

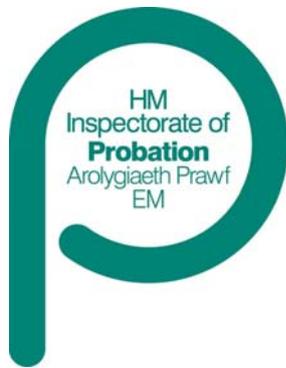
Report on an unannounced inspection of

# **HMP/YOI Isis**

by HM Chief Inspector of Prisons

**3–13 May 2016**

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



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### **Glossary of terms**

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

# Introduction

Isis is a modern category C training prison in south east London, built within the wall line of the high security Belmarsh prison. At the time of our inspection it held just over 600 convicted men, nearly all of whom were under the age of 30 and a significant number under 21. Of these about two-thirds were serving sentences of over two years with just under 40% of the total population serving between four and 10 years.

This was our third inspection of Isis. When we last inspected in 2014, we found a new prison that was making some limited progress, but one where outcomes for prisoners needed to improve in almost all the areas we inspected. This inspection suggested very little progress had been made since then and we evidenced clear deterioration. Across all of our tests of a healthy prison we judged that outcomes remained insufficient, and we found that purposeful activity in this training prison was now poor.

In late 2013 the prison had introduced a restricted emergency regime in response to staff shortages. In 2014 we were critical of the fact that what should have been a temporary arrangement was still in place. At this inspection we found that the restricted regime was again still in place, a situation that had hardly changed over the last three years. The consequences were very clear. Opportunity to access the regime was severely limited, and we found between 34% and 44% of prisoners locked in their cells during the working day. Some prisoners had as little as one hour a day out of cell. In our survey only 24% of prisoners said they could shower daily; at comparator prisons the figure is 94%. The two house blocks that made up the prison shared access to work and education facilities. This meant that at any one time only up to half of the young prisoners held at Isis were doing anything useful. As a training prison Isis was completely failing in its central purpose.

When prisoners did access education, training and work, provision was failing to fully meet need. Our colleagues in Ofsted judged that the learning and skills and work activities at Isis required improvement in all four of their assessments. There were insufficient work and vocational training places, the quality of teaching and learning needed to be better, and fewer prisoners as a proportion of the population now engaged in education. Those who did engage generally achieved accreditations and qualifications, and there were aspects of the overall provision that were better, but achievements in the important subjects of mathematics and English again required improvement.

Another area of significant concern was the safety of prisoners. Arrangements to receive prisoners were not good enough and this set the tone. Only half of prisoners felt they were treated well in reception, many spent hours being processed and few felt that they were helped. Too many prisoners did not feel safe on their first night and arrangements on the first night wing were too perfunctory, particularly the assessment and management of risk. Induction was poor.

In our survey more prisoners than in comparator prisons suggested they felt unsafe at Isis and levels of violence were high. Initiatives were in place to reduce violence but most were limited in effect. Nothing had been done to address the frustration and boredom resulting from such a limited regime; the prison had failed to recognise the impact of this on the attitude and behaviour of the 600 young men held. This issue also potentially affected those at risk of self-harm, and we observed some vulnerable prisoners isolated in their cells for long periods. The number of self-harm incidents had risen since our last inspection, but for those at risk the quality of case management support was reasonable.

Security in the prison was well managed and proportionate with good work being done to disrupt drug supplies, despite the lack of a joined up strategy. There was evidence of an emergent new psychoactive substances (NPS) challenge, but unlike other prisons we have seen, Isis did not feel overwhelmed. Its location within the Belmarsh site made throwing drugs over the perimeter very difficult, and this provided yet more evidence of the need for effective perimeter security as a

prerequisite in confronting the supply of NPS. The profile of the prison's population meant the issue of gang affiliation was concerning, but good joint working with partner agencies and the police was helping to address risks.

The prison had seen significant increase in the use of force since our last inspection but arrangements in place to supervise and account for its use were good. The segregation unit was spacious and not overused but, despite good relationships between staff and prisoners, the regime in segregation and effective care and reintegration planning were both limited.

