

Report on an unannounced inspection of

HMP/YOI Parc

by HM Chief Inspector of Prisons

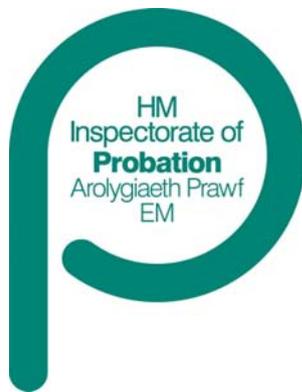
30 November – 1 December 2015

18 – 22 January 2016

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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.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Introduction

Parc is one of the largest prisons in the country, and since the last inspection has been expanded still further to the point that it currently holds in excess of 1,600 convicted and remanded adults and young people. It is situated near Bridgend, South Wales, and is operated under contract by G4S Care and Justice Ltd.

This report is, I hope, self explanatory, and I shall not repeat the findings in this introduction. There are however a few issues that are worthy of particular comment.

The prison has responded to high levels of violence and self-harm, but more needed to be done to address not only actual levels of violence, but the sense among prisoners that they were in an unsafe prison. Our survey found that 43% of prisoners had felt unsafe at some point during their stay in Parc, and 20% of prisoners felt unsafe at the time of our survey. The use of force was also high, but it must be said that it was proportionate and its governance excellent.

An issue of concern, in terms of the safety of some prisoners, was the use of CCTV to monitor those who had been placed on constant watch. This is not adequate. Quite apart from the lack of audible feed to the observers, there is the obvious risk of blind spots and other distractions diverting attention away from the vulnerable prisoners.

In terms of the overall safety and stability of the prison, it is clear that the seemingly ready availability of new psychoactive substances (NPS) such as Spice (a synthetic drug that mimics the effects of cannabis), is having a severely negative influence. Over 50% of prisoners told our survey that it was easy or very easy to get drugs in the prison. This is significantly higher than at comparator prisons and an increase from 32% who said this during the last inspection at Parc. The prison has made efforts to deal with this problem, but clearly the problem remains and does not appear to be receding. We were told that in the past, partnership working with South Wales police had not been as effective as it should have been, but that this was now improving.

Despite the issues around safety and violence that afflict Parc, outcomes for prisoners in terms of both purposeful activity and resettlement were found to be good. Inspectors found the prison had placed offender management 'at the heart of its work to reduce reoffending' and there were examples of good practice such as the family interventions unit.

Parc is a large and complex prison. It has benefited from strong and consistent leadership. Innovation is clearly encouraged, and despite the issues of NPS availability and the obviously linked violence, there is much which the management of Parc can feel justly proud of.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

March 2016

Fact page

Task of the establishment

Parc is a category B local prison holding convicted male adult and young offenders, convicted and remand sex offenders and young people.

Prison status

Private - run by G4S Care and Justice Ltd.

Region

Wales

Number held

1,659

Certified normal accommodation

1,559

Operational capacity

1,723

Date of last full inspection

15-19 July 2013

Brief history

Located in Bridgend, South Wales, Parc was the first prison to be built in the UK under the private finance initiative (PFI) and opened in November 1997. G4S Care & Justice Ltd has a 25-year operating contract to manage the prison on behalf of HM Prison Service, which has six years left to run.

Parc has undergone significant increases in its population in recent years as a part of the government's prison expansion programme. Most recently a new residential unit housing 387 prisoners was completed in early 2015, making Parc one of the largest prisons in the UK.

Short description of residential units

House block

- A Four units each with 75 single and double cells holding sentenced, standard- and basic-level young adults and adults; A2 holds young adults and adults on induction.
- B Four units each with 75 single and double cells holding sentenced, standard- and basic-level young adults and adults; B3 holds 18-25 year olds.
- C Single unit with 69 single and double cells, containing the resettlement unit for convicted young adults and adults.
- D Single unit with 69 single and double cells, containing the substance misuse support unit for convicted young adults and adults.
- X Three units with a total of 216 cells holding a mix of convicted and remand adults and young adults: X1 and X2 hold standard- and basic-level prisoners; X3 holds enhanced- and standard- level prisoners, and includes the assisted living unit and older prisoners unit.
- T T1- T4 have a total of 198 single and double cells holding a mix of convicted adults and young adults: T1 holds those on enhanced level; T2 is the enhanced working unit; T3 holds those in custody for the first time and ex-service personnel; T4 also contains the family unit
T5 - single unit with 112 single and double cells holding a mix of convicted and remand adults and young adults.

T6 – single unit with 16 wheelchair accessible cells, including two health care crisis beds allocated to young adults; this unit is not currently in use.

E2 Segregation unit containing 22 single cells.

Safer custody unit 15 single and double cells holding vulnerable prisoners on their first night and any other vulnerable prisoners in crisis.

Name of director

Janet Wallsgrove

Escort contractor

GEOAmey

Health service provider

G4S Medical Service - primary physical and mental health services

Abertawe Bro Morgannwg University Health Board - secondary mental health services

Learning and skills provider

G4S

Independent Monitoring Board chair

Jean Davies

Community rehabilitation company (CRC)

Working Links

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 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 *Prisoners' early days in the prison were managed well. Staff and peer supporters maintained a clean and welcoming reception. First night procedures and induction were good. Levels of violence were very high and one in five prisoners felt unsafe. The prison's response was proactive and thorough but more was needed to make the prison safer. The level of self-harm was high. Case management procedures for prisoners in crisis were good, but too many were managed in special accommodation and some observation practices were unsafe. Security was managed well and the privileges scheme was effective. Use of force was high but proportionate, and governance was excellent. With the exception of special accommodation, the segregation unit was used appropriately to manage the most challenging prisoners. The prison's efforts to tackle the availability of drugs and related prisoner debt were not sufficiently effective. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S2 *At the last inspection in 2013 we found that outcomes for prisoners in Parc were good against this healthy prison test. We made nine recommendations in the area of safety. At this follow-up inspection we found that six of the recommendations had been achieved, one had been partially achieved and two had not been achieved.*
- S3 Most prisoners had short journeys to the prison and felt safe during escort. Handcuffs were no longer applied routinely to prisoners disembarking from escort vehicles.
- S4 Reception was in good decorative order and provided a welcoming environment. Although some new arrivals still spent too long in reception, there had been an improvement since the last inspection. Risk assessments were thorough and carried out in private, and peer workers supported new arrivals. There was good support for prisoners on the first night unit, with appropriate welfare checks in place. Induction was timely and comprehensive.
- S5 The number of violent incidents had increased significantly since our last inspection, and in our survey one in five prisoners said they felt unsafe and a third had been victimised by other prisoners. Spice – a synthetic drug that mimics the effects of cannabis but is much stronger and cannot be detected by drug tests – was a significant threat to the safety of prisoners and the stability of the prison. The processes for identifying, managing and reducing violence were good, with interventions to help perpetrators address their violent behaviour and good support for the victims of violence.
- S6 Levels of self-harm and prisoners subject to assessment, care in custody and teamwork (ACCT) case management were high, but documentation was very good. Prisoners in crisis felt well supported by staff and had good access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). The safer custody unit now held vulnerable prisoners in their early days, which inevitably affected the quality of the regime and the dedicated care for prisoners with safer custody needs. We were not assured that anti-ligature clothing was only used as a last resort, and too many prisoners subject to ACCT case management were located in special accommodation. There was also an overreliance on CCTV to monitor some prisoners on constant watch. The safeguarding policy was comprehensive, with systems to identify prisoners at risk.

- S7 Security measures were generally proportionate. Intelligence was analysed well and required actions carried out quickly. Despite this, significant quantities of contraband were still getting into the prison, and in our survey, over half of all prisoners said it was easy to get illegal drugs. The prison failed to meet its mandatory drug testing target but was actively addressing supply reduction. Relationships with the police had been ineffective but had begun to improve.
- S8 Staff had a good understanding of the incentives and earned privileges (IEP) scheme and used warnings appropriately to deal with minor infringements of the rules. There were real incentives for prisoners to behave well, and the use of peer mentors (from the basic interventions group) had been effective in reducing the number on the basic level. However, the creation of a landing holding basic-level only prisoners was counterproductive.
- S9 Oversight of all discipline was good. Adjudication charges were only used for the more serious offences. The use of force was high and had increased since our last inspection. The cases we examined were reasonable and proportionate, and the use of de-escalation was very good. Use of special accommodation was too high and we were not assured that every use was appropriate. Most prisoners who were segregated returned to normal location quickly, with good reintegration planning for those segregated for longer. The segregation unit regime had improved with access to more activities, and unit staff had a good knowledge of the prisoners in their care.
- S10 Substance misuse work was well managed, with a developing and recovery-focused service. Clinical treatment had improved since the last inspection. Parc was due to be at the forefront of introducing the smoking ban in prisons. The prison was preparing well for this, but held strong concerns about its potential impact.

Respect

S11 *Parc provided a decent living environment and facilities were good. Relationships between staff and prisoners were positive and staff were approachable. The personal officer scheme worked well and staff had good knowledge of the prisoners in their care. Outcomes for prisoners in most protected groups were generally good. There was a lack of confidence in the applications and complaints processes. Most health services were reasonably good but mental health provision was weak.*
Outcomes for prisoners were reasonably good against this healthy prison test.

S12 *At the last inspection in 2013 we found that outcomes for prisoners in Parc were reasonably good against this healthy prison test. We made 19 recommendations in the area of respect. At this follow-up inspection we found that nine of the recommendations had been achieved, five had been partially achieved, four had not been achieved and one was no longer relevant.*

- S13 Most outside areas were well maintained but exercise yards were austere. The living accommodation was generally good and cells were clean. Toilets were screened but there was no lockable storage in cells. Prisoners were concerned that cell call bells were not answered within five minutes. They also lacked confidence in the applications process, and quality assurance arrangements were insufficient. However, they valued the in-cell telephones.
- S14 In our survey, fewer prisoners than the comparator said that most staff treated them with respect. However, more than the comparator said that a member of staff had checked on them in the last week and that there were staff they could turn to. Prisoners spoke positively about most staff, and we observed positive and relaxed interaction. There was an effective

personal officer scheme, but some new staff lacked knowledge about the prison system, which caused frustration for both them and prisoners.

- S15 There were weaknesses in the strategic management of equality work, and little discussion in the community inclusion action team meeting about some key protected groups. Action planning was generally poor, and there was insufficient attention to equality monitoring data. However, outcomes for prisoners were generally good. Most responses to discrimination complaints were adequate, with good interventions for prisoners found to have been discriminatory, something we rarely see. There was excellent engagement with outside groups to promote diversity. Support for prisoners with disabilities was better than we normally see, and supported living plans were an excellent innovation. Provision for young adults had improved, and was good for older prisoners. Gypsy, Roma and Traveller and LGBT (lesbian, gay, bisexual and transgender) forums were very good, but consultation with other protected characteristics groups was poor by comparison. The support for transgender prisoners needed to be improved. Faith provision was generally good, although poor for some smaller faith groups due to chaplaincy vacancies.
- S16 The number of complaints was higher than in similar prisons and, although prisoners found it easy to make a complaint, some lacked confidence in the process. The standard of the responses we sampled was good, and there was appropriate analysis and quality assurance of complaints. There were limited legal services, and it took too long for prisoners to arrange a visit with a legal representative.
- S17 Prisoners remained overwhelmingly negative about access to and quality of health services. We found that health services were reasonably good, except for mental health provision, which was inadequate. Prisoners with mild to moderate mental health needs were not always assessed promptly, and too many did not get the regular ongoing support they needed - including those with both substance misuse and mental health needs (dual diagnosis). Funding for secondary mental health support had not increased since the prison population had expanded, and consequently provision was too limited. The range of primary care services remained good, but excessive non-attendance rates, including prisoners not taken to health care appointments, contributed to long waits for some services. Clinical governance remained good. The main health department and X unit had reasonably good clinical facilities, but the other unit treatment rooms remained unacceptably poor. Some prisoners waited too long to attend external hospital appointments, which put their health at risk. Dental services were good. Pharmacy services generally were reasonably good, but some wing systems, including access to paracetamol, were unsatisfactory. The learning disability service remained a positive initiative.
- S18 The range and standard of food were reasonable. Prisoners could eat communally and some food could be prepared on the wings, but staff supervision and servery hygiene practices varied. Prisoners could submit shop orders using the central management system (CMS, electronic kiosks used to process prisoner requests), and were consulted about the range of goods on sale.

Purposeful activity

*S19 Too many prisoners were locked behind their doors during the core day. Leadership and management of learning and skills were good, and a wide range of courses and work places were available, but not enough for all prisoners. The quality of provision was good and prisoners were able to progress and achieve qualifications at a high level. The main library was good but access for vulnerable prisoners was poor. The PE department offered a good range of activities for all capabilities. **Outcomes for prisoners were good against this healthy prison test.***

S20 At the last inspection in 2013 we found that outcomes for prisoners in Parc were reasonably good against this healthy prison test. We made seven recommendations in the area of purposeful activity. At this follow-up inspection we found that six of the recommendations had been achieved and one had not been achieved.

S21 Time out of cell had reduced since the last inspection and too many prisoners were locked up during the core day. During our roll checks we found up to 40% of the population locked in their cells.

S22 Leadership and support for learning and skills from senior managers were good, and data were used effectively to plan provision. The new education and vocational facility for vulnerable prisoners was of a high standard. There was a good annual evaluative self-assessment report, which informed the quality development plan. Staff used data well to monitor prisoner recruitment, retention and achievement, and their performance against contractual targets.

S23 The breadth of provision had improved since the last inspection and was good, but there were not enough full-time places and 250 prisoners were unemployed. There were opportunities for prisoners to study for qualifications at level 3 or higher. Wing staff encouraged prisoners into learning, and prisoner mentors successfully engaged prisoners with poor basic skills on the wings. There was good communication between education and wing staff, which helped ensure that activity attendance was good.

S24 Employment workshops occupied prisoners well, enabling them to develop relevant workplace skills. There was a wide range of activities, qualifications and levels. Standards of teaching were consistently good, enhanced by valuable and effective classroom peer mentors. Most prisoners' work was of a good standard, but in a few cases learning did not meet needs. Some prisoners felt they had been put on the wrong course and became difficult to engage.

S25 Consistent initial assessment and diagnosis of prisoners' literacy and numeracy skills were used effectively to match activities with abilities. Assessment of learning was good, and written and verbal feedback was timely and constructive. Progress against goals was tracked and prisoners attained qualifications at a good rate, gaining valuable skills that improved their employability. Although prisoners met their overall goals, individual learning plans did not consistently contain measurable targets tailored to individual needs.

S26 Most classrooms and workshops were of good quality, with good access to learning equipment and modern technology. There was improved promotion of the Welsh language. Evaluation of the impact of prisoners' learning on their progression following release was limited.

- S27 The main library was equipped to a high standard and access was generally good, although poor for vulnerable prisoners. There were good library materials for Welsh speakers and Welsh learners, and useful reference materials to support learning.
- S28 Work to encourage healthy living was effective. Most prisoners had good access to PE facilities. The purpose-built gyms provided good facilities, and prisoners could pursue a wide range of qualifications. There were appropriate activities for all age ranges and for prisoners with disabilities.

Resettlement

- S29 *The prison had placed offender management at the heart of its work to reduce reoffending. The strategy was clear, and links between the relevant departments and with external organisations were well established. Most prisoners received good support from all resettlement departments, and the quality of casework was good, though there was not enough focus on risk management plans. Public protection arrangements were generally robust. Reintegration planning was good, with offender supervisors and the community rehabilitation company (CRC)² helping prisoners to prepare for their release. The prison's work on the children and families pathway remained among the best we have seen. **Outcomes for prisoners were good against this healthy prison test.***
- S30 *At the last inspection in 2013 we found that outcomes for prisoners in Parc were good against this healthy prison test. We made seven recommendations in the area of resettlement. At this follow-up inspection we found that four of the recommendations had been achieved, two had been partially achieved and one had not been achieved.*

- S31 The prison had a comprehensive and clear strategic framework for reducing reoffending. Links between the offender management unit (OMU) and the resettlement/CRC team were well established and well managed. There were also good links with community organisations and other prisons in Wales. There had been a clear strategic approach to ensure that the OMU was at the heart of the prison's work, which we do not always see. Offender supervisors were widely involved in all aspects of the prisoner's life, including attendance at IEP and ACCT reviews.
- S32 All prisoners were allocated a named offender supervisor and contact was established early on their arrival. Induction assessments were incorporated with public protection reviews, which provided a comprehensive view of need and risk. Almost half of all new arrivals had no up-to-date OASys (offender assessment system) assessment, which had a significant affect on offender supervisor contact time with prisoners. In our survey, prisoners were very positive about offender management work at Parc. Most casework was good and focused appropriately on addressing offending behaviour and identified risk factors. Public protection procedures were robust; offender supervisors had a clear role in the process and were actively engaged in reviews.
- S33 The prison released an average of 100 prisoners a month. The role of the CRC (Working Links) was well defined and the team had a reasonably high profile across the prison. Resettlement plans were of a good standard, covered all necessary areas and were appropriately reviewed a week before the prisoner's release. Offender supervisors and

² Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs, which are responsible for work with medium- and low-risk offenders. The National Probation Service (NPS) has maintained responsibility for high- and very high-risk offenders.

offender managers were well integrated into the process. In our survey, more prisoners than at our last inspection said that a member of staff had helped them to prepare for release.

- S34 Housing support for prisoners was reasonable. All new arrivals were seen and support was available to maintain tenancies and/or to manage housing debt. Recent analysis found that 96% of all prisoners were released into appropriate temporary or permanent accommodation.
- S35 Prisoners had good access to independent careers advice. There were good links with local colleges, which improved prisoners' awareness of progression opportunities. The skills offered in most workshops prepared prisoners well for work.
- S36 Arrangements to ensure continuity of health care post-release or on transfer were appropriate. End-of-life and palliative care arrangements remained very good. Substance misuse offender supervisors had developed strong community links to facilitate prisoners' throughcare, and there were good release planning arrangements. All prisoners were given harm reduction information before their release.
- S37 Working Links provided some limited debt advice and support, although further financial advice developments were planned. A money management programme was provided as part of pre-release support.
- S38 Work with children and families was excellent. The development of T4, the family interventions unit, and the 'invisible walls' initiative, to tackle intergenerational offending, appeared to be having a significant impact on the prisoners involved. Visits were widely available, and a positive and relaxed experience without compromising security.
- S39 The prison offered a range of accredited and non-accredited offending behaviour programmes that met the broad needs of the population.

Main concerns and recommendations

- S40 **Concern:** Violence had increased since our previous inspection. In our survey, almost a fifth of respondents said they felt unsafe at the time of the inspection and 33% that they had been victimised by other prisoners.
- Recommendation: The prison should further explore and address the reasons for the high and increasing levels of violence, and give more focus to managing and supporting prisoners in debt. There should be more consultation with prisoners and peer representatives to discuss violence and its main causes.**
- S41 **Concern:** There was a high demand for mental health support, but primary mental health provision was inadequate. Prisoners with mild to moderate mental health needs were not assessed promptly, and primary and secondary mental health support was too limited including for those with both substance misuse and mental health needs.
- Recommendation: Prisoners with primary and secondary mental health needs, including dual diagnosis, should receive satisfactory care-planned support from appropriately trained staff within agreed timescales.**
- S42 **Concern:** Some prisoners waiting to be transferred to hospital under the Mental Health Act had waited for excessive periods, including more than 20 weeks in one case.

Recommendation: Prisoners requiring a transfer to hospital under the Mental Health Act should be assessed promptly and transferred within the current transfer guidelines.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Journeys to the prison were short for most prisoners, and the majority felt safe during escort. Prisoners were no longer unnecessarily handcuffed into reception.*

I.2 Journeys to Parc were short for most prisoners; in our survey, only 24% of prisoners, against the comparator of 48%, said they had spent more than two hours in the escort van. Escort staff were polite and knowledgeable about the prisoners in their care. Prisoners were no longer routinely handcuffed between the escort vehicle and the prison reception, and handcuffs were only used during outside hospital and other escorts on the basis of a risk assessment (see also paragraph I.31).

Early days in custody

Expected outcomes:

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

I.3 *The reception area was welcoming and well maintained. Risk assessments of new arrivals were robust and confidential, and peer workers offered good support. First night processes were sound. Induction was comprehensive but some information was duplicated.*

I.4 The reception area was clean, well decorated and provided a welcoming environment. In our survey, 71% of prisoners said that reception staff treated them well, which was below the comparator; we saw reception staff treating new arrivals well. Some prisoners still waited too long before they were moved to their first night accommodation, and in our survey, only 28% of prisoners, against the comparator of 53%, said that they had spent less than two hours in reception. Vulnerable prisoners were no longer routinely held in the small holding cells in reception, but instead waited in one of the larger well-equipped rooms.

I.5 Each new arrival received a thorough and confidential risk assessment during a private interview in reception. During this time, an induction booklet was opened for them, and a cell sharing risk assessment was carried out. Five prisoner peer supporters worked in reception and offered support and information to all new arrivals. Listeners – prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners – were also available to all new arrivals in reception and on the first night units. Peer partners met new arrivals before they were located in their first night cell.

- I.6** The first night processes were good. Vulnerable prisoners were allocated to the safer custody unit and mainstream prisoners to A2, the first night and induction unit. Staff on the wings interviewed and risk assessed all new arrivals before they were allocated to first night cells, which were clean and adequately equipped. There was a thorough handover between day and night staff, followed by an additional welfare check of new arrivals during their first night in custody.
- I.7** Induction took place within 24 hours and was delivered by peer partners and staff. The prison had introduced a record of induction booklet, which was an effective tool for managing the process. In our survey, fewer prisoners than the comparator said they had been on an induction course or that it covered everything they needed to know. The induction from prisoners and the one-to-one interviews by staff included some duplication, and some vulnerable prisoners said there were delays in starting their induction. The induction we saw was detailed and tailored to the needs of prisoners, and a Parc prisoners' survey indicated that most had completed their induction.

