice, one of the new psychoactive substances (NPS) – new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects), mobile telephones and illicitly brewed alcohol (hooch).
- I.42** In our survey, more prisoners than at the time of the previous inspection said that drugs and alcohol were easily available at the prison (40% versus 25% for drugs, and 23% versus 15%, for alcohol). Further analysis showed that this increase reflected much greater availability on the South site. While 2% of those surveyed on the North site said that they had developed a problem at the prison, this rose to 11% on the South site.
- I.43** There was minimal target drug testing and it was not always carried out within prescribed timescales. The average random mandatory drug testing positive rate for the previous six months was relatively low, at 4.4%, but NPS, which could not be tested for, had become the prison’s largest problem by far.
- I.44** There had been some large finds of drugs and hooch during 2015, with over 1.5 kilograms of NPS and 126 litres of hooch, along with over 150 mobile telephones and many SIM cards found. Most finds were made on the South site, where the large perimeter and rural location provided opportunity for packages containing contraband to be thrown over the perimeter fence.
- I.45** The prison was well sighted on the threat of drugs and alcohol. The security committee considered a wide range of data, drawn from an excellent intelligence report identifying current and potential risks, and formulated some good initiatives to disrupt and address issues. For example, some excellent and innovative work with the prison’s police intelligence officer and local and regional police forces had led to some successful operations to deter and intercept the supply of drugs. There was good information sharing between security, health and substance misuse services. The prison, however, would have benefitted from the development of a formal drug supply reduction strategy and action plan to better coordinate activity and ensure a greater consistency in approach.

Recommendations

- I.46 Prisoners should not be placed on closed visits for non-visits-related reasons.** (Repeated recommendation I.46)
- I.47 There should be a drug supply reduction strategy.** (Repeated recommendation I.47)
- I.48 Suspicion tests should be completed within prescribed timescales.** (Repeated recommendation I.48)

Incentives and earned privileges⁴

Expected outcomes:

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

I.49 *Prisoners were positive about the incentives and earned privileges scheme. Effective measures had been developed to incentivise good behaviour.*

- I.50** In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection said that the IEP scheme encouraged them to change their behaviour. Administration of the scheme was consistent and reviews took place regularly.
- I.51** The IEP scheme had been developed since the previous inspection. Differences between the levels of the scheme had been extended, and additional features of the enhanced level included extra time out cell, consideration for trusted jobs and more visits. In addition to this we found a culture and broad measures which encouraged good behaviour and many prisoners told us that notwithstanding its remote location they could see the benefits of being at Highpoint. Prisoners were keen to be able to access the better accommodation on the South site and many aspired to being allocated to the North site, which was mostly available to those who behaved well. The number of places on the enhanced units (where prisoners had more on-unit freedom and enhanced facilities) had also been increased, which also incentivised good behaviour.

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

Discipline

Expected outcomes:

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

I.52 *The number of adjudications was high. Management oversight and quality assurance procedures were adequate. Levels of use of force were low but not all incidents involving the planned use of force were video-recorded. There was little use of special accommodation. Use of segregation was relatively low. The segregation unit was bright, clean and in good order. Reintegration planning had improved and was good. The number of prisoners transferred to other prisons from the segregation unit had reduced. Staff-prisoner relationships on the unit were good.*

Disciplinary procedures

- I.53** There had been 1,415 adjudications in the previous six months, which was higher than at comparator prisons and almost double the number during the same period before the previous inspection. Many adjudications could have been dealt with under the IEP system, and this had been identified at the quarterly adjudication review meeting. Most adjudications related to the South site and to charges for disobedience, unauthorised possession, assaults and threatening behaviour.
- I.54** The adjudications and records we observed were mostly detailed and demonstrated an appropriate level of investigation. The quarterly review meetings and senior management quality assurance provided sufficient monitoring and oversight.

The use of force

- I.55** The level of use of force was relatively low when compared with that at similar prisons and at the time of the previous inspection. Managerial oversight and scrutiny had improved considerably, as had the quality of paperwork, but we still found too many dossiers that were incomplete.
- I.56** Most planned use of force was video-recorded but incidents during the night were not. The videos we observed showed a focus on de-escalation of incidents, and most prisoners had responded well to this. The quality of the recordings was variable; some showed excellent briefing/debriefing and a good narrative of the incident but others failed to provide a continuous recording of the incident from start to finish.
- I.57** Special accommodation was used rarely and the comprehensive records indicated that its use was proportionate, appropriately authorised and well monitored, with prisoners being removed at the earliest opportunity.

Housekeeping points

- I.58** All use of force documentation should be complete and include an F213 form for each incident.
- I.59** All planned interventions should be recorded regardless of the time of day and should include a continuous record of the entire intervention.

Segregation

- I.60** The condition of the segregation unit had improved considerably, and it was clean and in good order, with well-equipped cells and a refurbished shower area.
- I.61** Despite some periods of high occupancy earlier in 2015, the use of segregation was lower than at comparator prisons and than at the time of the previous inspection. There was a policy of not transferring prisoners for poor behaviour and this appeared to be having a positive impact, with far fewer prisoners seeking transfers from segregation than we usually see. As a result, a few prisoners had been segregated for relatively long periods but it was clear that the prison had made efforts to reintegrate them to normal location during these periods and had achieved some successes with some particularly problematic prisoners. The average length of stay on the unit was around 10 days, with most prisoners returning to normal location.
- I.62** Reintegration planning was good and started immediately after location on the unit. Managerial oversight of segregation was consistent, with effective communication to key staff. Attendance at the monthly monitoring and review group was much improved.
- I.63** The segregation regime was limited; it consisted of daily access to showers and telephones, and only 30 minutes' exercise per day. Prisoners could apply to attend religious services following a risk assessment but there was no evidence of this happening in 2015 to date.
- I.64** We observed some particularly poor behaviour by a few prisoners on the unit, and this was handled sensitively and well by the unit staff. Prisoners reported positively on their treatment by segregation staff.

Recommendation

- I.65** **The regime in the segregation unit should be improved and prisoners should have access to in-cell and off-unit activities (subject to risk assessments) and have the opportunity to spend at least an hour in the open air each day.**

Substance misuse

Expected outcomes:

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

- I.66** *A substance misuse strategy committee had been formed to coordinate service provision but the drug and alcohol policy was out of date. Prisoners could access a range of interventions, which included both a drug and an alcohol programme, but the designated drug recovery unit held too many prisoners not committed to its purpose. Clinical treatment was appropriately recovery focused.*

- I.67** The substance misuse policy had not been reviewed for over two years, and the action plan did not incorporate the findings of the recent needs analysis. A multi-agency drug strategy committee, chaired by the deputy governor, met bimonthly and there was good information sharing between departments.
- I.68** All new arrivals were seen by the Rehabilitation of Addicted Prisoners trust (RAPt) team and provided with information about the service, as well as harm reduction information relating

to Spice and other NPS (see also section on security). RAPt provided a range of interventions to meet the different needs of the population across both sites. All prisoners could access one-to-one support, and a 'living safely' module was running on the integrated drug treatment system (IDTS) unit. Recovery-focused support on the designated drug-free unit included two accredited abstinence-based programmes (one for drug and one for alcohol users), an NPS workshop, a music project and acupuncture sessions. There was also an active peer support scheme, Alcoholics Anonymous and Narcotics Anonymous groups, and regular service user consultation meetings. However, only 50% of those located on the large (120 prisoners) drug-free unit had a drug or alcohol issue, and the mix of general prisoners with those committed to recovery undermined the ethos of the unit.

- I.69** Prescribing regimes were flexible and took account of individual need. At the time of the inspection, 67 prisoners were receiving opiate substitute treatment, most (76%) on a reducing basis. Treatment reviews were held regularly and there was good integrated working between clinical and RAPt services. Prisoners with both substance use and mental health-related problems were referred to the mental health team but there was no dual diagnosis expertise or care pathway. Controlled drug administration took place on the designated IDTS unit and was supervised appropriately.

Recommendations

- I.70** The substance misuse policy document should be reviewed and the action plan updated in light of the recent needs analysis.
- I.71** The drug free wing should hold only prisoners committed to drug recovery.

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** *The external grounds were well maintained. The condition and cleanliness of prisoner accommodation ranged from reasonable to very good. Prisoners were positive about their access to facilities and services on residential units. Access to stored property and recovery of missing items was problematic. The applications system was weak and not monitored.*
- 2.2** The external grounds were pleasant and mostly litter free. Litter thrown from cell windows during the night was cleared regularly.
- 2.3** The cleanliness and condition of the accommodation ranged from reasonable to very good. Since the previous inspection, there had been a focus on improving the cleanliness and condition of the accommodation on both sites. A planned and well-coordinated programme of redecoration was in place and over 1,000 cells had been redecorated. Prisoners were encouraged to take part in the painting and decoration of communal areas and cells and many prisoners worked hard and showed a strong investment in the programme. With the exception of some showers and toilets, communal areas on both sites were clean, in good decorative order and well maintained.
- 2.4** Most cells were clean, bright and in good decorative order, and the offensive display policy was adhered to. However, there was considerable damage to the flooring in some cells on the South site and some furniture was in need of repair or replacement. There was insufficient in-cell lockable storage for personal items or prescribed medication.
- 2.5** In our survey, 74% of prisoners, against the 66% comparator, said that they were normally offered enough clean, suitable clothes for the week and we saw adequate and organised stores of clothing on both sites. More prisoners than elsewhere said that they received clean sheets each week (89% versus 73%) and more said that they were able to have a shower every day (97% versus 92%).
- 2.6** Many prisoners said that they had problems accessing their stored property held in reception, with some waiting for up to four months. A considerable number of prisoners experienced problems with loss of property on transfer but the governor had taken proactive steps to compensate prisoners whose property had been lost during transfer or went missing afterwards.
- 2.7** In our survey, most (82%) prisoners said that it was easy to make an application; however, for those who had made an application, only 40% said that it had been dealt with quickly. There was no tracking system to monitor the timeliness of responses to applications and there was no quality assurance by managers. Delays in the applications process had resulted in prisoners using the complaints system as an alternative (see paragraph 2.43).

- 2.8** In our survey, fewer prisoners than elsewhere said that they had had problems in getting access to wing telephones (12% versus 23%). Privacy hoods and individual booths for telephones had been introduced on a number of house blocks.

Recommendations

- 2.9** **Damaged flooring on residential units should be replaced and the refurbishment of all showers and toilets should be completed as soon as possible.**
- 2.10** **Prisoners should be provided with lockable storage for their medication.**
(Repeated recommendation 2.88)
- 2.11** **Prisoners should be able to get efficient access to their stored property.**

Staff-prisoner relationships

Expected outcomes:

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

2.12 *Relationships between prisoners and staff were good. Senior managers led by example through their positive interaction with prisoners. Consultation with prisoners was mostly good but some issues were not dealt with adequately.*

- 2.13** In our survey, 82% of prisoners, against the 79% comparator, said that most staff treated them respectfully. Staff were knowledgeable about the prisoners in their care and we saw courteous and respectful interaction. Staff encouraged prisoners to engage in activities and routines, and challenged inappropriate conduct. Members of the senior management team led by example through their daily presence on the house blocks and walks around the prison grounds, engaging positively with prisoners. Entries in electronic case notes did not reflect the good-quality engagement we observed and too many were infrequent and cursory.
- 2.14** Consultation with prisoners to discuss wing and domestic matters took place regularly through quarterly prisoner forums but some issues raised by prisoners were not always dealt with in a timely manner, and forums on the South site had taken place less often. A rolling programme of measuring the quality of prison life (MQPL) focus groups, where prisoners were invited to discuss wider prison matters, took place monthly. Matters arising were shared with the senior management team and action points identified.

Recommendation

- 2.15** **Prisoner wing forums should take place regularly on the South site and issues raised by prisoners should be dealt with promptly.**

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 had improved. However, insufficient work was being done to consult with minority groups and train staff. An external consultant had been appointed to support the equality team. Discrimination incident complaint forms were mostly well investigated. The perceptions of black and minority ethnic and Muslim prisoners, and those with disabilities, about their treatment were poor. Although immigration services had improved, there was not enough use of professional interpreting services or translated materials for non-English speakers. The needs of prisoners with a disability were not met systematically. There was no support for gay and bisexual prisoners. There was good support for transgender prisoners.*

Strategic management

- 2.17** The strategic management of equality had improved. There was a comprehensive equality and diversity policy, and an action plan. The equality action team meeting was bimonthly, chaired by the governor, and was attended by prisoner representatives. The meeting was effective in checking progress against the action plan, monitoring equality through the standard equality monitoring tool and reviewing discrimination complaints. Monitoring had led to investigations of perceived discrimination and demonstrated that the approach to equality was robust. However, monitoring was limited to the Prison Service standard list of areas and had not been expanded locally to include issues that were relevant specifically to the establishment, such as employment and involvement in violence.
- 2.18** There was an active equality team, supported by a representative from Ipswich and Suffolk Council for Race Equality (ISCRE), who attended the prison twice a week. This external consultant played a valuable role in supporting and directing the prison's approach to equality and diversity. There were also prisoner equality orderlies with access to all areas of the prison, and prisoner representatives on each wing. The role of these individuals was to provide a network of support and advice to prisoners, alert the equality team and other staff to any problems and to act as a means of consultation. Although this was a valuable structure, we found some problems in its practical application, with appointments to representative posts not always being regulated by, or notified to, the equality team, and some representatives had been appointed without adequate training or briefing in their role.
- 2.19** In our survey and in our groups, prisoners from minority groups had negative perceptions about their treatment, even though there had been some good initiatives to investigate their concerns (see paragraphs 2.25 and 2.28). For example, there was a programme of consultation with prisoner orderlies and representatives in an attempt to understand and counter these perceptions. However, these were not broadened to involve all prisoners

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

from minority groups, and at times these meetings had not taken place as planned (see main recommendation S50).

- 2.20** Discrimination incident complaint forms (DIRFs) were readily available and the number submitted was similar to that at other establishments. Although responses were generally late, there was a good system for investigating and responding to DIRFs. Before these were allocated for investigation, the ISCRE representative provided a helpful briefing for the investigator about the matters that should be covered, and monitored the quality of responses. The DIRFs that we examined had been investigated thoroughly, with findings well explained and responses courteous.
- 2.21** Equality was promoted around the prison by events and displays related to occasions such as Black History Month and Remembrance Day.

Recommendation

- 2.22** **The monitoring of outcomes for prisoners with protected characteristics should be broadened, to include all areas relevant to the prison.**

Housekeeping point

- 2.23** Prisoner equality representatives should be briefed in their role and trained as soon as they are appointed.

Good practice

- 2.24** *The external consultant from Ipswich and Suffolk Council for Race Equality made a worthwhile contribution to the investigation of equality complaints and progress with equality work in the prison.*

Protected characteristics

- 2.25** There was a large population of black and minority ethnic prisoners at the establishment, and their perceptions were more negative than those of white prisoners, both in our survey and our groups. For example, only 17% of black and minority ethnic prisoners, compared with 31% of white prisoners, said that staff normally spoke to them during association; 37%, compared with 24%, that they had been victimised by a member of staff; 69%, compared with 75%, that they had felt safe on their first night; and 51% were currently working, compared with 68% of white prisoners. Muslim prisoners were also more negative than non-Muslims about safety, relationships with staff, and employment. Some efforts had been made to consult about these concerns through prisoner representatives but these had not been successful (see paragraph 2.19 and main recommendation S50).
- 2.26** There were 255 foreign national prisoners, representing nearly 20% of the population. Provision for the small minority who did not speak English was poor. There was no written information provided in languages other than English, and professional interpreting services were not used widely enough. A list of prisoners and staff available to interpret was available and officers we spoke to told us that they relied on this. We found examples where prisoners had been used inappropriately to interpret in confidential matters, such as assessment, care in custody and teamwork (ACCT) reviews.

- 2.27** At the time of the inspection, five prisoners were being detained beyond the end of their sentence; one of them had been held for four years beyond their tariff expiry date. Immigration services had improved and Home Office staff attended the prison three days a week, held surgeries on both sites and planned to extend provision with a drop-in facility. They communicated effectively with prisoners subject to immigration measures and continued to work on progressing the case of the prisoner being held long after the end of his sentence. However, no independent immigration advice and support were available.
- 2.28** Prisoners who considered themselves to have a disability were identified by the equality orderlies during induction but the equality team did not keep an independent record of them or ensure that their needs were being met systematically. They responded to requests by residential or health services staff to implement reasonable adjustments for prisoners with disabilities, and the fire officer prepared evacuation plans for those notified to him, but such provision was inconsistent. We found some prisoners with a disability who had an evacuation plan and a care plan identifying reasonable adjustments to be provided, and some had designated paid prisoner carers. However, we also found prisoners with serious disabilities who had not been identified and had no support or planning to meet their needs. In our survey, prisoners who considered themselves to have a disability were far more negative than other prisoners in important areas such as safety and relationships with staff.
- 2.29** There was currently no provision for gay and bisexual prisoners but we were told that contact had been made with a support group to visit the prison.
- 2.30** There was one transgender prisoner held at the time of the inspection. Her needs had been met well and prison managers had carefully prepared for her transfer to the establishment, so that she could live safely as a woman while serving her sentence.