Although a modern prison, environmental conditions on the wings and in the cells were unacceptably poor and a significant indictment of the way staff were managing their responsibilities. Many wings were dirty, cells were poorly equipped and many prisoners struggled to access clean kit, showers and other basics of daily living. The quality of relationships between staff and prisoners were not good enough and we observed too many staff, particularly those on the wings, with low expectations and dismissive attitudes. The approach of some staff was characterised by passivity and indifference, often, for example, failing to challenge poor behaviour among prisoners. It was our view that tensions were made worse by the limitations and frustrations of the regime, but a better grip of staff culture and improved professionalism among the staff group was a priority that needed to be addressed.

The promotion of equality was poor despite the diversity of the population. The prison did not follow its own policies and we were not assured that those with protected characteristics were even correctly identified. Work to support individual minority groups was limited and perceptions among minorities were worse than in comparator groups. The provision of health care was, in contrast, generally very good and prisoners clearly appreciated the quality of food provided.

There was evidence that the prison was working towards the better integration of its offender management work and resettlement services as provided by the community rehabilitation company (CRC), but despite the significant number of higher risk offenders the quality of offender management work was, at best, inconsistent. Too many prisoners arrived without an assessment of their risk factors and sentence planning was too variable. Work to support reintegration and resettlement was generally good with, for example, a decent number of prisoners released to work or further training. However, access to visits and the delivery of offending behaviour interventions needed to improve.

Overall this is a disappointing report. Not enough progress had been made at Isis and the failure to attend to the delivery of some basic services, notwithstanding the evident challenges, was very poor. At the time of our inspection, the prison was awaiting the arrival of a new Governor. This provided the opportunity for positive change, and renewed attention to the delivery of the basics seemed to us to be a clear priority. Isis needed to rediscover its sense of purpose as a training prison, to urgently stabilise the routine and fully engage prisoners. The new Governor needed, in our view, to re-energise the staff group. We have provided a series of recommendations which we hope will assist that process.

**Peter Clarke CVO OBE QPM**  
HM Chief Inspector of Prisons

August 2016

# Fact page

**Task of the establishment**

HMP/YOI Isis is a young adult and category C training prison for young adult and adult males up to the age of 30.

**Prison status**

Public

**Region**

Greater London

**Number held**

611

**Certified normal accommodation**

478

**Operational capacity**

628

**Date of last full inspection**

February 2014

**Brief history**

HMP/YOI Isis is in South East London and is the first such establishment in the London region that is a young adult and category C training prison for young men and adults up to the age of 30. The prison was constructed within the perimeter of HMP Belmarsh and received its first prisoners on 26 July 2010. Young prisoners who turn 21 have the opportunity to remain to continue their sentence, if in the interest of successful completion of their sentence plan and they are intending to resettle locally. Isis is the first whole-build public sector prison to be built in the last 20 years.

**Short description of residential units**

The two house blocks, Thames and Meridian, are both of a similar size, with four spurs radiating from a central hub with three landings on each spur. There is accommodation for an average of 80 prisoners on each spur in both single and double cells. There are also a few fully-equipped cells for prisoners with disabilities.

**Name of governor**

Judith Feline (acting governor)

**Escort contractor**

Serco

**Health service provider**

Oxleas NHS Foundation Trust

**Learning and skills provider**

Novus

**Independent Monitoring Board chair**

Peter Ward

**Community rehabilitation company (CRC)**

Catch22, subcontracted by MTCnovo

# 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
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>1</sup>

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<sup>1</sup> The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

# Summary

## Safety

S1 *The prison failed to provide appropriate support and decent living conditions for new arrivals. Too many prisoners felt unsafe and levels of violence were too high, with limited interventions to manage perpetrators or support victims. The quality of case management plans for prisoners at risk of suicide or self-harm was reasonably good, but too many prisoners were locked up with nothing to do. Vulnerable prisoners had limited access to work and education. The incentives scheme was not effective. Adjudication procedures were well managed, although overused. Governance of use of force was good but levels of use were high. The segregation environment was positive but the regime was poor. Management of substance misuse services was good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S2 *At the last inspection in 2014 we found that outcomes for prisoners in Isis were not sufficiently good against this healthy prison test. We made 29 recommendations in the area of safety. At this follow-up inspection we found that seven of the recommendations had been achieved, two had been partially achieved and 20 had not been achieved.*

S3 Despite short journeys to the prison, in our survey prisoners were more negative about their escort experience than those at similar establishments. Escort vans were covered in graffiti, and many prisoners continued to experience unacceptable delays disembarking.