Housekeeping point

- I.8** The information given to prisoners in the induction programme should not be duplicated.

Good practice

- I.9** *The record of induction booklet was a good imitative that enabled a thorough and robust risk assessment.*

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.10** *The number of violent incidents had increased significantly and more prisoners now felt unsafe. New psychoactive substances (NPS)³ posed a significant threat to prisoners. There were good processes to identify, manage and reduce violence, and very good links with other departments. The violence reduction team was active in tackling violence and offered a wide range of interventions to address violence and support victims.*

- I.11** The number of reported violent incidents in the previous six months had increased and was higher than in similar prisons, with 88 assaults on prisoners, 56 fights and 41 assaults on staff. The violence reduction strategy addressed the specific issues at Parc. The availability and use of NPS was a significant problem and posed a real threat to the safety of prisoners (see also paragraph I.35). The prison's own analysis of data showed a clear link between the use of NPS and violent incidents.

³ 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.

- I.12** In our survey, 20% of prisoners said that they felt unsafe at the time of our inspection, 43% said they had felt unsafe at some point and 33% said that they had been victimised by other prisoners; all these responses were significantly higher than at our last inspection. (See main recommendation S40.) Victimisation was mostly in the form of assaults, threats and debt. Vulnerable prisoners located on X wing were more positive about feeling safe now that they lived on a dedicated wing.
- I.13** Systems and practices for identifying, managing and reducing violence were good. There was good monitoring and analysis of all data at the monthly violence reduction meeting, and the prison had highlighted some key areas requiring action – such as unemployment among prisoners, recalled prisoners and NPS use – and had started taking steps to address them. This meeting was supplemented by a daily director's briefing that discussed all incidents in the previous 24 hours and agreed actions to manage them. Links between the violence reduction team and other departments, particularly security and offender management, were good, and information about prisoners was shared with key personnel.
- I.14** The violence reduction was proactive and identified all new arrivals with current or previous violent offences on their record. It also used OASys (offender assessment system) information to identify those who might be at high risk of future violence. A member of the team saw all perpetrators and victims of violence identified in reported incidents. Perpetrators were offered a wide range of interventions to address their poor behaviour, through the effective use of supervision logs, and victims were offered support. All unidentified injuries to prisoners were investigated thoroughly and necessary action taken. There was little consultation with prisoners about violence, and not enough action to tackle the problem of debt among prisoners. (See main recommendation S40.)
- I.15** Vulnerable prisoners spent their early days on the safer custody unit, which also housed prisoners in crisis who required high levels of support. We were not convinced that this was necessary given that there was a purpose-built unit for vulnerable prisoners (X block). In our survey, prisoners on X block were positive about their safety, as were most of those we spoke to. The regime on the unit had improved with the opening of the new educational and vocational facility and the introduction of activities on the wing for older and disabled prisoners (see paragraphs 2.29 and 3.11). Vulnerable prisoners had poorer access to the library than mainstream prisoners.

Good practice

- I.16** *The use of OASys information to identify prisoners who might be violent was a good initiative to support the violence reduction strategy.*

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.17 *The numbers of self-harm incidents and prisoners in crisis on casework management were high. Prisoners in crisis were well cared for and casework documentation was very good. Prisoners had good access to Listeners, and the safer custody unit remained a good initiative, although it now ran a split regime to manage the induction of vulnerable prisoners. Anti-ligature clothing was used too often and for too long. Staff did not safely monitor prisoners who required constant watch. The prison shared information with outside agencies when a prisoner at risk of self-harm left the prison.*

I.18 In the previous six months, 234 prisoners had been involved in 386 self-harm incidents, higher than at similar prisons. There had been 454 assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm opened in the previous six months, a rise since the last inspection. The reasons for these high indicators included the availability of NPS and subsequent debt and bullying (see paragraphs 1.10 and 1.32). There had been two self-inflicted deaths since our last inspection, and the prison had implemented the recommendations from the subsequent Prisons and Probation Ombudsman (PPO) reports.

I.19 During our inspection, 53 prisoners were on ACCTs. Those we spoke to felt supported and cared for, and staff were knowledgeable about their individual circumstances. Five of those on an open ACCT were also on the basic level of the incentives and earned privileges (IEP) scheme, two of who were unemployed. This inevitably led to a reduction in their access to activity that potentially increased their risk of self-harm. ACCT documentation was very good. Prisoners in crisis who required high levels of support were held on the safer custody unit. The unit remained a good initiative but it now also held vulnerable prisoners in their early days, which resulted in a split regime and diluted its function. Prisoners had good access to the 18 Listeners, but the Listeners did not attend the monthly safer custody meeting, which inhibited information sharing.

I.20 Anti-ligature clothing was used too often and for too long to prevent prisoners self-harming. In the previous six months, 15 prisoners had been placed in special accommodation in anti-ligature clothing, including seven on ACCTs. We saw a prisoner held in a cell with no furniture, activities or clothing apart from an anti-ligature gown. Prisoners requiring constant watch were placed in a cell with CCTV, but the cell contained blind spots and staff in the unit office who should have been watching the prisoner were distracted by other office tasks.

I.21 The prison now shared risk information with outside agencies when a prisoner who was or had been on an ACCT was discharged. This was an excellent initiative (see also paragraph 4.32).

Recommendations

I.22 **Prisoners on assessment, care in custody and teamwork (ACCT) case management should only be placed on the basic level of the incentives and earned privileges scheme as a last resort, and even then should not be confined to their cells for long periods.**

I.23 **Prisoners requiring constant watch should be monitored face-to-face by a dedicated member of staff and not by CCTV.**

Housekeeping point

- I.24** Listeners should attend the non-confidential parts of the monthly safer custody meetings.

Good practice

- I.25** *The prison shared key risk information with relevant outside agencies when at-risk prisoners on case management were released, which improved risk management and continuity of care.*

Safeguarding (protection of adults at risk)

Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.⁴

- I.26** *The safer custody team had regular contact with the local safeguarding adults board. Robust risk assessments identified prisoners at risk. There was a comprehensive safeguarding policy.*

- I.27** The prison continued to work with the local safeguarding adults board. There were comprehensive risk assessments identifying those at potential risk because of their age, disability or health, which included initial identification of disability and health care interviews with new arrivals (see also paragraph 2.47). Additional risk assessments took place on the induction units, ensuring a robust approach to the identification of prisoners at risk. Prisoners who required extra help were given a supported living plan. Complex cases, including prisoners with a supported living plan, were discussed at the monthly safer custody meeting, where additional safeguarding concerns could be raised.

- I.28** The safeguarding policy was comprehensive and regularly updated. Originally drafted in 2013 in line with the Wales interim *Policy and procedures for the protection of vulnerable adults from abuse* (POVA 2010), the policy offered guidance and clear protocols to staff. Staff were aware of the policy and their responsibility to protect at-risk prisoners from harm. They were trained to recognise and respond to potential indicators of abuse, and what to do if they had concerns about a prisoner in their care.

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.

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

I.29 *Security measures were generally proportionate, although illicit items continued to be thrown over the wall into the prison. Intelligence was analysed well and required actions carried out quickly. There was now a reasonable working relationship with the police. Closed visits were used appropriately and were well administered.*

I.30 Physical security measures were proportionate. Additional measures had been taken in response to the continued threat of packages thrown in over the wall and to combat the supply and use of NPS and mobile telephones. Additional CCTV cameras were in use and a high risk work area had been moved. There had been a reduction in packages coming in over the wall, probably because the prison had intercepted a large number of such packages.

I.31 Prisoners had free movement to activities at designated times, and at other times they were escorted around the site. Security staff contributed to prisoners' risk assessments for activities, and prisoners were not overly restricted in allocation to work. All strip searching was by risk assessment. Mail for prisoners on the vulnerable prisoner unit was now only censored if the public protection team assessed this as necessary. The security and health care departments had developed a handcuffing protocol to identify in advance prisoners who should not be handcuffed during hospital escorts due to their illness or injury (see also paragraph I.2).

I.32 Good staff-prisoner relationships underpinned dynamic security, and the security department received a wide range of information from all departments. Intelligence was analysed quickly and required outcomes, such as target searching, were carried out promptly.

I.33 The well-attended monthly security meeting reviewed a wide range of data from a detailed intelligence assessment report. There was a focus on emerging threats, and analysis of trends identifying specific actions and strategies to reduce these. Security objectives were relevant and communicated quickly to staff, who were then able to contribute to making the prison safer.

I.34 The prison's relationship with the police had been poor and mostly ineffective, but had improved recently with monthly strategic meetings between senior managers from both organisations. The police provided some support to deal with criminal activity in the prison, illicit acts by visitors and anti-corruption matters, but this relationship needed to be developed further to combat the problem of illicit items entering the prison. The prison had sound procedures to protect prisoners from misconduct by staff, and to manage threats from extremism and terrorism.

I.35 Drugs were readily available at Parc. In our survey, 51% of prisoners said it was easy to get illegal drugs in the prison, compared with 32% at the last inspection and the comparator of 37%. Nineteen per cent said they had developed a drug problem while at Parc, significantly higher than the 11% at the last inspection. The availability of Spice, a synthetic drug that mimics the effects of cannabis but is much stronger and cannot be detected by drug tests, had become a major problem. Although the prison had introduced measures to disrupt supply, incidents continued, with six that required health staff to attend logged in the week of the inspection alone. Staff training had been provided and there was good information sharing between departments. A 'supportive response' protocol had been developed, and information about the dangers of Spice was widely available to prisoners. Supply reduction was included in the overall drug strategy, and the prison was developing a separate NPS strategy. (See also paragraph I.61.)

I.36 The random mandatory drug testing (MDT) positive rate had averaged 9.4% in the previous six months, exceeding the annual target of 8%; prisoners mainly tested positive for Subutex

(buprenorphine) and diverted medication. There had also been finds of anabolic steroids, injecting equipment and 'hooch' (illicitly-brewed alcohol). Many prisons have seen a significant drop in the numbers testing positive for detectable drugs as prisoners opt for non-detectable drugs like Spice. The fact that Parc's MDT rate was still high demonstrated the extent of the drug problem in the prison. The MDT programme itself was well managed, and suspicion as well as risk tests were undertaken when required. Spice could not yet be tested for.

- I.37** The prison had been one of the first to be designated as completely non-smoking. Managers had prepared well for the forthcoming ban (due to take effect for the whole prison in April 2016), and had consulted regularly with prisoners, keeping them informed about the support available to them. Managers had also considered the possible consequences of the ban and had contingencies to deal with any incidents that might arise.
- I.38** Thirty prisoners were subject to closed visits restrictions, all due to visits-related illicit activity. The appeal process was explained and prisoners on closed visits were reviewed monthly. Most were removed from the restrictions within three months. Visitors who were the subject of an indication by a drugs dog were offered a one-off closed visit.

Recommendation

- I.39** **The prison should work with the police to explore ways to prevent drugs and other illicit items entering the prison, and take action to reduce or remove methods of entry.**

Incentives and earned privileges

Expected outcomes:

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

I.40 *Prisoners were generally negative about the incentives and earned privileges (IEP) scheme. Staff had a good understanding of the scheme, and used warnings appropriately for minor infringements of the rules. There were real incentives for prisoners to behave well, and peer mentors were used effectively. The creation of a basic-level prisoner landing was inappropriate.*

- I.41** In our survey, only 37% of prisoners felt that they had been treated fairly in their experience of the IEP scheme, less than the comparator and than at our last inspection. However, prisoners residing on T unit, where most on enhanced level lived, were more positive.
- I.42** New arrivals could retain their enhanced status from a previous prison, and applications for enhanced and reviews for basic were dealt with promptly. Staff understood the scheme and its application well, and used warnings appropriately for less serious infringements of prison rules. A points system was used to assess if a review might be necessary, which ensured fair application of the scheme.
- I.43** Regular quality assurance of documentation for prisoners on the basic regime ensured that any anomalies or issues were rectified. These prisoners had reasonable access to time out of cell for telephone calls, showers and meals, and were not restricted from attending work or

other activity. However, those who were unemployed could have less than three hours a day out of their cells.

- I.44** All basic-level prisoners on B3 were located on one landing with large signs on their cell doors identifying them as such, which was inappropriate and potentially counterproductive.
- I.45** A new group of prisoner peer supporters, the 'basic interventions group' (BIG), had been appointed on A and B units. These prisoners were trained to offer support and advice to prisoners on, or close to being placed on, the basic regime. Early indications were that the number of prisoners on the basic regime had reduced on these units, and that prisoners were moving back to the standard level more quickly.
- I.46** There were real incentives for prisoners to behave well, and those on enhanced level could move to T unit where they were able to access better employment opportunities and increased association. Many prisoners told us that they did not apply for enhanced as they did not want to move away from the wings where they were settled. Managers said they tried to encourage prisoners on enhanced to move to T unit to take advantage of the extra incentives, but it was not necessary.

Recommendation

- I.47** **Prisoners on basic level should not all be located on the same landing or have signs on their door to indicate their regime level.**

Good practice

- I.48** *The use of peer mentors to support prisoners on basic level or close to being reviewed for basic was a good initiative and beginning to have a positive effect.*

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.49** *Oversight of all areas of discipline was good. The deputy director quality assured adjudications. The use of separation logs for those awaiting adjudication ensured prisoner safety. Adjudication charges were appropriate. Use of force had increased and was high. Use of special accommodation was too high and we were not assured that all use was appropriate or that prisoners were removed at the earliest opportunity. Most prisoners stayed in segregation for short periods. Reintegration planning for those segregated for longer was good. The regime had improved with access to more activities and facilities. Staff-prisoner relationships on the unit were good.*

Disciplinary procedures

- I.50** The number of adjudications was higher than in similar prisons and than at our last inspection, with 2,210 in the previous six months. Oversight, monitoring and quality assurance of adjudications were good. Adjudications data were analysed and discussed at monthly violence reduction meetings, and the deputy director carried out quality assurance

checks on individual adjudication records. The main charges were for unauthorised articles, disobedience, and threats and abuse. Prisoners who needed to be kept separated on residential wings overnight before an adjudication (rather than in the segregation unit) were seen by health care staff and a safety algorithm completed; access to regime activities was approved according to a risk assessment by a senior manager, and a written separation log was kept for all these prisoners, which contributed to keeping them safe.

- I.51** The independent adjudicator attended every two weeks to hear an increasing number of the more serious charges. The adjudications we observed and the documentation we reviewed showed that prisoners were given the chance to present their account of events. Records generally gave a reasonable account of the proceedings. Punishments were proportionate and in accordance with the published tariff.

Good practice

- I.52** *The separation of prisoners on wings overnight before an adjudication contributed to prisoner safety on the wings, and prevented too many prisoners being held in the segregation unit.*

The use of force

- I.53** The use of force was high, had increased since our last inspection and was far higher than in similar prisons. There had been 359 incidents in the previous six months, of which nearly 70% involved full use of restraint. Oversight of and accountability for use of force had improved significantly and were now excellent. Force was discussed at the monthly violence reduction meeting and data analysed for any trends. A manager reviewed all incidents and any CCTV recordings within 48 hours. A senior manager reviewed all recordings of planned incidents, although these were poor in quality. We were assured that action was taken to address any concerns about staff involved in use of force. A review of prison life for young adults had included use of restraint, with action taken to address concerns identified (see paragraph 2.30).
- I.54** Written records were detailed and showed evidence of de-escalation before and during the use of force, as did video recordings of incidents. The records we examined showed that most force was proportionate and justified. We raised concerns about two incidents that had taken place before comprehensive reviews of force had been introduced, which were quickly investigated by prison managers.
- I.55** Special accommodation had been used too often with 16 prisoners located in the cells in the previous six months. In 15 of these incidents, the prisoner had their normal clothing removed and were issued with a strip blanket and/or gown because of concerns about prisoner and staff safety. The special cells were not suitable accommodation for those in crisis. Documentation on the use of special accommodation did not assure us that all uses were justified or that prisoners were removed from the cells at the earliest opportunity. In some cases, managers had required a further period of compliance when prisoners stated they were ready to leave the cells, which resulted in some prisoners becoming non-compliant again.

Recommendation

- I.56** **All use of special accommodation should be justified and this accommodation should not be used for prisoners in crisis. Prisoners who do have to be held in these cells should be removed at the earliest opportunity.**

Segregation

- I.57** Use of segregation was similar to our last inspection, with 336 prisoners segregated in the previous six months. There were 12 prisoners on the unit at the start of our inspection – three serving cellular confinement, six for reasons of good order or discipline and three awaiting adjudication. Any prisoners held in segregation when on open ACCT documents were assessed to ensure it was the most suitable location, and all were reviewed at the monthly violence reduction meetings. Few prisoners remained in segregation for long; in the previous six months, only 11 had remained there for over two months. The majority returned to normal residential accommodation within the prison. The use of segregation was monitored at the monthly violence reduction meetings, and collation and analysis of data was good.
- I.58** Reviews were timely, and reintegration and care planning were good for those who remained in segregation for long periods. Staff-prisoner relationships in the unit were very good; staff knew the prisoners in their care well, and their entries in written records reflected this knowledge. Use of segregation was monitored and discussed at the monthly violence reduction meetings, and data were analysed well.
- I.59** The segregation unit environment was good. Cells were clean and well maintained. Although the exercise yard was cage-like, benches and murals had been added. Prisoners had daily access to showers, telephones, time in the open air and the central management system (CMS) kiosks (see paragraph 2.5). The unit staff had made great efforts to provide in-cell activities and workbooks, and the violence reduction team visited daily to see all prisoners and offer support and interventions. Some prisoners who had stayed for longer periods in the unit had accessed the gym, received interventions, and attended offending behaviour programmes. Prisoners could apply to attend religious services.

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.60 *The drug and alcohol strategy was well managed. Substance misuse services had amalgamated with offender management and a range of recovery-focused interventions continued to be developed, but prisoners' perception of support was poorer than previously. Clinical treatment had improved.*

- I.61** The substance misuse policy was up to date and contained detailed development targets based on a comprehensive needs analysis. The prison was also developing a specific NPS strategy overseen by a project board. Actions to address the problem included staff and prisoner awareness raising, monitoring and responding to incidents involving Spice (the most commonly used NPS), and sharing information across departments. (See also paragraph I.35.) A peer support scheme and groupwork modules focusing on NPS were planned but not yet running.
- I.62** Substance misuse offender supervisors (SMOS) engaged with 470 prisoners, but in our survey only 38% said they had received support with their drug problem, against the comparator of 63% and 49% at the last inspection. Only 47%, against the comparator of 65%, said they had received help with alcohol problems.

- I.63** Interventions took place mainly on DI, the relocated drug support wing, and ranged from lower intensity groupwork modules to the five-week Building Skills for Recovery (BSR) programme. SMART (self-management and recovery training) had been introduced and prisoners could now access a counselling service. Although there was regular one-to-one work, our survey and interviews with prisoners indicated they lacked confidence in SMOS. However, an experiment during the inspection for SMOS to change out of uniform and into civilian clothing received a positive response.
- I.64** Currently 52 prisoners received opiate substitute treatment (OST), with the majority reducing on methadone, which was appropriate for a long-term population. Treatment regimes were reviewed regularly by a well-integrated team, which now also included a substance misuse nurse. Stabilisation treatment was available to those who had developed a dependency on illicit Subutex, and prisoners at risk of overdose could recommence OST before their release. Dual diagnosis services for those with mental health and substance-related problems were still insufficiently developed (see main recommendation S41).

Recommendation

- I.65** **The prison should further develop substance misuse services to meet the needs of prisoners, and the range of support for prisoners using Spice should be increased.**

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** *Accommodation and communal areas were in good condition. The prison grounds were generally well maintained but exercise yards were bleak. Cell call bells were not answered promptly. The applications system was ineffective. Prisoners appreciated the in-cell telephones.*
- 2.2** Most of the outside areas were pleasant and well maintained by the prison gardeners, but some areas behind the A, B C and D residential units were littered with refuse and debris that had been thrown from some cell windows. The exercise yards were bleak and had no equipment.
- 2.3** The living accommodation was in good decorative order, most cells and communal spaces were clean and we did not see any in-cell graffiti. However, in our survey fewer prisoners than the comparator and than at the last inspection said that they could get cell cleaning materials every week. Communal showers were now screened, and in-cell toilets were clean and adequately screened.
- 2.4** In our survey, fewer prisoners than the comparator and than at the last inspection said that their cell call bell was normally answered within five minutes. As we walked around, this was again raised as a concern by some prisoners. We were unable to corroborate this as there was no electronic monitoring system in place.
- 2.5** Prisoners had to fill out application forms to raise residential issues, and they told us this system was not working well. In our survey, fewer prisoners than the comparator said that it was easy to make an application. Responses to applications were not prompt, and fewer prisoners than at the last inspection, 48% against 62%, felt their applications were dealt with fairly. There was no quality assurance or monitoring to check the appropriateness of responses or their promptness. Prisoners could also make a range of requests using electronic kiosks in the central management system (CMS).
- 2.6** Prisoners were positive about the in-cell telephone system, which allowed them to call their friends and family between 6am and 11pm each day.

Recommendations

- 2.7** Prisoners should have access to exercise equipment in the exercise yards.
- 2.8** A cell call bell monitoring system should be used to monitor response times.
- 2.9** The paper-based applications system should be replaced by the electronic central management system (CMS), and systematic monitoring and quality assurance introduced.

Housekeeping point

- 2.10 All outside areas should be kept clear of litter and rubbish.

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.

2.11 *Most staff-prisoner relationships were good. The personal officer scheme was effective. Consultation with prisoners had improved since the last inspection.*

2.12 Most interactions between staff and prisoners were positive and courteous. We saw staff engaging well with prisoners who they addressed using their preferred names, and spoke to during association. Although fewer prisoners than the comparator said that staff treated them with respect, more than the comparator said that a member of staff had checked on them personally in the last week. Prisoners were encouraged to take responsibility for their own needs and behaviour.