Recommendations

- 2.31 Professional interpreting services should be used effectively and a range of translated material should be provided to inform foreign national prisoners of the regime and services available to them, and help them feel less isolated.** (Repeated recommendation. 2.39)
- 2.32 Foreign national prisoners should have access to independent immigration advice.** (Repeated recommendation 2.40)
- 2.33 The needs of all prisoners with disabilities should be identified and recorded, and they should all have a care plan and emergency evacuation plan, both of which should be reviewed and updated regularly.**

Good practice

- 2.34** *Prison managers had carefully prepared for the admission of a transgender prisoner, so that she could live safely as a woman while serving her sentence.*

Faith and religious activity

Expected outcomes:

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

- 2.35** *All faiths in the prison were catered for. The chaplaincy was well integrated across the prison and provided a wide range of support to prisoners. Community contact was developing well.*
- 2.36** There was good provision from the chaplaincy on both sites. In our survey, more prisoners than at comparator establishments said that their religious beliefs were respected, that they were able to speak to a religious leader in private and that it was easy to attend religious services.
- 2.37** There were employed and sessional chaplains available, representing all faiths, and appropriate worship was freely accessible. On both sites, there were well-appointed Christian chapels and multi-faith rooms. The number of Muslim prisoners attending prayers could not be accommodated in the multi-faith rooms, resulting in the gym being used as an overflow; however, the Muslim chaplain assured us that this was a satisfactory arrangement.
- 2.38** The chaplaincy was well integrated across the prison. The managing chaplain was a member of the senior management team, and chaplains were represented on important management groups, such as those concerned with equality, security and safety.
- 2.39** The team provided a range of activities, including music groups, religious classes and discussion groups. There was good support for prisoners, including private meetings with chaplains, volunteers trained by CRUSE (a charity offering care and support after the death of someone close) to support bereaved prisoners, and a volunteer prison visitors group. The team also ran the Restore victim awareness programme, which was an Open College Network accredited programme developed locally (see also paragraphs 4.51 to 4.53).
- 2.40** The chaplaincy had a community development strategy, which involved local volunteers in supporting worship, assisting at chaplaincy events and providing religious artefacts. Contact with prisoners' home faith communities was also provided, either to organise a visit during their sentence or to make arrangements for contact and support on release.

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.

- 2.41** *The number of complaints submitted was high. Many could have been resolved through the application system. Monitoring was basic. The quality of responses was variable. Not all types of complaint forms were available on the wings.*

- 2.42** The number of complaints submitted was high. In the previous six months, prisoners had made 1,911 formal complaints, which was more than at comparable prisons. Most complaints were about property, wing issues and employment.
- 2.43** Many complaints could have been resolved using the application system, or were about unresolved applications (see paragraph 2.7). The monitoring of complaints was rudimentary. Trends were analysed only by category and location. The protected characteristics of complainants were not monitored (see paragraph 2.17). The outcome of complaints was not recorded.
- 2.44** The quality of replies had improved but was still variable. Many were polite but others were perfunctory and did not address or resolve the issue, and some were illegible. Investigations were sometimes superficial. Not all types of complaint forms were available on all wings⁶. The deputy governor quality checked a sample of complaint responses each month and fed back to managers.

Recommendation

- 2.45** **The complaints monitoring system should be effective, providing analysis of complaints (both upheld and refused) each month by all protected characteristics, to identify patterns and make improvements.**

Housekeeping point

- 2.46** All types of complaint forms should be freely available on all residential units.

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.

- 2.47** *Prisoners could not direct their legal queries to a single point of contact. There was insufficient computer support for appellants. Prisoners could not consult their lawyers in private.*

- 2.48** There was no centralised resource to help prisoners with legal issues. At the time of the inspection, 31 prisoners were appealing their sentence or conviction. Prisoners were not allowed to work on their cases on the library computers and there was only one 'access to justice' laptop computer to lend to prisoners, which was insufficient.
- 2.49** Legal visits took place in the open visits halls, so prisoners could not consult their lawyers in private.
- 2.50** The libraries stocked a good selection of legal textbooks and Prison Service Instructions (see paragraph 3.36).

⁶ Three types of general complaint forms are used in prisons: a formal complaint form, an appeal form and a form for making confidential complaints which are only accessed by the governor.

Recommendation

- 2.51** Prisoners should have access to staff who are trained to provide advice and practical support in pursuing legal matters. (Repeated recommendation 2.55)
- 2.52** Prisoners should be able to consult their lawyers in private.

Housekeeping point

- 2.53** There should be sufficient ‘access to justice’ laptop computers to meet the needs of the population.

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.

- 2.54** *Health services were reasonable and continuing to improve, with good local partnership arrangements and effective governance processes. Prisoners were treated respectfully, by professional staff, and could access an appropriate range of services, although they waited too long to see the dentist, optician and physiotherapist. Pharmacy provision overall was good but the in-possession medicine collection arrangements left staff and prisoners vulnerable. Mental health services had improved but some elements of primary care input were weak.*
- 2.55** *The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁷ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found no breaches of the relevant regulations.*

Governance arrangements

- 2.56** The CQC found no breaches of the relevant regulations.
- 2.57** Positive relationships between health services staff, the prison and commissioners contributed to good health outcomes for prisoners. An appropriate range of services, informed by a recent health and social care needs assessment, were advertised to patients in accessible formats.
- 2.58** Operational leadership was clear and staffing levels appropriate, and the skill mix reflected patient need. Staff had good access to relevant training and development opportunities, and told us that they felt well supported. Clinical leadership and governance, including incident management, were robust. There were suitable arrangements to promote and monitor infection prevention and control. However, in the absence of a recent infection control audit, some risks had not been identified and addressed.

⁷ 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>.

- 2.59** We observed good interactions between health services staff and prisoners that demonstrated mutual respect. Staff understood individual prisoners' needs and had adopted lead roles in respect of some medical conditions and for older people. Prisoners' health information was managed safely and shared to protect confidentiality.
- 2.60** Prisoners were asked routinely for their feedback about health services and we saw examples of improvements made in response to feedback. They also had access to a confidential health care complaints system that was well managed and included the option for a face-to-face resolution meeting with staff.
- 2.61** Immunisation and age-appropriate screening programmes were run, with the exception of bowel cancer screening. Smoking cessation clinics were well attended and valued by prisoners. Barrier protection was advertised, although uptake was low. Health care information was generally good and was available on all house units. Prisoners' health was promoted through a monthly newsletter and displays.
- 2.62** There was good access to appointments, both within the prison and externally. External appointments were risk rated to ensure that critical appointments were prioritised. Cancellations were rare and activity was monitored routinely. Waiting lists were well managed and most patients were seen promptly. Owing to recent changes in providers, some prisoners experienced long waits to see the dentist, optician and physiotherapist, but this was being addressed by the provision of extra sessions. The number of prisoners failing to attend appointments was sometimes high, but it was monitored and followed up individually to ensure that needs were met. Consent to treatment was managed well. However, consent to share information with other parties was not systematic.
- 2.63** Clinical equipment was subject to regular checking and servicing. Emergency equipment was accessible, with sufficient automated external defibrillators (AEDs) across both sites. However, we found inadequate checking of emergency equipment, both in the health centre and on residential units. Prison and health services staff understood the emergency codes in use. Prison staff did not receive specific awareness training in the use of AEDs and too many of the staff we spoke to were not familiar with the location and response protocol to access these. Only 21% had received first-aid training and few staff had received basic life support refresher training since their initial induction. Ambulance response times appeared appropriate but current log books did not systematically record activity chronologically.

Recommendations

- 2.64 All clinical environments and equipment should be monitored and comply with infection control standards.**
- 2.65 Prisoners should have access to screening programmes and experience waiting times for appointments that are equivalent to those in the community.**
- 2.66 The partnership board should coordinate strategies for the provision and placement of automated external defibrillators, checking of equipment, and the training and deployment of trained staff. (Repeated recommendation 2.66)**

Housekeeping point

- 2.67** Consent to share confidential personal information should be sought routinely during the reception process.

Good practice

- 2.68** *The confidential health care complaints system included the option for prisoners to have a face-to-face resolution meeting with staff.*

Delivery of care (physical health)

- 2.69** The reception process included a health screening, which was undertaken by experienced and competent registered nursing staff. The process was thorough, with a strong focus on disease prevention. Access to specialist health professionals was also facilitated.
- 2.70** Assessment and treatment were provided in the health suite on each of the sites. The waiting area on the South site was very busy and sometimes cramped, with men waiting too long to see health service professionals. They also waited in crowded conditions following their consultation, as free-flow movements were not facilitated. In addition, the dental suite on the South site opened directly into the waiting area, which exposed the dental team to risk and provided limited privacy for those receiving dental treatment.
- 2.71** Prisoners were seen by the GP for non-urgent care within seven to 10 days. In our survey, more prisoners than at the time of the previous inspection (47% versus 31%) said that the quality of medical provision was good or better, and prisoners we spoke to were positive about the care they received from the doctor. Complex cases were subject to a thorough multidisciplinary review.
- 2.72** Chronic disease management arrangements were developing but there were few formal care plans and the quality of record keeping was variable. The service also relied on peer interpreting for individuals whose first language was not English, and this could have compromised medical confidentiality (see also paragraph 2.26).

Recommendation

- 2.73** **A health and safety review of the South site health centre waiting area and the entry point to the dental suite should be conducted to determine any control measures that would better assure staff safety and patient privacy.**

Pharmacy

- 2.74** An internal pharmacy provided all medication promptly, with appropriate labelling and patient information. A full-time pharmacist and five pharmacy technicians were based on site. A formulary (a list of medications used to inform prescribing) and appropriate in-date policies were used. Refrigerator temperatures were managed appropriately and medicines were stored safely. The pharmacist took part in the multidisciplinary team and medicines management committees.
- 2.75** Most prisoners on medication received it in-possession, and most had contemporary risk assessments on SystemOne (electronic clinical information system), although changes to the way that patients were supplied medicines were not always recorded.
- 2.76** Prisoners who missed their medication were identified and followed up appropriately. The administration records we examined were complete. Supervised medication was administered by nurses twice daily from both health centres. On the North site, men collected in-possession medication from the central health facility. However, in-possession

medicines on the South site were delivered to the wings and collected by prisoners during the lunch period, which carried significant risks, both to staff and prisoners. There were also other issues with this arrangement. For example, the room from which prisoners collected their medication on unit 2 was dirty and the lights were not working; on unit 5, the laundry room was used, and a table was used to block the door, the panic alarm was out of reach and there was no gate or hatch; on unit 8, an open counter was used, with the medicines trolley placed onto chairs. Supervision of this process by staff across the wings was variable. Prisoners did not sign for their medicine, and in-cell lockable facilities to secure medicines were not always available (see paragraph 2.4 and recommendation 2.10).

- 2.77** Use of the out-of-hours cupboards was not reviewed, to check that inappropriate quantities of medicines were not being handed to patients, and patients supplied with medicines as ‘special sick’ (immediate health treatment without an appointment) were not assessed for their prescribed medicines. For example, one patient was given paracetamol when he had already been prescribed co-codamol (a preparation which also contains paracetamol), eight tablets daily, which could have led to a paracetamol overdose.

Recommendations

- 2.78 In-possession risk assessments should be audited to ensure that reasons for changes are recorded.**
- 2.79 In-possession medicines should be delivered to prisoners in a way that promotes safety and provides adequate supervision to ensure privacy and confidentiality.**
- 2.80 The special sick and out-of-hours provision should be reviewed to ensure that prisoners are not placed at risk by inappropriate dispensing.**

Dentistry

- 2.81** Community Dental Services (CDS) had recently taken over provision of dentistry services. They offered routine assessments and a full range of standard NHS treatments. There was a dental suite on each site. Both were spacious and clean, and the care we observed was good. The environments were mainly good but sinks on both sites did not fully comply with infection prevention standards. Dental equipment was appropriately maintained and there were safe arrangements to dispose of waste materials.
- 2.82** Access to the dentist took too long and the new service was not fully established. Prisoners had to wait around nine weeks for a routine assessment and then a further seven weeks for treatment. The current waiting list for assessment contained 249 names. Although slots for urgent referrals were ring fenced, prisoners had experienced difficulties in accessing them, although this issue was resolved during the inspection (see recommendation 2.65).

Recommendation

- 2.83 The dental suites should comply with infection control and prevention standards.**

Delivery of care (mental health)

- 2.84** An integrated mental health service was provided by Care UK during the week. The team was fully established and consisted mainly of nurses and a consultant psychiatrist, who attended 1.5 days per week, but there was no clinical psychologist, occupational therapist or counselling service.
- 2.85** There was an open referral system, with triage assessments undertaken daily. The team aimed to see everyone within five days, and urgent cases within 24 hours. A total of 55–70 referrals were received each month.
- 2.86** At the time of the inspection, the mental health primary care caseload was 74 and an additional 19 men with enduring and severe mental health problems were being managed effectively under the care programme approach.
- 2.87** Prisoners attended individual sessions in the health centres and an outreach model was offered on the wings. Nurses delivered individual brief and solution-based interventions and there was a wide range of guided self-help material, but no therapeutic groups. A weekly team meeting was held to discuss ongoing care and new referrals. Care plans and clinical records were good and the interventions we observed were undertaken in a professional and caring manner. Supervision arrangements were appropriate.
- 2.88** Working relationships with other areas of the prison were good, including regular participation in the weekly safer custody complex needs meeting (see also paragraph 1.27). Mental health staff also attended ACCT and case management reviews. Although a training package had been developed, too few custody staff had received mental health awareness training.
- 2.89** There had been only one transfer to an external mental health service since January 2015. This had not taken place within the transfer time guidelines, resulting in a delay of 10 weeks.

Recommendations

- 2.90** Prisoners should have access to all clinically indicated psychological and group interventions, including professional counselling services.
- 2.91** The transfer of patients to external health care beds should be expedited and occur within Department of Health transfer target timescales. (Repeated recommendation 2.104)

Catering

Expected outcomes:

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

- 2.92** *The quality of the food provided had improved but was still too variable. Prisoners working in the kitchens could not gain relevant vocational qualifications. There were few opportunities for prisoners to eat together out of their cells. Consultation arrangements about the food were reasonably good.*

- 2.93** The quality of the food provided had improved. In our survey, 28% of prisoners said that the food was good or very good, compared with 19% at the time of the previous inspection. The prison baked most of its own bread, produced more of its own pies and used freshly laid eggs from the prison chickens. However, the quality of the food we tasted was variable; some meals were tasty but others were bland and overcooked.
- 2.94** Lunch was served at midday and the evening meal at 5pm but breakfast packs were issued on the evening before they were to be consumed, and were meagre.
- 2.95** Not all machinery and cooking equipment in the kitchens was working. The flooring of the kitchen on the South site was broken but there were plans to replace it. Serveries were reasonably clean but some prisoners served food without wearing overalls or hats. There were few opportunities for prisoners to eat together out of their cell.
- 2.96** Consultation arrangements about the food were reasonably good. There were regular consultation meetings, and a food survey had been conducted in July 2015; both of these had informed the new five-week menu.
- 2.97** Fifty-six prisoners were employed across the two kitchens but they were unable to gain accredited qualifications (see paragraph 3.17). Prisoners had basic opportunities to cook for themselves on their residential units.

Recommendation

- 2.98 Prisoners working in the kitchens should be able to study towards accredited qualifications.**

Housekeeping point

- 2.99** Prisoners working on serveries should wear overalls and hats.

Purchases

Expected outcomes:

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

2.100 *Prisoners had weekly access to the prison shop and could buy other items through catalogues. Some minority groups were less positive about the system and there had been no consultation to identify prisoners' needs and preferences.*

- 2.101** There was reasonable provision for prisoners to make purchases from the prison shop list every week, and in our survey more than at comparator prisons said that they could purchase a wide enough range of goods to meet their needs. However, in our survey only 43% of black and minority ethnic prisoners (compared with 50% of white prisoners) and 29% of those with disabilities (compared with 49% of those without) answered this question positively. There had been no general consultation with minority groups to identify what they wanted to buy from the shop (see paragraph 2.19 and recommendation 2.22).

2.102 An adequate range of catalogues was available, from which prisoners could buy more expensive items, such as clothes and electrical goods. No administration fee was charged for these orders.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁸

- 3.1** *The amount of time out of cell was adequate, although prisoners were locked up too early and the regime was not provided reliably. Outdoor exercise periods were too short.*
- 3.2** The amount of time out of cell was adequate but had reduced since the previous inspection. Prisoners working full time routinely had about nine hours a day unlocked during the working week but unemployed prisoners barely had four hours out of their cell.
- 3.3** Evening association was not provided routinely owing to staff shortages. Prisoners were locked up too early, at 6.15 pm, and arrangements to unlock working prisoners once a week for evening activities were cancelled too often. The weekend regime was not provided reliably, and weekend association was cancelled on a rota basis. Although we could not establish how often this occurred, staff and prisoners confirmed that it was a regular event on some wings.
- 3.4** In our spot checks, we found that 15.5% of prisoners were locked up during the working day and that 67% were engaged in a purposeful activity, two-thirds of them off the wing.
- 3.5** Outdoor exercise was limited to 30 minutes a day. It was provided on grassy areas, with adequate seating.

Recommendations

- 3.6** **Evening association periods should be extended.** (Repeated recommendation. 3.4)
- 3.7** **All prisoners should have one hour of exercise daily.** (Repeated recommendation 3.5)

⁸ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

Learning and skills and work activities

Expected outcomes:

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

3.8 *The overall effectiveness of learning, skills and work was good, as was leadership and management. Self-assessment and quality improvement processes were well developed and very effective. Senior managers had worked productively with the education and training provider, Novus, and had made considerable improvements to the provision. The variety and range of activities were good and met prisoners' needs well. The education curriculum placed a strong emphasis on developing prisoners' English and mathematics skills. Teaching, learning and coaching were good and trained prisoners provided excellent support in learning sessions. Not all prisoners were stretched and challenged sufficiently. Prisoners achieved well and success rates were high for most qualifications. They developed good personal and employability skills, were highly motivated and showed a good work ethic, particularly in the commercial workshops. In a few areas, interpersonal skills were not recognised or recorded sufficiently. Prisoners had good access to the library on each site and staff supported a number of initiatives aimed at improving prisoners' literacy skills successfully.*

3.9 *Ofsted⁹ made the following assessments about the learning and skills and work provision:*

Overall effectiveness of learning and skills and work: *good*

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: *good*

Personal development and behaviour *good*

Leadership and management of learning and skills and work: *good*

Management of learning and skills and work

3.10 The management of learning, skills and work was good. Prison senior managers had responded quickly and effectively to the recommendations of the previous inspection. They had increased the range of accredited vocational training and extended the number of activity places. Managers had made good use of a well-informed needs analysis, to identify employment opportunities in release areas. Plans were well advanced to extend vocational training and activities further.