S4 Prisoners had poor perceptions of their early days in custody, and our findings supported their views. New arrivals experienced unacceptable delays in reception, some in excess of five hours, with little meaningful interaction with staff. The first night risk assessments we observed were cursory. Many prisoners could not make a telephone call or have a shower on their first night, and were placed in cells without televisions or kettles. Prisoners on the induction wing spent long periods locked in their cells, and the delivery of induction was inconsistent and often incomplete.

S5 Although prisoners' perceptions of safety were worse than the comparators, they had improved since the previous inspection. Levels of violence were high. Violence data and intelligence were used to identify trends and hotspots. While these were clearly discussed at the safer custody meeting, the prison took little action to address the identified concerns. There were too few interventions for perpetrators of violence and little evidence that they were challenged about their poor behaviour, other than being placed on the basic regime. There was also limited support for victims. The regime on the safer custody wing was more restricted than that provided for the wider population, with limited access to work and education, even though only half of the population located there were vulnerable prisoners.

S6 The number of self-harm incidents had risen since the previous inspection. Some prisoners at risk of suicide or self-harm experienced good care. The quality of their open assessment, care in custody and teamwork (ACCT) case management documents for prisoners was reasonably good. However, we saw vulnerable prisoners who were left isolated in their cells for long periods, and many care plans were incomplete and insufficiently focused.

S7 Security was broadly proportionate to the risks. The security team received a good flow of intelligence that was analysed swiftly, but too many actions were delayed. In our survey, more prisoners than last time, but fewer than the comparator, said it was easy to get illegal drugs. The prison was identifying and disrupting supply routes, and information sharing

between departments had improved. The additional security provided by the Belmarsh perimeter wall clearly reduced entry routes. The random mandatory drug testing rate averaged 4.2%, which was lower than in 2014, and there were some effective supply reduction measures. Cannabis was the main problem but new psychoactive substances (NPS)<sup>2</sup> were emerging as a threat.

- S8 Prisoners had little confidence in the mostly ineffective incentives and earned privileges (IEP) scheme. There were few incentives for prisoners to improve their behaviour, and an already poor regime became impoverished for those on basic.
- S9 The administration of adjudications was fair and courteous, and procedures were carried out properly. However, the number remained high and many could have been dealt with by other means. The use of force was high. Governance was good but the number of incidents needed to be reduced. The segregation unit was spacious, bright and relatively clean, and cells were not regularly full. Prisoners were positive about the staff in the segregation unit and staff demonstrated good knowledge of those located there. The regime was limited and prisoners were unable to shower every day. We were unable to find any care plans drawn up since September 2015 or evidence of formal reintegration planning.
- S10 An enthusiastic and well-resourced team from Lifeline had increased the range of substance misuse interventions and engaged well with over 400 prisoners. Behavioural change work with dealers and gang-affiliated prisoners was an example of good practice. Demand for clinical management was low but well managed.

## Respect

*S11 Living conditions for some prisoners were unacceptable, with dirt and graffiti in many areas. The restricted regime prevented daily access to showers and telephone calls home. Prisoners were negative about staff and, despite some of the positive and supportive interactions we saw, relationships between staff and prisoners were strained. Given the diverse population at Isis, it was unacceptable that work to promote equality remained as bad as it was at the last inspection. This was compensated somewhat by good support and faith services provided by the chaplaincy. Health care provision was good. Prisoners were positive about the food they received. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

*S12 At the last inspection in 2014 we found that outcomes for prisoners in Isis were not sufficiently good against this healthy prison test. We made 28 recommendations in the area of respect. At this follow-up inspection we found that two of the recommendations had been achieved, one partially achieved and 25 had not been achieved.*

- S13 Much of the external environment was clean and well maintained, but communal areas on residential wings were dirty and rundown, even though the buildings were relatively new. Many cells were dirty with graffiti on walls and doors. Some toilets were filthy. There were insufficient kettles and TVs, and some cells were inadequately furnished. Most prisoners could not shower or make a telephone call daily. Communal showers were not adequately screened, and there was a shortage of clean prison clothing and bedding. We were not assured emergency cell bells were answered correctly.