2.13 Prisoners had identified personal officers who they could turn to for support. These officers were knowledgeable about the personal circumstances of the prisoners in their care and maintained accurate records of their contact with them. In our survey, more prisoners than at the last inspection said that they had a member of staff they could turn to for help. The recruitment of a significant number of new and inexperienced staff since the last inspection had resulted in some frustration for them and prisoners.

2.14 Consultation with prisoners had improved, with weekly focus groups on the residential units that were minuted and well attended by an operational manager and prisoners. There were also monthly residential meetings with a set agenda. A bimonthly prisoner council meeting had been set up since the last inspection to discuss the future development of the prison and consider new ideas and initiatives. Although prisoners were consulted regularly, we were not assured from the minutes of meetings that issues raised were followed up or resolved systematically.

Recommendation

- 2.15 **Issues raised by prisoners at consultation meetings should be followed up promptly by a named manager.**

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

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

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 *There were weaknesses in the strategic management of equality work. Meetings were poorly attended, the action plan had fallen into disuse and there was insufficient attention to data from the equality monitoring tool, particularly for black and minority ethnic prisoners. However, there was very good engagement with outside groups to promote diversity, and good support for most minority groups. There were interventions to address discriminatory behaviour.*

Strategic management

- 2.17** The 'community inclusion' policy covered all protected characteristics, but was brief and did not fully specify the prison's approach to equality work. The community inclusion action plan had not been updated since June 2015 and had fallen into disuse, with many actions not completed by the deadline set.
- 2.18** Prisoners were not invited to the monthly community inclusion action team (CIAT) meeting, which was poorly attended by key staff. There was little, if any, discussion about some protected groups, such as foreign national prisoners and those with disabilities, and therefore no subsequent actions. There was also little discussion of some adverse findings from the equality monitoring tool. Four equality impact assessments had been completed in the year, although there had been none in the previous six months.
- 2.19** Despite weaknesses in the strategic management of equality work, staff in the community inclusion team were enthusiastic and innovative, and helped to achieve good outcomes for prisoners in most protected groups. There were 15 well-trained community inclusion prisoner representatives who assisted on all aspects of equality and diversity, and who felt well supported by the staff team.
- 2.20** There had been 146 discrimination incident reporting forms (DIRFs) submitted by prisoners in the previous six months; most involved low-level incidents. The high number of DIRFs reflected good screening of new arrivals for discriminatory views, as many had been raised by induction staff. Investigations were adequate, but many responses were not prompt. Prisoners found to have contravened the prison's community inclusion policy were required to attend a one-day diversity training programme, which led to actions that were fed into their sentence plan. This was a really positive approach to changing prejudicial attitudes.
- 2.21** The Gypsy, Roma and Traveller, and LGBT (lesbian, gay, bisexual and transgender) forums were very good. Consultation for those with other protected characteristics, mostly through generic community inclusion focus groups, was poor by comparison. There was little effective consultation with foreign national prisoners, older prisoners or those with disabilities.
- 2.22** The prison had very active engagement with community groups, which was much better than we usually see. The team worked particularly well with PE staff, using the gym and sports events to promote diversity. For example, prisoner teams had recently played against a wheelchair rugby team and a gay football team (see paragraph 3.42).

Recommendation

- 2.23** The community inclusion action team meeting should ensure effective policy, planning and consultation for all protected groups, which address need, prisoner perceptions and monitoring data.

Good practice

- 2.24** *New arrivals were screened for discriminatory views and induction staff had raised many discrimination incident reporting forms. Prisoners found to have contravened the prison's community inclusion policy were required to attend a diversity training programme, which set actions that were fed into their sentence plan.*

Protected characteristics

- 2.25** In our survey, responses from black and minority ethnic prisoners were more negative than those from white prisoners, in particular on safety but also on their interactions with staff. Sixty-seven per cent of black and minority ethnic prisoners, compared with 79% of white prisoners, felt respected by staff and only 26%, against 39%, said they had been treated fairly under the incentives and earned privileges (IEP) scheme. Data from the equality monitoring tool (see paragraph 2.18) supported some of these perceptions, showing disproportionate treatment of black and minority ethnic prisoners in the adjudication process and representation on the basic level of the IEP scheme. The data and perceptions had not been discussed at the CIAT or in consultation with this group.
- 2.26** The 'Travellers united' support group for Gypsy, Roma and Traveller prisoners was well attended and popular, with a good range of activities. The group was currently preparing to publish a selection of prisoners' writing on their culture.
- 2.27** The induction of foreign national prisoners was better than we see elsewhere, and they were offered good support for their daily needs. However, due to cuts in legal aid, those facing complex deportation proceedings had generally poor access to legal representation. Conversely, access to bail advice for immigration detainees was better than we normally see. There was evidence of appropriate use of professional interpreting for those who did not speak English. The prison aimed to co-locate prisoners of the same nationality who did not speak English to minimise their sense of isolation. Prisoners were often only told they were going to be detained under immigration powers on the day before were due to be released, which was unacceptable.
- 2.28** There was good identification of prisoners with disabilities, and outcomes for this group were generally good. Wing staff had a better awareness of their needs than we usually see, particularly for those with less visible disabilities. Prisoners with identified need were given a supported living plan, drafted initially by health care staff but held by residential staff, which documented an individual care plan, with review dates. This was an excellent initiative, and although the quality of plans was variable, care for prisoners on such plans was generally good and most felt well supported. The quality of personal emergency evacuation plans was poor – those we saw did not specify any evacuation arrangements. EMT data indicated that prisoners with disabilities had spent a disproportionate time in segregation in the last six months, although this had not been discussed at the CIAT.
- 2.29** There was an assisted living unit for older and disabled prisoners who required most support. The unit, which was on the vulnerable prisoner wing, had two mobility chairs and operated a paid carer scheme. It organised very good activities, which retired and disabled

prisoners located elsewhere in the vulnerable prisoner wing could attend. There was little dedicated provision for prisoners held elsewhere in the prison.

- 2.30** Provision for young adults had improved since the last inspection. They were now predominantly held on one wing where staff had been trained to deal with this age group. The prison had recognised the need to develop dedicated activities and strategy to improve provision for the group generally. There had been a review all aspects of prison life for young adults, including use of restraint and the basic level of the IEP scheme, and action taken to address the concerns identified.
- 2.31** There was better provision for LGBT prisoners than we usually see, and an active and well-attended support group. In 2015, the group published *Inside Out*, a selection of prisoners' and staff writing on being gay in prison. There was work to challenge homophobic views in the general prisoner population. There were two transgender prisoners in the prison during the inspection and there was some evidence of poor support, including inappropriate staff use of the male pronoun for these prisoners.

Recommendations

- 2.32** Foreign national prisoners should be given at least one month's notice before they have completed their sentence of an intention to detain them.
- 2.33** All retired prisoners and those unfit to work should have access to similar provision as that available in the assisted living unit.
- 2.34** The prison should assess and meet the needs of transgender prisoners, including through staff training.

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 *Faith provision was generally good, although some chaplaincy vacancies affected provision for some smaller faith communities.*

- 2.36** Chaplaincy provision was well organised and the team was an active and visible presence on the wings. Although there were sufficient chaplains for the main faiths, there were no chaplains for Buddhist, Hindu or Spiritualist prisoners, despite the best efforts of the team to address this. Since the last inspection, an additional Muslim chaplain had been appointed and a new multi-faith centre had been opened on the vulnerable prisoner wing. Facilities for worship were generally good, and there were several well-attended weekly faith classes for the larger faith groups.
- 2.37** The chaplaincy was well integrated into prison life and members attended key management meetings, but had only limited engagement in resettlement work. The team made daily visits to the segregation and safer custody units. Pastoral support was good, including bereavement support from members of the team and a bereavement counsellor. Prisoners could attend

the 'living with loss' group, and memorial services and short acts of remembrance were appreciated.

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.

2.38 *Complaints procedures were satisfactory and there was good quality assurance, but some prisoners still expressed a lack of confidence in the system.*

2.39 There had been 2,290 complaints in the previous six months, which was higher than in similar prisons. Almost a third of complaints were made by vulnerable prisoners, who had their own wing meetings.

2.40 Complaint forms were freely available on the wings. The complaints box was emptied by the night manager and then passed on to the complaints clerk, and some prisoners expressed concern about the confidentiality of the process. Forms were logged and assigned to the appropriate senior manager, who was also responsible for quality assurance. The responses we sampled were polite, made in good time and addressed the issues raised. Confidential access complaints were dealt with by the director and thoroughly investigated when required.

2.41 Complaint trends were analysed at the monthly functional heads meeting and action taken to address areas causing most concern. Most complaints were about residential issues and the prison had introduced wing surgeries for prisoners to discuss these. The number of complaints about health care was also high (see paragraph 2.50).

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.

2.42 *There was limited legal service provision and it took too long to arrange a visit with a legal representative.*

2.43 There were no legal services staff to assist prisoners with their legal needs and no bail service for the few remand prisoners. However, there was some limited support, such as signposting prisoners to legal representation and assisting them to understand reasons for their recall. In our survey, 58% of prisoners said it was easy to attend legal visits, against the comparator of 48%. However, at the time of the inspection the next available slot for a legal visit was over a week away, which was too long. Arrangements for legal visits were otherwise satisfactory.

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.

2.44 *Prisoners were overwhelmingly negative about health services, particularly prescribing, access to services and mental health provision. Primary care services were reasonably good, but mental health provision was inadequate. Prisoners could access an appropriate range of primary care services, but excessive non-attendance contributed to long waits for optician and podiatry services, and some prisoners waited too long for hospital appointments. Access to the GP was good and for physiotherapy very good. Clinical governance was good. Health promotion was comprehensive. Most unit clinical rooms remained unacceptably poor. Dental services were good. Pharmacy services were generally reasonable, but some wing systems were unsatisfactory. Support for prisoners with learning disabilities and dementia was good.*

Governance arrangements

- 2.45** G4S Medical Services provided primary physical and mental health services and the Abertawe Bro Morgannwg University Health Board provided secondary mental health services. Joint working between the prison, health provider, health board and Public Health Wales was good. Regular well-attended clinical governance and partnership board meetings addressed all essential areas. A new health needs assessment had been commissioned to replace the last one completed in 2010. Learning from adverse incidents, audits and complaints informed service improvement. An identified health engagement lead staff member attended prisoner forums, and health champions were being developed (see also paragraph 2.51).
- 2.46** Experienced clinical managers and lead nurses provided effective clinical leadership. Significant chronic recruitment and retention problems had particularly affected primary mental health and secondary health screening. Three health staff located throughout the prison at night ensured prompt access. A local GP practice provided daily clinics and out-of-hours cover. Health staff were easily identifiable and the health interactions we observed were good. Health staff had good access to relevant policies, clinical training, appraisals and clinical supervision. Most electronic clinical records we examined were good.
- 2.47** The strategic management of older prisoners remained excellent. Access to age-sensitive screening campaigns was satisfactory. An identified nurse led on disability assessments and worked jointly with the prison to facilitate access to mobility and health aids. The prison and local authority were working collaboratively to implement the Social Services and Wellbeing (Wales) Act 2014 from April 2016, which would require the local authority to address prisoners' social care needs.
- 2.48** The main health department and the upstairs facility in X unit had reasonable clinical facilities. The installation of air conditioning had improved the A and B unit clinical rooms, but most unit clinical rooms, including the newly refurbished methadone administration room on D wing, remained too warm, cramped and did not meet infection control standards. The number of prisoners held in the waiting room and waiting times there had improved.

- 2.49** Appropriate emergency equipment was located across the prison. Weaknesses in checking processes were addressed during the inspection. All operational staff were first aid trained and most were also trained to use the easily accessible automated defibrillators, which ensured prompt emergency care. Ambulances were called promptly for medical emergencies.
- 2.50** Written information on health services was only available in reception, but it was out of date and not routinely offered to new arrivals. The prison complaints system was still used for health matters. Although health envelopes had been introduced to provide confidentiality, these were not always available and the process was poorly advertised. Most of the 619 complaints received in 2015 related to medication and access to services. Complaint responses were generally polite and timely, but did not consistently address all issues or highlight the options if the complainant was unhappy with the response. Complaints were correctly no longer included in the clinical notes. There was now a specific health administrator, who was identified on posters and on the central management system (CMS, see paragraph 2.5) as a contact to discuss and resolve minor concerns, and this recent initiative was developing well.
- 2.51** Comprehensive health promotion linked to national campaigns was available prison wide. An impressive pilot between the prison, Red Cross and Public Health Wales had trained 13 prisoner volunteers on one wing as peer mentors to offer information on health issues, including substance misuse and blood-borne viruses, to improve prisoner's health and well-being. Prisoners had good access to relevant immunisations, support for blood-borne viruses and barrier protection.

Recommendations

- 2.52 All health care rooms should comply with infection control standards, and temperatures should not exceed 25°C.** (Repeated recommendation 2.57)
- 2.53 Prisoners should have access to a well-advertised confidential health complaints system. Responses to health complaints should address all the issues raised, and advise prisoners of the options if they are unhappy with the response.**

Housekeeping point

- 2.54** Information on health services in the prison should be up to date and easily accessible for new arrivals and throughout the prison.

Delivery of care (physical health)

- 2.55** New arrivals received an initial health screen and were referred to required services. A GP saw new arrivals with complex or acute health needs the next day. Health staff requested community clinical records to ensure continuity of care. Prisoner access to secondary physical and mental health screens had deteriorated and were regularly weeks, and even months, after arrival, which meant that wider health issues were not always managed promptly.
- 2.56** In our survey, significantly fewer prisoners than the comparator said that it was easy to access the nurse or doctor, or that the quality of health provision was good. Prisoners we spoke to were also overwhelmingly negative, particularly on prescribing, mental health support, waiting times for internal and external appointments, and the quality of care.

- 2.57** Prisoner applications for health services through the CMS were processed swiftly, logged on the clinical notes and replies sent. Appropriate primary care services were provided and waiting times were monitored. Too many prisoners were not brought to their appointments or arrived too late to be seen. There were a variety of reasons for this but they all contributed to high non-attendance rates of 20% to 30%, and excessive waiting times for the optician, dentist and podiatrist. Physiotherapy services were well integrated into the prison and health care, and waiting times were short.
- 2.58** Prisoners with minor health problems who applied to see the GP were allocated to nurse clinics, which might have contributed to prisoner perceptions of poor access to the GP. However, the nurse clinics were effective and provided appropriate medication for minor illnesses and injuries. Waiting times for the GP were equivalent to those in the community. Same-day appointments were available for those with urgent needs.
- 2.59** Support for prisoners with complex health needs, including lifelong conditions, was generally good. Appropriately trained health staff provided regular clinics. The lead GP chaired a well-attended weekly meeting to discuss prisoners with complex health needs, including feedback from prisoner peer supporters. The lead GP had developed comprehensive case management that had contributed to improved outcomes for prisoners with complex epilepsy, and was being expanded to prisoners with diabetes.
- 2.60** The number of daily escorts for external hospital appointments had not increased, despite the prison's expansion. However, demand still exceeded the provision. We found cases where prisoners waited an additional two to three months for surgery or review because they could not be escorted to the first appointments offered. Most of the 25 appointments a month cancelled by the prison were to accommodate more clinically urgent or emergency appointments. Monitoring of external appointments had improved, although the prison could not be assured that all prisoners were seen within the required timescale as waiting times from referral were not monitored.

Recommendations

- 2.61 All new arrivals should receive secondary health assessments within 72 hours.**
- 2.62 Prisoners should be able to access all primary care clinics, including dental services, within community-equivalent waiting times, and non-attendance rates should be below 12%.**
- 2.63 Prisoners should have prompt access to external hospital appointments, and waiting times from referral to attendance should be monitored.**

Pharmacy

- 2.64** Focus Healthcare Ltd provided medication promptly, with appropriate written information, from an on-site pharmacy. The pharmacist monitored prescribing effectively and saw prisoners for targeted medicines use reviews and medication counselling. A well-attended medicines management committee met monthly and monitored prescribing trends.
- 2.65** Appropriate up-to-date protocols and prescribing guidance (formulary) were available and generally followed. Prescribing of tradable medication and complex regimes were reviewed appropriately. Most medicines were issued for named patients with suitable arrangements for repeat prescribing, transfers, releases and court appearances. Most prisoners received their medication in possession following suitable and regularly reviewed risk assessment.

However, prisoners lacked secure in-cell storage for medicines, and there were no routine spot checks of in-possession medicines, which increased the risks of diversion.

- 2.66** Most medicines were administered at clinically appropriate times, although sedative medicines were often given too early. Prisoners' identity was checked before administration. Electronic prescribing and administration were used reasonably well, although many administration records we checked were incomplete and it was unclear whether the prisoner had actually received their medication. We observed the use of effective systems to address medication refusal and non-attendance to collect medicines, including contacting key staff such as managers and safer custody. However, this procedure had not been followed for a prisoner who had repeatedly refused an essential anti-clotting agent. Custody staff supervised medication administration inconsistently, which compromised safety and confidentiality and increased the likelihood of diversion and bullying.
- 2.67** The amount of paracetamol that could be administered without a prescription was limited to three doses in 28 days – this had followed a spike in reported paracetamol overdoses. Prisoners wishing to have paracetamol had their details recorded by custodial staff and returned to collect it when all other medication had been administered. However, this system was often poorly managed, prisoners were very dissatisfied with it and acute pain was not always effectively managed. This paracetamol supply was also not consistently recorded on the clinical records.
- 2.68** Medicines were generally stored appropriately with robust date checking in the pharmacy and for out-of-hours stock. However, stock held in other areas for administration under patient group directions (authorising appropriate health care professionals to supply and administer prescription-only medicine) was not audited regularly. Monitoring of drug refrigerator temperatures in clinical rooms was poor, and out-of-range temperatures were not always managed appropriately. Controlled drugs were managed effectively, although the prescriber did not sign printed prescriptions for controlled drugs. Errors, near-misses and drug alerts were managed appropriately. The pharmacy lacked a *British National Formulary* for children, and many wing reference books were out of date.

Recommendations

- 2.69 All medication should be administered at an appropriate time for maximum therapeutic effect, and administration records should be complete.**
- 2.70 Custodial staff should supervise medicines administration adequately to ensure confidentiality and prevent diversion and bullying.**
- 2.71 Prisoners should have secure storage for their medication, and there should be systematic checks on patients receiving in-possession medication.**

Housekeeping points

- 2.72** Prisoners should have prompt access to simple analgesia through a well-understood system.
- 2.73** The use of stock for administration under patient group directions should be audited.
- 2.74** Refrigerator temperatures should be adequately recorded, and appropriate action taken to correct any not in range.

- 2.75** Prescriptions for controlled drugs should be signed by the prescriber and scanned into the clinical records.
- 2.76** Appropriate in-date reference books and resources should be available and out-of-date material discarded.

Dentistry

- 2.77** Time for Teeth provided a full range of NHS-equivalent services. Waiting times had significantly improved since the last inspection, but remained too long at around eight weeks. Prisoners requesting routine appointments were triaged in person by a dental nurse within one to three weeks and saw a dentist around six weeks later. In our survey, more prisoners than at the last inspection said that access to the dentist was good, although fewer than the comparator said the quality of the dentist was good. Emergency provision was adequate. There was effective oral health promotion. The dental facility was excellent, but the flooring did not meet infection-control standards and required urgent repair (see recommendation 2.52). Clinical governance was good.

Delivery of care (mental health)

- 2.78** In our survey, more prisoners than the comparator and at the previous inspection said they had emotional well-being or mental health problems but fewer than the comparator said they had been helped for these. Joint working between prison and mental health staff was good, including health staff engagement in assessment, care in custody and teamwork (ACCT) case management reviews for prisoners in crisis. Most discipline staff (78%) had received mental health awareness training in the previous three years.
- 2.79** Primary mental health services supported around 110 prisoners with mild to moderate mental health needs, but provision was too limited. These services consisted of mental health nurses plus GP clinics, and there was no clear care pathway. The nurses mainly completed primary care activities and had insufficient time to complete assessments promptly and manage their caseloads effectively, although those with urgent needs were prioritised. An initial mental health screen was completed in reception, but secondary screens were frequently delayed (see paragraph 2.55 and recommendation 2.61). New referrals were allocated to a mental health nurse promptly, but there were often excessive delays before they were seen.
- 2.80** Primary mental health services had no access to psychologically informed therapies, clinical psychology or psychiatry. A dual diagnosis pathway (for prisoners with both mental health and substance misuses needs) was developing, but was restricted by nurse capacity (see main recommendation S41). Support for prisoners with learning disabilities remained very good, and the prison was working toward accreditation with the National Autistic Society quality assurance programme. There were good mechanisms to identify and support prisoners with dementia.
- 2.81** Funding for secondary mental health had not increased since the doubling in prisoner numbers held, which had created significant pressures in the team and led to comparatively restrictive acceptance criteria. The secondary mental health team provided reasonable support to around 35 prisoners, but there was no groupwork and access to clinical psychology was too limited. (See main recommendation S41.) The Mental Health (Wales) Measure approach to care planning was used effectively, and appropriate self-referrals were accepted. The team had introduced training for primary care staff on the criteria for

identifying referrals to their service, as the number referred had remained at around 14 a month despite the recent expansion.

- 2.82** Two of the three prisoners transferred to hospital under the Mental Health Act in the six months to December 2015 had been prompt, but the third had waited more than 20 weeks due to external problems, which was excessive (see main recommendation S42).

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.