3.11 Prison senior managers had developed strong and successful partnerships with external organisations and employers, which had resulted in a wide range of contract workshops. These provided good employability skill development opportunities to commercial standards.

⁹ 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>.

- 3.12** Most prisoners who had transferred from other prisons had already gained a qualification at level 1 in English and mathematics. Novus had taken over the education and vocational training contract in February 2015 and ensured that the focus of the education curriculum was on improving prisoners' English and mathematics skills further. Since the start of the contract, Novus staff had made good progress in raising the functional skills success rates in both English and mathematics, and these were high (see below). However, senior managers had recognised the need to improve further the success rates in mathematics at level 2 (see recommendation 3.35). The education and vocational training provided by Novus was good.
- 3.13** The prison's self-assessment report was comprehensive, self-critical and linked well to the quality improvement action plan. Partnerships across the prison were strong and effective. An extensive amount of data were collected and used well to inform decisions and scrutinise prisoners' performance. However, data were not analysed sufficiently by site, to ensure that any underperforming groups could be identified clearly.

Recommendation

- 3.14 Data should be collected and analysed to provide a comprehensive evaluation of all aspects of education and skills on both sites.**

Provision of activities

- 3.15** There were sufficient purposeful activity places for about 1,100 of the 1,300 prisoners. The number of prisoners working as cleaners on the residential units had reduced considerably and additional high-quality orderly posts had been introduced. These included trained peer mentors, classroom assistants, induction supporters and conflict mediators. Prisoners appreciated and valued the opportunities to develop their self-confidence and self-esteem. Too many prisoners (approximately 200) were unemployed and mostly waiting to be allocated to an activity.
- 3.16** Novus provided approximately 220 education places, most of which were part time. The range of programmes included English for speakers of other languages (ESOL), English, mathematics, graphic design, peer mentoring, business enterprise, 'family man', 'fathers inside' and employability training. Approximately 840 prisoners were employed in commercial contract and other prison work.
- 3.17** Approximately 100 full-time vocational training places were offered on the North site. The provision was focused effectively on areas where there was the potential for gaining well-paid employment on release, such as Street Works (for working on the roads/highways), kitchen fitting and plumbing. It also included, for example, carpentry and tiling, which were appropriate for those seeking self-employment. Most provision was at level 2, although some provision at level 3 was available in barbering and computer maintenance. Plans were well advanced to introduce accredited horticulture work, kitchen qualifications (see also paragraph 2.97), and welding and fabrication programmes. Well-paid commercial contract work was offered on the South site.
- 3.18** Prisoners' learning and skills and work induction was good and peer mentors supported induction staff and prisoners well. All prisoners had their immediate needs identified by experienced and qualified staff from Futures, the National Careers Service provider.
- 3.19** There were delays in processing prisoners' applications to activities and subsequent allocation. There were long waiting lists for work in the commercial contract workshops.

Recommendation

- 3.20** The establishment should provide additional activity places to meet the needs of the whole population and ensure that prisoners are allocated to a purposeful activity on a timely basis.

Quality of provision

- 3.21** The quality of teaching, learning and assessment was good. Most tutors, particularly in English, ESOL and business sessions, ensured that most prisoners made good progress through stimulating activities that met their needs and helped them to develop their understanding, knowledge and skills effectively. Tutors showed high levels of enthusiasm for their subjects. They explained theoretical concepts and principles well and used question and answer techniques adeptly to check and embed understanding and application.
- 3.22** Most teachers used ongoing assessment, particularly in English, to augment learners' knowledge and skills development. Prisoners acting as peer mentors supported teachers' practice very well, contributing to session planning and playing an important role in supporting prisoners' development.
- 3.23** In a minority of learning sessions in mathematics, teaching and assessment were weak. Sessions were structured poorly, with insufficient use of questioning to check prisoners' understanding. Prisoners were often not stretched and challenged sufficiently to improve their skills. Not enough tutors used information and learning technology (ILT) to enrich lessons.
- 3.24** Teaching, training and coaching in vocational training were good. Trainers' enthusiasm for teaching and their subject expertise helped to motivate learners to work effectively and with concentration. As a result, they made good progress during sessions in both practical and written work. Prisoners trained as mentors and other, more experienced prisoners provided good support to tutors, working effectively with groups and individuals to demonstrate and supervise practical tasks. They also provided good individual help to prisoners with written work.
- 3.25** In a number of areas, including computer maintenance and plumbing, tutors incorporated activity to develop learners' mathematics skills well. However, in most areas the focus on developing learners' ability to apply English in their vocational area was too limited.

Recommendations

- 3.26** Managers should ensure that all tutors plan appropriate activities that meet the needs of prisoners and that interest and challenge them to make good progress.
- 3.27** Tutors should improve the use of techniques, including question and answer, to ensure that all prisoners develop their understanding, knowledge and skills effectively.

Personal development and behaviour

- 3.28** Prisoners' attendance and punctuality were good. Prisoners in the workshops were highly motivated and showed a good work ethic. In one workshop, prisoners were required to sign an employment contract which replicated employment requirements for work in the

community. In a small minority of education sessions, prisoners arrived late and sessions were interrupted too frequently for appointments. Most prisoners understood fully the need to be prompt and take responsibility for their own development of personal and work-related skills. Learners took pride in their work; for example, those refurbishing wheelchairs valued the contribution they were making to the community. Those working as conflict mediators were proud to be placed in a responsible position and had showed excellent negotiation skills in several successful resolutions. Approximately 80 prisoners were engaged successfully in distance learning or Open University programmes.

- 3.29** Relationships between teaching staff and prisoners were excellent. Staff promoted high standards of behaviour and reinforced a culture of openly challenging inappropriate language and behaviour. This was reflected in prisoners' extremely good behaviour. Prisoners worked diligently in the workshops and recognised the importance of meeting deadlines and following instructions. However, prisoners' development of interpersonal skills was not always recognised or recorded as part of their achievements. The use of individual learning plans was variable and did not always provide prisoners with clear targets to improve.
- 3.30** A number of events supported by external employers gave prisoners the chance to talk to employers and gain an insight into the job market and how to apply for jobs. Staff from major construction companies interviewed and assessed prisoners, and offered places on training programmes and jobs on release. Local companies also provided staff to give presentations to prisoners about how to manage money and how to set up their own businesses.

Recommendations

- 3.31 Prisoners' appointments should be sequenced more effectively, to reduce interruptions to education and training sessions.**
- 3.32 Staff should ensure that prisoners' development of interpersonal skills is captured and recorded in all areas of learning, skills and work.**

Education and vocational achievements

- 3.33** Prisoners' achievements of accredited qualifications were high. Success rates in English and mathematics functional skills had improved and were high, but in level 2 mathematics were not high enough. A large proportion of prisoners achieved at least one level higher than that assessed at entry. Prisoners achieved well in most vocational training and personal development programmes. Prisoners on distance learning and Open University programmes achieved well.
- 3.34** Standards of work in vocational and creative areas were high, and standards across the provision were good. Prisoners made good progress from their starting points within and between levels, and there was little difference in achievement between different groups.

Recommendation

- 3.35 Success rates for mathematics at level 2 should be improved.**

Library

- 3.36** The library facilities, provided by Suffolk Libraries IPS Limited, were good but underused. The two library areas were well lit and spacious. Prisoners on both sites had good access to the facilities, and inter-library loan facilities were effective. A broad range of fiction and non-fiction titles were available, along with a wide selection of books for foreign nationals. A good selection of Prison Service Instructions and legal textbooks was stocked. Eleven stand-alone computers were well used by prisoners for learning languages, undertaking distance learning and creative writing.
- 3.37** Provision of the Shannon Trust reading programme ‘Turning Pages’ was administered well, and approximately 27 mentors and a similar number of mentees were engaged successfully in activities. According to library data, approximately 50% of prisoners accessed the facility, and this proportion had risen slightly since 2014. However, there were insufficient data on the usage by different groups of prisoners.
- 3.38** Managers had introduced a number of activities to increase prisoners’ literacy skills; these included: the Six-Book Challenge, reading groups, creative writing groups, stories for families, ‘being a dad day’, World Book Night and weekly visits to the library by ESOL and English groups.

Recommendation

- 3.39** **Managers should collect accurate data on library usage, so that they are able to determine whether all prisoners are making good use of the facilities.**

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.

3.40 *The quality of recreational PE was good. Access for prisoners was very good. Specialist provision for those with physical or mental health needs was effective. Facilities were mainly good but some were in need of maintenance or repair. Data were not used effectively to identify groups or individuals not participating in PE. A reduction in staffing levels had led to a suspension of the previously good programme of accredited vocational PE training.*

- 3.41** A wide range of recreational PE was offered, supported well by trained orderlies. This included popular team sports, such as football, volleyball and cricket, along with short tennis and circuit training. Industry-standard cardiovascular exercise machines in dedicated rooms were well used. Prisoners made extensive use of the large, well-equipped weights training rooms, with up to 60 able to use the facility on the South site in each session.
- 3.42** There was an all-weather outdoor pitch on the South site, and a sizeable sports hall on both. However, the South site hall was not in a good enough state of repair to make it usable for team sports, and an outdoor area on the North site was unused because of security concerns. Showers on the North site were unscreened and the changing room was in poor condition. On both sites, cardiovascular machines suffered from corrosion and weights machines from the effects of wear and tear.

- 3.43** Access to PE was very good. Most prisoners could attend up to five sessions a week, and also participate in extra 'club' sessions in sports such as football. Timetabling was planned well for maximum access, and extended over weekdays and weekends. In our survey, far more prisoners than at comparator prisons said that they visited the gym at least three times a week.
- 3.44** Remedial provision for prisoners referred by health services professionals with mental or physical health needs was good, as was specific provision for older prisoners.
- 3.45** There were no longer any accredited vocational PE qualifications offered. Instructor numbers had fallen, and this had resulted in the suspension of the previously good programme of accredited courses.

Recommendations

- 3.46** **Necessary repairs to the South site sports hall and improvements to the changing rooms should be made, including the provision of shower screens.**
- 3.47** **A programme of accredited vocational PE should be offered to meet prisoner needs.**

Housekeeping point

- 3.48** Cardiovascular and weights equipment should be refurbished.

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 reducing reoffending delivery plan set clear priorities for the resettlement pathways but there was no strategy to promote a whole-prison approach to reducing reoffending. The work of the offender management unit did not hold a high enough profile and was not the focal point for information exchange, which limited good risk management. The development of the new community rehabilitation company provision was positive, although their recording of contact and support provided needed to be improved.*

4.2 The reducing reoffending delivery plan included clear targets across the seven resettlement pathways but it was not supported by a comprehensive strategy or a clear model for delivering offender management and resettlement. Offender management did not hold a high enough profile within the establishment and was not the focal point for risk management work. There was also a lack of a whole-prison approach, which left the offender management unit (OMU) isolated, with poor information exchange with other departments and a lack of understanding of the importance of its role. The reducing reoffending committee met quarterly but was not well attended.

4.3 A survey was completed each year to identify prisoner perceptions of their resettlement needs. This was a useful starting point but other data, such as offender assessment system (OASys) assessments and P-Nomis (electronic case notes), were not analysed to inform further what was known about the population. This meant that the full extent of resettlement and offender management needs was not fully known.

4.4 Some work had been done to improve the sequencing of education, training and employment provision for prisoners. This had led to the development and piloting of a spreadsheet which enabled providers to allocate prisoners to individual programmes and interventions, which helped to plan and sequence work and activities (see also paragraph 4.36). A small range of release on temporary licence (ROTL) placements was available for employment within the grounds, outside the prison. This included positions in the staff mess, the stores and the prison gardens. There had been 679 day releases for 47 men in the previous six months (see paragraph 4.18).

4.5 The introduction of the community rehabilitation company (CRC)¹⁰ resettlement provision had been a positive development which supported all prisoners, irrespective of their release address or sentence status. CRC staff had some contact with offender supervisors but their work was not yet fully integrated with that of the OMU. For example, records made by CRC staff of contact with prisoners were not always entered onto P-Nomis and were not easily

¹⁰ From May 2015 rehabilitation services, both in custody and after release, have been organised through community rehabilitation companies (CRCs) who 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.

accessible to other staff, including offender supervisors and wing staff. This limited information exchange, joint working and good risk management.

Recommendations

- 4.6 A strategy should be developed, based on a comprehensive needs analysis, which establishes an integrated and whole-prison approach to reducing reoffending. It should be supported by an action plan and progress should be monitored by a well-attended committee.**
- 4.7 Records of contact with prisoners by community rehabilitation company staff and action taken should be accessible to all staff, including offender supervisors, to promote information exchange and good risk management.**

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 *Probation staff vacancies and the high level of redeployment of offender supervisors had resulted in ineffective offender management. There was little meaningful contact between prisoners and offender supervisors, and too many prisoners did not have an offender assessment system (OASys) assessment or sentence plan, which hindered progression. Too many completed assessments were of inadequate quality. The quality of some public protection work needed improving, particularly assessments for release on temporary licence, but the interdepartmental risk management team provided good oversight of high-risk cases due for final release into the community. Categorisation was up to date but transfer requests were not influenced by offender supervisors or based on clear prioritisation of sentence plan targets. There was little specific provision for indeterminate-sentenced prisoners.*

- 4.9** The probation team was experiencing long-term staff shortages and many of the uniformed offender supervisors were persistently redeployed to operational duties. We were told that half of the profiled offender supervisor hours for uniformed staff were lost each month. It was not surprising, therefore, to find that the OMU was ineffective. A substantial source of concern expressed by prisoners during the inspection was the lack of support, contact and direction provided by the OMU (see main recommendation S51).
- 4.10** Almost all prisoners held at the establishment were serving over 12 months and therefore should have had an OASys assessment and sentence plan; however, many prisoners arrived from local prisons without these. Although good attention had been given to addressing this problem, at the time of the inspection a quarter of prisoners did not have a current assessment or a plan, which undermined risk management and left the prisoner unsure about the activities he needed to complete and how to progress (see main recommendation S51). The lack of an up-to-date assessment also hindered prisoners' access to some activities, such as offending behaviour programmes (see paragraph 4.51).

- 4.11** Almost half the population presented a high risk of reoffending or harm but too many OASys assessments and plans were of inadequate quality, too often missing important information. For example, only half of the assessments of the likelihood of reoffending were of adequate quality.
- 4.12** In our survey, fewer prisoners than at similar prisons said that they had an offender manager in the community and more said that they had not had any contact with them (41% versus 35%). In addition, fewer than at similar prisons said that they had an offender supervisor and more said that no one was helping them to achieve their sentence plan targets. Offender supervisors struggled to have meaningful contact with the prisoners on their caseload, and the case notes we looked at showed that initial contact was also poor. Few prisoners received high-quality management, with offender supervisors able to respond only to events such as parole board hearings, and often with little or no knowledge of the prisoner (see main recommendation S51).
- 4.13** To mitigate some of the issues caused by the lack of contact between offender supervisors and prisoners, wing-based OMU surgeries were held at weekends, so that prisoners could check up on progress or ask questions about their sentence management.
- 4.14** There was no offender management strategy to draw together the various elements of the OMU or give clear direction to staff, and there was little evidence of management oversight of the quality or frequency of the work being done. In addition, too much recording was not entered onto P-Nomis, which limited information exchange beyond the OMU.
- 4.15** Procedures for assessing prisoners' suitability for release on home detention curfew were adequate, starting 10 weeks ahead of release, and involved the prisoner attending the board when needed. However, timeliness was not monitored and we saw some examples of prisoners being released after their eligibility date.

Recommendations

- 4.16** **P-Nomis should be used as the central case recording system to improve information exchange and risk management.**
- 4.17** **The timeliness of home detention curfew releases should be monitored, to ensure that all prisoners are released at their earliest eligibility date, and action should be taken to resolve obstacles to this.**

Public protection

- 4.18** Only half of the public protection cases we looked at had undergone an adequate and timely analysis of the risk of serious harm to others, and these analyses sometimes lacked information on specific areas of risk. In two-thirds of them, the annual review was overdue, which affected prisoners' ability to prove that they were making progress against the risks posed. Less than half of the relevant cases that required a risk management plan had one. Some important aspects of public protection work were inadequate. For example, decisions on child contact were not always informed by an-up-to-date risk assessment or adequate input from the offender supervisor. ROTL assessments for category D prisoners working outside the prison were inadequate and did not provide assurance that risks had been assessed well or managed appropriately. There was a presumption in favour of these prisoners being allowed out on day release, without a formal risk assessment, an up-to-date OASys assessment, consultation with the offender supervisor or oversight by a board to ratify the decision.

- 4.19** All high risk of harm prisoners were discussed at the interdepartmental risk management team meeting and, although attendance by representatives from departments outside the OMU was poor, this meeting ensured that all multi-agency public protection arrangements (MAPPA) nominals were monitored in advance of their release. Contributions to MAPPA meetings were good and reports prepared by offender supervisors were of adequate quality. Some MAPPA alerts on P-Nomis were out of date and too many prisoners who were due for release did not have a clear MAPPA management level.

Recommendations

- 4.20** Prisoners presenting a risk of harm to others should undergo a full and timely analysis of the risk of serious harm to others and have an accompanying risk management plan.
- 4.21** Access to release on temporary licence should be based on a comprehensive risk assessment, undertaken by an offender supervisor who knows the prisoner and supported by a current OASys assessment and risk management plan.
- 4.22** Multi-agency public protection arrangements (MAPPA) alerts on P-Nomis should be reviewed and kept up to date, and all MAPPA prisoners nearing release should have their management level confirmed.