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

- S14 In our survey, only 58% of prisoners said that most staff treated them with respect and 42% said they had been victimised by staff, much worse than we normally see. We saw some ineffective relationships, particularly on residential units, and there was a tension between officers and prisoners. This was made worse by regime restrictions and the lack of basic amenities. We also observed some relationships around the prison that were respectful, and examples where staff engaged positively with prisoners and offered them support. Insufficient supervision on wings meant that some inappropriate prisoner behaviour went unchallenged.
- S15 Equality and diversity work remained underdeveloped, and there was insufficient evidence of progress following diversity meetings. The prison did not sufficiently investigate and address disproportionate outcomes from equality monitoring data. Few discrimination complaints were submitted and the reporting forms were not always available, although those that we sampled were dealt with adequately. Our survey revealed worse perceptions among most of the protected characteristic groups in areas of respect and safety. With the exception of a meeting for the Travelling community, there were no forums for prisoners from minority groups. We were not confident that all foreign national prisoners or prisoners with disabilities were known to the prison, and support for these groups was insufficient. There was not enough action to address the needs of the young adult population. Little had been done to raise awareness and encourage tolerance around issues of sexuality. However, faith provision was good, and the chaplaincy was well integrated into the prison and provided valued support for prisoners.
- S16 In our survey, only 22% of respondents who had made a complaint said that the complaints system operated fairly. The quality of most replies we sampled was reasonably good, but some did not evidence sufficient investigation and a few were dismissive. Provision for legal visits was sufficient and the video link was used well. However, restricted access to telephones inhibited prisoner contact with legal representatives.
- S17 Health care provision was reasonably good and effectively governed, with a lead provider overseeing an appropriate range of integrated health services. Some prisoners we spoke to were dissatisfied with the care provided, but we found effective provision and good professional interactions with timely access for all services, except for the optician. The non-attendance rates for clinic appointments were high. Pharmacy services were effective but in-possession medications arrangements were not strong enough, and there was limited intelligence on the amount of medication prescribed in possession. Prison staff supervision of medicine queues was poor. Dentistry services were good and waiting times were in line with community provision. Mental health services were good and delivered timely and clinically appropriate interventions for prisoners, including a broad range of psychosocial interventions.
- S18 Our survey results on the prison food were impressive, with nearly 60% of respondents indicating that it was good, which was significantly higher than the comparator and at the last inspection. However, wing serveries and food trolleys were dirty, meals were served too early, and there were insufficient opportunities to dine communally. Prisoners could purchase a reasonable range of goods from the prison shop, but new arrivals had long waits to receive their first full order, which could be a source of bullying and debt.

## Purposeful activity

S19 *It was unacceptable that prisoners in a category C training facility holding a young population were subjected to such a severely restricted regime. Our roll checks found that only a third of the population were in purposeful activity and 40% were locked up during the core day. The management of learning, skills and work required improvement. Fewer prisoners attended education. There was not enough vocational training and not all activity spaces were filled. Attendance was low in some areas, but punctuality and behaviour in sessions were generally good. Most prisoners were working towards and achieved a qualification, but achievements in the critical areas of English and mathematics were not good enough. Teaching, learning and assessment required improvement. Too many prisoners did not have good access to the library. PE continued to be a good provision.*  
**Outcomes for prisoners were poor against this healthy prison test.**

S20 *At the last inspection in 2014 we found that outcomes for prisoners in Isis were not sufficiently good against this healthy prison test. We made nine recommendations in the area of purposeful activity. At this follow-up inspection we found that three of the recommendations had been achieved, one had been partially achieved and five had not been achieved.*

S21 During our roll checks, around 40% of prisoners were locked in their cell during the core day, which was too high, particularly for a training prison holding a young population. Only around a third were engaged in purposeful activity during our checks. The regime had been punitively restricted for several years and there had not been enough effort to improve it. Inadequate time out of cell meant that many prisoners could not access activities, showers and telephones every day. The prison was planning to introduce a new regime.