- 2.83** *The standard and range of food were reasonable, and minority groups were well catered for. Prisoners were consulted regularly about the food, and the prison had addressed the specific concerns of vulnerable prisoners. Wing serveries were clean but staff supervision was variable.*

- 2.84** Prisoners selected their main meals from a four-week rolling menu offering a good variety of food, including fruit and vegetables. Following the regular prisoner consultation, soup had been added to lunch options and a hot meal was now available on Saturday evenings. Prisoners could eat communally, and could also cook some food themselves on the wings, which was popular. The diverse needs of prisoners were well catered for, and in our survey 41% of black and minority ethnic prisoners said the food was good, compared with 20% of white prisoners. The quality of food we tasted was reasonable. Meal times were appropriate, but prisoners were issued with breakfast packs the evening before they were to be eaten. Food comments books were not always accessible to prisoners.
- 2.85** The majority of meals were ready made by external suppliers and delivered to the prison, but some meals were now cooked freshly on site. Twelve prisoners who were appropriately trained and supervised now assisted with food preparation, but the size of the kitchen restricted the number of trainees. The kitchen was clean, provided adequate chilled and frozen storage facilities, and had a separate area for halal products. Food dates, times and cooking temperatures were monitored and recorded, and catering staff regularly checked serveries during meal times. However, staff supervision on the wings during serving times was inconsistent, which led to some unsafe hygiene practices and could facilitate poor portion control and bullying.
- 2.86** The prison had addressed concerns raised by vulnerable prisoners that their food had been tampered with, and had introduced separate kitchen and transportation arrangements to address these.

Recommendations

- 2.87** **Breakfast should be served on the day it is to be eaten.**
- 2.88** **There should be consistent staff supervision of prisoners during meal times.**

Housekeeping point

2.89 Food comments books should be visibly displayed on all wings.

Purchases

Expected outcomes:

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

2.90 *Prisoners could easily access the prison shop and the product list had been amended and was reasonable, although minority ethnic prisoners still felt less satisfied with the range of goods.*

2.91 In our survey, prisoner responses about access to the prison shop on arrival were better than the comparator, and a loan advance had been increased to £20. Prisoners now used the central management system (CMS) to place orders throughout the week (see paragraph 2.5), and queries were resolved quickly. Following prisoner consultation, items had been added to the shop list and new suppliers identified. Although in our survey only 36% of black and minority ethnic prisoners against 47% of white prisoners said the range of shop goods met their needs, we found that the choice of products for minority ethnic prisoners was reasonable. In anticipation of the smoking ban due for the whole prison from April 2016, a wide selection of nicotine replacement products, including electronic cigarettes, had been added. Prisoners could also shop from a range of catalogues and place internet orders. Newspapers could be ordered and were delivered to the prison daily.

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.⁶

3.1 *Enhanced-status prisoners could have a reasonable amount of time out of their cell but too many part-time workers were locked up during the core day.*

3.2 Prisoners' time out of cell had reduced since the previous inspection. The published core day indicated that an enhanced-status full-time worker could have 11.5 hours a day out of their cell. Most full-time workers on standard level could have eight hours a day, compared with 10-11 hours at the previous inspection, and part-time workers on standard level had only five hours out of their cell. At the weekends most prisoners could have 4.75 hours a day out of their cell, compared with six hours at the last inspection. Unemployed prisoners had only 2.5 hours a day out of their cell, which had reduced from between four and six hours.

3.3 During roll checks in the morning and afternoon of the core day, we found between 34% and 40% of the population locked in their cells. This high figure included a significant number of part-time workers who could have been out of their cells, carrying out domestic tasks.

3.4 Access to outside exercise was offered to all prisoners daily, with a 30-minute slot per prisoner during the evening or morning on each residential unit. However, due to a broken light that had not been fixed in three months, access on one unit had been stopped in the evening when prisoners were more likely to want to spend time in the open air. Domestic time to clean cells and communal areas was built into the weekend routine.

Recommendation

3.5 **Prisoners who were not required to be at activities should be unlocked during the core day.** (Repeated recommendation 3.5)

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.

⁶ 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.

3.6 *The strategic management of learning and skills was good, with a continued focus on improving and developing the range of provision. However, there were not enough activity places to engage all prisoners. Learning and skills opportunities for vulnerable prisoners had improved. Educational and vocational achievements were good, and there had been an increase in the number of prisoners who progressed to higher level qualifications. Nearly all learning environments were good quality, and a few vocational units offered the latest equipment. Library provision was good with a broad range of resources, but access for vulnerable prisoners was poor.*

3.7 *Estyn⁷ made the following assessments about the learning and skills and work provision:*

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

Achievements of prisoners engaged in learning and skills and work: **Excellent**

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

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

Management of learning and skills and work

3.8 There was good support and leadership for learning and skills from senior prison managers, who gave a clear priority and focus to the importance of this area for the rehabilitation of prisoners. Their commitment to the continuous improvement of learning and skills had enabled education staff to be active in improving the range and quality of provision.

3.9 The prison's learning and skills staff produced a good, annual, evaluative self-assessment report. The report clearly identified the prison's strengths and areas that required improvement, which became the basis for the quality development plan. Senior managers monitored progress towards the plan's objectives effectively.

3.10 There was good collection and analysis of data. Most staff used this well to track learners' progress, plan provision and inform strategic managers of prisoners' progress. This enabled good monitoring of the use of facilities, as well as learner recruitment, retention and achievement, and learners' performance against appropriate benchmarks and contractual targets. Managers and peers regularly observed teachers in lessons, and gave clear advice on how to further improve teaching skills.

3.11 Most classrooms and workshops were of good quality, and had good access to learning resources, equipment and modern technology that prepared prisoners for a work environment. The new education and vocational facility for vulnerable prisoners was of a high standard. Classrooms had good display space, which tutors used effectively. Most also had interactive whiteboards and good access to information and communications technology (ICT), but a few did not, which affected progress for a few learners.

3.12 The prison's promotion of the Welsh language had improved. Prisoners who spoke Welsh were identified more clearly than at the previous inspections, and they were encouraged to use conversational Welsh on the wings. A Welsh-speakers' forum has improved the prison's

⁷ Estyn is Her Majesty's Inspectorate for Education and Training in Wales. It is a Crown body, established under the Education Act 1992. Estyn is independent of the National Assembly for Wales but receives its funding from the Welsh Government under Section 104 of the Government of Wales Act 1998.

ability to take account of the views of Welsh speakers. There were more courses for prisoners who wished to learn Welsh.

- 3.13** There was still work to be done to evaluate the impact of prisoners' learning on their sustained progression into work opportunities or on their offending behaviour following release from prison.

Recommendation

- 3.14** **NOMS should require the community rehabilitation company provider to evaluate the impact of prisoners' learning on their progression into work and on their offending behaviour following release from prison.**

Provision of activities

- 3.15** There were 1,470 full-time-equivalent activity places, of which 426 were in education. There were not enough activity places to occupy all 1,620 prisoners, and there were 250 unemployed prisoners. Learners included 160 prisoners, some studying part time, who were pursuing level 3 or higher qualifications; two were working towards masters' degrees.
- 3.16** Wing staff encouraged prisoners into learning, and there were good examples of mentors who engaged with prisoners with poor basic skills on the wings and encouraged to participate in education. However, a few prisoners in numeracy classes did not appreciate the importance of this class for their own development
- 3.17** The breadth of provision was good with a range of choices for education and work. This range had improved to incorporate regular Welsh classes, pottery and ceramics classes, a bricklaying workshop, a state-of-the-art digital printing workshop, an electrical installation workshop and a digital graphic design studio. These improvements were consistent with the needs of the local labour market. Vulnerable prisoners could gain skills in agricultural animal husbandry. Employment workshops occupied prisoners well, and enabled them to develop relevant workplace skills. Prisoners wishing to access work were encouraged to develop their basic skills to a functional level.
- 3.18** The prison undertook consistent initial assessment of prisoners' literacy and numeracy skills, which tutors used effectively to provide activities that suited prisoners' abilities. Courses available included appropriate provision for prisoners with additional learning needs, and a range of qualifications to suit all abilities, from entry to higher level Open University study.
- 3.19** There were good opportunities for prisoners to combine work and education, including attending study part time, and so extend their skills and knowledge and improve their qualifications to enhance their employability.
- 3.20** Good communication between education and wing staff helped ensure that activity attendance was good, and that absences were followed up.

Recommendation

- 3.21** **The preparatory work with prisoners who need to improve their numeracy skills should ensure they understand the relevance of these classes.**

Quality of provision

- 3.22** Standards of teaching and learning were good, and enhanced by the valuable and very effective contribution of classroom peer partners. Most teachers used a wide variety of strategies to engage and motivate learners, catered for different ability groups well and encouraged learners to work collaboratively. In a very few cases, teachers relied too much on worksheets and PowerPoint presentations. The atmosphere in classrooms was respectful.
- 3.23** Teachers' assessment of and for learning was good, with prisoners receiving prompt constructive written and verbal feedback. Teachers tracked prisoners' work well, and ensured they were clear about their progress.
- 3.24** In a very few cases, learning did not fully meet prisoners' needs: a few prisoners felt they had been put on the wrong course against their wishes, and they became difficult to engage.

Education and vocational achievements

- 3.25** There was systematic initial assessment and diagnosis of prisoners' literacy and numeracy skills, repeated at appropriate points, which enabled tutors to plan specific activities to suit prisoners' abilities. Teachers' careful monitoring of prisoners' progress helped ensure they received the right help to complete their goals within the appropriate time. Nearly all prisoners met their overall goals. However, a minority of individual learning plans did not contain sufficiently specific and tailored targets that took enough account of their individual learning needs.
- 3.26** Nearly all prisoners attained qualifications at a good rate. The prison performed well against its attainment performance indicators. Prisoners attained at higher rates than other prisons in Wales, and a good number progressed to higher level qualifications.
- 3.27** Prisoners gained valuable skills that improved their employability, including peer and collaborative working, timekeeping, following instructions and communicating in groups, as well as formal qualifications.
- 3.28** Most prisoners' work was of a good standard, particularly those working towards higher level qualifications, such as GCSEs, Access courses or degrees. Many prisoners were working towards external qualifications that had high currency in the employment market.
- 3.29** The peer partner system worked very well to motivate and support prisoners. Nearly all classes had peer partners, who had been on accredited training at the prison so that they could help learners to progress. Peer partners valued their qualification and their role. They provided good role models, gave prisoners a goal to work towards and provided additional support for teachers. All peer partners worked well with staff to help those prisoners who needed it.
- 3.30** Prisoners on creative arts programmes could enter their work for national awards, and many had won awards and had items exhibited in public galleries. A few had also sold items they had made.
- 3.31** Prisoners on the new bricklaying course were very positive. Most had never built a wall before, and all were progressing quickly and producing walls to a very good standard – in some cases, they were of an exceptionally high standard and included complicated and intricate designs.

- 3.32** Most prisoners had an opportunity to gain a qualification recognised in industry. Many achieved literacy and numeracy qualifications while in class and were then able to progress to further vocational or educational studies.

Recommendation

- 3.33 SMART (specific, measurable, achievable, realistic and time-bound) targets should be included in prisoners' individual learning plans.**

Library

- 3.34** The main library was well equipped, with adequate staff to support prisoners develop their reading and research. There was a good range of materials, including publications for Welsh speakers and learners, foreign nationals and readers with lower basic skills levels. A range of reference material, including legal references and publications, enabled prisoners to research their educational and vocational interests. Prisoners in the main prison had regular access to the library, but vulnerable prisoners had only 20-minute visits once a fortnight.
- 3.35** A few prisoners, particularly those following higher level qualifications, found it difficult to access materials on the internet, due to e-safety restrictions. However, tutors downloaded materials on their behalf.
- 3.36** The library held creative writing groups, and prisoners from these had recently had their stories recorded and broadcast on local prison radio, and distributed via CD to a local community group working with the visually impaired.

Recommendation

- 3.37 Vulnerable prisoners should have better access to the library.**

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.

- 3.38** *PE provision and health promotion were good, and prisoners had the opportunity to pursue accredited courses.*

- 3.39** There was a wide range of PE facilities, including a large fully fitted gym, an indoor ball court and two outdoor all-weather pitches. Prisoners made good use of gym facilities and a high percentage attended gym sessions; figures for September 2015 showed that 56% had used the facilities in just one week.
- 3.40** The provision catered for prisoners of all ages and fitness levels, and activities included football, basketball, netball, rugby, weight training and non-contact boxing. Prisoners had opportunities to develop their football skills through a football coaching programme run in partnership with Cardiff City and the Prince's Trust. They gained valuable experience in structuring their work, as well as learning how to motivate others. Staff also offered a range

of activities for prisoners with disabilities and for older prisoners, such as chair-based aerobics, indoor bowls and yoga.

- 3.41** The prison had two full-time teaching staff and prisoners could access a wide range of accredited courses, including lifestyle management and physical achievement. They could also pursue YMCA awards, including circuit training, gym instructor and nutrition at levels 1 and 2. The fitness programmes also gave prisoners the opportunity to take courses from entry to level 3. For example, the 'healthy living' course offered an opportunity to gain a valuable basic coaching qualification. Prisoners used their time enthusiastically to explore their own levels of fitness and nutrition, and worked well towards their qualification at their own pace.
- 3.42** PE staff promoted equality and diversity well. For example, they had arranged a rugby match with a wheelchair rugby group, held a competition with a female Olympic power lifter, and enabled vulnerable prisoners to participate in a football match against an external gay football team. The department also took part in Black History month and a Kick Out (racism) programme involving outside speakers. These visits provided powerful and influential role models and messages.
- 3.43** An effective and comprehensive range of external and community partnerships enabled prisoners to participate in short courses and gain awards from organisations such as Basketball Wales, Badminton Wales, Glamorgan Cricket Club and several charitable organisations.
- 3.44** Prisoners spoke confidently about the importance of a healthy lifestyle, and a few had become inspired by learning about healthy living at the prison. For example, one prisoner was developing resources to promote smoking cessation, and two former prisoners had progressed to working for a local authority to promote nutrition and healthy living in schools and the community.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

4.1 *The strategic approach to resettlement and offender management was clear, comprehensive and based on identified prisoner need. There were good external strategic and operational links, and the prison made considerable efforts to ensure that offender management was at the heart of its day-to-day functioning.*

4.2 The prison's reducing reoffending strategy 2015-16 was up to date and comprehensive, outlining the key functions and provision available. It covered each department, including the offender management unit (OMU) and each resettlement pathway, with their own detailed action plans outlining the development objectives for the year. Lead managers for each area were responsible for updating action plans and ensuring progress was maintained. The strategy was also supported by a detailed needs analysis based on both OASys (offender assessment) data and information from resettlement questions completed by prisoners. Strategic developments reflected the findings from this needs analysis, especially for the provision of offending behaviour programmes.

4.3 The reducing reoffending/resettlement integrated managers group meetings were held bimonthly with good attendance from across the prison, along with community service providers. Minutes from meetings indicated comprehensive reviews and discussions about issues affecting service provision.

4.4 The prison maintained a good external strategic focus, primarily through the offender management, development and implementation group for Wales and Wales community rehabilitation company (CRC).⁸ However, some issues, particularly prisoners arriving from other establishments without an up-to-date OASys assessment (see paragraph 4.9 and recommendation 4.16), remained unresolved.

4.5 Parc had made considerable effort prison-wide to ensure that offender management was at the heart of its functioning. Offender supervisors took a case management approach to their work with prisoners and regularly attended reviews, including for incentives and earned privileges (IEP) and assessment, care in custody and teamwork (ACCT). They made contributions to decisions about prisoners, and were the conduit for information between the prison and the community. We saw considerable evidence of good and regular contact and information sharing with and from offender managers. Offender supervisors were specifically selected for their role and were rarely, if ever, redeployed elsewhere.

⁸ Since May 2015, rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The National Probation Service (NPS) has maintained responsibility for high- and very high-risk offenders.

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.

4.6 *Too many prisoners continued to arrive at Parc without an up-to-date OASys assessment or sentence plans diminishing the time available for offender supervisors to work with them. The work of the OMU was of a good standard, although there was not enough focus on risk management plans. Casework supervision for offender supervisors had improved, there was a small but growing amount of one-to-one offending behaviour work, and frequency of contact with prisoners was appropriate. Public protection arrangements were generally robust, although community managers did not always clarify prisoner risk levels early enough before their release.*

4.7 Approximately 2% of the population were unsentenced with the remaining 98% allocated to one of 35 offender supervisors, including four seconded from the national probation service. Around half the population was assessed as high or very high risk of harm, with the remainder either low or medium risk.

4.8 We were joined on this inspection by colleagues from HM inspectorate of Probation who looked in detail at 11 cases of prisoners assessed as high or medium risk of harm. A further 18 cases were looked at, although in less detail, of prisoners due to be released within the following fortnight.

4.9 Virtually all prisoners were subject to OASys assessment and, in principle, should have arrived at Parc with an up-to-date assessment and sentence plan. However, as was the case at the last inspection, almost half of all new arrivals had either no OASys assessment or one that was out of date. We found one prisoner serving nine years for serious sex offences who had arrived in November 2015 and was due for release in January 2016, who had not had his OASys reviewed since 2011. Induction assessments and public protection reviews provided a comprehensive analysis of need and risk. The OMU had decided to complete full OASys assessments on all prisoners (rather than use the basic risk assessment) to ensure a thorough assessment and appropriate sentence planning. This had been approved by NOMS and was a commendable approach, although it took resources away from other useful offender supervisor work.

4.10 Our analysis of cases found that most were of a good standard with an appropriate assessment of risk of harm. Sufficient risk management plans, however, while usually completed by offender managers when required, often lacked sufficient detail when completed by offender supervisors.

4.11 In our survey, significantly more prisoners than the comparator said they had an identified offender supervisor. They said that their offender supervisor was involved in their sentence planning and assisting them in meeting their sentence plan targets.

4.12 The OMU had developed a 'case intensity tool' to prioritise the level of contact between offender supervisors and prisoners, based on assessed risk and need. This was used effectively with good overall contact, and in some cases the frequency of contact exceeded the minimum level when required. While variable, we saw several examples of one-to-one work by offender supervisors, often focusing on in-cell work, although not always followed up. Such work generally supported and reinforced that provided through structured

accredited and non-accredited offending behaviour programmes. Prisoners could communicate readily with their offender supervisors via the CMS kiosks on each wing (see paragraph 2.5), and reported that the system worked well.

- 4.13** The OMU's recording system was complex. Some information was recorded on P-Nomis (the Prison Service IT system), but not all offender supervisors had easy access to an appropriate terminal. The department's main recording was on its own unique system and, while appropriate and comprehensive, was only used by the OMU. The CMS was also separate and other departments, such as the CRC, had their own system. Although the range of information was comprehensive, the different systems meant unnecessary complications in sharing it all to inform risk assessments etc.
- 4.14** Since the last inspection, the model of casework supervision and offender supervisor support had developed well. Managers reviewed cases regularly and supervision was also provided. Offender supervisors were positive about this range of support.
- 4.15** Release on home detention curfew (HDC) was managed well with weekly boards to consider prisoners' cases. During 2015, the prison had released 23.5% of prisoners considered for HDC. Although this appeared relatively low, our review of cases indicated an appropriate focus on risk, and decisions were consistent and fair. The process for reviewing prisoners for release on temporary licence (ROTL) was also appropriate, even though only one prisoner had been on ROTL in the previous six months.

Recommendations

- 4.16 Prisoners should not be transferred to Parc without an up-to-date OASys.**
(Repeated recommendation 4.15)
- 4.17 Quality assurance of OASys assessments should ensure that risk management plans describe clearly how prisoners should be managed, both in custody and the community.**

Housekeeping point

- 4.18** The prison should clarify and streamline its offender management unit and resettlement record keeping and recording to ensure that all information is easily accessible.

Public protection

- 4.19** Arrangements for managing public protection were generally good. A senior probation officer oversaw a robust system with offender supervisors playing an active role in identifying and assessing prisoners. The public protection record for information sharing (PRISS) information and recording system ensured that public protection was the main focus of offender supervisor work and decision making.
- 4.20** All new arrivals were reviewed and considered at the next monthly inter-departmental risk management team (IDRMT) meeting, with some appropriately screened out by the senior probation officer. The IDRMT was well attended from across the prison. Offender supervisors were also responsible for the completion of MAPPA (multi agency public protection arrangements) F reports (assessments for community meetings) for prisoners to be released as level two or three. The reports we saw were completed to a generally good standard.

- 4.21** All MAPPA level two and three cases were reviewed at each of the four IDRMT meetings before their release to ensure that appropriate information and arrangements were in place. Approximately six months before their release, there were attempts to clarify the MAPPA level under which prisoners were to be released. We saw several examples of prisoners still waiting to have their MAPPA level confirmed only a few days or weeks before their release, despite many emails and telephone messages to offender managers, which was a potential problem in release planning.

Recommendation

- 4.22** **NOMS should ensure that the MAPPA level on which prisoners will be released is determined at the earliest opportunity to ensure effective pre-release risk management.**

Categorisation

- 4.23** Categorisation arrangements were appropriate with few delays in completion. Prisoners could make representation at boards, and the cases we reviewed were handled appropriately. Reviews to downgrade prisoners were also appropriate; although prisoners could make contributions they did not actually attend boards. At the time of the inspection, almost 70% of the population were categorised as C with fewer than 2% categorised as D. Most prisoners who met the criteria for open conditions were moved and there were no significant delays in transferring them to category D prisons, with most going to HMP Prescoed.

Indeterminate sentence prisoners

- 4.24** The number of indeterminate sentenced prisoners (ISPs) held had increased to 71 since the last inspection, and was due to rise by a further 50 from April 2016. The prison did not provide any specific services for ISPs, except to prioritise them for offending behaviour programmes, but the range of support was generally appropriate.