Categorisation

- 4.23** Recategorisation reviews were up to date, with 600 completed in 2015 to date and 70 granted category D status.
- 4.24** About 60 prisoners a month were transferred out of the prison, and category D prisoners did not wait long to move to open conditions. Transfers of category C prisoners were rarely influenced by sentence plan needs or prioritised by offender supervisors.

Recommendation

- 4.25** Prisoners should be transferred according to their sentence planning needs.

Indeterminate sentence prisoners

- 4.26** Many of the indeterminate-sentenced prisoners (ISPs) lived on house unit 10. At the time of the inspection, a total of 149 ISPs were being held, of whom 85 were lifers and 64 were serving an indeterminate sentence for public protection. Most were over-tariff and some stayed too long at the establishment with too few progression opportunities. This population was due to increase over the following year but there had not been a needs analysis for them and there was little specific provision other than access to family days and a recently reintroduced support forum.
- 4.27** Qualified probation officers managed ISPs but struggled to maintain regular contact with them and some ISPs did not have an up-to-date OASys assessment or sentence plan (see main recommendation S51). Much of the contact was focused on the preparation of parole reports, which were up to date at the time of the inspection.

Recommendation

- 4.28** The needs of indeterminate-sentenced prisoners should be analysed, and provision reviewed and developed. Contact with offender supervisors should be regular, meaningful and focused on progression.

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.

4.29 *The establishment was a resettlement prison for London and Essex prisoners in the last three months of their sentence. Demand for resettlement services was reasonably high. Some prisoners from London found it difficult to be located so far from home. Immediate needs were checked and addressed on arrival and pre-release planning was developing as intended under the community rehabilitation company arrangements. A wide range of specialist support was offered for prisoners with accommodation and debt needs. Support with health, substance misuse and education, training and employment before release was also good. Prisoners were helped to maintain and rebuild family ties, and arrangements for prison visits were generally good. The range of accredited offending behaviour programmes was appropriate but the lack of offender assessment system (OASys) assessments meant that the full extent of need was not clear and prevented some who needed to undertake a programme from getting a place.*

- 4.30** Despite being in rural Suffolk, the establishment was a resettlement prison for London and Essex prisoners in the last three months of their sentence, and around 60% of prisoners were released to London. Some prisoners told us how difficult they found it to be located so far away from home in such a rural location.
- 4.31** Two different CRCs dealt with the two catchment areas of London and Essex (London CRC and Essex CRC). London CRC also provided services to prisoners being released to other areas of the country. The two CRCs worked slightly differently and had begun to develop separate interventions, including resettlement programmes, which could potentially lead to some duplication.
- 4.32** Demand for resettlement services was reasonably high, with around 60 prisoners being released each month. The CRC provision was developing as required, and enabled prisoners to access a wide range of support throughout their sentence.
- 4.33** Immediate needs were checked on arrival and help was given to those who needed it. A follow-up interview was carried out and a resettlement plan drawn up 12 weeks before release. Some of the plans we looked at were of inadequate quality; they were over-reliant on prisoners' views of their resettlement needs and did not set specific and time-limited objectives.

Recommendation

- 4.34** Resettlement plans should be of good quality, with specific and time-limited objectives.

Accommodation

4.35 In our survey, 17% of prisoners said that they had had housing problems on arrival at the prison, which was higher than the 13% comparator. Accommodation services were provided by the two CRCs; both provided a similar, broad range of specialist advice services, including the closure of tenancies and resisting possession orders. They also tried to ensure that prisoners being released had settled accommodation to go to. In the previous six months, 11% of prisoners had been released without accommodation; although this was too high, it was lower than we had found in a number of recent inspections of prisons in the London region. Those without accommodation were provided with an appointment with the homelessness department of the local authority to which they were returning.

Education, training and employment

4.36 The quality of the careers advice and guidance, provided by Futures, the National Careers Service provider, was good. Interviews with new prisoners were timely and resulted in an action plan, which was used well when allocating prisoners to education and skills.

4.37 Prison managers worked productively with internal and external partners to ensure that prisoners were provided with good employment support on release. Staff worked well with local and national employers, and 18 employer engagement events had taken place over the previous year. These events raised prisoners' awareness of job opportunities; they were well supported by prison staff and well attended by prisoners. Employers interviewed and assessed prisoners before release.

4.38 The range of vocationally related programmes aimed at providing prisoners with employability skills had improved and was good (see also section on learning and skills and work activities). A wide range of pre-release programmes was provided but the virtual campus (internet access for prisoners to community education, training and employment opportunities) was not available on the South site.

Recommendation

4.39 All prisoners should have access to the virtual campus to research employment opportunities on release.

Health care

4.40 There was good health care support for prisoners before discharge, with all being seen and reviewed by the primary health services team. Prisoners were supplied with information about registering with a GP and also given an appropriate supply of medicines to take out if required.

4.41 There were effective links with local community mental health teams to support discharge planning for those with severe and enduring mental health needs.

Drugs and alcohol

- 4.42** Clinical and Rehabilitation of Addicted Prisoners trust (RAPt) services were well integrated and worked jointly to ensure the continuity of treatment for prisoners with substance use issues on release. The RAPt team contributed to parole and home detention curfew boards, and offender supervisors participated in post-programme reviews.
- 4.43** Local drug intervention programme teams visited the prison, and RAPt offered a 'meet and greet' aftercare service to prisoners on release. Release plans were detailed and of good quality.
- 4.44** All prisoners with substance misuse issues were provided with harm reduction advice before release, and this included specific information about the dangers of new psychoactive substances (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects).

Finance, benefit and debt

- 4.45** Finance, benefit and debt provision had improved and was good. There was a range of services to meet prisoners' financial needs. The debt advice service, run by Ipswich Housing Advice and Guidance (IHAG), provided a comprehensive specialist advice and representation service, including assistance with tax issues, debt relief orders and bankruptcy.
- 4.46** Jobcentre Plus workers provided advice on the payment of arrears and benefits. Some types of benefit application could be completed before release. There was a bank account service and 70 accounts had been opened in the previous six months. Courses on money management and budgeting were provided by the two CRCs and the education department.

Children, families and contact with the outside world

- 4.47** Support for prisoners to re-establish or maintain relationships with children and families had improved and was good. In our survey, 59% of prisoners said that they had children under the age of 18. The prison commissioned Ormiston Trust to support prisoners and their families. Monthly family days allowed those without children to have an extended visit with close family members. Children's days, held twice a month, allowed prisoners to eat a hot meal with their families and have a photograph taken together. Shortly before the inspection, Ormiston Trust had run a 'dad's day', which had involved third sector organisations and a firm of solicitors making presentations to prisoners and their families. Feedback about the day had been positive. These initiatives were greatly appreciated by prisoners.
- 4.48** Visits arrangements were generally good. The visits hall on the North site was shabby, with fixed plastic seating arranged in rows, but was better on the South site. The children's crèche on the latter site, staffed by two qualified play workers, was excellent. Prisoners could enter the crèche during children and family days.

- 4.49** The visitors centre on the North site was no longer in use. The centre on the South site, run by two staff from Children's Links,¹¹ was rundown, with the carpet and lockers in need of replacement. A wide range of information was available there to assist families. Families we spoke to said that they were treated well by staff. A bus ran from London to the prison once a fortnight and families could apply for help with their travel costs under the assisted prison visits scheme.

Recommendation

- 4.50** The visits halls and visitors centre should be in good order and well decorated.

Attitudes, thinking and behaviour

- 4.51** The range of accredited offending behaviour programmes included the thinking skills programme (TSP), Resolve, the self-change programme and the healthy relationships programme, and was appropriate to the needs of the population. However, the lack of OASys assessments and planning meant that the full extent of need for these programmes was not clear and also prevented some prisoners from getting a place on the programmes, which further hindered their progression (see paragraph 4.10 and main recommendation S51). As a result, waiting lists were not long but some programmes struggled to recruit enough prisoners to fill the groups. The TSP programme completions were hindered by staff shortages but this was being addressed.
- 4.52** Support for those with gambling problems was available, with a counsellor on site two days a week. Sixty referrals had been received in the previous six months. Some support was also given to ex-veterans and a victim awareness programme was available through the chaplaincy, although it had not run since March 2015.
- 4.53** The Getting it Right programme, a resettlement programme delivered by the London CRC, started during the inspection. It provided a comprehensive range of resettlement help and was also a promising additional way of developing problem-solving skills.

Recommendation

- 4.54** The victim awareness course should be delivered regularly.

¹¹ Children's Links is a third sector organisation that works to improve the lives and experiences of children, young people and their families.

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 analysis of violent incidents should be used to develop a clear strategy and action plan to manage and reduce violence. (S49)
- 5.2** More needs to be done to consult prisoners with protected characteristics, to understand and address their needs and perceptions, and then inform them of the findings and action taken. (S50)
- 5.3** All prisoners should have an offender assessment system (OASys) assessment and sentence plan which identifies targets for progression and reducing reoffending. Contact between prisoners and offender supervisors should be regular, meaningful, and encourage and monitor progression. (S51)

Recommendations

To NOMS and the escort contractor

Courts, escort and transfers

- 5.4** All prisoners' property should arrive with them when they are transferred to the prison. (1.4)

Recommendations

To the governor

Early days in custody

- 5.5** All newly arrived prisoners should have a comprehensive first night risk assessment completed, including a review of cell sharing risks. (1.13)

Self-harm and suicide

- 5.6** Recommendations from Prisons and Probation Ombudsman reports should be reviewed regularly to ensure that they are fully implemented in practice. (1.31)
- 5.7** A strategy to prevent self-harm and suicide should be developed using trend analysis data and other intelligence. (1.32)
- 5.8** Prisoners at risk of self-harm or suicide should be cared for effectively. Good standards of care should be maintained by a programme of refresher training and robust quality assurance of assessment, care in custody and teamwork (ACCT) documentation. (1.33)

- 5.9** Segregation should only be used exceptionally and as a last resort for prisoners in crisis and at risk of suicide and self-harm. (1.34, repeated recommendation 1.33)

Security

- 5.10** Prisoners should not be placed on closed visits for non-visits-related reasons. (1.46, repeated recommendation 1.46)
- 5.11** There should be a drug supply reduction strategy. (1.47, repeated recommendation 1.47)
- 5.12** Suspicion tests should be completed within prescribed timescales. (1.48, repeated recommendation 1.48)

Discipline

- 5.13** The regime in the segregation unit should be improved and prisoners should have access to in-cell and off-unit activities (subject to risk assessments) and have the opportunity to spend at least an hour in the open air each day. (1.65)

Substance misuse

- 5.14** The substance misuse policy document should be reviewed and the action plan updated in light of the recent needs analysis. (1.70)
- 5.15** The drug free wing should hold only prisoners committed to drug recovery. (1.71)

Residential units

- 5.16** Damaged flooring on residential units should be replaced and the refurbishment of all showers and toilets should be completed as soon as possible. (2.9)
- 5.17** Prisoners should be provided with lockable storage for their medication. (2.10, repeated recommendation 2.88)
- 5.18** Prisoners should be able to get efficient access to their stored property. (2.11)

Staff-prisoner relationships

- 5.19** Prisoner wing forums should take place regularly on the South site and issues raised by prisoners should be dealt with promptly. (2.15)

Equality and diversity

- 5.20** The monitoring of outcomes for prisoners with protected characteristics should be broadened, to include all areas relevant to the prison. (2.22)
- 5.21** Professional interpreting services should be used effectively and a range of translated material should be provided to inform foreign national prisoners of the regime and services available to them, and help them feel less isolated. (2.31, repeated recommendation 2.39)
- 5.22** Foreign national prisoners should have access to independent immigration advice. (2.32, repeated recommendation 2.40)

- 5.23** The needs of all prisoners with disabilities should be identified and recorded, and they should all have a care plan and emergency evacuation plan, both of which should be reviewed and updated regularly. (2.33)

Complaints

- 5.24** The complaints monitoring system should be effective, providing analysis of complaints (both upheld and refused) each month by all protected characteristics, to identify patterns and make improvements. (2.45)

Legal rights

- 5.25** Prisoners should have access to staff who are trained to provide advice and practical support in pursuing legal matters. (2.51, repeated recommendation 2.55)
- 5.26** Prisoners should be able to consult their lawyers in private. (2.52)

Health services

- 5.27** All clinical environments and equipment should be monitored and comply with infection control standards. (2.64)
- 5.28** Prisoners should have access to screening programmes and experience waiting times for appointments that are equivalent to those in the community. (2.65)
- 5.29** The partnership board should coordinate strategies for the provision and placement of automated external defibrillators, checking of equipment, and the training and deployment of trained staff. (2.66, repeated recommendation 2.66)
- 5.30** A health and safety review of the South site health centre waiting area and the entry point to the dental suite should be conducted to determine any control measures that would better assure staff safety and patient privacy. (2.73)
- 5.31** In-possession risk assessments should be audited to ensure that reasons for changes are recorded. (2.78)
- 5.32** In-possession medicines should be delivered to prisoners in a way that promotes safety and provides adequate supervision to ensure privacy and confidentiality. (2.79)
- 5.33** The special sick and out-of-hours provision should be reviewed to ensure that prisoners are not placed at risk by inappropriate dispensing. (2.80)
- 5.34** The dental suites should comply with infection control and prevention standards. (2.83)
- 5.35** Prisoners should have access to all clinically indicated psychological and group interventions, including professional counselling services. (2.90, repeated recommendation 2.103)
- 5.36** The transfer of patients to external health care beds should be expedited and occur within Department of Health transfer target timescales. (2.91, repeated recommendation 2.104)

Catering

- 5.37** Prisoners working in the kitchens should be able to study towards accredited qualifications. (2.98)

Time out of cell

- 5.38** Evening association periods should be extended. (3.6, repeated recommendation. 3.4)
- 5.39** All prisoners should have one hour of exercise daily. (3.7, repeated recommendation 3.5)

Learning and skills and work activities

- 5.40** Data should be collected and analysed to provide a comprehensive evaluation of all aspects of education and skills on both sites. (3.14)
- 5.41** The establishment should provide additional activity places to meet the needs of the whole population and ensure that prisoners are allocated to a purposeful activity on a timely basis. (3.20)
- 5.42** Managers should ensure that all tutors plan appropriate activities that meet the needs of prisoners and that interest and challenge them to make good progress. (3.26)
- 5.43** Tutors should improve the use of techniques, including question and answer, to ensure that all prisoners develop their understanding, knowledge and skills effectively. (3.27)
- 5.44** Prisoners' appointments should be sequenced more effectively, to reduce interruptions to education and training sessions. (3.31)
- 5.45** Staff should ensure that prisoners' development of interpersonal skills is captured and recorded in all areas of learning, skills and work. (3.32)
- 5.46** Success rates for mathematics at level 2 should be improved. (3.35)
- 5.47** Managers should collect accurate data on library usage, so that they are able to determine whether all prisoners are making good use of the facilities. (3.39)

Physical education and healthy living

- 5.48** Necessary repairs to the South site sports hall and improvements to the changing rooms should be made, including the provision of shower screens. (3.46)
- 5.49** A programme of accredited vocational PE should be offered to meet prisoner needs. (3.47)

Strategic management of resettlement

- 5.50** A strategy should be developed, based on a comprehensive needs analysis, which establishes an integrated and whole-prison approach to reducing reoffending. It should be supported by an action plan and progress should be monitored by a well-attended committee. (4.6)
- 5.51** Records of contact with prisoners by community rehabilitation company staff and action taken should be accessible to all staff, including offender supervisors, to promote information exchange and good risk management. (4.7)

Offender management and planning

- 5.52** P-Nomis should be used as the central case recording system to improve information exchange and risk management. (4.16)

- 5.53** The timeliness of home detention curfew releases should be monitored, to ensure that all prisoners are released at their earliest eligibility date, and action should be taken to resolve obstacles to this. (4.17)
- 5.54** Prisoners presenting a risk of harm to others should undergo a full and timely analysis of the risk of serious harm to others and have an accompanying risk management plan. (4.20)
- 5.55** Access to release on temporary licence should be based on a comprehensive risk assessment, undertaken by an offender supervisor who knows the prisoner and supported by a current OASys assessment and risk management plan. (4.21)
- 5.56** Multi-agency public protection arrangements (MAPPA) alerts on P-Nomis should be reviewed and kept up to date, and all MAPPA prisoners nearing release should have their management level confirmed. (4.22)
- 5.57** Prisoners should be transferred according to their sentence planning needs. (4.25)
- 5.58** The needs of indeterminate-sentenced prisoners should be analysed, and provision reviewed and developed. Contact with offender supervisors should be regular, meaningful and focused on progression. (4.28)

Reintegration planning

- 5.59** Resettlement plans should be of good quality, with specific and time-limited objectives. (4.34)
- 5.60** All prisoners should have access to the virtual campus to research employment opportunities on release. (4.39)
- 5.61** The visits halls and visitors centre should be in good order and well decorated. (4.50)
- 5.62** The victim awareness course should be delivered regularly. (4.54)

Housekeeping points

Early days in custody

- 5.63** Reception staff should have clear views of the holding rooms to ensure that prisoners are held safely. (1.14)

Discipline

- 5.64** All use of force documentation should be complete and include an F213 form for each incident. (1.58)
- 5.65** All planned interventions should be recorded regardless of the time of day and should include a continuous record of the entire intervention. (1.59)

Equality and diversity

- 5.66** Prisoner equality representatives should be briefed in their role and trained as soon as they are appointed. (2.23)