S22 There were not enough activity places for all prisoners, and even these were underused due to the restricted regime and lack of tutors. Approximately 70% of prisoners were in accredited education compared with 75% at the previous inspection. Only 16% were involved in vocational training, which was low. New courses had been introduced but several were closed at the time of the inspection. Approximately 40 prisoners were successfully engaged in distance learning and Open University programmes. Allocation of prisoners to activities and the management of attendance required improvement. Self-assessment processes in the provision of learning, skills and work were well developed and used effectively to highlight many of the strengths and areas for improvement we had identified. However, action planning for further improvement was insufficiently detailed.

S23 Teaching, learning and assessment required improvement. Some learners were not making sufficient progress in developing critical English and mathematics skills, and there was insufficient outreach support in these areas for vulnerable prisoners. Tutors used a range of learning strategies well to develop learners' knowledge and skills. Trained mentors provided good support in classrooms and training areas.

S24 Most prisoners were working towards a qualification and those who remained in the prison achieved them. Achievements were particularly good in peer mentoring, horticulture, barbering, catering and radio production. However, overall success rates for English and mathematics required improvement, especially at level 2. Prisoners behaved well and were punctual for learning, skills and work, but attendance in some sessions was too low. Standards of work were very good, particularly in catering and radio production.

S25 The library continued to be a well-managed resource with a good range of reading and learning material. Most prisoners who participated in education sessions had good access to the library. However, prisoners on the units had very limited access, and our survey showed that fewer went to the library than at the previous inspection.

- S26 Recreational PE continued to be a good provision with very good resources. Participation had improved since the previous inspection from 32% to 52%, although there was no evening provision. Accredited awards had been introduced only recently.

## Resettlement

S27 *Strategic management of resettlement was reasonably good, and integration between resettlement, offender management and the community rehabilitation company (CRC)<sup>3</sup> was developing well. Offender management contact with prisoners and quality of the work were inconsistent. There was still a backlog of incomplete OASys (offender assessment system) assessments, which affected contact time. Many formal sentence plans were insufficient to address prisoner risk and need, but there were examples of positive work. There continued to be substantial delays in home detention curfew (HDC) releases. Public protection arrangements were good. Reintegration planning was reasonable and work on most resettlement pathways was good. The number of prisoners who were released into work was impressive. The visits experience needed to improve. There was not enough essential offender behaviour work. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S28 *At the last inspection in 2014 we found that outcomes for prisoners in Isis were insufficiently good against this healthy prison test. We made 14 recommendations in the area of resettlement. At this follow-up inspection we found that three of the recommendations had been achieved, three had been partially achieved and eight had not been achieved.*

S29 The prison had a reasonably clear strategic approach to reducing reoffending and offender management, but both policies needed updating to reflect recent changes and the role of CRCs. There had been several recent positive initiatives and significant efforts to integrate resettlement and offender management work, but further work was required on roles and responsibilities. Managers were clear about how they wanted to develop services and had good arrangements to review the CRC's work with the prison.

S30 Despite a high number of high risk offenders, the work of offender management was too inconsistent. In our survey, more prisoners than the comparators said they had an offender supervisor and initial contact was good. However, continuing contact between offender supervisors and prisoners was variable and many prisoners were not seen often enough, which led to them feeling frustrated and demotivated.

S31 Too many prisoners still arrived at Isis without an up-to-date OASys assessment and, in many cases, no assessment at all. Attempts to minimise this impact through informal sentence plans were well intended but ineffectual. The OASys assessments and formal sentence plans that were in place varied in quality, with the majority of case we reviewed insufficient to address risk and need. Despite this, there were examples of positive work that focused on offending and risk factors and demonstrated good engagement with community offender management. There continued to be substantial delays in HDC releases; assessment procedures were comprehensive and of a good standard, but the quality and timeliness of some community assessments hampered progress.