Reintegration planning

Expected outcomes:

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

- 4.25** *Wales CRC saw all prisoners before their release. Resettlement plans were clear and focused on key issues, and there were appropriate links with community staff responsible for post-release supervision. Although accommodation was often difficult to arrange, some accommodation was found for the vast majority on their release. The prison had good links with local colleges and prisoners were prepared well for the world of work. Release arrangements covering health care and mental health support were generally effective. Substance misuse services were well linked to community support, and the incorporation of substance misuse workers into the work of the OMU ensured good links with wider resettlement provision. Work to support prisoners with financial problems, including debt, was underdeveloped but there were credible plans to expand services. Work to support children and families was excellent and some of the best we have seen across*

England and Wales. The number and range of offending behaviour programmes was good, although there was not enough one-to-one provision.

- 4.26** The prison released approximately 100 prisoners a month. Wales CRC (Working Links) was well integrated into the prison. Its role was clear and there were good liaison and information sharing with offender supervisors and offender managers. Although most prisoners being released had been held before the introduction of the basic custody screening tool in May 2015, the department had introduced its own pre-release review plans, which were more comprehensive than we often see. The plans not only covered the five mandatory areas but also any other work required, and each resettlement pathway. The plans we reviewed were initially drawn up approximately 12 weeks before the prisoner's release and reviewed again a week before discharge, and were of a good standard. Although in our survey prisoners were negative about knowing who to speak to on a range of resettlement services, we found little evidence to support this. By contrast, significantly more prisoners than at the last inspection told us that someone had helped them prepare for release.

Accommodation

- 4.27** All prisoners were seen during induction and offered support to manage any outstanding housing debt, along with information and guidance about applying for post-release accommodation. The support for prisoners was reasonable, although in our survey, more prisoners than the comparator and at our last inspection said they had concerns about accommodation when they arrived at Parc.
- 4.28** Legislative changes in Wales since the last inspection meant that accommodation was no longer guaranteed for prisoners leaving custody and living in Wales and now depended on them meeting priority status, which was relatively rare. Although around a third of all prisoners leaving Parc in the previous six months had had no accommodation secured for them beforehand, most prisoners were offered temporary accommodation through area support services. The prison did not routinely follow up prisoners to establish whether they had accommodation after release, but a review in December 2015 had followed up 50 prisoners released in the previous six weeks who had submitted home assistance applications and found that 96% had returned to temporary or permanent accommodation.
- 4.29** The CRC also delivered a two-hour housing support course that was available to all prisoners, covering how to obtain and maintain accommodation, being a good tenant and other issues.

Recommendation

- 4.30** **Wales CRC should routinely follow up prisoners who approach them for housing support to establish the accommodation they are actually released to, and use such information in its strategy to developing service support.**

Education, training and employment

- 4.31** Prisoners had good access to independent careers advice towards the end of their sentence, although several told us that this would have been more useful when they first arrived to help them to plan the use of their time. The prison had good links with local colleges, which improved prisoners' awareness of progression opportunities and motivated them to consider

further education to improve their employability. The skills offered in most workshops prepared prisoners well for the world of work, enabling them to develop skills in realistic work environments.

Health care

- 4.32** Pre-transfer and release health arrangements were generally effective, including for prisoners with severe mental health problems. The prison shared risk information with outside agencies such as probation when a prisoner who had been subject to ACCT left the prison, which was an excellent initiative to improve continuity of care and manage risk. Palliative and end-of-life care remained impressive. The clinical records we examined demonstrated an excellent prison-wide approach to end-of-life care in partnership with community services.

Drugs and alcohol

- 4.33** The substance misuse service was now fully integrated with the OMU, focused on risk management and addressed substance misuse in relation to offending behaviour. Substance misuse offender supervisors (SMOS) held the caseload of prisoners with a high level of need, such as those requiring clinical treatment. All prisoners received harm reduction advice and information on arrival and pre-release. SMOS worked closely with the community-based integrated offender intervention service and CRCs to facilitate throughcare and ensure treatment continuation on release. Prison link workers visited regularly, and a through-the-gate scheme offering increased support was due to be piloted.

Finance, benefit and debt

- 4.34** Although the prison's own needs analysis indicated that around 26% of prisoners had concerns about managing money and getting into debt, and significantly more prisoners in our survey than the comparator said they had money worries when they arrived at Parc, there was still little provision to support such prisoners. There was some support and advice about housing debt but little on more general financial problems, although there were plans for a contract with Citizens Advice to offer this. Working Links provided a money management course. Prisoners were not able to open bank accounts before release

Recommendation

- 4.35** **The prison should develop general debt management advice and support for prisoners, and enable them to open bank accounts before their release.**

Children, families and contact with the outside world

- 4.36** The prison worked with families to ensure they were involved in the rehabilitation and resettlement of prisoners. The approach was radical and innovative and probably the best we have seen in any prison. The prison had recently been awarded the 'Investors in Families' accredited chartermark – the only prison in the European Union to have received the award.
- 4.37** T4 wing remained the family interventions unit, holding up to 60 prisoners, where prisoners could access a range of programmes and activities to support and develop their family relationships; partners and children were also encouraged to be part of this approach. Any prisoner could apply for a place on the unit, with priority to those felt most likely to benefit

and who were motivated to engage. Each prisoner on the unit had a tailored programme to address their specific needs and concerns.

- 4.38** T4 also incorporated the 'Invisible walls' project, a four-year initiative offering targeted help and support for 20 prisoners at a time in the last 12 months of their sentence and the first six months following release. The project focused on some of the most chaotic and problematic families, and was designed to break the cycle of intergenerational offending. Initial indications were that the work was having a substantial impact on reconviction rates.
- 4.39** Visits were available in the mornings, afternoon and evenings and most sessions were busy, without feeling crowded. The main visits hall was large, airy and comfortable, with a separate small area for enhanced-level prisoners, and an extensive and staffed children's play area and social enterprise cafe. Visits were managed and staffed by the family interventions unit rather than security, which created a more relaxed environment with no evident compromise of security. A family 'lounge' was also available for the various family support events. The smaller visits area for vulnerable prisoners was also a positive environment. A prison analysis suggested that 69% of prisoners at Parc received regular visits compared with an average of 48% across the rest of England and Wales. The prison encouraged prisoner involvement in the lives of their children, and many parent/teacher meetings had been arranged at the prison.

Good practice

- 4.40** *The importance of families and children had been integrated into the whole-prison approach to working with prisoners and their resettlement. The range of programmes on T4 wing was innovative and radical, and the award of the Investors in Families chartermark indicated the quality of this work.*

Attitudes, thinking and behaviour

- 4.41** The prison offered several nationally accredited offending behaviour programmes. These included the Thinking Skills Programme, Building Better Relationships (addressing issues of domestic violence, the Resolve violence and aggression programme, and Building Skills for Recovery, designed to address substance misuse. Almost 300 programme places a year were available. The non-accredited restorative justice programme Restore also continued to be provided.
- 4.42** Priority to attend these programmes went to prisoners assessed as high or very high risk of harm, although the number of places offered flexibility. Prisoners who took part in the programmes achieved positive outcomes. We also saw examples of one-to-one offending behaviour work by offender supervisors to support programme outcomes or to target prisoners who did not meet the very specific programme criteria. Although some offender supervisors would have liked to extend such work, they were often limited by the time available.
- 4.43** Parc was no longer identified as a treatment centre for sex offender treatment programmes (SOTP). In recognition of this, and given that the prison held sentenced sex offenders, the intervention team was developing a short four-session motivational enhancement programme for delivery in a group or to individual prisoners. So far only five programmes had been delivered, but initial indications were positive.

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 Department of Health

- 5.1** Prisoners requiring a transfer to hospital under the Mental Health Act should be assessed promptly and transferred within the current transfer guidelines. (S42)

To the director

- 5.2** The prison should further explore and address the reasons for the high and increasing levels of violence, and give more focus to managing and supporting prisoners in debt. There should be more consultation with prisoners and peer representatives to discuss violence and its main causes. (S40)
- 5.3** Prisoners with primary and secondary mental health needs, including dual diagnosis, should receive satisfactory care-planned support from appropriately trained staff within agreed timescales. (S41)

Recommendation

To the Home Office

- 5.4** Foreign national prisoners should be given at least one month's notice before they have completed their sentence of an intention to detain them. (2.32)

Recommendations

To NOMS

- 5.5** NOMS should require the community rehabilitation company provider to evaluate the impact of prisoners' learning on their progression into work and on their offending behaviour following release from prison. (3.14)
- 5.6** Prisoners should not be transferred to Parc without an up-to-date OASys. (4.16, repeated recommendation 4.15)
- 5.7** NOMS should ensure that the MAPPA level on which prisoners will be released is determined at the earliest opportunity to ensure effective pre-release risk management. (4.22)

Recommendations

To the director

Self-harm and suicide

- 5.8** Prisoners on assessment, care in custody and teamwork (ACCT) case management should only be placed on the basic level of the incentives and earned privileges scheme as a last resort, and even then should not be confined to their cells for long periods. (1.22)
- 5.9** Prisoners requiring constant watch should be monitored face-to-face by a dedicated member of staff and not by CCTV. (1.23)

Security

- 5.10** The prison should work with the police to explore ways to prevent drugs and other illicit items entering the prison, and take action to reduce or remove methods of entry. (1.39)

Incentives and earned privileges

- 5.11** Prisoners on basic level should not all be located on the same landing or have signs on their door to indicate their regime level. (1.47)

Discipline

- 5.12** All use of special accommodation should be justified and this accommodation should not be used for prisoners in crisis. Prisoners who do have to be held in these cells should be removed at the earliest opportunity. (1.56)

Substance misuse

- 5.13** The prison should further develop substance misuse services to meet the needs of prisoners, and the range of support for prisoners using Spice should be increased. (1.65)

Residential units

- 5.14** Prisoners should have access to exercise equipment in the exercise yards. (2.7)
- 5.15** A cell call bell monitoring system should be used to monitor response times. (2.8)
- 5.16** The paper-based applications system should be replaced by the electronic central management system (CMS), and systematic monitoring and quality assurance introduced. (2.9)

Staff-prisoner relationships

- 5.17** Issues raised by prisoners at consultation meetings should be followed up promptly by a named manager. (2.15)

Equality and diversity

- 5.18** The community inclusion action team meeting should ensure effective policy, planning and consultation for all protected groups, which address need, prisoner perceptions and monitoring data. (2.23)

- 5.19** All retired prisoners and those unfit to work should have access to similar provision as that available in the assisted living unit. (2.33)
- 5.20** The prison should assess and meet the needs of transgender prisoners, including through staff training. (2.34)

Health services

- 5.21** All health care rooms should comply with infection control standards, and temperatures should not exceed 25°C. (2.52, repeated recommendation 2.57)
- 5.22** Prisoners should have access to a well-advertised confidential health complaints system. Responses to health complaints should address all the issues raised, and advise prisoners of the options if they are unhappy with the response. (2.53)
- 5.23** All new arrivals should receive secondary health assessments within 72 hours. (2.61)
- 5.24** Prisoners should be able to access all primary care clinics, including dental services, within community-equivalent waiting times, and non-attendance rates should be below 12%. (2.62)
- 5.25** Prisoners should have prompt access to external hospital appointments, and waiting times from referral to attendance should be monitored. (2.63)
- 5.26** All medication should be administered at an appropriate time for maximum therapeutic effect, and administration records should be complete. (2.69)
- 5.27** Custodial staff should supervise medicines administration adequately to ensure confidentiality and prevent diversion and bullying. (2.70)
- 5.28** Prisoners should have secure storage for their medication, and there should be systematic checks on patients receiving in-possession medication. (2.71)

Catering

- 5.29** Breakfast should be served on the day it is to be eaten. (2.87)
- 5.30** There should be consistent staff supervision of prisoners during meal times. (2.88)

Time out of cell

- 5.31** Prisoners who were not required to be at activities should be unlocked during the core day. (3.5, repeated recommendation 3.5)

Learning and skills and work activities

- 5.32** The preparatory work with prisoners who need to improve their numeracy skills should ensure they understand the relevance of these classes. (3.21)
- 5.33** SMART (specific, measurable, achievable, realistic and time-bound) targets should be included in prisoners' individual learning plans. (3.33)
- 5.34** Vulnerable prisoners should have better access to the library. (3.37)

Offender management and planning

- 5.35** Quality assurance of OASys assessments should ensure that risk management plans describe clearly how prisoners should be managed, both in custody and the community. (4.17)

Reintegration planning

- 5.36** Wales CRC should routinely follow up prisoners who approach them for housing support to establish the accommodation they are actually released to, and use such information in its strategy to developing service support. (4.30)
- 5.37** The prison should develop general debt management advice and support for prisoners, and enable them to open bank accounts before their release. (4.35)

Housekeeping points

Early days in custody

- 5.38** The information given to prisoners in the induction programme should not be duplicated. (1.8)

Self-harm and suicide

- 5.39** Listeners should attend the non-confidential parts of the monthly safer custody meetings. (1.24)

Residential units

- 5.40** All outside areas should be kept clear of litter and rubbish. (2.10)

Health services

- 5.41** Information on health services in the prison should be up to date and easily accessible for new arrivals and throughout the prison. (2.54)
- 5.42** Prisoners should have prompt access to simple analgesia through a well-understood system. (2.72)
- 5.43** The use of stock for administration under patient group directions should be audited. (2.73)
- 5.44** Refrigerator temperatures should be adequately recorded, and appropriate action taken to correct any not in range. (2.74)
- 5.45** Prescriptions for controlled drugs should be signed by the prescriber and scanned into the clinical records. (2.75)
- 5.46** Appropriate in-date reference books and resources should be available and out-of-date material discarded. (2.76)

Catering

- 5.47** Food comments books should be visibly displayed on all wings. (2.89)

Offender management and planning

- 5.48** The prison should clarify and streamline its offender management unit and resettlement record keeping and recording to ensure that all information is easily accessible. (4.18)

Examples of good practice

- 5.49** The record of induction booklet was a good initiative that enabled a thorough and robust risk assessment. (1.9)
- 5.50** The use of OASys information to identify prisoners who might be violent was a good initiative to support the violence reduction strategy. (1.16)
- 5.51** The prison shared key risk information with relevant outside agencies when at-risk prisoners on case management were released, which improved risk management and continuity of care. (1.25)
- 5.52** The use of peer mentors to support prisoners on basic level or close to being reviewed for basic was a good initiative and beginning to have a positive effect. (1.48)
- 5.53** The separation of prisoners on wings overnight before an adjudication contributed to prisoner safety on the wings, and prevented too many prisoners being held in the segregation unit. (1.52)
- 5.54** New arrivals were screened for discriminatory views and induction staff had raised many discrimination incident reporting forms. Prisoners found to have contravened the prison's community inclusion policy were required to attend a diversity training programme, which set actions that were fed into their sentence plan. (2.24)
- 5.55** The importance of families and children had been integrated into the whole-prison approach to working with prisoners and their resettlement. The range of programmes on T4 wing was innovative and radical, and the award of the Investors in Families chartermark indicated the quality of this work. (4.40)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector (in post till 29.1.16)
Deborah Butler	Team leader
Colin Carroll	Inspector
Karen Dillon	Inspector
Fionnuala Gordon	Inspector
Deri Hughes-Roberts	Inspector
Keith McInnis	Inspector
Michelle Bellham	Researcher
Tim McSweeney	Researcher
Patricia Taflan	Researcher
Heidi Webb	Researcher
Sigrid Engelen	Substance misuse inspector
Majella Pearce	Health services inspector
Helen Boniface	Pharmacist
Alun Connick	Estyn inspector
Sally Stringer	Estyn inspector
Paddy Doyle	Offender management inspector
Ian Simpkins	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, Parc was a large prison holding some very challenging prisoners and yet it continued to be generally safe. Prisoner escort to the prison was positive, early days arrangements were good and most prisoners said they felt safe on their first night. Levels of violence and bullying were low and had reduced since our last inspection. There was good support for prisoners in crisis, and safeguarding was well developed. Security was generally proportionate and adjudications were fair. The privileges scheme encouraged good behaviour but did not support some individual prisoners. The drug reduction strategy was effective, and psychosocial and clinical interventions were good. Outcomes for prisoners were good against this healthy prison test.

Recommendations

Prisoners should only spend more than two hours in reception in exceptional circumstances. (1.11)

Not achieved

Vulnerable prisoners should be held in reception facilities equivalent to those for other prisoners. (1.12)

Achieved

Prisoners on assessment, care in custody and teamwork (ACCT) case management should not be on the basic level of the incentives and earned privileges scheme. (1.30)

Not achieved

Mail to prisoners should only be censored on the basis of intelligence and when deemed necessary, and authorisation for this should be clearly recorded alongside sound reasoning. (1.44)

Achieved

The prison should investigate and address the reasons that a disproportionate number of young adults report that they have been restrained by staff. (1.57)

Achieved

All prisoners in the segregation unit should be allowed daily access to telephones. (1.64)

Achieved

Treatment regimes for opiate-dependent prisoners should be flexible and based on individual need, and those already prescribed buprenorphine (Subutex) should be able to continue with this regime. (1.71)

Achieved

There should be a dual diagnosis service for prisoners who experience mental health and substance-related problems. (1.72)

Partially achieved

The prison should review the size and function of the drug support/recovery unit to ensure that it provides a supportive environment to prisoners with drug and/or alcohol problems. (1.73)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, Parc was a large modern prison that was clean with good facilities, although some accommodation lacked privacy. Staff-prisoner relationships were good. Arrangements for equality and diversity were good, although prisoners from minority groups were less positive than others about some important aspects of their treatment. Support for prisoners with protected characteristic work was well developed. Faith arrangements were generally good but provision for vulnerable prisoners was limited. Prisoners lacked confidence in the complaints system. Prisoners were negative about the health care and waited too long for key services. We found that some improvement was still required; however the service overall had improved and was reasonably good. Prisoners, especially young adults, were dissatisfied with the food but provision was acceptable. The prison shop offered a reasonable service. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

The prison should develop its strategic management of young adults to ensure that this group are not unfairly represented in key areas, and take account of their levels of maturity and specific needs when developing new strategies (especially the incentives and earned privileges scheme). (S43)

Achieved

Recommendations

Toilets in shared cells should be properly screened or the cells not be used for double occupancy. All cells should contain enough furniture, including lockable cupboards, and be in a good decorative condition. (2.10)

Partially achieved

In-cell and communal showers should provide adequate privacy. (2.11)

Partially achieved

There should be an overarching prisoner council with representatives from all parts of the prison, and chaired and attended by senior managers. (2.18)

Achieved

The prison should work with minority groups to understand and address some of the negative perceptions displayed in our survey. (2.28)

Not achieved

Immigration detainees should not be held in prison unless there are exceptional reasons to do so following risk assessment. (2.36)

Achieved

The prison should assess and meet the needs of transgender prisoners on an individual basis. (2.37)

Not achieved

There should be fair and equitable worship provision for vulnerable prisoners. (2.41)

Achieved

The prison should explore and address prisoners' limited confidence in the complaints process. (2.45)

Partially achieved

All health care rooms should comply with infection control standards, and temperatures should not exceed 25°C. (2.57)

Not achieved (recommendation repeated, 2.52)

Prisoners should not be held in the health care waiting room for long periods before and after appointments. The waiting room should be effectively supervised by staff and there should be a reasonable limit on the numbers held there. (2.66)

Achieved

Nurse assessment clinics should provide prompt effective assessment and include the administration of appropriate medication where requested. (2.67)

Achieved

Waiting lists should be monitored and action taken to reduce excessive waits. (2.68)

Partially achieved

Supplies of controlled drugs should comply with controlled drug regulations. (2.77)

No longer relevant

Medication risk assessments should include both the prisoner and the medication. (2.78)

Achieved

All medication should be administered with sufficient privacy and at an appropriate time for maximum therapeutic effect. (2.79)

Not achieved

Prisoners should have prompt access to appropriate medication through patient group directions and 'special sick' supplies, and their use should be consistently recorded and monitored. (2.80)

Partially achieved

The prison should investigate and address the quantity of food provided to young adult prisoners. (2.97)

Achieved

The shop should offer a suitable range of goods for prisoners from minority groups. (2.100)

Achieved

Purposeful activity

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

At the last inspection, in 2013, time out of cell had improved but at the time of the inspection too many prisoners were still locked up during the core day because of staff absences. Management of learning and skills was more strategic than at our last inspection. The overall quality of activities and the range of provision were good but limited for vulnerable prisoners. Educational and vocational achievements were very good. All learning environments were impressive. Labour allocation was fair. The library was an effective service but access for some prisoners was restricted. PE and health promotion were good but access for some was too limited. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Prisoners who were not required to be at activities should be unlocked during the core day. (3.5, repeated recommendation 6.41)

Not achieved (recommendation repeated, 3.5)

The prison should monitor and review prisoners' progress on their learning while in the prison. (3.13)

Achieved

The standard of teaching should be improved so that it is good or better in all lessons. (3.25)

Achieved

There should be more support for advanced Welsh-speaking prisoners to use and develop their language skills. (3.26)

Achieved

There should be increased opportunities for prisoners to take higher level qualifications in essential skills, maths and English. (3.33)

Achieved

The print shop should provide specialist training to enable prisoners to develop their vocational skills further. (3.34)

Achieved

Staffing in the library should be improved to ensure reasonable access for all prisoners and the resumption of promotion and development work. (3.39)

Achieved

Resettlement

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

At the last inspection, in 2013, there was a comprehensive strategic framework and offender management was at the heart of the prison's work. Sentence planning often focused on activity rather than risk, but public protection arrangements were good. Reintegration planning was generally good. Accommodation outcomes were positive but finance, benefit and debt provision was underdeveloped. Education, training and employment resettlement arrangements were good, as were health care and substance misuse discharge work. Work with children and families was innovative and impressive. Offending behaviour programme support was generally good. Outcomes for prisoners were good against this healthy prison test.