Complaints

5.67 All types of complaint forms should be freely available on all residential units. (2.46)

Legal rights

5.68 There should be sufficient 'access to justice' laptop computers to meet the needs of the population. (2.53)

Health services

5.69 Consent to share confidential personal information should be sought routinely during the reception process. (2.67)

Catering

5.70 Prisoners working on serveries should wear overalls and hats. (2.99)

Physical education and healthy living

5.71 Cardiovascular and weights equipment should be refurbished. (3.48)

Examples of good practice

Equality and diversity

5.72 The external consultant from Ipswich and Suffolk Council for Race Equality made a worthwhile contribution to the investigation of equality complaints and progress with equality work in the prison. (2.24)

5.73 Prison managers had carefully prepared for the admission of a transgender prisoner, so that she could live safely as a woman while serving her sentence. (2.34)

Health services

5.74 The confidential health care complaints system included the option for prisoners to have a face-to-face resolution meeting with staff. (2.68)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Andrew Rooke	Inspector
Paul Rowlands	Inspector
Deri Hughes-Roberts	Inspector
Colin Carroll	Inspector
Fionnula Gordon	Inspector
Michelle Bellham	Researcher
Joe Simmonds	Researcher
Sophie Skinner	Researcher
Natalie-Anne Hall	Researcher
Sigrid Engelen	Substance misuse inspector
Steve Eley	Health services inspector
Maureen Jamieson	Health services inspector
Sue Melvin	Pharmacist
Jan Fooks-Bale	CQC inspector
Bob Cowdrey	Ofsted inspector
Alastair Pearson	Ofsted inspector
Matt Vaughan	Ofsted inspector
Denise Olander	Ofsted inspector
Keith Humphreys	Offender management inspector
Les Smith	Offender management inspector
Andy Smith	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2012, reception procedures were reasonably swift but lacked privacy. First night processes were unsafe, with insufficient staff oversight. Induction was reasonable but over-long. More prisoners felt unsafe than at comparator prisons. Levels of reported violence were not high and the prison was generally well sighted and proactive in managing violence reduction, with the exception of gang-related issues. Suicide and self-harm processes were generally good. The number of drug finds and positive mandatory drug testing rates were high and the prison lacked a supply reduction strategy. Treatment for drug and alcohol users was very good. There was relatively little use of force and of segregation but there was little analysis of their use. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

All prisoners should have the opportunity to speak to a member of staff in private on their first night. All prisoner assessments, including the diversity and first night assessments, should be completed by a member of staff. (HP49)

Partially achieved

Recommendations

First night cells should be fully equipped, clean and in a good state of repair, and all new arrivals should be allowed a shower and telephone call on the day they arrive at the prison. (1.13)

Achieved

The induction programme should be reviewed so that it is succinct, includes staff support and ensures that prisoners do not spend long periods locked in their cells. (1.14)

Achieved

Prisoner views about gang-related matters should be explored and acted on. (1.23)

Achieved

The gated cell on the segregation unit should be taken out of use, and all other gated cells should be clean and adequately furnished. (1.32)

Partially achieved

Segregation should only be used exceptionally and as a last resort for prisoners in crisis and at risk of suicide and self-harm. (1.33)

Not achieved (recommendation repeated, 1.34)

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. (1.39)

Achieved

Prisoners should not be placed on closed visits for non-visits-related reasons. (1.46)

Not achieved (recommendation repeated, 1.46)

There should be a drug supply reduction strategy. (1.47)

Not achieved (recommendation repeated, 1.47)

Suspicion tests should be completed within prescribed timescales. (1.48)

Not achieved (recommendation repeated, 1.48)

All drug testing facilities should be relocated or refurbished to ensure that they are adequate as respectful and forensic drug testing environments. (1.49)

Partially achieved

The potential to provide greater differentiation between IEP levels should be developed. (1.56)

Achieved

Planned uses of force should be video-recorded and footage should be reviewed by managers within a reasonable timeframe, to ensure that the force is minimal and used only as a last resort. (1.62)

Partially achieved

Use of force and special accommodation documentation should be completed in full and routinely reviewed to ensure procedural compliance and the appropriateness of both measures. (1.63)

Achieved

Resin bed plinths should be removed and replaced with fixed bed frames. (1.68)

Achieved

There should be clear care and reintegration planning and targets should address prisoners' personal circumstances and regime access. (1.69)

Achieved

Segregation monitoring and review meetings should be held regularly to identify and analyse trends in segregation, with adequate attendance by appropriate departments. (1.70)

Achieved

The integrated drug treatment system should hasten the introduction of a more recovery-focused clinical review and support process, while still catering for individual needs. (1.76)

Achieved

A single committee should be convened to oversee all aspects of the prison's strategic approach to drugs and alcohol. (1.77)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2012, external areas were generally clean. The quality and cleanliness of communal and cell accommodation was mostly acceptable and some very good. Provision of telephones and access to showers were good. Staff–prisoner relationships were reasonably good, and better on the North than the South site. Some equality and diversity provision was underdeveloped. Black and minority ethnic prisoners reported less positively than white prisoners. Support for foreign national prisoners was poor. Health services were reasonably good and developing well. The food provided was poor. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

Management oversight of diversity should be prioritised and regular consultation with prisoners with protected characteristics should be fully implemented. The diversity manager should be supported so that the needs of all prisoners with protected characteristics are identified, assessed and met, and any negative perceptions of particular groups are understood. (HP50)

Partially achieved

Recommendations

All cells should have the correct amount of furniture, maintained to a reasonable standard. (2.9)

Not achieved

Toilets in shared accommodation should have appropriate privacy screening and be deep cleaned. (2.10)

Not achieved

All communal shower areas should be refurbished. (2.11)

Not achieved

Applications should be responded to within seven working days and prisoners should be able to get efficient access to their stored property. (2.12)

Not achieved

Staff should use prisoners' preferred names when they address them. (2.21)

Achieved

The diversity action plan should be regularly reviewed and steps taken to ensure that identified actions are completed and embedded. (2.29)

Achieved

Professional interpreting services should be used effectively and a range of translated material should be provided to inform foreign national prisoners of the regime and services available to them, and help them feel less isolated. (2.39)

Not achieved (recommendation repeated, 2.31)

Foreign national prisoners should have access to independent immigration advice. (2.40)

Not achieved (recommendation repeated, 2.32)

The personal emergency evacuation plan process should be standardised across the prison, further publicised and regularly updated. (2.41)

Not achieved

Adequate and appropriate facilities should be provided to facilitate group worship of Muslim prisoners. (2.48)

Achieved

Prisoners should have access to the services of staff who are trained to provide advice and practical support in pursuing legal matters. (2.55)

Not achieved (recommendation repeated, 2.51)

The partnership board should coordinate strategies for the provision and placement of automated external defibrillators, checking of equipment, and the training and deployment of trained staff. (2.66)

Partially achieved (recommendation repeated, 2.66)

There should be active and systematic promotion of health promotion throughout the prison. (2.67)

Achieved

The partnership board should engage with the ambulance service to ensure maximum efficiency of response time following clinical calls for emergency assistance. (2.68)

Achieved

Action should be taken to reduce the clinical time lost because of patients failing to attend for appointments. (2.78)

Achieved

The in-possession policy should be updated to include guidance on high-risk medication, and be consistently applied. (2.86)

Achieved

The use of Henley bags should be discontinued; in-possession medicine should be supplied in original packs. (2.87)

Not achieved

Prisoners should be provided with lockable storage for their medication. (2.88)

Partially achieved (recommendation repeated, 2.10)

Rooms used for the administration of medicine should ensure safety and enable confidential conversations to take place. (2.89)

Not achieved

There should be complete records of administration of medicines. (2.90)

Achieved

The medicines and therapeutics committee should review the 'special sick' policy to ensure the supply of an appropriate range of medications and monitor its usage. Patient group directions should be produced to allow the supply of more potent medicines by the nursing staff where appropriate. (2.91)

Partially achieved

Uniformed staff should have the appropriate training to recognise and take appropriate action when a prisoner may have mental health problems, and work effectively with health staff to ensure a prisoner's care. (2.102)

Not achieved

Patients should have access to a full range of support for mental health problems, including counselling and group therapies. (2.103)

Not achieved

The transfer of patients to external health care beds should be expedited and occur within Department of Health transfer target timescales. (2.104)

Not achieved (recommendation repeated, 2.91)

The quality, temperature and portion sizes of food should be maintained to a reasonable and consistent standard. (2.109)

Achieved

Purposeful activity

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

At the last inspection, in 2012, time out of cell was satisfactory for most prisoners during the working week, but poor for unemployed prisoners. The management and provision of learning and skills was good. Links with employers were excellent. There were insufficient activity places for the population but good use was made of available spaces. Too many prisoners were under-employed in low-skilled wing work or unemployed. For those engaged in learning and skills, the provision was good. The range and quality of education and vocational opportunities were reasonable. Achievements were generally high, although some opportunities for accreditation were being missed. Library provision was sound. Recreational and vocational PE provision was good and achievements on courses were high. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

The number of good quality activity places should be increased. (HP51)

Partially achieved

Recommendations

Evening association periods should be extended. (3.4)

Not achieved (recommendation repeated, 3.6)

All prisoners should have one hour of exercise daily. (3.5)

Not achieved (recommendation repeated, 3.7)

The opportunities for prisoner transfer between sites should be expanded, to enable learners to access the full range of provision. (3.11)

Achieved

Instructional officers should be recruited to vacant posts to improve the number of available accredited vocational training places. (3.12)

Partially achieved

The prison should further reduce the time taken to allocate activity places to new arrivals. (3.16)

Partially achieved

The prison should provide qualifications in the vocational work areas of gardens, fabrication and welding, the kitchen, recycling and waste management. (3.17)

Not achieved

The prison should improve the qualification pass rates for learners on literacy courses, those on the Prisons Information Communication Technology Academy (PICTA) course and those with dyslexia. (3.25)

Achieved

There should be appropriate outside PE provision for prisoners on the North site. (3.33)

No longer relevant

Shower facilities should be renovated on the North site and modesty screens provided for the showers on the South site. (3.34)

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 2012, the strategic management of resettlement was reasonable but resettlement and offender management were not sufficiently integrated. For the many high-risk prisoners, the quality and frequency of offender supervisor contact were variable and sometimes poor and too infrequent. There was little support and encouragement for low- and medium-risk prisoners to meet their targets. Public protection arrangements were sound. There were high numbers of category D prisoners and they waited too long to transfer to open prisons. Release on temporary licence opportunities were limited. Indeterminate-sentenced prisoners were reasonably well managed. Resettlement needs were assessed on induction and resettlement provision was generally good, particularly for employment. Visits arrangements were poor, in spite of the inaccessibility of the prison and the long distances travelled. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

High-risk prisoners should receive planned and regular contact with their offender supervisors. Contact should be meaningful and focused on risk, and the management of risk should drive the sentence plan. (HP52)

Not achieved

Prisoners and their visitors should be consulted in order to identify and implement improvements to visits access and facilities. (HP53)

Achieved

Recommendations

The reducing reoffending delivery plan should include the work of the offender management unit and details of the planned approach to managing the custodial sentence. (4.7)

Not achieved

The prisoner needs analysis should include offender assessment system (OASys) data. (4.8)

Not achieved

The role of offender supervisors for medium- and low-risk prisoners should be clarified and determine the level, frequency and focus of their contact with prisoners. (4.19)

Not achieved

Offender supervisors should receive sufficient training, supervision and support to meet the needs of prisoners in reducing and managing their risk of harm and reoffending. (4.20)

Not achieved

All prisoners should have a good quality assessment of the individual's risk of harm to others and a plan to identify how this will be taken forward. (4.23)

Not achieved

Category D prisoners should not be delayed in transferring to open conditions. (4.25)

Achieved

Further links should be developed with local and national employers, and opportunities for release on temporary licence should be extended. (4.35)

Achieved

The requirements for those undertaking accredited programmes to give up employment and to move to unit 8 should be removed. (4.54)

No longer relevant

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	0	1,199	93.3
Recall	0	84	6.5
Convicted unsentenced	0	1	0.1
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	1	0.1
Total		1,285	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	0	0
Less than six months	0	0	0
Six months to less than 12 months	0	9	0.7
12 months to less than two years	0	70	5.4
Two years to less than four years	0	279	21.7
Four years to less than 10 years	0	675	52.5
10 years and over (not life)	0	103	8
ISPP (indeterminate sentence for public protection)	0	85	11.6
Life	0	64	5
Total		1,285	100

Age	Number of prisoners	%
Please state minimum age here: 21		
Under 21 years	0	0
21 years to 29 years	468	36.4
30 years to 39 years	397	30.9
40 years to 49 years	247	19.2
50 years to 59 years	129	10
60 years to 69 years	37	2.9
70 plus years	7	0.5
Please state maximum age here: 80		
Total	1,285	100

Nationality	18–20-year-olds	21 and over	%
British	0	1027	79.9
Foreign nationals	0	255	19.8
Not stated	0	3	0.2
Total		1,285	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	0	0

Category C	0	1,261	98.1
Category D	0	24	1.9
Other			
Total		1,285	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	0	552	43
Irish	0	19	1.5
Gypsy/Irish Traveller	0	21	1.6
Other white	0	136	10.6
Mixed			
White and black Caribbean	0	33	2.6
White and black African	0	7	0.5
White and Asian	0	5	0.4
Other mixed	0	21	1.6
Asian or Asian British			
Indian	0	33	2.6
Pakistani	0	24	1.9
Bangladeshi	0	19	1.5
Chinese	0	5	0.4
Other Asian	0	40	3.1
Black or black British			
Caribbean	0	167	13
African	0	112	8.7
Other black	0	65	5.1
Other ethnic group			
Arab	0	2	0.2
Other ethnic group	0	22	1.7
Not stated	0	2	0.2
Total	0	1,285	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	0	207	16.1
Roman Catholic	0	262	20.4
Other Christian denominations	0	31	2.4
Muslim	0	292	22.7
Sikh	0	17	1.3
Hindu	0	11	0.9
Buddhist	0	19	1.5
Jewish	0	15	1.2
Other	0	31	2.4
No religion	0	211	16.4
Total	0	1,285	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)	0	Not recorded	
Total			

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than one month	0	0	114	8.9
One month to three months	0	0	248	19.3
Three months to six months	0	0	261	20.3
Six months to one year	0	0	341	26.5
One year to two years	0	0	248	19.3
Two years to four years	0	0	58	4.5
Four years or more	0	0	15	1.2
Total	0	0	1285	100

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than one month	0	0	0	0
One month to three months	0	0	0	0
Three months to six months	0	0	0	0
Six months to one year	0	0	0	0
One year to two years	0	0	0	0
Two years to four years	0	0	0	0
Four years or more	0	0	0	0
Total	0	0	0	0

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

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 establishment¹². 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 26 October 2015 the prisoner population at HMP Highpoint was 1,298. Using the method described above, questionnaires were distributed to a sample of 236 prisoners.

We received a total of 182 completed questionnaires, a response rate of 77%. This included one questionnaire completed via interview. Nineteen respondents refused to complete a questionnaire, 28 questionnaires were not returned and seven were returned blank.

¹² 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
1	16
2	18
3	15
4	20
5	17
6	6
7	7
8	15
9	10
10	8
11	8
12	6
13	10
14	12
15	14

Presentation of survey results and analyses

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

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 significant¹³ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Highpoint in 2015 compared with responses from prisoners surveyed in all other category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 36 category C training prisons since April 2011.
- The current survey responses from HMP Highpoint in 2015 compared with the responses of prisoners surveyed at HMP Highpoint in 2012.
- A comparison within the 2015 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2015 survey between those who are British nationals and those who are foreign nationals.

¹³ 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.

- A comparison within the 2015 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2015 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2015 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2015 survey between the two sites, Highpoint North and Highpoint South.