<sup>3</sup> 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 has maintained responsibility for high- and very high-risk offenders.

- S32 Public protection arrangements were generally robust. There were good screening procedures on prisoners' arrival and release, and good analysis of high risk prisoners through the inter-departmental risk management team. The quality of multi-agency public protection arrangements (MAPPA) assessments for community meetings was good.
- S33 The prison released an average of around 60 prisoners a month. The CRC provided an assessment and referral service, and was generally well integrated into the prison. All prisoners were seen and in most cases managed appropriately before their release. We saw examples of good work, but high caseloads made individual ongoing casework difficult.
- S34 The DePaul UK charity provided a comprehensive housing support service with good referral mechanisms and links with resettlement case workers. There were also good links with a wide range of community providers, and relatively few prisoners were released without accommodation.
- S35 Prospects (the careers advice provider), Jobcentre Plus and CRC staff provided good support to prisoners at induction and throughout their sentence. Employer links were well-established and provided a range of employment opportunities, and the number of prisoners entering education and training or employment on release was impressive.
- S36 Prisoners were well supported by health services in preparing for discharge. The mental health in-reach team linked well with local community mental health teams and other agencies to support effective discharge planning for prisoners with ongoing mental health needs. There was good release planning and preparation for prisoners with substance misuse problems, with good links with community providers, and Lifeline continued to engage with prisoners post-release.
- S37 The visits hall was a positive environment but the frequency and length of visits was limited, and the inflexibility of access to visits for latecomers frustrated prisoners. In our survey, only 22% of prisoners said they were supported to maintain contact with their families while in custody. The introduction of a family engagement worker and parenting and relationship courses were positive initiatives.
- S38 Although the provision of the Thinking Skills Programme and Resolve (cognitive-behavioural intervention for violent offenders) were appropriate for the population, fewer than half the planned places were delivered. There were several other shorter non-accredited offending behaviour programmes. However, we came across some examples of prisoners who were released at the end of long sentences without having completed any offending behaviour work.

## Main concerns and recommendations

- S39 Concern: Early days procedures were weak; prisoners experienced long delays in reception with little interaction with staff, were locked in poorly furnished cells on their first night and rarely received a complete induction.

**Recommendation: The prison should ensure that all aspects of early days procedures are improved to provide better support for new arrivals to the prison.**

- S40 Concern: The number of violent incidents, including assaults and fights, remained high despite the severely restricted regime. Prisoners had poor perceptions about their safety compared with comparator prisons. Little was done to challenge perpetrators of violence or support victims.

**Recommendation: The number of fights and assaults should be reduced and the prison should monitor and address prisoner perceptions about their safety. Governance of prisoners on formal violence reduction measures should be improved. There should be a purposeful and structured regime for such prisoners, and planned interventions to address bullying behaviour and support victims.**

- S41 Concern: Relationships between prisoners and staff had deteriorated since our last inspection. Too many prisoners said that they were not treated with respect by staff, and some reported poor treatment.

**Recommendation: Staff should actively engage with prisoners and help support them through their sentence. They should challenge inappropriate conduct and behave fairly and consistently while responding to meet their basic needs. Prisoners should have a nominated individual officer they can turn to for support or to resolve problems in the prison.**

- S42 Concern: The strategic management of diversity work was poor. The prison did not have a clear understanding of the needs of protected groups and there was little consultation with these groups. Support arrangements were insufficient, equality and diversity were not promoted sufficiently, and monitoring of equality of treatment outcomes did not inform practice.

**Recommendation: The management and promotion of equality work should be robust and informed by routine consultation with groups with protected characteristics and effective use of prisoner representatives.**

- S43 Concern: Prisoners spent too little time out of cell each day. The restricted regime affected most areas of prison life, including the development of positive relationships with staff, the opportunity for prisoners to learn and work towards their release, access to telephones to maintain family and other important relationships, and access to showers.