Recommendations

The prison's annual needs analysis should incorporate information from OASys assessments to inform the strategic development of provision. (4.6)

Achieved

Prisoners should not be transferred to Parc without an up-to-date OASys assessment. (4.15)

Not achieved (recommendation repeated, 4.16)

All relevant departments and personal officers should attend or provide written contributions to sentence planning boards. (4.16)

Partially achieved

There should be quality assurance and case supervision in the offender management unit to ensure effective and consistent practice in all aspects of provision. (4.17)

Achieved

The prison should monitor the impact of education, training and employment resettlement programmes on prisoners who are released. (4.32)

Achieved

Debt management should be available for all prisoners with an identified need. (4.40)

Partially achieved

Appropriate programmes and interventions should be available to challenge the attitudes of prisoners in denial of their sexual offending or refusing to take part in appropriate treatment, and motivate them to engage in offending behaviour work. (4.50)

Achieved

Appendix III: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	105	1295	86.4
Recall	7	167	10.5
Convicted unsentenced	3	15	1.1
Remand	2	26	1.8
Civil prisoners	0	1	0.1
Detainees / Other	0	1	0.1
Total	117	1505	

Sentence	18–20 yr olds	21 and over	%
Unsentenced	5	42	3.0
Less than six months	9	6	1.3
Six months to less than 12 months	11	7	1.9
12 months to less than 2 years	30	120	10.1
2 years to less than 4 years	45	452	30.1
4 years to less than 10 years	17	568	35.1
10 years and over (not life)	0	239	14.3
ISPP (indeterminate sentence for public protection)	0	46	2.7
Life	0	25	4.2
Total	117	1505	

Age	Number of prisoners	%
Under 21 years	170	10.1
21 years to 29 years	583	34.8
30 years to 39 years	478	28.5
40 years to 49 years	244	14.6
50 years to 59 years	118	7.0
60 years to 69 years	59	3.5
70 plus years: <i>maximum age=88</i>	23	1.4
Total	1675	

Nationality	18–20 yr olds	21 and over	%
British	113	1458	96.7
Foreign nationals	4	45	3.2
Total	117	1505	

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	5	53	3.8
Uncategorised sentenced	0	11	0.7
Category B	0	235	14.0
Category C	1	1157	69.1
Category D	0	18	1.1
Other	111	31	11.2
Total	117	1505	

Ethnicity	18–20 yr olds	21 and over	%
White			
British	104	1282	85.1
Irish	1	8	0.9
Gypsy/Irish Traveller	0	18	1.1
Other white	1	24	1.6
Mixed			
White and black Caribbean	1	22	1.4
White and black African	1	7	0.5
White and Asian	0	4	0.3
Other mixed	0	16	1.0
Asian or Asian British			
Indian	1	9	0.6
Pakistani	1	19	1.2
Bangladeshi	0	5	0.3
Other Asian	2	15	1.1
Black or black British			
Caribbean	1	24	1.6
African	3	26	1.9
Other black	0	18	1.3
Other ethnic group			
Arab	0	1	0.1
Other ethnic group	1	4	0.4
Not stated	0	3	0.2
Total	117	1505	

Religion	18–20 yr olds	21 and over	%
Baptist	0	5	0.3
Church of England	1	80	5.0
Roman Catholic	4	172	10.6
Other Christian denominations	38	411	28.0
Muslim	17	147	10.0
Sikh	0	4	0.2
Hindu	0	3	0.2
Buddhist	0	24	1.4
Jewish	0	10	0.6
Other	0	27	1.7
No religion	57	622	42.1
Total	117	1505	

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 establishment⁹. 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 30 November 2015, the prisoner population at HMP/YOI Parc was 1,609. Using the method described above, questionnaires were distributed to a sample of 240 prisoners.

We received a total of 197 completed questionnaires, a response rate of 82%. This included three questionnaires completed via interview. Thirteen respondents refused to complete a questionnaire and 30 questionnaires were not returned.

⁹ 95% confidence interval with a sampling error of 3%. The formula assumes an 80% response rate (70% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

Wing/Unit	Number of completed survey returns
A	39
B	43
C	10
D	12
T	46
X	44
H	2
Segregation unit	1

Presentation of survey results and analyses

Over the following pages we present the survey results for HMP/YOI Parc.

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences¹⁰ 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/YOI Parc in 2015 compared with responses from prisoners surveyed in all other category B and category C training prisons. This comparator is based on all responses from prisoner surveys carried out in seven category B prisons and 37 category C prisons since April 2011.
- The current survey responses from HMP/YOI Parc in 2015 compared with the responses of prisoners surveyed at HMP/YOI Parc in 2013.
- A comparison within the 2015 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2015 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2015 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2015 survey between X wing and all other wings.
- A comparison within the 2015 survey between T wing and all other wings.

¹⁰ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

Survey summary

Section I: About you

Q1.2	How old are you?		
	<i>Under 21</i>		15 (8%)
	<i>21 - 29</i>		66 (34%)
	<i>30 - 39</i>		72 (37%)
	<i>40 - 49</i>		22 (11%)
	<i>50 - 59</i>		8 (4%)
	<i>60 - 69</i>		13 (7%)
	<i>70 and over</i>		1 (1%)
Q1.3	Are you sentenced?		
	<i>Yes</i>		170 (86%)
	<i>Yes - on recall</i>		23 (12%)
	<i>No - awaiting trial</i>		2 (1%)
	<i>No - awaiting sentence</i>		2 (1%)
	<i>No - awaiting deportation</i>		0 (0%)
Q1.4	How long is your sentence?		
	Not sentenced		4 (2%)
	<i>Less than 6 months</i>		2 (1%)
	<i>6 months to less than 1 year</i>		8 (4%)
	<i>1 year to less than 2 years</i>		18 (9%)
	<i>2 years to less than 4 years</i>		61 (31%)
	<i>4 years to less than 10 years</i>		70 (36%)
	<i>10 years or more</i>		22 (11%)
	<i>IPP (indeterminate sentence for public protection)</i>		8 (4%)
	<i>Life</i>		4 (2%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?		
	<i>Yes</i>		10 (5%)
	<i>No</i>		184 (95%)
Q1.6	Do you understand spoken English?		
	<i>Yes</i>		197 (100%)
	<i>No</i>		0 (0%)
Q1.7	Do you understand written English?		
	<i>Yes</i>		195 (99%)
	<i>No</i>		2 (1%)
Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	161 (82%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	0 (0%)	<i>Asian or Asian British - other</i> 1 (1%)
	<i>White - other</i>	9 (5%)	<i>Mixed race - white and black Caribbean</i> 3 (2%)
	<i>Black or black British - Caribbean</i>	2 (1%)	<i>Mixed race - white and black African</i> 3 (2%)
	<i>Black or black British - African</i>	5 (3%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	3 (2%)	<i>Mixed race - other</i> 2 (1%)
	<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Arab</i> 1 (1%)
	<i>Asian or Asian British - Pakistani</i>	2 (1%)	<i>Other ethnic group</i> 1 (1%)

Asian or Asian British - Bangladeshi 1 (1%)

Q1.9 Do you consider yourself to be Gypsy/ Romany/ Traveller?

Yes	6 (3%)
No	183 (97%)

Q1.10 What is your religion?

None	102 (53%)	Hindu	1 (1%)
Church of England	26 (13%)	Jewish	0 (0%)
Catholic	21 (11%)	Muslim	17 (9%)
Protestant	4 (2%)	Sikh	1 (1%)
Other Christian denomination	14 (7%)	Other	4 (2%)
Buddhist	3 (2%)		

Q1.11 How would you describe your sexual orientation?

Heterosexual/Straight	189 (98%)
Homosexual/Gay	2 (1%)
Bisexual	2 (1%)

Q1.12 Do you consider yourself to have a disability (i.e. do you need help with any long-term physical, mental or learning needs)?

Yes	57 (29%)
No	139 (71%)

Q1.13 Are you a veteran (ex-armed services)?

Yes	19 (10%)
No	174 (90%)

Q1.14 Is this your first time in prison?

Yes	60 (31%)
No	135 (69%)

Q1.15 Do you have children under the age of 18?

Yes	104 (53%)
No	93 (47%)

Section 2: Courts, transfers and escorts**Q2.1 On your most recent journey here, how long did you spend in the van?**

Less than 2 hours	136 (70%)
2 hours or longer	47 (24%)
Don't remember	11 (6%)

Q2.2 On your most recent journey here, were you offered anything to eat or drink?

My journey was less than two hours	136 (70%)
Yes	34 (18%)
No	18 (9%)
Don't remember	6 (3%)

Q2.3 On your most recent journey here, were you offered a toilet break?

My journey was less than two hours	136 (71%)
Yes	4 (2%)
No	49 (26%)
Don't remember	3 (2%)

Q2.4	On your most recent journey here, was the van clean?		
	Yes		106 (55%)
	No		75 (39%)
	Don't remember		13 (7%)
Q2.5	On your most recent journey here, did you feel safe?		
	Yes		153 (80%)
	No		34 (18%)
	Don't remember		5 (3%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?		
	Very well		54 (28%)
	Well		86 (44%)
	Neither		36 (19%)
	Badly		8 (4%)
	Very badly		2 (1%)
	Don't remember		8 (4%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)		
	Yes, someone told me		127 (66%)
	Yes, I received written information		18 (9%)
	No, I was not told anything		48 (25%)
	Don't remember		1 (1%)
Q2.8	When you first arrived here did your property arrive at the same time as you?		
	Yes		167 (87%)
	No		22 (11%)
	Don't remember		4 (2%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?			
	Less than 2 hours		55 (28%)	
	2 hours or longer		126 (65%)	
	Don't remember		13 (7%)	
Q3.2	When you were searched, was this carried out in a respectful way?			
	Yes		159 (83%)	
	No		23 (12%)	
	Don't remember		9 (5%)	
Q3.3	Overall, how were you treated in reception?			
	Very well		42 (22%)	
	Well		94 (49%)	
	Neither		36 (19%)	
	Badly		16 (8%)	
	Very badly		3 (2%)	
	Don't remember		2 (1%)	
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	21 (11%)	Physical health	30 (16%)
	Housing problems	33 (18%)	Mental health	48 (26%)
	Contacting employers	8 (4%)	Needing protection from other prisoners	17 (9%)

	<i>Contacting family</i>	43 (23%)	<i>Getting phone numbers</i>	36 (19%)
	<i>Childcare</i>	7 (4%)	<i>Other</i>	12 (6%)
	<i>Money worries</i>	33 (18%)	Did not have any problems	73 (39%)
	<i>Feeling depressed or suicidal</i>	35 (19%)		
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?			
	<i>Yes</i>			37 (20%)
	<i>No</i>			76 (41%)
	Did not have any problems			73 (39%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)			
	<i>Tobacco</i>			162 (84%)
	<i>A shower</i>			66 (34%)
	<i>A free telephone call</i>			136 (70%)
	<i>Something to eat</i>			156 (81%)
	<i>PIN phone credit</i>			149 (77%)
	<i>Toiletries/ basic items</i>			158 (82%)
	Did not receive anything			4 (2%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)			
	<i>Chaplain</i>			107 (56%)
	<i>Someone from health services</i>			132 (69%)
	<i>A Listener/Samaritans</i>			66 (35%)
	<i>Prison shop/ canteen</i>			68 (36%)
	Did not have access to any of these			31 (16%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)			
	<i>What was going to happen to you</i>			99 (54%)
	<i>What support was available for people feeling depressed or suicidal</i>			88 (48%)
	<i>How to make routine requests (applications)</i>			78 (42%)
	<i>Your entitlement to visits</i>			78 (42%)
	<i>Health services</i>			92 (50%)
	<i>Chaplaincy</i>			84 (46%)
	Not offered any information			55 (30%)
Q3.9	Did you feel safe on your first night here?			
	<i>Yes</i>			156 (81%)
	<i>No</i>			28 (15%)
	<i>Don't remember</i>			8 (4%)
Q3.10	How soon after you arrived here did you go on an induction course?			
	Have not been on an induction course			32 (17%)
	<i>Within the first week</i>			102 (53%)
	<i>More than a week</i>			43 (22%)
	<i>Don't remember</i>			15 (8%)
Q3.11	Did the induction course cover everything you needed to know about the prison?			
	Have not been on an induction course			32 (17%)
	<i>Yes</i>			78 (42%)
	<i>No</i>			54 (29%)
	<i>Don't remember</i>			22 (12%)

Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	36 (19%)
	<i>Within the first week</i>	103 (54%)
	<i>More than a week</i>	34 (18%)
	<i>Don't remember</i>	18 (9%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to...					
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i> N/A
	<i>Communicate with your solicitor or legal representative?</i>	26 (14%)	65 (35%)	22 (12%)	31 (16%)	22 (12%)
	<i>Attend legal visits?</i>	32 (17%)	74 (40%)	22 (12%)	20 (11%)	8 (4%)
	<i>Get bail information?</i>	10 (6%)	22 (13%)	22 (13%)	24 (14%)	21 (12%)
						70 (41%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?					
	<i>Not had any letters</i>					29 (15%)
	<i>Yes</i>					90 (47%)
	<i>No</i>					71 (37%)
Q4.3	Can you get legal books in the library?					
	<i>Yes</i>					65 (34%)
	<i>No</i>					20 (11%)
	<i>Don't know</i>					105 (55%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	149 (76%)	43 (22%)	3 (2%)		
	<i>Are you normally able to have a shower every day?</i>	189 (96%)	7 (4%)	0 (0%)		
	<i>Do you normally receive clean sheets every week?</i>	142 (73%)	49 (25%)	3 (2%)		
	<i>Do you normally get cell cleaning materials every week?</i>	100 (51%)	91 (46%)	5 (3%)		
	<i>Is your cell call bell normally answered within five minutes?</i>	61 (31%)	118 (61%)	15 (8%)		
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	124 (65%)	66 (34%)	2 (1%)		
	<i>If you need to, can you normally get your stored property?</i>	34 (18%)	106 (55%)	53 (27%)		
Q4.5	What is the food like here?					
	<i>Very good</i>					5 (3%)
	<i>Good</i>					39 (20%)
	<i>Neither</i>					48 (25%)
	<i>Bad</i>					57 (29%)
	<i>Very bad</i>					46 (24%)
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>					4 (2%)
	<i>Yes</i>					87 (45%)
	<i>No</i>					101 (53%)
Q4.7	Can you speak to a Listener at any time, if you want to?					
	<i>Yes</i>					117 (60%)
	<i>No</i>					14 (7%)
	<i>Don't know</i>					64 (33%)
Q4.8	Are your religious beliefs respected?					
	<i>Yes</i>					84 (43%)

No	20 (10%)
Don't know/ N/A	90 (46%)

Q4.9	Are you able to speak to a chaplain of your faith in private if you want to?	
	Yes	123 (63%)
	No	6 (3%)
	Don't know/ N/A	66 (34%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	I don't want to attend	50 (26%)
	Very easy	49 (26%)
	Easy	34 (18%)
	Neither	15 (8%)
	Difficult	15 (8%)
	Very difficult	2 (1%)
	Don't know	25 (13%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?		
	Yes		136 (72%)
	No		43 (23%)
	Don't know		10 (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?	15 (8%)	81 (44%) 88 (48%)
	Are applications dealt with quickly (within seven days)?	15 (9%)	47 (28%) 108 (64%)
Q5.3	Is it easy to make a complaint?		
	Yes		119 (63%)
	No		35 (19%)
	Don't know		34 (18%)
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?	63 (34%)	37 (20%) 87 (47%)
	Are complaints dealt with quickly (within seven days)?	63 (36%)	21 (12%) 93 (53%)
Q5.5	Have you ever been prevented from making a complaint when you wanted to?		
	Yes		57 (31%)
	No		129 (69%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?		
	Don't know who they are		55 (30%)
	Very easy		13 (7%)
	Easy		35 (19%)
	Neither		30 (16%)
	Difficult		29 (16%)
	Very difficult		21 (11%)

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>	18 (9%)
	Yes	71 (37%)
	No	84 (44%)
	<i>Don't know</i>	17 (9%)
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>	18 (10%)
	Yes	84 (45%)
	No	70 (38%)
	<i>Don't know</i>	14 (8%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	19 (10%)
	No	170 (90%)
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>	147 (80%)
	<i>Very well</i>	5 (3%)
	<i>Well</i>	6 (3%)
	<i>Neither</i>	13 (7%)
	<i>Badly</i>	6 (3%)
	<i>Very badly</i>	7 (4%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	144 (77%)
	No	43 (23%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	140 (74%)
	No	48 (26%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	63 (33%)
	No	129 (67%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	14 (7%)
	<i>Never</i>	33 (17%)
	<i>Rarely</i>	55 (29%)
	<i>Some of the time</i>	43 (23%)
	<i>Most of the time</i>	24 (13%)
	<i>All of the time</i>	21 (11%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	46 (24%)
	<i>In the first week</i>	65 (33%)
	<i>More than a week</i>	60 (31%)

Don't remember 24 (12%)

Q7.6 How helpful is your personal (named) officer?

Do not have a personal officer/ I have not met him/ her 46 (24%)
 Very helpful 44 (23%)
 Helpful 48 (25%)
 Neither 20 (11%)
 Not very helpful 21 (11%)
 Not at all helpful 11 (6%)

Section 8: Safety

Q8.1 Have you ever felt unsafe here?

Yes 82 (43%)
 No 110 (57%)

Q8.2 Do you feel unsafe now?

Yes 38 (20%)
 No 149 (80%)

Q8.3 In which areas have you felt unsafe? (Please tick all that apply to you.)

Never felt unsafe	110 (59%)	<i>At meal times</i>	17 (9%)
<i>Everywhere</i>	27 (15%)	<i>At health services</i>	16 (9%)
<i>Segregation unit</i>	11 (6%)	<i>Visits area</i>	11 (6%)
<i>Association areas</i>	23 (12%)	<i>In wing showers</i>	15 (8%)
<i>Reception area</i>	7 (4%)	<i>In gym showers</i>	6 (3%)
<i>At the gym</i>	9 (5%)	<i>In corridors/stairwells</i>	18 (10%)
<i>In an exercise yard</i>	14 (8%)	<i>On your landing/wing</i>	25 (13%)
<i>At work</i>	17 (9%)	<i>In your cell</i>	13 (7%)
<i>During movement</i>	28 (15%)	<i>At religious services</i>	3 (2%)
<i>At education</i>	10 (5%)		

Q8.4 Have you been victimised by other prisoners here?

Yes 62 (32%)
 No 129 (68%)

Q8.5 If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)

Insulting remarks (about you or your family or friends) 27 (14%)
Physical abuse (being hit, kicked or assaulted) 19 (10%)
Sexual abuse 4 (2%)
Feeling threatened or intimidated 34 (18%)
Having your canteen/property taken 14 (7%)
Medication 7 (4%)
Debt 11 (6%)
Drugs 10 (5%)
Your race or ethnic origin 12 (6%)
Your religion/religious beliefs 11 (6%)
Your nationality 9 (5%)
You are from a different part of the country than others 13 (7%)
You are from a traveller community 3 (2%)
Your sexual orientation 3 (2%)
Your age 7 (4%)
You have a disability 8 (4%)
You were new here 13 (7%)
Your offence/ crime 13 (7%)
Gang related issues 5 (3%)

Q8.6	Have you been victimised by staff here?	
	Yes	71 (38%)
	No	116 (62%)
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>	31 (17%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	14 (7%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	33 (18%)
	<i>Medication</i>	12 (6%)
	<i>Debt</i>	4 (2%)
	<i>Drugs</i>	6 (3%)
	<i>Your race or ethnic origin</i>	15 (8%)
	<i>Your religion/religious beliefs</i>	11 (6%)
	<i>Your nationality</i>	11 (6%)
	<i>You are from a different part of the country than others</i>	14 (7%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	3 (2%)
	<i>Your age</i>	5 (3%)
	<i>You have a disability</i>	5 (3%)
	<i>You were new here</i>	6 (3%)
	<i>Your offence/ crime</i>	13 (7%)
	<i>Gang related issues</i>	3 (2%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	94 (54%)
	Yes	37 (21%)
	No	42 (24%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?						
		Don't know	Very easy	Easy	Neither	Difficult	Very difficult
	The doctor	10 (5%)	9 (5%)	39 (21%)	22 (12%)	70 (37%)	38 (20%)
	The nurse	12 (7%)	15 (8%)	58 (32%)	17 (9%)	54 (30%)	27 (15%)
	The dentist	14 (8%)	5 (3%)	23 (13%)	9 (5%)	35 (19%)	97 (53%)
Q9.2	What do you think of the quality of the health service from the following people?						
		Not been	Very good	Good	Neither	Bad	Very bad
	The doctor	27 (14%)	19 (10%)	44 (24%)	24 (13%)	26 (14%)	47 (25%)
	The nurse	25 (14%)	20 (11%)	53 (29%)	27 (15%)	23 (12%)	37 (20%)
	The dentist	34 (19%)	9 (5%)	31 (17%)	23 (13%)	27 (15%)	55 (31%)
Q9.3	What do you think of the overall quality of the health services here?						
	Not been					18 (10%)	
	<i>Very good</i>					13 (7%)	
	<i>Good</i>					43 (24%)	
	<i>Neither</i>					23 (13%)	
	<i>Bad</i>					34 (19%)	
	<i>Very bad</i>					51 (28%)	
Q9.4	Are you currently taking medication?						
	Yes					78 (43%)	
	No					103 (57%)	

Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?	
	Not taking medication	103 (55%)
	Yes, all my meds	47 (25%)
	Yes, some of my meds	13 (7%)
	No	24 (13%)
Q9.6	Do you have any emotional or mental health problems?	
	Yes	73 (39%)
	No	113 (61%)
Q9.7	Are you being helped/ supported by anyone in this prison?	(e.g. a
	psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)	
	Do not have any emotional or mental health problems	113 (62%)
	Yes	25 (14%)
	No	44 (24%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	72 (39%)
	No	112 (61%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	37 (20%)
	No	145 (80%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	63 (34%)
	Easy	31 (17%)
	Neither	15 (8%)
	Difficult	3 (2%)
	Very difficult	10 (5%)
	Don't know	61 (33%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	23 (12%)
	Easy	21 (11%)
	Neither	26 (14%)
	Difficult	14 (8%)
	Very difficult	19 (10%)
	Don't know	82 (44%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	34 (19%)
	No	149 (81%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	22 (12%)
	No	159 (88%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	Did not / do not have a drug problem	97 (58%)
	Yes	26 (16%)
	No	43 (26%)

Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	<i>Did not / do not have an alcohol problem</i>	145 (81%)
	Yes	16 (9%)
	No	18 (10%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	133 (82%)
	Yes	21 (13%)
	No	8 (5%)

Section II: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		Don't know	Very easy	Easy	Neither	Difficult	Very difficult
	Prison job	12 (7%)	28 (16%)	62 (35%)	21 (12%)	31 (18%)	21 (12%)
	Vocational or skills training	21 (12%)	24 (14%)	63 (36%)	22 (13%)	30 (17%)	15 (9%)
	Education (including basic skills)	18 (10%)	29 (16%)	72 (41%)	29 (16%)	15 (9%)	13 (7%)
	Offending behaviour programmes	41 (24%)	11 (6%)	25 (14%)	18 (10%)	39 (22%)	40 (23%)
Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)						
	<i>Not involved in any of these</i>						45 (25%)
	Prison job						112 (61%)
	Vocational or skills training						26 (14%)
	Education (including basic skills)						37 (20%)
	Offending behaviour programmes						20 (11%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?						
		Not been involved	Yes	No	Don't know		
	Prison job	19 (12%)	64 (40%)	63 (39%)	16 (10%)		
	Vocational or skills training	29 (21%)	50 (36%)	41 (30%)	17 (12%)		
	Education (including basic skills)	30 (22%)	47 (35%)	40 (30%)	18 (13%)		
	Offending behaviour programmes	36 (27%)	35 (26%)	45 (34%)	18 (13%)		
Q11.4	How often do you usually go to the library?						
	<i>Don't want to go</i>						32 (18%)
	Never						49 (28%)
	Less than once a week						49 (28%)
	About once a week						42 (24%)
	More than once a week						4 (2%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?						
	<i>Don't use it</i>						60 (34%)
	Yes						76 (44%)
	No						38 (22%)
Q11.6	How many times do you usually go to the gym each week?						
	<i>Don't want to go</i>						39 (22%)
	0						35 (20%)

	<i>1 to 2</i>	36 (20%)
	<i>3 to 5</i>	55 (31%)
	<i>More than 5</i>	13 (7%)
Q11.7	How many times do you usually go outside for exercise each week?	
	<i>Don't want to go</i>	27 (15%)
	<i>0</i>	25 (14%)
	<i>1 to 2</i>	64 (36%)
	<i>3 to 5</i>	37 (21%)
	<i>More than 5</i>	24 (14%)
Q11.8	How many times do you usually have association each week?	
	<i>Don't want to go</i>	15 (8%)
	<i>0</i>	4 (2%)
	<i>1 to 2</i>	8 (4%)
	<i>3 to 5</i>	22 (12%)
	<i>More than 5</i>	130 (73%)
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>	30 (17%)
	<i>2 to less than 4 hours</i>	31 (17%)
	<i>4 to less than 6 hours</i>	26 (15%)
	<i>6 to less than 8 hours</i>	30 (17%)
	<i>8 to less than 10 hours</i>	20 (11%)
	<i>10 hours or more</i>	32 (18%)
	<i>Don't know</i>	10 (6%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	63 (36%)
	<i>No</i>	113 (64%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	74 (41%)
	<i>No</i>	107 (59%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	34 (19%)
	<i>No</i>	148 (81%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	19 (10%)
	<i>Very easy</i>	20 (11%)
	<i>Easy</i>	39 (22%)
	<i>Neither</i>	13 (7%)
	<i>Difficult</i>	44 (24%)
	<i>Very difficult</i>	40 (22%)
	<i>Don't know</i>	6 (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>	4 (2%)

	Yes	148 (84%)
	No	25 (14%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)	
	Not sentenced/ NA	29 (16%)
	No contact	50 (28%)
	Letter	41 (23%)
	Phone	21 (12%)
	Visit	67 (38%)
Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	148 (83%)
	No	31 (17%)
Q13.4	Do you have a sentence plan?	
	Not sentenced	4 (2%)
	Yes	115 (65%)
	No	59 (33%)
Q13.5	How involved were you in the development of your sentence plan?	
	Do not have a sentence plan/ not sentenced	63 (35%)
	Very involved	39 (22%)
	Involved	30 (17%)
	Neither	9 (5%)
	Not very involved	22 (12%)
	Not at all involved	18 (10%)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)	
	Do not have a sentence plan/ not sentenced	63 (36%)
	Nobody	50 (29%)
	Offender supervisor	48 (27%)
	Offender manager	21 (12%)
	Named/ personal officer	10 (6%)
	Staff from other departments	10 (6%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	Do not have a sentence plan/ not sentenced	63 (36%)
	Yes	71 (40%)
	No	29 (16%)
	Don't know	14 (8%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	Do not have a sentence plan/ not sentenced	63 (35%)
	Yes	25 (14%)
	No	72 (40%)
	Don't know	21 (12%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	Do not have a sentence plan/ not sentenced	63 (35%)
	Yes	22 (12%)
	No	54 (30%)
	Don't know	41 (23%)

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

Yes	9 (5%)
No	75 (42%)
Don't know	95 (53%)

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

Yes	28 (16%)
No	150 (84%)

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.)

	Do not need help		
	Yes	Yes	No
Employment	31 (18%)	31 (18%)	107 (63%)
Accommodation	38 (22%)	28 (16%)	104 (61%)
Benefits	32 (19%)	32 (19%)	102 (61%)
Finances	34 (21%)	24 (15%)	107 (65%)
Education	37 (22%)	27 (16%)	102 (61%)
Drugs and alcohol	39 (24%)	31 (19%)	93 (57%)

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

Not sentenced	4 (2%)
Yes	70 (40%)
No	102 (58%)

Main comparator and comparator to last time



Prisoner survey responses HMP & YOI Parc 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 & YOI Parc 2015	Category B and Category C training prisons comparator	HMP/YOI Parc 2015	HMP/YOI Parc 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		197	7,953	197	200
SECTION 1: General information					
1.2	Are you under 21 years of age?	8%	2%	8%	11%
1.3	Are you sentenced?	98%	99%	98%	94%
1.3	Are you on recall?	12%	8%	12%	6%
1.4	Is your sentence less than 12 months?	5%	5%	5%	5%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	4%	10%	4%	2%
1.5	Are you a foreign national?	5%	10%	5%	4%
1.6	Do you understand spoken English?	100%	99%	100%	100%
1.7	Do you understand written English?	99%	98%	99%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	14%	27%	14%	13%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	4%	3%	3%
1.1	Are you Muslim?	9%	13%	9%	10%
1.11	Are you homosexual/gay or bisexual?	2%	4%	2%	3%
1.12	Do you consider yourself to have a disability?	29%	21%	29%	22%
1.13	Are you a veteran (ex-armed services)?	10%	6%	10%	5%
1.14	Is this your first time in prison?	31%	39%	31%	33%
1.15	Do you have any children under the age of 18?	53%	51%	53%	51%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	24%	48%	24%	18%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	59%	72%	59%	39%
2.3	Were you offered a toilet break?	7%	9%	7%	2%
2.4	Was the van clean?	55%	63%	55%	60%
2.5	Did you feel safe?	80%	79%	80%	81%
2.6	Were you treated well/very well by the escort staff?	72%	72%	72%	70%
2.7	Before you arrived here were you told that you were coming here?	66%	62%	66%	65%
2.7	Before you arrived here did you receive any written information about coming here?	9%	14%	9%	20%
2.8	When you first arrived here did your property arrive at the same time as you?	87%	85%	87%	88%

Main comparator and comparator to last time

Key to tables

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SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	28%	53%	28%	33%
3.2	When you were searched in reception, was this carried out in a respectful way?	83%	84%	83%	82%
3.3	Were you treated well/very well in reception?	71%	75%	71%	71%
When you first arrived:					
3.4	Did you have any problems?	61%	60%	61%	59%
3.4	Did you have any problems with loss of property?	11%	19%	11%	8%
3.4	Did you have any housing problems?	18%	11%	18%	12%
3.4	Did you have any problems contacting employers?	4%	2%	4%	1%
3.4	Did you have any problems contacting family?	23%	18%	23%	23%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	1%	4%	1%
3.4	Did you have any money worries?	18%	13%	18%	16%
3.4	Did you have any problems with feeling depressed or suicidal?	19%	14%	19%	13%
3.4	Did you have any physical health problems?	16%	12%	16%	11%
3.4	Did you have any mental health problems?	26%	15%	26%	15%
3.4	Did you have any problems with needing protection from other prisoners?	9%	5%	9%	4%
3.4	Did you have problems accessing phone numbers?	19%	16%	19%	24%
For those with problems:					
3.5	Did you receive any help/ support from staff in dealing with these problems?	33%	36%	33%	35%
When you first arrived here, were you offered any of the following:					
3.6	Tobacco?	84%	73%	84%	83%
3.6	A shower?	34%	29%	34%	30%
3.6	A free telephone call?	71%	42%	71%	64%
3.6	Something to eat?	81%	57%	81%	78%
3.6	PIN phone credit?	77%	51%	77%	67%
3.6	Toiletries/ basic items?	82%	47%	82%	52%
SECTION 3: Reception, first night and induction continued					
When you first arrived here did you have access to the following people:					
3.7	The chaplain or a religious leader?	56%	52%	56%	54%
3.7	Someone from health services?	70%	69%	70%	68%
3.7	A Listener/Samaritans?	35%	33%	35%	36%
3.7	Prison shop/ canteen?	36%	24%	36%	41%
When you first arrived here were you offered information about any of the following:					
3.8	What was going to happen to you?	54%	51%	54%	56%
3.8	Support was available for people feeling depressed or suicidal?	48%	40%	48%	53%
3.8	How to make routine requests?	42%	44%	42%	53%
3.8	Your entitlement to visits?	42%	41%	42%	52%

Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
3.8	Health services?	50%	52%	50%	54%
3.8	The chaplaincy?	46%	48%	46%	50%
3.9	Did you feel safe on your first night here?	81%	82%	81%	83%
3.10	Have you been on an induction course?	83%	91%	83%	87%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	51%	61%	51%	60%
3.12	Did you receive an education (skills for life) assessment?	81%	84%	81%	90%
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?	48%	47%	48%	47%
4.1	Attend legal visits?	58%	48%	58%	55%
4.1	Get bail information?	19%	14%	19%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	47%	41%	47%	47%
4.3	Can you get legal books in the library?	34%	43%	34%	35%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	76%	67%	76%	82%
4.4	Are you normally able to have a shower every day?	96%	92%	96%	97%
4.4	Do you normally receive clean sheets every week?	73%	71%	73%	89%
4.4	Do you normally get cell cleaning materials every week?	51%	65%	51%	70%
4.4	Is your cell call bell normally answered within five minutes?	31%	37%	31%	37%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	65%	69%	65%	72%
4.4	Can you normally get your stored property, if you need to?	18%	24%	18%	20%
4.5	Is the food in this prison good/very good?	23%	29%	23%	25%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	45%	48%	45%	60%
4.7	Are you able to speak to a Listener at any time, if you want to?	60%	56%	60%	55%
4.8	Are your religious beliefs are respected?	43%	53%	43%	41%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	63%	58%	63%	59%
4.10	Is it easy/very easy to attend religious services?	44%	50%	44%	36%
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	72%	81%	72%	82%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	48%	56%	48%	62%
5.2	Do you feel applications are dealt with quickly (within seven days)?	30%	40%	30%	42%
5.3	Is it easy to make a complaint?	63%	60%	63%	51%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	30%	33%	30%	28%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	19%	28%	19%	26%

Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
5.5	Have you ever been prevented from making a complaint when you wanted to?	31%	20%	31%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	26%	29%	26%	23%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	51%	37%	50%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	46%	45%	54%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	7%	10%	10%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	30%	37%	30%	56%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	77%	80%	77%	80%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	75%	73%	75%	71%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	33%	30%	33%	29%
7.4	Do staff normally speak to you most of the time/all of the time during association?	24%	21%	24%	22%
7.5	Do you have a personal officer?	76%	67%	76%	83%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	64%	63%	64%	66%
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	43%	36%	43%	25%
8.2	Do you feel unsafe now?	20%	16%	20%	8%
8.4	Have you been victimised by other prisoners here?	33%	28%	33%	22%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	14%	12%	14%	12%
8.5	Hit, kicked or assaulted you?	10%	8%	10%	5%
8.5	Sexually abused you?	2%	2%	2%	1%
8.5	Threatened or intimidated you?	18%	17%	18%	10%
8.5	Taken your canteen/property?	7%	6%	7%	3%
8.5	Victimised you because of medication?	4%	4%	4%	3%
8.5	Victimised you because of debt?	6%	4%	6%	3%
8.5	Victimised you because of drugs?	5%	4%	5%	3%
8.5	Victimised you because of your race or ethnic origin?	6%	4%	6%	3%
8.5	Victimised you because of your religion/religious beliefs?	6%	3%	6%	1%
8.5	Victimised you because of your nationality?	5%	3%	5%	3%
8.5	Victimised you because you were from a different part of the country?	7%	4%	7%	5%
8.5	Victimised you because you are from a Traveller community?	2%	1%	2%	1%
8.5	Victimised you because of your sexual orientation?	2%	2%	2%	2%
8.5	Victimised you because of your age?	4%	3%	4%	3%

Main comparator and comparator to last time

Key to tables

		HMP & YOI Parc 2015	Category B and Category C training prisons comparator	HMP/YOI Parc 2015	HMP/YOI Parc 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.5	Victimised you because you have a disability?	4%	3%	4%	2%
8.5	Victimised you because you were new here?	7%	5%	7%	3%
8.5	Victimised you because of your offence/crime?	7%	5%	7%	3%
8.5	Victimised you because of gang related issues?	3%	4%	3%	3%
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	38%	30%	38%	33%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	17%	11%	17%	13%
8.7	Hit, kicked or assaulted you?	8%	4%	8%	6%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	18%	12%	18%	10%
8.7	Victimised you because of medication?	6%	3%	6%	4%
8.7	Victimised you because of debt?	2%	2%	2%	2%
8.7	Victimised you because of drugs?	3%	2%	3%	2%
8.7	Victimised you because of your race or ethnic origin?	8%	4%	8%	3%
8.7	Victimised you because of your religion/religious beliefs?	6%	3%	6%	3%
8.7	Victimised you because of your nationality?	6%	3%	6%	4%
8.7	Victimised you because you were from a different part of the country?	8%	3%	8%	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?	2%	1%	2%	1%
8.7	Victimised you because of your age?	3%	2%	3%	4%
8.7	Victimised you because you have a disability?	3%	3%	3%	5%
8.7	Victimised you because you were new here?	3%	4%	3%	4%
8.7	Victimised you because of your offence/crime?	7%	4%	7%	3%
8.7	Victimised you because of gang related issues?	2%	2%	2%	2%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	47%	40%	47%	35%
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	26%	30%	26%	28%
9.1	Is it easy/very easy to see the nurse?	40%	51%	40%	48%
9.1	Is it easy/very easy to see the dentist?	15%	14%	15%	9%
	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?	39%	47%	39%	44%
9.2	The nurse?	46%	57%	46%	57%
9.2	The dentist?	28%	44%	28%	27%
9.3	The overall quality of health services?	34%	42%	34%	36%

Main comparator and comparator to last time

Key to tables

		HMP & YO1 Parc 2015	Category B and Category C training prisons comparator	HMP/YO1 Parc 2015	HMP/YO1 Parc 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
9.4	Are you currently taking medication?	43%	49%	43%	44%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	71%	83%	71%	87%
9.6	Do you have any emotional well being or mental health problems?	39%	31%	39%	33%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	36%	52%	36%	37%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	39%	23%	39%	29%
10.2	Did you have a problem with alcohol when you came into this prison?	20%	16%	20%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	51%	37%	51%	32%
10.4	Is it easy/very easy to get alcohol in this prison?	24%	24%	24%	20%
10.5	Have you developed a problem with drugs since you have been in this prison?	19%	9%	19%	11%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	12%	7%	12%	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?	38%	63%	38%	49%
10.8	Have you received any support or help with your alcohol problem while in this prison?	47%	65%	47%	54%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	73%	77%	73%	78%
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	51%	44%	51%	58%
11.1	Vocational or skills training?	50%	39%	50%	40%
11.1	Education (including basic skills)?	57%	55%	57%	51%
11.1	Offending behaviour programmes?	21%	24%	21%	19%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	61%	61%	61%	68%
11.2	Vocational or skills training?	14%	15%	14%	13%
11.2	Education (including basic skills)?	20%	24%	20%	30%
11.2	Offending behaviour programmes?	11%	13%	11%	11%
11.3	Have you had a job while in this prison?	88%	84%	88%	87%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	45%	43%	45%	43%
11.3	Have you been involved in vocational or skills training while in this prison?	79%	74%	79%	74%
	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?	46%	56%	46%	49%
11.3	Have you been involved in education while in this prison?	78%	80%	78%	82%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	45%	59%	45%	54%

Main comparator and comparator to last time

Key to tables

		HMP & YOJ Parc 2015	Category B and Category C training prisons comparator	HMP/YOJ Parc 2015	HMP/YOJ Parc 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
11.3	Have you been involved in offending behaviour programmes while in this prison?	73%	71%	73%	70%
	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?	36%	51%	36%	41%
11.4	Do you go to the library at least once a week?	26%	44%	26%	33%
11.5	Does the library have a wide enough range of materials to meet your needs?	44%	45%	44%	48%
11.6	Do you go to the gym three or more times a week?	38%	34%	38%	38%
11.7	Do you go outside for exercise three or more times a week?	34%	51%	34%	64%
11.8	Do you go on association more than five times each week?	73%	66%	73%	81%
11.9	Do you spend ten or more hours out of your cell on a weekday?	18%	17%	18%	28%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	36%	34%	36%	39%
12.2	Have you had any problems with sending or receiving mail?	41%	43%	41%	41%
12.3	Have you had any problems getting access to the telephones?	19%	21%	19%	14%
12.4	Is it easy/ very easy for your friends and family to get here?	33%	27%	33%	40%
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?	86%	83%	86%	84%
	For those who are sentenced what type of contact have you had with your offender manager:				
13.2	No contact?	34%	34%	34%	39%
13.2	Contact by letter?	28%	35%	28%	18%
13.2	Contact by phone?	14%	26%	14%	12%
13.2	Contact by visit?	45%	33%	45%	42%
13.3	Do you have a named offender supervisor in this prison?	83%	75%	83%	82%
	For those who are sentenced:				
13.4	Do you have a sentence plan?	66%	68%	66%	72%
	For those with a sentence plan:				
13.5	Were you involved/very involved in the development of your plan?	59%	53%	59%	60%
	Who is working with you to achieve your sentence plan targets:				
13.6	Nobody?	45%	45%	45%	48%
13.6	Offender supervisor?	43%	38%	43%	39%
13.6	Offender manager?	19%	27%	19%	20%
13.6	Named/ personal officer?	9%	14%	9%	10%
13.6	Staff from other departments?	9%	15%	9%	18%
	For those with a sentence plan:				
13.7	Can you achieve any of your sentence plan targets in this prison?	62%	63%	62%	69%
13.8	Are there plans for you to achieve any of your targets in another prison?	21%	22%	21%	12%
13.9	Are there plans for you to achieve any of your targets in the community?	19%	26%	19%	23%

Main comparator and comparator to last time

Key to tables

		HMP & YOI Parc 2015	Category B and Category C training prisons comparator	HMP/YOI Parc 2015	HMP/YOI Parc 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
13.10	Do you have a needs based custody plan?	5%	7%	5%	5%
13.11	Do you feel that any member of staff has helped you to prepare for release?	16%	15%	16%	13%
	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?	22%	31%	22%	32%
13.12	Accommodation?	21%	35%	21%	35%
13.12	Benefits?	24%	36%	24%	36%
13.12	Finances?	18%	26%	18%	23%
13.12	Education?	21%	33%	21%	29%
13.12	Drugs and alcohol?	25%	41%	25%	37%
	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?	41%	55%	41%	49%