Survey summary

Section I: About you

Q1.1	What wing or houseblock are you currently living on? See shortened methodology	
Q1.2	How old are you?	
	<i>Under 21</i>	0 (0%)
	<i>21–29</i>	66 (36%)
	<i>30–39</i>	57 (31%)
	<i>40–49</i>	31 (17%)
	<i>50–59</i>	23 (13%)
	<i>60–69</i>	5 (3%)
	<i>70 and over</i>	0 (0%)
Q1.3	Are you sentenced?	
	<i>Yes</i>	161 (88%)
	<i>Yes – on recall</i>	21 (12%)
	<i>No – awaiting trial</i>	0 (0%)
	<i>No – awaiting sentence</i>	0 (0%)
	<i>No – awaiting deportation</i>	0 (0%)
Q1.4	How long is your sentence?	
	<i>Not sentenced</i>	0 (0%)
	<i>Less than six months</i>	1 (1%)
	<i>Six months to less than one year</i>	7 (4%)
	<i>One year to less than two years</i>	17 (10%)
	<i>Two years to less than four years</i>	34 (19%)
	<i>Four years to less than 10 years</i>	89 (50%)
	<i>10 years or more</i>	12 (7%)
	<i>IPP (indeterminate sentence for public protection)</i>	9 (5%)
	<i>Life</i>	9 (5%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	<i>Yes</i>	34 (19%)
	<i>No</i>	148 (81%)
Q1.6	Do you understand spoken English?	
	<i>Yes</i>	176 (98%)
	<i>No</i>	4 (2%)
Q1.7	Do you understand written English?	
	<i>Yes</i>	175 (96%)
	<i>No</i>	7 (4%)

Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	65 (36%)	<i>Asian or Asian British - Chinese</i> 2 (1%)
	<i>White - Irish</i>	5 (3%)	<i>Asian or Asian British - other</i> 4 (2%)
	<i>White - other</i>	24 (13%)	<i>Mixed race - white and black Caribbean</i> 8 (4%)
	<i>Black or black British - Caribbean</i>	31 (17%)	<i>Mixed race - white and black African</i> 1 (1%)
	<i>Black or black British - African</i>	13 (7%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	5 (3%)	<i>Mixed race - other</i> 3 (2%)
	<i>Asian or Asian British - Indian</i>	3 (2%)	<i>Arab</i> 1 (1%)
	<i>Asian or Asian British - Pakistani</i>	5 (3%)	<i>Other ethnic group</i> 5 (3%)
	<i>Asian or Asian British - Bangladeshi</i>	3 (2%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	<i>Yes</i>		10 (6%)
	<i>No</i>		159 (94%)
Q1.10	What is your religion?		
	<i>None</i>	37 (21%)	<i>Hindu</i> 0 (0%)
	<i>Church of England</i>	34 (19%)	<i>Jewish</i> 3 (2%)
	<i>Catholic</i>	32 (18%)	<i>Muslim</i> 46 (26%)
	<i>Protestant</i>	1 (1%)	<i>Sikh</i> 1 (1%)
	<i>Other Christian denomination</i>	13 (7%)	<i>Other</i> 8 (5%)
	<i>Buddhist</i>	2 (1%)	
Q1.11	How would you describe your sexual orientation?		
	<i>Heterosexual/ Straight</i>		177 (99%)
	<i>Homosexual/ Gay</i>		1 (1%)
	<i>Bisexual</i>		1 (1%)
Q1.12	Do you consider yourself to have a disability (i.e. do you need help with any long-term physical, mental or learning needs)?		
	<i>Yes</i>		25 (14%)
	<i>No</i>		154 (86%)
Q1.13	Are you a veteran (ex-armed services)?		
	<i>Yes</i>		8 (4%)
	<i>No</i>		171 (96%)
Q1.14	Is this your first time in prison?		
	<i>Yes</i>		57 (32%)
	<i>No</i>		123 (68%)
Q1.15	Do you have children under the age of 18?		
	<i>Yes</i>		106 (59%)
	<i>No</i>		74 (41%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?		
	<i>Less than 2 hours</i>		50 (28%)
	<i>2 hours or longer</i>		114 (63%)
	<i>Don't remember</i>		17 (9%)

Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	50 (28%)
	Yes	92 (51%)
	No	28 (16%)
	<i>Don't remember</i>	9 (5%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	50 (28%)
	Yes	7 (4%)
	No	119 (66%)
	<i>Don't remember</i>	3 (2%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	106 (59%)
	No	58 (32%)
	<i>Don't remember</i>	15 (8%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	133 (75%)
	No	36 (20%)
	<i>Don't remember</i>	9 (5%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	36 (20%)
	<i>Well</i>	85 (47%)
	<i>Neither</i>	45 (25%)
	<i>Badly</i>	7 (4%)
	<i>Very badly</i>	1 (1%)
	<i>Don't remember</i>	6 (3%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	96 (53%)
	<i>Yes, I received written information</i>	28 (16%)
	<i>No, I was not told anything</i>	48 (27%)
	<i>Don't remember</i>	8 (4%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	149 (83%)
	No	29 (16%)
	<i>Don't remember</i>	2 (1%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	77 (43%)
	<i>2 hours or longer</i>	97 (54%)
	<i>Don't remember</i>	7 (4%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	146 (81%)
	No	18 (10%)
	<i>Don't remember</i>	17 (9%)

Q3.3	Overall, how were you treated in reception?		
	Very well		31 (17%)
	Well		87 (48%)
	Neither		37 (21%)
	Badly		18 (10%)
	Very badly		4 (2%)
	Don't remember		3 (2%)
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	42 (24%)	Physical health 22 (12%)
	Housing problems	31 (17%)	Mental health 24 (13%)
	Contacting employers	10 (6%)	Needing protection from other prisoners 16 (9%)
	Contacting family	34 (19%)	Getting phone numbers 27 (15%)
	Childcare	9 (5%)	Other 9 (5%)
	Money worries	22 (12%)	Did not have any problems 74 (42%)
	Feeling depressed or suicidal	18 (10%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	Yes		30 (17%)
	No		69 (40%)
	Did not have any problems		74 (43%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	Tobacco		133 (76%)
	A shower		47 (27%)
	A free telephone call		68 (39%)
	Something to eat		131 (74%)
	PIN phone credit		113 (64%)
	Toiletries/ basic items		93 (53%)
	Did not receive anything		6 (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		93 (52%)
	Someone from health services		135 (76%)
	A Listener/Samaritans		55 (31%)
	Prison shop/ canteen		60 (34%)
	Did not have access to any of these		25 (14%)
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		98 (57%)
	What support was available for people feeling depressed or suicidal		79 (46%)
	How to make routine requests (applications)		83 (48%)
	Your entitlement to visits		88 (51%)
	Health services		107 (62%)
	Chaplaincy		96 (56%)
	Not offered any information		27 (16%)

Q3.9	Did you feel safe on your first night here?	
	Yes	130 (73%)
	No	38 (21%)
	Don't remember	11 (6%)
Q3.10	How soon after you arrived here did you go on an induction course?	
	Have not been on an induction course	13 (7%)
	Within the first week	133 (74%)
	More than a week	23 (13%)
	Don't remember	11 (6%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	Have not been on an induction course	13 (7%)
	Yes	117 (66%)
	No	33 (19%)
	Don't remember	14 (8%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment	12 (7%)
	Within the first week	71 (41%)
	More than a week	63 (36%)
	Don't remember	28 (16%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		Very easy	Easy	Neither	Difficult	Very difficult N/A
	Communicate with your solicitor or legal representative?	29 (17%)	52 (30%)	27 (15%)	20 (11%)	27 (15%) 20 (11%)
	Attend legal visits?	24 (15%)	50 (30%)	31 (19%)	15 (9%)	9 (5%) 35 (21%)
	Get bail information?	8 (5%)	15 (10%)	29 (19%)	15 (10%)	17 (11%) 66 (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					32 (18%)
	Yes					82 (47%)
	No					62 (35%)
Q4.3	Can you get legal books in the library?					
	Yes					82 (48%)
	No					8 (5%)
	Don't know					82 (48%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		Yes	No	Don't know		
	Do you normally have enough clean, suitable clothes for the week?	130 (74%)	40 (23%)	6 (3%)		
	Are you normally able to have a shower every day?	173 (97%)	4 (2%)	2 (1%)		
	Do you normally receive clean sheets every week?	155 (89%)	17 (10%)	3 (2%)		
	Do you normally get cell cleaning materials every week?	137 (77%)	38 (21%)	4 (2%)		
	Is your cell call bell normally answered within five minutes?	60 (35%)	72 (42%)	38 (22%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	136 (77%)	37 (21%)	4 (2%)		
	If you need to, can you normally get your stored property?	38 (21%)	89 (50%)	50 (28%)		

Q4.5	What is the food like here?	
	<i>Very good</i>	7 (4%)
	<i>Good</i>	43 (24%)
	<i>Neither</i>	63 (36%)
	<i>Bad</i>	44 (25%)
	<i>Very bad</i>	20 (11%)
Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	
	<i>Have not bought anything yet/ don't know</i>	5 (3%)
	<i>Yes</i>	82 (46%)
	<i>No</i>	90 (51%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	<i>Yes</i>	87 (50%)
	<i>No</i>	15 (9%)
	<i>Don't know</i>	73 (42%)
Q4.8	Are your religious beliefs respected?	
	<i>Yes</i>	104 (58%)
	<i>No</i>	23 (13%)
	<i>Don't know/ N/A</i>	51 (29%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	<i>Yes</i>	110 (61%)
	<i>No</i>	6 (3%)
	<i>Don't know/ N/A</i>	63 (35%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	25 (14%)
	<i>Very easy</i>	65 (36%)
	<i>Easy</i>	42 (23%)
	<i>Neither</i>	8 (4%)
	<i>Difficult</i>	5 (3%)
	<i>Very difficult</i>	6 (3%)
	<i>Don't know</i>	28 (16%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?	
	<i>Yes</i>	141 (82%)
	<i>No</i>	23 (13%)
	<i>Don't know</i>	9 (5%)
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 one Yes No
	Are applications dealt with fairly?	16 (9%) 96 (55%) 61 (35%)
	Are applications dealt with quickly (within seven days)?	16 (10%) 57 (36%) 86 (54%)
Q5.3	Is it easy to make a complaint?	
	<i>Yes</i>	107 (61%)
	<i>No</i>	30 (17%)
	<i>Don't know</i>	37 (21%)

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

	Not made one	Yes	No
Are complaints dealt with fairly?	64 (37%)	44 (26%)	63 (37%)
Are complaints dealt with quickly (within seven days)?	64 (38%)	35 (21%)	69 (41%)

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

Yes	33 (20%)
No	131 (80%)

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

<i>Don't know who they are</i>	37 (22%)
Very easy	23 (14%)
Easy	29 (17%)
Neither	41 (24%)
Difficult	27 (16%)
Very difficult	11 (7%)

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

<i>Don't know what the IEP scheme is</i>	7 (4%)
Yes	83 (48%)
No	60 (35%)
<i>Don't know</i>	23 (13%)

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

<i>Don't know what the IEP scheme is</i>	7 (4%)
Yes	86 (51%)
No	65 (39%)
<i>Don't know</i>	10 (6%)

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

Yes	15 (9%)
No	161 (91%)

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

<i>I have not been to segregation in the last 6 months</i>	146 (85%)
Very well	5 (3%)
Well	3 (2%)
Neither	7 (4%)
Badly	5 (3%)
Very badly	6 (3%)

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

Yes	141 (82%)
No	31 (18%)

Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	118 (70%)
	No	51 (30%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	49 (28%)
	No	124 (72%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	7 (4%)
	<i>Never</i>	43 (25%)
	<i>Rarely</i>	37 (21%)
	<i>Some of the time</i>	46 (26%)
	<i>Most of the time</i>	27 (15%)
	<i>All of the time</i>	15 (9%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	60 (34%)
	<i>In the first week</i>	46 (26%)
	<i>More than a week</i>	44 (25%)
	<i>Don't remember</i>	24 (14%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	60 (36%)
	<i>Very helpful</i>	37 (22%)
	<i>Helpful</i>	32 (19%)
	<i>Neither</i>	14 (8%)
	<i>Not very helpful</i>	11 (7%)
	<i>Not at all helpful</i>	13 (8%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	Yes	76 (43%)		
	No	100 (57%)		
Q8.2	Do you feel unsafe now?			
	Yes	40 (23%)		
	No	133 (77%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)			
	<i>Never felt unsafe</i>	100 (60%)	<i>At meal times</i>	11 (7%)
	<i>Everywhere</i>	28 (17%)	<i>At health services</i>	12 (7%)
	<i>Segregation unit</i>	2 (1%)	<i>Visits area</i>	5 (3%)
	<i>Association areas</i>	20 (12%)	<i>In wing showers</i>	11 (7%)
	<i>Reception area</i>	6 (4%)	<i>In gym showers</i>	9 (5%)
	<i>At the gym</i>	15 (9%)	<i>In corridors/stairwells</i>	12 (7%)
	<i>In an exercise yard</i>	14 (8%)	<i>On your landing/wing</i>	17 (10%)
	<i>At work</i>	12 (7%)	<i>In your cell</i>	13 (8%)
	<i>During movement</i>	26 (16%)	<i>At religious services</i>	8 (5%)
	<i>At education</i>	9 (5%)		
Q8.4	Have you been victimised by other prisoners here?			
	Yes	54 (31%)		
	No	122 (69%)		

Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	22 (13%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	18 (10%)
	<i>Sexual abuse</i>	3 (2%)
	<i>Feeling threatened or intimidated</i>	31 (18%)
	<i>Having your canteen/property taken</i>	21 (12%)
	<i>Medication</i>	10 (6%)
	<i>Debt</i>	14 (8%)
	<i>Drugs</i>	10 (6%)
	<i>Your race or ethnic origin</i>	10 (6%)
	<i>Your religion/religious beliefs</i>	11 (6%)
	<i>Your nationality</i>	9 (5%)
	<i>You are from a different part of the country than others</i>	6 (3%)
	<i>You are from a traveller community</i>	3 (2%)
	<i>Your sexual orientation</i>	5 (3%)
	<i>Your age</i>	6 (3%)
	<i>You have a disability</i>	4 (2%)
	<i>You were new here</i>	17 (10%)
	<i>Your offence/ crime</i>	7 (4%)
	<i>Gang related issues</i>	14 (8%)
Q8.6	Have you been victimised by staff here?	
	Yes	52 (30%)
	No	123 (70%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	17 (10%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	8 (5%)
	<i>Sexual abuse</i>	5 (3%)
	<i>Feeling threatened or intimidated</i>	20 (11%)
	<i>Medication</i>	5 (3%)
	<i>Debt</i>	3 (2%)
	<i>Drugs</i>	2 (1%)
	<i>Your race or ethnic origin</i>	15 (9%)
	<i>Your religion/religious beliefs</i>	13 (7%)
	<i>Your nationality</i>	8 (5%)
	<i>You are from a different part of the country than others</i>	5 (3%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	3 (2%)
	<i>You have a disability</i>	4 (2%)
	<i>You were new here</i>	13 (7%)
	<i>Your offence/ crime</i>	7 (4%)
	<i>Gang related issues</i>	8 (5%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	99 (62%)
	Yes	25 (16%)
	No	35 (22%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	11 (6%)	15 (9%)	43 (25%)	25 (15%)	48 (28%)	30 (17%)
	The nurse	14 (8%)	30 (18%)	61 (37%)	25 (15%)	19 (12%)	16 (10%)
	The dentist	13 (8%)	9 (5%)	19 (11%)	9 (5%)	40 (24%)	77 (46%)
Q9.2	What do you think of the quality of the health service from the following people?						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	21 (12%)	20 (12%)	51 (30%)	27 (16%)	25 (15%)	27 (16%)
	The nurse	16 (10%)	36 (22%)	59 (35%)	27 (16%)	13 (8%)	16 (10%)
	The dentist	39 (24%)	25 (15%)	33 (20%)	22 (13%)	15 (9%)	30 (18%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>					11 (6%)	
	<i>Very good</i>					19 (11%)	
	<i>Good</i>					48 (28%)	
	<i>Neither</i>					36 (21%)	
	<i>Bad</i>					26 (15%)	
	<i>Very bad</i>					31 (18%)	
Q9.4	Are you currently taking medication?						
	Yes					67 (39%)	
	No					107 (61%)	
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?						
	<i>Not taking medication</i>					107 (62%)	
	<i>Yes, all my meds</i>					46 (27%)	
	<i>Yes, some of my meds</i>					15 (9%)	
	<i>No</i>					4 (2%)	
Q9.6	Do you have any emotional or mental health problems?						
	Yes					49 (28%)	
	No					124 (72%)	
Q9.7	Are your being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?						
	<i>Do not have any emotional or mental health problems</i>					124 (73%)	
	Yes					19 (11%)	
	No					28 (16%)	

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	34 (20%)
	No	140 (80%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	26 (15%)
	No	147 (85%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	48 (28%)
	Easy	21 (12%)
	Neither	18 (10%)
	Difficult	5 (3%)
	Very difficult	4 (2%)
	Don't know	78 (45%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	21 (12%)
	Easy	18 (10%)
	Neither	20 (12%)
	Difficult	14 (8%)
	Very difficult	10 (6%)
	Don't know	90 (52%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	14 (8%)
	No	158 (92%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	9 (5%)
	No	162 (95%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	130 (77%)
	Yes	21 (13%)
	No	17 (10%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?	
	<i>Did not / do not have an alcohol problem</i>	147 (84%)
	Yes	18 (10%)
	No	9 (5%)
Q10.9	Was the support or help you received, while in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	138 (82%)
	Yes	22 (13%)
	No	9 (5%)

Section II: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	13 (8%)	23 (14%)	64 (38%)	27 (16%)	27 (16%)	14 (8%)
	Vocational or skills training	27 (17%)	17 (10%)	49 (30%)	28 (17%)	28 (17%)	13 (8%)
	Education (including basic skills)	18 (11%)	35 (21%)	58 (35%)	26 (16%)	23 (14%)	5 (3%)
	Offending behaviour programmes	33 (21%)	14 (9%)	33 (21%)	27 (17%)	31 (19%)	22 (14%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				32 (19%)
	Prison job				98 (59%)
	Vocational or skills training				23 (14%)
	Education (including basic skills)				30 (18%)
	Offending behaviour programmes				15 (9%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	Yes	No	Don't know
	Prison job	18 (13%)	49 (34%)	58 (41%)	18 (13%)
	Vocational or skills training	31 (25%)	66 (52%)	19 (15%)	10 (8%)
	Education (including basic skills)	26 (20%)	64 (49%)	27 (21%)	14 (11%)
	Offending behaviour programmes	30 (25%)	43 (36%)	34 (28%)	14 (12%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				17 (10%)
	Never				29 (17%)
	Less than once a week				56 (33%)
	About once a week				53 (32%)
	More than once a week				13 (8%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				38 (23%)
	Yes				73 (45%)
	No				52 (32%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				29 (17%)
	0				14 (8%)
	1 to 2				23 (14%)
	3 to 5				90 (53%)
	More than 5				13 (8%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				24 (14%)
	0				10 (6%)
	1 to 2				44 (26%)
	3 to 5				50 (29%)
	More than 5				43 (25%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				6 (4%)
	0				4 (2%)
	1 to 2				7 (4%)
	3 to 5				31 (18%)
	More than 5				120 (71%)

Q11.9	How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)	
	<i>Less than 2 hours</i>	16 (10%)
	<i>2 to less than 4 hours</i>	24 (14%)
	<i>4 to less than 6 hours</i>	26 (16%)
	<i>6 to less than 8 hours</i>	34 (20%)
	<i>8 to less than 10 hours</i>	31 (19%)
	<i>10 hours or more</i>	20 (12%)
	<i>Don't know</i>	15 (9%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	Yes	50 (31%)
	No	113 (69%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	68 (41%)
	No	99 (59%)
Q12.3	Have you had any problems getting access to the telephones?	
	Yes	20 (12%)
	No	146 (88%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	18 (11%)
	<i>Very easy</i>	6 (4%)
	<i>Easy</i>	17 (10%)
	<i>Neither</i>	14 (8%)
	<i>Difficult</i>	46 (27%)
	<i>Very difficult</i>	64 (38%)
	<i>Don't know</i>	5 (3%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	0 (0%)
	Yes	130 (78%)
	No	37 (22%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)	
	<i>Not sentenced/ NA</i>	37 (22%)
	<i>No contact</i>	53 (32%)
	<i>Letter</i>	40 (24%)
	<i>Phone</i>	39 (23%)
	<i>Visit</i>	27 (16%)
Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	117 (71%)
	No	48 (29%)

Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	Yes	114 (68%)
	No	53 (32%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	53 (31%)
	<i>Very involved</i>	36 (21%)
	<i>Involved</i>	38 (22%)
	<i>Neither</i>	12 (7%)
	<i>Not very involved</i>	16 (9%)
	<i>Not at all involved</i>	14 (8%)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)	
	<i>Do not have a sentence plan/ not sentenced</i>	53 (32%)
	<i>Nobody</i>	62 (37%)
	<i>Offender supervisor</i>	38 (23%)
	<i>Offender manager</i>	21 (13%)
	<i>Named/ personal officer</i>	14 (8%)
	<i>Staff from other departments</i>	13 (8%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	53 (32%)
	Yes	80 (48%)
	No	16 (10%)
	<i>Don't know</i>	17 (10%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	53 (32%)
	Yes	28 (17%)
	No	60 (36%)
	<i>Don't know</i>	27 (16%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	53 (32%)
	Yes	24 (14%)
	No	56 (33%)
	<i>Don't know</i>	35 (21%)
Q13.10	Do you have a needs based custody plan?	
	Yes	15 (9%)
	No	70 (42%)
	<i>Don't know</i>	80 (48%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes	28 (17%)
	No	140 (83%)

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

	<i>Do not need help</i>	<i>Yes</i>	<i>No</i>
Employment	39 (24%)	49 (30%)	75 (46%)
Accommodation	38 (24%)	48 (30%)	72 (46%)
Benefits	40 (26%)	42 (27%)	73 (47%)
Finances	39 (26%)	33 (22%)	80 (53%)
Education	43 (28%)	41 (27%)	69 (45%)
Drugs and alcohol	48 (32%)	43 (29%)	58 (39%)

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

<i>Not sentenced</i>	0 (0%)
<i>Yes</i>	93 (57%)
<i>No</i>	69 (43%)

Main comparator and comparator to last time



Prisoner survey responses HMP Highpoint 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

		HMP Highpoint 2015	Category C Training Prisons comparator	HMP Highpoint 2015	HMP Highpoint 2012
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		182	6,312	182	183
SECTION 1: General information					
1.2	Are you under 21 years of age?	0%	3%	0%	0%
1.3	Are you sentenced?	100%	100%	100%	100%
1.3	Are you on recall?	12%	9%	12%	14%
1.4	Is your sentence less than 12 months?	5%	6%	5%	8%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	9%	5%	4%
1.5	Are you a foreign national?	19%	9%	19%	12%
1.6	Do you understand spoken English?	98%	99%	98%	98%
1.7	Do you understand written English?	96%	98%	96%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	48%	24%	48%	44%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	4%	6%	3%
1.1	Are you Muslim?	26%	13%	26%	19%
1.11	Are you homosexual/gay or bisexual?	1%	4%	1%	1%
1.12	Do you consider yourself to have a disability?	14%	20%	14%	21%
1.13	Are you a veteran (ex-armed services)?	5%	6%	5%	4%
1.14	Is this your first time in prison?	32%	37%	32%	33%
1.15	Do you have any children under the age of 18?	59%	51%	59%	56%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	63%	44%	63%	66%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	71%	73%	71%	71%
2.3	Were you offered a toilet break?	5%	8%	5%	5%
2.4	Was the van clean?	59%	63%	59%	59%
2.5	Did you feel safe?	75%	80%	75%	77%
2.6	Were you treated well/very well by the escort staff?	67%	72%	67%	72%
2.7	Before you arrived here were you told that you were coming here?	53%	62%	53%	49%
2.7	Before you arrived here did you receive any written information about coming here?	16%	14%	16%	30%
2.8	When you first arrived here did your property arrive at the same time as you?	83%	86%	83%	90%

Main comparator and comparator to last time

Key to tables

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Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction				
3.1 Were you in reception for less than 2 hours?	43%	54%	43%	45%
3.2 When you were searched in reception, was this carried out in a respectful way?	81%	85%	81%	84%
3.3 Were you treated well/very well in reception?	66%	76%	66%	70%
When you first arrived:				
3.4 Did you have any problems?	58%	60%	58%	61%
3.4 Did you have any problems with loss of property?	24%	18%	24%	23%
3.4 Did you have any housing problems?	17%	13%	17%	26%
3.4 Did you have any problems contacting employers?	6%	2%	6%	3%
3.4 Did you have any problems contacting family?	19%	18%	19%	13%
3.4 Did you have any problems ensuring dependants were being looked after?	5%	1%	5%	1%
3.4 Did you have any money worries?	12%	13%	12%	13%
3.4 Did you have any problems with feeling depressed or suicidal?	10%	14%	10%	14%
3.4 Did you have any physical health problems?	12%	12%	12%	16%
3.4 Did you have any mental health problems?	14%	15%	14%	11%
3.4 Did you have any problems with needing protection from other prisoners?	9%	5%	9%	5%
3.4 Did you have problems accessing phone numbers?	15%	16%	15%	17%
For those with problems:				
3.5 Did you receive any help/ support from staff in dealing with these problems?	30%	36%	30%	38%
When you first arrived here, were you offered any of the following:				
3.6 Tobacco?	76%	75%	76%	73%
3.6 A shower?	27%	28%	27%	14%
3.6 A free telephone call?	39%	42%	39%	22%
3.6 Something to eat?	75%	56%	75%	71%
3.6 PIN phone credit?	64%	52%	64%	62%
3.6 Toiletries/ basic items?	53%	46%	53%	52%
When you first arrived here did you have access to the following people:				
3.7 The chaplain or a religious leader?	52%	53%	52%	47%
3.7 Someone from health services?	76%	70%	76%	63%
3.7 A Listener/Samaritans?	31%	33%	31%	26%
3.7 Prison shop/ canteen?	34%	23%	34%	29%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference					
	When you first arrived here were you offered information about any of the following:					
	3.8 What was going to happen to you?	57%	50%		57%	55%
	3.8 Support was available for people feeling depressed or suicidal?	46%	40%		46%	39%
	3.8 How to make routine requests?	48%	44%		48%	45%
	3.8 Your entitlement to visits?	51%	40%		51%	47%
	3.8 Health services?	62%	52%		62%	55%
	3.8 The chaplaincy?	56%	48%		56%	52%
	3.9 Did you feel safe on your first night here?	73%	82%		73%	77%
	3.10 Have you been on an induction course?	93%	90%		93%	92%
	For those who have been on an induction course:					
	3.11 Did the course cover everything you needed to know about the prison?	71%	59%		71%	66%
	3.12 Did you receive an education (skills for life) assessment?	93%	83%		93%	88%
	SECTION 4: Legal rights and respectful custody					
	In terms of your legal rights, is it easy/very easy to:					
	4.1 Communicate with your solicitor or legal representative?	46%	46%		46%	46%
	4.1 Attend legal visits?	45%	48%		45%	41%
	4.1 Get bail information?	15%	15%		15%	14%
	4.2 Have staff ever opened letters from your solicitor or legal representative when you were not with them?	47%	39%		47%	47%
	4.3 Can you get legal books in the library?	48%	42%		48%	52%
	For the wing/unit you are currently on:					
	4.4 Are you normally offered enough clean, suitable clothes for the week?	74%	66%		74%	71%
	4.4 Are you normally able to have a shower every day?	97%	92%		97%	94%
	4.4 Do you normally receive clean sheets every week?	89%	73%		89%	86%
	4.4 Do you normally get cell cleaning materials every week?	77%	64%		77%	81%
	4.4 Is your cell call bell normally answered within five minutes?	35%	36%		35%	29%
	4.4 Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	77%	69%		77%	68%
	4.4 Can you normally get your stored property, if you need to?	22%	24%		22%	14%
	4.5 Is the food in this prison good/very good?	28%	29%		28%	19%
	4.6 Does the shop/canteen sell a wide enough range of goods to meet your needs?	46%	48%		46%	49%
	4.7 Are you able to speak to a Listener at any time, if you want to?	50%	57%		50%	42%
	4.8 Are your religious beliefs are respected?	58%	53%		58%	53%
	4.9 Are you able to speak to a religious leader of your faith in private if you want to?	62%	58%		62%	58%
	4.10 Is it easy/very easy to attend religious services?	60%	49%		60%	65%

Main comparator and comparator to last time

Key to tables

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Any percentage highlighted in blue is significantly worse					
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Percentages which are not highlighted show there is no significant difference					
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	82%	82%	82%	85%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	61%	58%	61%	60%
5.2	Do you feel applications are dealt with quickly (within seven days)?	40%	41%	40%	42%
5.3	Is it easy to make a complaint?	62%	59%	62%	49%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	41%	34%	41%	25%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	34%	30%	34%	23%
5.5	Have you ever been prevented from making a complaint when you wanted to?	20%	19%	20%	18%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	31%	29%	31%	25%
SECTION 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%	48%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	51%	46%	51%	47%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	7%	9%	4%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	31%	37%	31%	43%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	82%	79%	82%	81%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	70%	74%	70%	73%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	28%	31%	28%	28%
7.4	Do staff normally speak to you most of the time/all of the time during association?	24%	21%	24%	16%
7.5	Do you have a personal officer?	66%	66%	66%	71%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	64%	63%	64%	61%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	43%	35%	43%	39%
8.2	Do you feel unsafe now?	23%	15%	23%	20%
8.4	Have you been victimised by other prisoners here?	31%	27%	31%	23%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	13%	12%	13%	9%
8.5	Hit, kicked or assaulted you?	10%	7%	10%	9%
8.5	Sexually abused you?	2%	1%	2%	1%
8.5	Threatened or intimidated you?	18%	16%	18%	14%

Main comparator and comparator to last time

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8.5	Taken your canteen/property?	12%	6%	12%	4%
8.5	Victimised you because of medication?	6%	4%	6%	4%
8.5	Victimised you because of debt?	8%	4%	8%	4%
8.5	Victimised you because of drugs?	6%	4%	6%	2%
8.5	Victimised you because of your race or ethnic origin?	6%	3%	6%	3%
8.5	Victimised you because of your religion/religious beliefs?	6%	3%	6%	2%
8.5	Victimised you because of your nationality?	5%	2%	5%	2%
8.5	Victimised you because you were from a different part of the country?	3%	4%	3%	3%
8.5	Victimised you because you are from a Traveller community?	2%	1%	2%	1%
8.5	Victimised you because of your sexual orientation?	3%	2%	3%	1%
8.5	Victimised you because of your age?	3%	3%	3%	5%
8.5	Victimised you because you have a disability?	2%	3%	2%	5%
8.5	Victimised you because you were new here?	10%	5%	10%	4%
8.5	Victimised you because of your offence/crime?	4%	5%	4%	2%
8.5	Victimised you because of gang related issues?	8%	4%	8%	5%
8.6	Have you been victimised by staff here?	30%	29%	30%	30%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	10%	11%	10%	9%
8.7	Hit, kicked or assaulted you?	5%	4%	5%	5%
8.7	Sexually abused you?	3%	1%	3%	1%
8.7	Threatened or intimidated you?	11%	12%	11%	13%
8.7	Victimised you because of medication?	3%	3%	3%	4%
8.7	Victimised you because of debt?	2%	2%	2%	2%
8.7	Victimised you because of drugs?	1%	3%	1%	1%
8.7	Victimised you because of your race or ethnic origin?	9%	4%	9%	6%
8.7	Victimised you because of your religion/religious beliefs?	8%	3%	8%	3%
8.7	Victimised you because of your nationality?	5%	2%	5%	3%
8.7	Victimised you because you were from a different part of the country?	3%	3%	3%	4%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	0%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
8.7	Victimised you because of your age?	2%	2%	2%	3%
8.7	Victimised you because you have a disability?	2%	3%	2%	3%
8.7	Victimised you because you were new here?	8%	4%	8%	7%
8.7	Victimised you because of your offence/crime?	4%	4%	4%	2%
8.7	Victimised you because of gang related issues?	5%	2%	5%	5%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	42%	39%	42%	38%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	34%	30%	34%	23%
9.1	Is it easy/very easy to see the nurse?	55%	52%	55%	44%
9.1	Is it easy/very easy to see the dentist?	17%	14%	17%	11%
	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?	47%	49%	47%	31%
9.2	The nurse?	63%	58%	63%	46%
9.2	The dentist?	46%	44%	46%	29%
9.3	The overall quality of health services?	42%	44%	42%	34%
9.4	Are you currently taking medication?	39%	49%	39%	47%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	94%	83%	94%	94%
9.6	Do you have any emotional well being or mental health problems?	28%	31%	28%	20%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	40%	53%	40%	48%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	20%	25%	20%	21%
10.2	Did you have a problem with alcohol when you came into this prison?	15%	17%	15%	11%
10.3	Is it easy/very easy to get illegal drugs in this prison?	40%	38%	40%	25%
10.4	Is it easy/very easy to get alcohol in this prison?	23%	23%	23%	15%
10.5	Have you developed a problem with drugs since you have been in this prison?	8%	9%	8%	5%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	7%	5%	7%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	55%	63%	55%	69%
10.8	Have you received any support or help with your alcohol problem while in this prison?	67%	64%	67%	58%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	71%	77%	71%	81%

Main comparator and comparator to last time

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SECTION 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	52%	45%	52%	37%
11.1	Vocational or skills training?	41%	41%	41%	31%
11.1	Education (including basic skills)?	56%	56%	56%	47%
11.1	Offending behaviour programmes?	29%	23%	29%	16%
Are you currently involved in any of the following activities:					
11.2	A prison job?	59%	59%	59%	47%
11.2	Vocational or skills training?	14%	16%	14%	8%
11.2	Education (including basic skills)?	18%	23%	18%	32%
11.2	Offending behaviour programmes?	9%	12%	9%	4%
11.3	Have you had a job while in this prison?	87%	82%	87%	76%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	39%	44%	39%	30%
11.3	Have you been involved in vocational or skills training while in this prison?	75%	73%	75%	70%
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?	70%	56%	70%	43%
11.3	Have you been involved in education while in this prison?	80%	78%	80%	81%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	61%	59%	61%	50%
11.3	Have you been involved in offending behaviour programmes while in this prison?	75%	70%	75%	66%
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?	47%	51%	47%	36%
11.4	Do you go to the library at least once a week?	39%	44%	39%	48%
11.5	Does the library have a wide enough range of materials to meet your needs?	45%	46%	45%	52%
11.6	Do you go to the gym three or more times a week?	61%	32%	61%	56%
11.7	Do you go outside for exercise three or more times a week?	54%	52%	54%	49%
11.8	Do you go on association more than five times each week?	71%	67%	71%	76%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	17%	12%	15%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	31%	34%	31%	25%
12.2	Have you had any problems with sending or receiving mail?	41%	43%	41%	48%
12.3	Have you had any problems getting access to the telephones?	12%	23%	12%	14%
12.4	Is it easy/ very easy for your friends and family to get here?	14%	29%	14%	16%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	78%	82%	78%	76%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	41%	35%	41%	40%
13.2	Contact by letter?	31%	35%	31%	30%
13.2	Contact by phone?	30%	25%	30%	27%
13.2	Contact by visit?	21%	33%	21%	25%
13.3	Do you have a named offender supervisor in this prison?	71%	74%	71%	38%
For those who are sentenced:					
13.4	Do you have a sentence plan?	68%	65%	68%	59%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	64%	52%	64%	56%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	54%	47%	54%	59%
13.6	Offender supervisor?	33%	36%	33%	23%
13.6	Offender manager?	18%	27%	18%	16%
13.6	Named/ personal officer?	12%	12%	12%	15%
13.6	Staff from other departments?	11%	15%	11%	17%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	71%	61%	71%	77%
13.8	Are there plans for you to achieve any of your targets in another prison?	24%	20%	24%	24%
13.9	Are there plans for you to achieve any of your targets in the community?	21%	29%	21%	29%
13.10	Do you have a needs based custody plan?	9%	7%	9%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	17%	15%	17%	16%
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?	40%	34%	40%	30%
13.12	Accommodation?	40%	38%	40%	36%
13.12	Benefits?	37%	40%	37%	41%
13.12	Finances?	29%	28%	29%	22%
13.12	Education?	37%	35%	37%	38%
13.12	Drugs and alcohol?	43%	44%	43%	40%
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	57%	55%	57%	50%

Diversity analysis



Key question responses (ethnicity, foreign national and religion) HMP Highpoint 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		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
Any percentage highlighted in blue is significantly worse							
Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
Number of completed questionnaires returned		85	94	34	148	46	131
1.3	Are you sentenced?	100%	100%	100%	100%	100%	100%
1.5	Are you a foreign national?	22%	16%			24%	18%
1.6	Do you understand spoken English?	98%	98%	88%	100%	98%	98%
1.7	Do you understand written English?	95%	97%	79%	100%	96%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			56%	46%	91%	31%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	10%	3%	7%	0%	8%
1.1	Are you Muslim?	51%	4%	32%	25%		
1.12	Do you consider yourself to have a disability?	9%	19%	12%	14%	9%	15%
1.13	Are you a veteran (ex-armed services)?	6%	3%	6%	4%	2%	5%
1.14	Is this your first time in prison?	31%	32%	57%	26%	40%	30%
2.6	Were you treated well/very well by the escort staff?	60%	74%	76%	65%	58%	70%
2.7	Before you arrived here were you told that you were coming here?	56%	53%	55%	53%	53%	55%
3.2	When you were searched in reception, was this carried out in a respectful way?	80%	82%	76%	82%	76%	82%
3.3	Were you treated well/very well in reception?	65%	66%	67%	65%	68%	66%
3.4	Did you have any problems when you first arrived?	59%	57%	55%	59%	58%	58%
3.7	Did you have access to someone from health care when you first arrived here?	82%	71%	59%	79%	75%	75%
3.9	Did you feel safe on your first night here?	69%	75%	73%	73%	68%	74%
3.10	Have you been on an induction course?	94%	92%	94%	93%	93%	93%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	43%	49%	43%	47%	39%	49%