**Recommendation: Prisoners should be able to access a full prison regime every day, including all planned activities and opportunities to maximise their learning, ensure their personal hygiene needs are met, and have the opportunity to maintain regular telephone contact with family and friends.**

- S44 Concern: There were not enough activity places for all prisoners, and places were underused due to the restricted regime and lack of tutors. The number of prisoners in accredited education had fallen since the previous inspection, and only 16% were involved in vocational training.

**Recommendation: Additional activity places should be provided urgently to meet the needs of the population.**

- S45 Concern: Too many prisoners still arrived at Isis without an up-to-date OASys assessment and, in many cases, no assessment at all. Where there were OASys assessments and formal sentence plans these varied in quality, with most of those we saw insufficient to address risk and need.

**Recommendation: All appropriate prisoners should have a completed and up-to-date OASys assessment and sentence plan based on this information. Sentence plans should address identified risk factors, and offender supervisors should engage effectively with prisoners to help them meet these objectives.**



# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

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

- 1.1** All transfers of prisoners to Isis were planned and most had short journeys from other London prisons. Despite this, in our survey more prisoners than the comparator were negative about their treatment by escort staff and feelings of safety during escort. Only 39% of prisoners said that the escort van was clean, and those we saw were grubby and had large amounts of graffiti. As at the previous inspection, prisoners arriving over the staff lunch period had unacceptable delays disembarking. Fewer prisoners than the comparator said that their property arrived at the same time as them, which was a frustration for some prisoners.

### Recommendations

- 1.2** **Prison escort vans should be clean and free from graffiti.** (Repeated recommendation 1.3)
- 1.3** **Prisoners arriving during the staff lunch period should be disembarked from escort vans immediately.** (Repeated recommendation 1.5)

## Early days in custody

### Expected outcomes:

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

- 1.4** In our survey, structured groups and throughout the inspection prisoners were negative about their experience of reception, first night and induction; our findings supported this view. Reception processes were weak, even though this is a high risk period for prisoners. New arrivals experienced long delays in reception with little interaction with staff, were locked in poorly furnished cells on their first night, and rarely received a complete induction.
- 1.5** In our survey, only 49% of prisoners against the comparator of 76% said they were treated well in reception, and fewer said they were searched respectfully. Strip searching was not routine but we observed prisoners having to answer questions from three or four staff while being searched, which was disorienting.
- 1.6** The reception process took far too long; we observed delays of over five hours. New arrivals spent nearly all of this time locked in stark holding cells with nothing to occupy them. In our survey, only 16% of those arriving with problems said they had received help on arrival at Isis, which was fewer than the comparator and at the last inspection. All new arrivals had a health screening, first night risk assessment and safer custody interview focusing on gang affiliations. However, the interviews we observed in reception were formulaic. We were also concerned that risk information disclosed during one health screening we observed was not shared with the safer custody team. Despite their excessive

waits in reception and the availability of facilities, new arrivals were unable to shower or use the telephone. In our survey, only 17% of prisoners said they had access to a Listener (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) on arrival at Isis. Although staff asked arrivals if they would like to speak to a Listener, neither Listeners or other peer workers had a formal role in the reception process, which was a significant gap. (See main recommendation S39.)

- 1.7** In our survey, fewer prisoners than the comparator said they felt safe on their first night, and we observed very little support or reassurance offered by staff on G wing (the first night and induction wing). Prisoners and staff confirmed that many new arrivals were locked in their cells as soon as they arrived on G wing without access to a shower or a telephone call. The first night cells we saw were relatively clean, although the toilets were filthy. Shortages across the prison meant new arrivals did not have access to kettles or televisions (see also paragraph 2.2), which was a particular problem as they spent excessive periods locked in their cells during induction. (See main recommendation S39.)
- 1.8** The induction started the day after arrival but was poorly managed and no one officer was responsible for ensuring prisoners received all aspects of it. Most prisoners missed significant parts of the induction, and attendance records were rarely complete and sometimes inaccurate when they were. (See main recommendation S39.)