Diversity analysis



Key question responses (ethnicity) HMP&YOI Parc 2015

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

Key to tables

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		27	170
1.3	Are you sentenced?	100%	98%
1.5	Are you a foreign national?	12%	4%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	3%
1.1	Are you Muslim?	54%	2%
1.12	Do you consider yourself to have a disability?	15%	31%
1.13	Are you a veteran (ex-armed services)?	15%	9%
1.14	Is this your first time in prison?	31%	31%
2.6	Were you treated well/very well by the escort staff?	71%	73%
2.7	Before you arrived here were you told that you were coming here?	65%	66%
3.2	When you were searched in reception, was this carried out in a respectful way?	67%	86%
3.3	Were you treated well/very well in reception?	63%	72%
3.4	Did you have any problems when you first arrived?	62%	61%
3.7	Did you have access to someone from health care when you first arrived here?	72%	69%
3.9	Did you feel safe on your first night here?	69%	83%
3.10	Have you been on an induction course?	88%	83%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	40%	50%
4.4	Are you normally offered enough clean, suitable clothes for the week?	78%	76%
4.4	Are you normally able to have a shower every day?	89%	98%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Is your cell call bell normally answered within five minutes?	40%	30%
4.5	Is the food in this prison good/very good?	41%	20%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	36%	47%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	61%
4.8	Do you feel your religious beliefs are respected?	41%	44%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	67%	63%
5.1	Is it easy to make an application?	72%	72%
5.3	Is it easy to make a complaint?	63%	63%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	26%	39%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	45%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	11%	10%
7.1	Do most staff, in this prison, treat you with respect?	67%	79%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	69%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	19%	24%
7.4	Do you have a personal officer?	67%	78%
8.1	Have you ever felt unsafe here?	59%	40%
8.2	Do you feel unsafe now?	35%	18%
8.3	Have you been victimised by other prisoners?	52%	29%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	26%	17%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	37%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	30%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	26%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	4%	4%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	52%	36%
8.7	Have you ever felt threatened or intimidated by staff here?	32%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	44%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	28%	3%
8.7	Have you been victimised because of your nationality? (By staff)	28%	3%
8.7	Have you been victimised because you have a disability? (By staff)	0%	3%
9.1	Is it easy/very easy to see the doctor?	16%	27%
9.1	Is it easy/ very easy to see the nurse?	28%	42%
9.4	Are you currently taking medication?	42%	43%
9.6	Do you feel you have any emotional well being/mental health issues?	27%	41%
10.3	Is it easy/very easy to get illegal drugs in this prison?	39%	54%
11.2	Are you currently working in the prison?	60%	61%
11.2	Are you currently undertaking vocational or skills training?	24%	13%
11.2	Are you currently in education (including basic skills)?	28%	19%
11.2	Are you currently taking part in an offending behaviour programme?	16%	10%
11.4	Do you go to the library at least once a week?	36%	25%
11.6	Do you go to the gym three or more times a week?	46%	37%
11.7	Do you go outside for exercise three or more times a week?	30%	35%
11.8	On average, do you go on association more than five times each week?	71%	73%
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%	19%
12.2	Have you had any problems sending or receiving mail?	56%	39%
12.3	Have you had any problems getting access to the telephones?	21%	18%

Diversity analysis



Key question responses (disability and age over 50) HMP&YOI Parc 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

		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		57	139	22	175
1.3	Are you sentenced?	98%	98%	96%	98%
1.5	Are you a foreign national?	12%	2%	14%	4%
1.6	Do you understand spoken English?	100%	100%	100%	100%
1.7	Do you understand written English?	97%	100%	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	7%	17%	0%	16%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	2%	0%	4%
1.1	Are you Muslim?	8%	9%	0%	10%
1.12	Do you consider yourself to have a disability?			67%	25%
1.13	Are you a veteran (ex-armed services)?	11%	9%	25%	8%
1.14	Is this your first time in prison?	32%	30%	59%	27%
2.6	Were you treated well/very well by the escort staff?	72%	72%	70%	72%
2.7	Before you arrived here were you told that you were coming here?	65%	66%	75%	65%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	84%	85%	83%
3.3	Were you treated well/very well in reception?	70%	71%	80%	69%
3.4	Did you have any problems when you first arrived?	87%	51%	79%	59%
3.7	Did you have access to someone from health care when you first arrived here?	64%	72%	65%	70%
3.9	Did you feel safe on your first night here?	63%	89%	60%	84%
3.10	Have you been on an induction course?	79%	85%	85%	83%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	41%	51%	52%	48%
4.4	Are you normally offered enough clean, suitable clothes for the week?	69%	80%	91%	75%
4.4	Are you normally able to have a shower every day?	97%	96%	96%	97%

Diversity analysis

Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Is your cell call bell normally answered within five minutes?	36%	30%	46%	30%
4.5	Is the food in this prison good/very good?	27%	21%	23%	23%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	52%	42%	54%	44%
4.7	Are you able to speak to a Listener at any time, if you want to?	66%	57%	82%	57%
4.8	Do you feel your religious beliefs are respected?	46%	42%	52%	42%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	62%	64%	59%	64%
5.1	Is it easy to make an application?	66%	75%	73%	72%
5.3	Is it easy to make a complaint?	60%	65%	58%	64%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	42%	36%	37%	37%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	47%	11%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	12%	10%	0%	11%
7.1	Do most staff, in this prison, treat you with respect?	76%	77%	81%	77%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	74%	75%	80%	74%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	17%	27%	28%	23%
7.4	Do you have a personal officer?	79%	75%	91%	75%
8.1	Have you ever felt unsafe here?	59%	36%	43%	43%
8.2	Do you feel unsafe now?	35%	15%	29%	19%
8.3	Have you been victimised by other prisoners?	42%	29%	33%	32%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	25%	15%	15%	18%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	7%	0%	7%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	6%	0%	7%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	4%	0%	5%
8.5	Have you been victimised because of your age? (By prisoners)	11%	1%	15%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	11%	2%	9%	4%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	45%	35%	33%	39%
8.7	Have you ever felt threatened or intimidated by staff here?	25%	15%	15%	18%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	4%	10%	0%	9%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	4%	7%	0%	7%
8.7	Have you been victimised because of your nationality? (By staff)	6%	6%	0%	7%
8.7	Have you been victimised because of your age? (By staff)	8%	1%	9%	2%
8.7	Have you been victimised because you have a disability? (By staff)	6%	2%	5%	2%
9.1	Is it easy/very easy to see the doctor?	21%	28%	24%	26%
9.1	Is it easy/ very easy to see the nurse?	37%	41%	52%	38%
9.4	Are you currently taking medication?	66%	34%	90%	37%
9.6	Do you feel you have any emotional well being/mental health issues?	71%	28%	32%	40%
10.3	Is it easy/very easy to get illegal drugs in this prison?	54%	51%	47%	52%
11.2	Are you currently working in the prison?	43%	69%	33%	65%
11.2	Are you currently undertaking vocational or skills training?	21%	12%	9%	15%
11.2	Are you currently in education (including basic skills)?	30%	16%	29%	19%
11.2	Are you currently taking part in an offending behaviour programme?	13%	10%	9%	11%
11.4	Do you go to the library at least once a week?	20%	29%	17%	27%
11.6	Do you go to the gym three or more times a week?	23%	44%	16%	41%
11.7	Do you go outside for exercise three or more times a week?	23%	38%	21%	36%
11.8	On average, do you go on association more than five times each week?	52%	80%	58%	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)	6%	22%	9%	19%
12.2	Have you had any problems sending or receiving mail?	44%	39%	47%	40%
12.3	Have you had any problems getting access to the telephones?	24%	17%	25%	18%



Prisoner survey responses HMP & YOI Parc 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

		T wing	All other wings
	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		46	150
SECTION 1: General information			
1.2	Are you under 21 years of age?	7%	8%
1.3	Are you sentenced?	100%	97%
1.3	Are you on recall?	7%	13%
1.4	Is your sentence less than 12 months?	0%	7%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	5%
1.5	Are you a foreign national?	0%	7%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	13%	14%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	4%
1.1	Are you Muslim?	7%	10%
1.11	Are you homosexual/gay or bisexual?	0%	3%
1.12	Do you consider yourself to have a disability?	13%	34%
1.13	Are you a veteran (ex-armed services)?	11%	10%
1.14	Is this your first time in prison?	40%	28%
1.15	Do you have any children under the age of 18?	54%	52%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	17%	26%
2.5	Did you feel safe?	80%	80%
2.6	Were you treated well/very well by the escort staff?	74%	71%
2.7	Before you arrived here were you told that you were coming here?	65%	66%
2.8	When you first arrived here did your property arrive at the same time as you?	89%	86%
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	17%	32%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	83%
3.3	Were you treated well/very well in reception?	65%	72%

Key to tables

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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
	When you first arrived:		
3.4	Did you have any problems?	42%	67%
3.4	Did you have any problems with loss of property?	13%	11%
3.4	Did you have any housing problems?	13%	18%
3.4	Did you have any problems contacting employers?	7%	4%
3.4	Did you have any problems contacting family?	13%	26%
3.4	Did you have any problems ensuring dependants were being looked after?	11%	1%
3.4	Did you have any money worries?	20%	17%
3.4	Did you have any problems with feeling depressed or suicidal?	18%	19%
3.4	Did you have any physical health problems?	16%	16%
3.4	Did you have any mental health problems?	18%	28%
3.4	Did you have any problems with needing protection from other prisoners?	7%	10%
3.4	Did you have problems accessing phone numbers?	11%	22%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	74%	87%
3.6	A shower?	33%	34%
3.6	A free telephone call?	80%	68%
3.6	Something to eat?	78%	82%
3.6	PIN phone credit?	67%	80%
3.6	Toiletries/ basic items?	72%	85%
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	50%	59%
3.7	Someone from health services?	66%	70%
3.7	A Listener/Samaritans?	32%	35%
3.7	Prison shop/ canteen?	27%	39%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	58%	52%
3.8	Support was available for people feeling depressed or suicidal?	40%	50%
3.8	How to make routine requests?	37%	44%
3.8	Your entitlement to visits?	40%	43%
3.8	Health services?	51%	49%
3.8	The chaplaincy?	33%	49%
3.9	Did you feel safe on your first night here?	85%	80%
3.10	Have you been on an induction course?	85%	83%
3.12	Did you receive an education (skills for life) assessment?	85%	80%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
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?	44%	49%
4.1	Attend legal visits?	55%	58%
4.1	Get bail information?	22%	18%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	42%	49%
4.3	Can you get legal books in the library?	32%	35%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	77%	76%
4.4	Are you normally able to have a shower every day?	98%	96%
4.4	Do you normally receive clean sheets every week?	68%	75%
4.4	Do you normally get cell cleaning materials every week?	47%	52%
4.4	Is your cell call bell normally answered within five minutes?	31%	31%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	68%	63%
4.4	Can you normally get your stored property, if you need to?	21%	17%
4.5	Is the food in this prison good/very good?	20%	23%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	44%	46%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	62%
4.8	Are your religious beliefs are respected?	53%	40%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	69%	61%
4.10	Is it easy/very easy to attend religious services?	40%	45%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	74%	71%
5.3	Is it easy to make a complaint?	74%	60%
5.5	Have you ever been prevented from making a complaint when you wanted to?	26%	32%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	26%	27%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	41%	36%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	44%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	11%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	86%	74%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	71%	75%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	27%	34%
7.4	Do staff normally speak to you most of the time/all of the time during association?	33%	21%
7.5	Do you have a personal officer?	82%	75%

Key to tables

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	27%	47%
8.2	Do you feel unsafe now?	12%	22%
8.4	Have you been victimised by other prisoners here?	21%	36%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	7%	16%
8.5	Hit, kicked or assaulted you?	5%	12%
8.5	Sexually abused you?	0%	3%
8.5	Threatened or intimidated you?	12%	20%
8.5	Taken your canteen/property?	2%	9%
8.5	Victimised you because of medication?	5%	3%
8.5	Victimised you because of debt?	0%	8%
8.5	Victimised you because of drugs?	0%	7%
8.5	Victimised you because of your race or ethnic origin?	5%	7%
8.5	Victimised you because of your religion/religious beliefs?	7%	5%
8.5	Victimised you because of your nationality?	7%	4%
8.5	Victimised you because you were from a different part of the country?	9%	6%
8.5	Victimised you because you are from a traveller community?	0%	2%
8.5	Victimised you because of your sexual orientation?	0%	2%
8.5	Victimised you because of your age?	2%	4%
8.5	Victimised you because you have a disability?	5%	4%
8.5	Victimised you because you were new here?	7%	7%
8.5	Victimised you because of your offence/crime?	2%	8%
8.5	Victimised you because of gang related issues?	0%	3%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	39%	37%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	14%	18%
8.7	Hit, kicked or assaulted you?	5%	8%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	18%	18%
8.7	Victimised you because of medication?	9%	6%
8.7	Victimised you because of debt?	2%	2%
8.7	Victimised you because of drugs?	0%	4%
8.7	Victimised you because of your race or ethnic origin?	7%	8%
8.7	Victimised you because of your religion/religious beliefs?	5%	6%

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 nationality?	9%	5%
8.7	Victimised you because you were from a different part of the country?	14%	6%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	2%	3%
8.7	Victimised you because you have a disability?	5%	2%
8.7	Victimised you because you were new here?	5%	3%
8.7	Victimised you because of your offence/crime?	5%	8%
8.7	Victimised you because of gang related issues?	2%	1%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	26%	25%
9.1	Is it easy/very easy to see the nurse?	42%	39%
9.1	Is it easy/very easy to see the dentist?	19%	14%
9.4	Are you currently taking medication?	43%	43%
9.6	Do you have any emotional well being or mental health problems?	26%	43%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	33%	41%
10.2	Did you have a problem with alcohol when you came into this prison?	19%	20%
10.3	Is it easy/very easy to get illegal drugs in this prison?	42%	54%
10.4	Is it easy/very easy to get alcohol in this prison?	9%	28%
10.5	Have you developed a problem with drugs since you have been in this prison?	14%	20%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	14%	12%
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?	53%	49%
11.1	Education (including basic skills)?	60%	56%
11.1	Offending Behaviour Programmes?	26%	19%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	74%	58%
11.2	Vocational or skills training?	16%	14%
11.2	Education (including basic skills)?	19%	21%
11.2	Offending Behaviour Programmes?	16%	9%
11.4	Do you go to the library at least once a week?	31%	25%
11.5	Does the library have a wide enough range of materials to meet your needs?	45%	44%

Key to tables

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	Percentages which are not highlighted show there is no significant difference		
11.6	Do you go to the gym three or more times a week?	51%	35%
11.7	Do you go outside for exercise three or more times a week?	23%	38%
11.8	Do you go on association more than five times each week?	78%	71%
11.9	Do you spend ten or more hours out of your cell on a weekday?	26%	16%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	37%	36%
12.2	Have you had any problems with sending or receiving mail?	50%	38%
12.3	Have you had any problems getting access to the telephones?	12%	20%
12.4	Is it easy/ very easy for your friends and family to get here?	41%	30%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	86%	82%
13.10	Do you have a needs based custody plan?	2%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	22%	14%



Prisoner survey responses HMP&YOI Parc 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.

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Any percentage highlighted in green is significantly better	X wing	All other wings
Any percentage highlighted in blue is significantly worse		
Any percentage highlighted in orange shows a significant difference in prisoners' background details		
Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned	44	152
SECTION 1: General information		
1.2 Are you under 21 years of age?	2%	9%
1.3 Are you sentenced?	91%	100%
1.3 Are you on recall?	9%	12%
1.4 Is your sentence less than 12 months?	5%	5%
1.4 Are you here under an indeterminate sentence for public protection (IPP prisoner)?	9%	3%
1.5 Are you a foreign national?	9%	4%
1.6 Do you understand spoken English?	100%	100%
1.7 Do you understand written English?	100%	99%
1.8 Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	9%	15%
1.9 Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	4%
1.1 Are you Muslim?	2%	11%
1.11 Are you homosexual/gay or bisexual?	2%	2%
1.12 Do you consider yourself to have a disability?	40%	26%
1.13 Are you a veteran (ex-armed services)?	12%	9%
1.14 Is this your first time in prison?	52%	25%
1.15 Do you have any children under the age of 18?	43%	55%
SECTION 2: Transfers and escorts		
On your most recent journey here:		
2.1 Did you spend more than 2 hours in the van?	29%	23%
2.5 Did you feel safe?	81%	79%
2.6 Were you treated well/very well by the escort staff?	86%	68%
2.7 Before you arrived here were you told that you were coming here?	64%	67%
2.8 When you first arrived here did your property arrive at the same time as you?	86%	87%
SECTION 3: Reception, first night and induction		
3.1 Were you in reception for less than 2 hours?	55%	21%
3.2 When you were searched in reception, was this carried out in a respectful way?	88%	82%
3.3 Were you treated well/very well in reception?	83%	67%

Key to tables

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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
	When you first arrived:		
3.4	Did you have any problems?	76%	57%
3.4	Did you have any problems with loss of property?	5%	13%
3.4	Did you have any housing problems?	5%	21%
3.4	Did you have any problems contacting employers?	2%	5%
3.4	Did you have any problems contacting family?	34%	20%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	4%
3.4	Did you have any money worries?	19%	17%
3.4	Did you have any problems with feeling depressed or suicidal?	29%	16%
3.4	Did you have any physical health problems?	10%	18%
3.4	Did you have any mental health problems?	25%	26%
3.4	Did you have any problems with needing protection from other prisoners?	10%	9%
3.4	Did you have problems accessing phone numbers?	34%	15%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	76%	86%
3.6	A shower?	27%	36%
3.6	A free telephone call?	44%	78%
3.6	Something to eat?	76%	82%
3.6	PIN phone credit?	66%	80%
3.6	Toiletries/ basic items?	78%	83%
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	63%	55%
3.7	Someone from health services?	73%	68%
3.7	A Listener/Samaritans?	46%	31%
3.7	Prison shop/ canteen?	51%	32%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	58%	52%
3.8	Support was available for people feeling depressed or suicidal?	55%	46%
3.8	How to make routine requests?	47%	41%
3.8	Your entitlement to visits?	50%	40%
3.8	Health services?	58%	48%
3.8	The chaplaincy?	58%	42%
3.9	Did you feel safe on your first night here?	83%	81%
3.10	Have you been on an induction course?	86%	83%
3.12	Did you receive an education (skills for life) assessment?	80%	81%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
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?	43%	50%
4.1	Attend legal visits?	46%	61%
4.1	Get bail information?	5%	23%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	42%	49%
4.3	Can you get legal books in the library?	31%	35%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	82%	75%
4.4	Are you normally able to have a shower every day?	100%	95%
4.4	Do you normally receive clean sheets every week?	82%	71%
4.4	Do you normally get cell cleaning materials every week?	73%	44%
4.4	Is your cell call bell normally answered within five minutes?	39%	29%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	58%	66%
4.4	Can you normally get your stored property, if you need to?	11%	20%
4.5	Is the food in this prison good/very good?	25%	21%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	41%	47%
4.7	Are you able to speak to a Listener at any time, if you want to?	75%	56%
4.8	Are your religious beliefs are respected?	42%	43%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	59%	64%
4.10	Is it easy/very easy to attend religious services?	48%	43%
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	71%	72%
5.3	Is it easy to make a complaint?	57%	65%
5.5	Have you ever been prevented from making a complaint when you wanted to?	28%	31%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	16%	29%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	39%	37%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	44%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	12%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	74%	78%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	79%	73%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	41%	30%
7.4	Do staff normally speak to you most of the time/all of the time during association?	35%	21%
7.5	Do you have a personal officer?	89%	73%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	44%	42%
8.2	Do you feel unsafe now?	16%	21%
8.4	Have you been victimised by other prisoners here?	33%	33%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	16%	14%
8.5	Hit, kicked or assaulted you?	9%	10%
8.5	Sexually abused you?	2%	2%
8.5	Threatened or intimidated you?	12%	20%
8.5	Taken your canteen/property?	2%	9%
8.5	Victimised you because of medication?	2%	4%
8.5	Victimised you because of debt?	0%	8%
8.5	Victimised you because of drugs?	0%	7%
8.5	Victimised you because of your race or ethnic origin?	2%	8%
8.5	Victimised you because of your religion/religious beliefs?	5%	6%
8.5	Victimised you because of your nationality?	5%	5%
8.5	Victimised you because you were from a different part of the country?	5%	8%
8.5	Victimised you because you are from a traveller community?	0%	2%
8.5	Victimised you because of your sexual orientation?	0%	2%
8.5	Victimised you because of your age?	2%	4%
8.5	Victimised you because you have a disability?	5%	4%
8.5	Victimised you because you were new here?	2%	8%
8.5	Victimised you because of your offence/crime?	7%	7%
8.5	Victimised you because of gang related issues?	0%	3%
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	22%	42%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	7%	20%
8.7	Hit, kicked or assaulted you?	2%	8%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	7%	21%
8.7	Victimised you because of medication?	0%	8%
8.7	Victimised you because of debt?	0%	3%
8.7	Victimised you because of drugs?	2%	4%
8.7	Victimised you because of your race or ethnic origin?	5%	9%
8.7	Victimised you because of your religion/religious beliefs?	2%	7%

Key to tables

	Any percentage highlighted in green is significantly better	X wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.7	Victimised you because of your nationality?	2%	7%
8.7	Victimised you because you were from a different part of the country?	2%	9%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	0%	4%
8.7	Victimised you because you have a disability?	0%	4%
8.7	Victimised you because you were new here?	0%	4%
8.7	Victimised you because of your offence/crime?	7%	7%
8.7	Victimised you because of gang related issues?	0%	2%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	22%	26%
9.1	Is it easy/very easy to see the nurse?	36%	41%
9.1	Is it easy/very easy to see the dentist?	15%	16%
9.4	Are you currently taking medication?	59%	38%
9.6	Do you have any emotional well being or mental health problems?	40%	39%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	15%	45%
10.2	Did you have a problem with alcohol when you came into this prison?	13%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	32%	56%
10.4	Is it easy/very easy to get alcohol in this prison?	18%	25%
10.5	Have you developed a problem with drugs since you have been in this prison?	8%	22%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	14%
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?	43%	52%
11.1	Education (including basic skills)?	45%	61%
11.1	Offending Behaviour Programmes?	6%	25%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	54%	64%
11.2	Vocational or skills training?	17%	14%
11.2	Education (including basic skills)?	32%	17%
11.2	Offending Behaviour Programmes?	2%	14%
11.4	Do you go to the library at least once a week?	19%	28%
11.5	Does the library have a wide enough range of materials to meet your needs?	46%	43%
11.6	Do you go to the gym three or more times a week?	26%	42%

Key to tables

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	Percentages which are not highlighted show there is no significant difference		
11.7	Do you go outside for exercise three or more times a week?	15%	40%
11.8	Do you go on association more than five times each week?	75%	72%
11.9	Do you spend ten or more hours out of your cell on a weekday?	24%	16%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	37%
12.2	Have you had any problems with sending or receiving mail?	38%	41%
12.3	Have you had any problems getting access to the telephones?	24%	17%
12.4	Is it easy/ very easy for your friends and family to get here?	32%	33%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	92%	80%
13.10	Do you have a needs based custody plan?	0%	7%
13.11	Do you feel that any member of staff has helped you to prepare for release?	5%	19%