Diversity analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners			Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
Any percentage highlighted in green is significantly better									
Any percentage highlighted in blue is significantly worse									
Any percentage highlighted in orange shows a significant difference in prisoners' background details									
Percentages which are not highlighted show there is no significant difference									
4.4	Are you normally offered enough clean, suitable clothes for the week?	77%	72%			85%	71%	79%	73%
4.4	Are you normally able to have a shower every day?	99%	95%			97%	97%	98%	96%
4.4	Is your cell call bell normally answered within five minutes?	36%	36%			53%	31%	33%	36%
4.5	Is the food in this prison good/very good?	21%	34%			34%	27%	18%	32%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	43%	50%			55%	44%	46%	47%
4.7	Are you able to speak to a Listener at any time, if you want to?	46%	53%			50%	50%	45%	50%
4.8	Do you feel your religious beliefs are respected?	64%	54%			73%	55%	71%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	64%	58%			67%	60%	71%	58%
5.1	Is it easy to make an application?	81%	83%			76%	83%	71%	85%
5.3	Is it easy to make a complaint?	57%	68%			57%	63%	44%	66%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	38%	57%			45%	49%	43%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	56%			54%	51%	55%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	10%			15%	7%	9%	9%
7.1	Do most staff, in this prison, treat you with respect?	84%	81%			78%	83%	77%	83%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	68%	70%			68%	70%	61%	74%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	17%	31%			23%	24%	16%	27%
7.4	Do you have a personal officer?	63%	68%			69%	65%	57%	67%
8.1	Have you ever felt unsafe here?	41%	44%			37%	44%	41%	43%
8.2	Do you feel unsafe now?	23%	23%			22%	23%	27%	21%
8.3	Have you been victimised by other prisoners?	30%	32%			24%	32%	30%	31%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	14%	21%			9%	20%	14%	19%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	6%			0%	7%	9%	5%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	11%	2%			6%	6%	12%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	6%			6%	5%	7%	5%
8.5	Have you been victimised because you have a disability? (By prisoners)	1%	3%			0%	3%	2%	2%

Diversity analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better						
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
8.6	Have you been victimised by a member of staff?	37%	24%	32%	29%	40%	26%
8.7	Have you ever felt threatened or intimidated by staff here?	10%	13%	13%	11%	9%	13%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	12%	6%	3%	10%	14%	7%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	11%	4%	6%	7%	19%	3%
8.7	Have you been victimised because of your nationality? (By staff)	4%	6%	6%	4%	5%	5%
8.7	Have you been victimised because you have a disability? (By staff)	2%	2%	0%	3%	2%	2%
9.1	Is it easy/very easy to see the doctor?	32%	36%	44%	32%	19%	38%
9.1	Is it easy/ very easy to see the nurse?	56%	55%	55%	55%	43%	58%
9.4	Are you currently taking medication?	29%	46%	32%	40%	32%	39%
9.6	Do you feel you have any emotional well being/mental health issues?	26%	31%	26%	29%	27%	28%
10.3	Is it easy/very easy to get illegal drugs in this prison?	33%	45%	13%	46%	28%	43%
11.2	Are you currently working in the prison?	51%	68%	68%	58%	39%	65%
11.2	Are you currently undertaking vocational or skills training?	20%	9%	11%	15%	17%	13%
11.2	Are you currently in education (including basic skills)?	25%	11%	22%	18%	29%	15%
11.2	Are you currently taking part in an offending behaviour programme?	7%	11%	4%	10%	10%	9%
11.4	Do you go to the library at least once a week?	43%	36%	66%	34%	44%	39%
11.6	Do you go to the gym three or more times a week?	69%	54%	61%	61%	72%	58%
11.7	Do you go outside for exercise three or more times a week?	49%	61%	52%	55%	41%	59%
11.8	On average, do you go on association more than five times each week?	67%	76%	67%	72%	63%	74%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	13%	11%	6%	13%	14%	12%
12.2	Have you had any problems sending or receiving mail?	45%	38%	36%	42%	46%	38%
12.3	Have you had any problems getting access to the telephones?	12%	10%	7%	13%	10%	12%

Diversity Analysis



Key question responses (disability, age over 50) HMP Highpoint 2015

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

Key to tables

		Consider themselves to have a disability		Do not consider themselves to have a disability		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better						
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
Number of completed questionnaires returned		25	154			28	154
1.3	Are you sentenced?	100%	100%			100%	100%
1.5	Are you a foreign national?	16%	19%			14%	20%
1.6	Do you understand spoken English?	100%	97%			97%	98%
1.7	Do you understand written English?	100%	95%			97%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	28%	50%			39%	49%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	9%	6%			8%	6%
1.1	Are you Muslim?	17%	27%			22%	27%
1.12	Do you consider yourself to have a disability?					22%	13%
1.13	Are you a veteran (ex-armed services)?	12%	3%			7%	4%
1.14	Is this your first time in prison?	29%	33%			39%	30%
2.6	Were you treated well/very well by the escort staff?	63%	68%			79%	65%
2.7	Before you arrived here were you told that you were coming here?	40%	57%			56%	53%
3.2	When you were searched in reception, was this carried out in a respectful way?	68%	82%			86%	80%
3.3	Were you treated well/very well in reception?	52%	68%			82%	63%
3.4	Did you have any problems when you first arrived?	88%	53%			63%	58%
3.7	Did you have access to someone from health care when you first arrived here?	76%	75%			93%	73%
3.9	Did you feel safe on your first night here?	64%	74%			79%	72%
3.10	Have you been on an induction course?	88%	93%			97%	92%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	39%	47%			67%	43%
4.4	Are you normally offered enough clean, suitable clothes for the week?	76%	73%			89%	71%
4.4	Are you normally able to have a shower every day?	100%	96%			100%	96%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Is your cell call bell normally answered within five minutes?	29%	37%	52%	32%
4.5	Is the food in this prison good/very good?	28%	29%	43%	26%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	29%	49%	63%	43%
4.7	Are you able to speak to a Listener at any time, if you want to?	48%	50%	74%	45%
4.8	Do you feel your religious beliefs are respected?	54%	60%	79%	55%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	72%	61%	71%	60%
5.1	Is it easy to make an application?	79%	82%	86%	81%
5.3	Is it easy to make a complaint?	68%	60%	67%	61%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	51%	67%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	52%	50%	50%	51%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	9%	0%	10%
7.1	Do most staff, in this prison, treat you with respect?	63%	86%	96%	79%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	74%	69%	84%	67%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	33%	22%	44%	20%
7.4	Do you have a personal officer?	63%	65%	63%	66%
8.1	Have you ever felt unsafe here?	50%	42%	48%	42%
8.2	Do you feel unsafe now?	35%	20%	19%	24%
8.3	Have you been victimised by other prisoners?	50%	27%	37%	30%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	21%	16%	11%	19%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	12%	5%	7%	5%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	7%	7%	6%
8.5	Have you been victimised because of your nationality? (By prisoners)	17%	3%	7%	5%
8.5	Have you been victimised because of your age? (By prisoners)	12%	2%	11%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	4%	2%	4%	2%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability		Prisoners aged 50 and over
	Any percentage highlighted in blue is significantly worse				Prisoners under the age of 50
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	33%	28%	7%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	17%	10%	4%	13%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	12%	8%	4%	10%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	4%	7%	0%	9%
8.7	Have you been victimised because of your nationality? (By staff)	12%	3%	4%	5%
8.7	Have you been victimised because of your age? (By staff)	8%	1%	4%	1%
8.7	Have you been victimised because you have a disability? (By staff)	4%	2%	7%	1%
9.1	Is it easy/very easy to see the doctor?	37%	34%	44%	32%
9.1	Is it easy/ very easy to see the nurse?	55%	56%	61%	54%
9.4	Are you currently taking medication?	67%	33%	67%	33%
9.6	Do you feel you have any emotional well being/mental health issues?	71%	20%	26%	29%
10.3	Is it easy/very easy to get illegal drugs in this prison?	54%	37%	33%	41%
11.2	Are you currently working in the prison?	65%	58%	59%	59%
11.2	Are you currently undertaking vocational or skills training?	9%	15%	7%	15%
11.2	Are you currently in education (including basic skills)?	17%	19%	22%	17%
11.2	Are you currently taking part in an offending behaviour programme?	9%	9%	4%	10%
11.4	Do you go to the library at least once a week?	37%	40%	44%	38%
11.6	Do you go to the gym three or more times a week?	32%	66%	46%	64%
11.7	Do you go outside for exercise three or more times a week?	37%	58%	67%	52%
11.8	On average, do you go on association more than five times each week?	74%	71%	73%	71%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	0%	14%	15%	11%
12.2	Have you had any problems sending or receiving mail?	37%	41%	35%	42%
12.3	Have you had any problems getting access to the telephones?	13%	12%	15%	11%



Prisoner survey responses HMP Highpoint 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

		Highpoint North	Highpoint South
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		50	132
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	0%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	8%	13%
1.4	Is your sentence less than 12 months?	2%	5%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	6%
1.5	Are you a foreign national?	26%	16%
1.6	Do you understand spoken English?	96%	99%
1.7	Do you understand written English?	94%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	37%	52%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	7%
1.1	Are you Muslim?	22%	28%
1.11	Are you homosexual/gay or bisexual?	4%	0%
1.12	Do you consider yourself to have a disability?	19%	12%
1.13	Are you a veteran (ex-armed services)?	4%	5%
1.14	Is this your first time in prison?	47%	26%
1.15	Do you have any children under the age of 18?	66%	56%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	59%	64%
2.5	Did you feel safe?	77%	74%
2.6	Were you treated well/very well by the escort staff?	67%	67%
2.7	Before you arrived here were you told that you were coming here?	45%	57%
2.8	When you first arrived here did your property arrive at the same time as you?	92%	79%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	53%	39%
3.2	When you were searched in reception, was this carried out in a respectful way?	86%	79%
3.3	Were you treated well/very well in reception?	73%	63%

Key to tables

	Highpoint North	Highpoint South
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		
When you first arrived:		
3.4 Did you have any problems?	54%	60%
3.4 Did you have any problems with loss of property?	17%	26%
3.4 Did you have any housing problems?	19%	17%
3.4 Did you have any problems contacting employers?	8%	5%
3.4 Did you have any problems contacting family?	25%	17%
3.4 Did you have any problems ensuring dependants were being looked after?	6%	5%
3.4 Did you have any money worries?	17%	11%
3.4 Did you have any problems with feeling depressed or suicidal?	13%	9%
3.4 Did you have any physical health problems?	17%	11%
3.4 Did you have any mental health problems?	13%	14%
3.4 Did you have any problems with needing protection from other prisoners?	13%	8%
3.4 Did you have problems accessing phone numbers?	15%	15%
When you first arrived here, were you offered any of the following:		
3.6 Tobacco?	65%	80%
3.6 A shower?	25%	27%
3.6 A free telephone call?	44%	37%
3.6 Something to eat?	71%	76%
3.6 PIN phone credit?	60%	66%
3.6 Toiletries/ basic items?	54%	52%
When you first arrived here did you have access to the following people:		
3.7 The chaplain or a religious leader?	50%	53%
3.7 Someone from health services?	69%	79%
3.7 A Listener/Samaritans?	31%	31%
3.7 Prison shop/ canteen?	37%	32%
When you first arrived here were you offered information about any of the following:		
3.8 What was going to happen to you?	49%	60%
3.8 Support was available for people feeling depressed or suicidal?	51%	44%
3.8 How to make routine requests?	47%	49%
3.8 Your entitlement to visits?	51%	51%
3.8 Health services?	60%	63%
3.8 The chaplaincy?	58%	55%
3.9 Did you feel safe on your first night here?	65%	75%
3.10 Have you been on an induction course?	92%	93%
3.12 Did you receive an education (skills for life) assessment?	92%	94%

Key to tables

	Any percentage highlighted in green is significantly better	Highpoint North	Highpoint South
	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 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?	47%	46%
4.1	Attend legal visits?	48%	44%
4.1	Get bail information?	23%	13%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	45%	47%
4.3	Can you get legal books in the library?	51%	46%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	78%	72%
4.4	Are you normally able to have a shower every day?	96%	97%
4.4	Do you normally receive clean sheets every week?	92%	87%
4.4	Do you normally get cell cleaning materials every week?	72%	78%
4.4	Is your cell call bell normally answered within five minutes?	32%	37%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	78%	77%
4.4	Can you normally get your stored property, if you need to?	22%	21%
4.5	Is the food in this prison good/very good?	37%	25%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	52%	44%
4.7	Are you able to speak to a Listener at any time, if you want to?	43%	52%
4.8	Are your religious beliefs are respected?	70%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	62%	61%
4.10	Is it easy/very easy to attend religious services?	70%	56%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	81%	82%
5.3	Is it easy to make a complaint?	58%	63%
5.5	Have you ever been prevented from making a complaint when you wanted to?	20%	20%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	31%	31%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	45%	49%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	57%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	8%	9%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	84%	81%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	75%	68%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	29%	28%
7.4	Do staff normally speak to you most of the time/all of the time during association?	29%	22%
7.5	Do you have a personal officer?	76%	61%

Key to tables

	Any percentage highlighted in green is significantly better	Highpoint North	Highpoint South
	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			
8.1	Have you ever felt unsafe here?	32%	48%
8.2	Do you feel unsafe now?	16%	26%
8.4	Have you been victimised by other prisoners here?	34%	29%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	16%	11%
8.5	Hit, kicked or assaulted you?	10%	10%
8.5	Sexually abused you?	2%	2%
8.5	Threatened or intimidated you?	20%	17%
8.5	Taken your canteen/property?	8%	14%
8.5	Victimised you because of medication?	4%	6%
8.5	Victimised you because of debt?	6%	9%
8.5	Victimised you because of drugs?	2%	7%
8.5	Victimised you because of your race or ethnic origin?	4%	6%
8.5	Victimised you because of your religion/religious beliefs?	6%	6%
8.5	Victimised you because of your nationality?	4%	6%
8.5	Victimised you because you were from a different part of the country?	4%	3%
8.5	Victimised you because you are from a traveller community?	2%	2%
8.5	Victimised you because of your sexual orientation?	6%	2%
8.5	Victimised you because of your age?	8%	2%
8.5	Victimised you because you have a disability?	2%	2%
8.5	Victimised you because you were new here?	10%	10%
8.5	Victimised you because of your offence/crime?	6%	3%
8.5	Victimised you because of gang related issues?	2%	10%
8.6	Have you been victimised by staff here?	24%	32%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	10%	10%
8.7	Hit, kicked or assaulted you?	6%	4%
8.7	Sexually abused you?	2%	3%
8.7	Threatened or intimidated you?	14%	10%
8.7	Victimised you because of medication?	4%	2%
8.7	Victimised you because of debt?	2%	2%
8.7	Victimised you because of drugs?	2%	1%
8.7	Victimised you because of your race or ethnic origin?	4%	10%
8.7	Victimised you because of your religion/religious beliefs?	2%	10%

Key to tables

		Highpoint North	Highpoint South
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.7	Victimised you because of your nationality?	6%	4%
8.7	Victimised you because you were from a different part of the country?	4%	2%
8.7	Victimised you because you are from a traveller community?	0%	2%
8.7	Victimised you because of your sexual orientation?	4%	0%
8.7	Victimised you because of your age?	4%	1%
8.7	Victimised you because you have a disability?	2%	2%
8.7	Victimised you because you were new here?	4%	9%
8.7	Victimised you because of your offence/crime?	4%	4%
8.7	Victimised you because of gang related issues?	2%	6%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	34%	34%
9.1	Is it easy/very easy to see the nurse?	74%	48%
9.1	Is it easy/very easy to see the dentist?	17%	17%
9.4	Are you currently taking medication?	38%	39%
9.6	Do you have any emotional well being or mental health problems?	32%	27%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	8%	24%
10.2	Did you have a problem with alcohol when you came into this prison?	10%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	29%	44%
10.4	Is it easy/very easy to get alcohol in this prison?	16%	25%
10.5	Have you developed a problem with drugs since you have been in this prison?	2%	11%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	2%	7%
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	51%	52%
11.1	Vocational or skills training?	47%	38%
11.1	Education (including basic skills)?	52%	58%
11.1	Offending Behaviour Programmes?	28%	30%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	54%	62%
11.2	Vocational or skills training?	15%	14%
11.2	Education (including basic skills)?	23%	16%
11.2	Offending Behaviour Programmes?	8%	9%
11.4	Do you go to the library at least once a week?	51%	35%
11.5	Does the library have a wide enough range of materials to meet your needs?	37%	48%
11.6	Do you go to the gym three or more times a week?	58%	62%
11.7	Do you go outside for exercise three or more times a week?	69%	48%
11.8	Do you go on association more than five times each week?	67%	73%
11.9	Do you spend ten or more hours out of your cell on a weekday?	16%	10%

Key to tables

		Highpoint North	Highpoint South
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	27%	32%
12.2	Have you had any problems with sending or receiving mail?	33%	44%
12.3	Have you had any problems getting access to the telephones?	15%	11%
12.4	Is it easy/ very easy for your friends and family to get here?	13%	14%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	54%	77%
13.10	Do you have a needs based custody plan?	5%	11%
13.11	Do you feel that any member of staff has helped you to prepare for release?	15%	17%