## 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.**

- 1.9** Although fewer respondents to our survey than at the previous inspection said they had ever or currently felt unsafe, these responses were still higher than the comparators; 43% of prisoners stated that they had felt unsafe at some point, compared with 36% in similar establishments. At the time of inspection 22% of prisoners said that they felt unsafe, compared with 15% in comparator prisons. Levels of violence were broadly similar to the previous inspection but remained high. There had been 200 fights and assaults in 2015, with 124 in the previous six months.
- 1.10** The prison had maintained the previous violence management programme - based exclusively on sanctions and punishments - until late 2015. It had then been proposed to replace this with a new violence management strategy that provided a more individualised programme. This contained a revised personal intervention plan setting meaningful targets, with full involvement of the prisoner and relevant stakeholders, placing restrictions only where necessary, and reviewed at least every seven days. However, this proposal had very quickly been replaced by a more punitive approach in which a prisoner found to be involved in a violent incident was placed on to the basic regime for 14 days, with no individual care plans or behaviour targets, and no indication that staff were engaged in helping prisoners to progress. In practice, prisoners could be removed from basic if they had not been violent for 14 days which, given the restricted regime, was often the case. Support for victims of bullying and violence was limited. (See main recommendation S40.)
- 1.11** Violence reduction issues were discussed at the monthly safer custody meeting. Attendance at these meetings was reasonable with discussion of the data and violence diagnostic tools to help identify trends and violent 'hotspots'. However, there were too few actions agreed to reduce the number of violent incidents, and little consideration about how the very limited

prison regime led to prisoner boredom and frustration and affected behaviour. This was despite a spike in violent incidents in early 2016, which we were told was reaction to the curtailment of a more relaxed regime over the Christmas period, when prisoners had been able to access basic facilities more easily.

- I.12 The two safer custody officers were often cross-deployed and had insufficient time to provide good oversight of processes, offer guidance to residential staff or carry out quality checks of all the documentation.
- I.13 Violence reduction prisoner representatives were still in place but they had not received any formal training and told us that they were not used as was intended for post-incident discussion and mediation. Many prisoners we spoke to were unaware of how to contact them and their role was not well promoted.
- I.14 Meridian C had been the 'safer custody' unit which housed prisoners who were deemed to be vulnerable (at risk from other prisoners or in need of greater support from staff). Managers told us that the role of the spur had changed and it now housed a general population, with fewer than 50% (24 prisoners) deemed to be vulnerable. However, the role of the unit was now ill-defined and both staff and prisoners were confused. As a result, safer custody restrictions continued to apply to all residents (see also paragraph 3.11), and they still had limited access to work and education.

## Recommendation

- I.15 **Safer custody officers should be allocated sufficient time to carry out their duties.**

## 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.16 There had been 68 incidents of self-harm during the previous six months, which was a significant increase from the 27 incidents in the same period before the previous inspection. Nearly all these incidents involved superficial cutting rather than more serious incidents or near misses. There was some inconsistency in what prisoners at risk of self-harm told us about their care; while some spoke of supportive and helpful staff, others had spent long periods locked in their cells without televisions or anything else to occupy them. There had been one death in custody in February 2016, which was currently under investigation by the Prisons and Probation Ombudsman.
- I.17 The number of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm had also increased, with 105 opened during the previous six months compared with 58 in the same period before the 2014 inspection. The overall quality of ACCT documentation was reasonably good and many contained detailed accounts of interaction by wing staff and regular case reviews. However, many also had incomplete care maps or were insufficiently focused on the provision of practical support, including radios, televisions or activity, for at-risk prisoners.

- I.18** The use of strip clothing was no longer routine for prisoners at risk of self-harm. Too many were put into the segregation unit while on an open ACCT document – 22 in the previous six months – and we were not always assured that there were exceptional circumstances to justify this.
- I.19** The monthly safer custody meeting was reasonably well attended by staff and prisoners. It considered a range of information, including individual incidents and more strategic data that enabled the identification of trends. However, the few resulting actions that were identified had not all been carried out (see also paragraph I.11 and recommendation I.15).
- I.20** There was no longer a shortage of trained Listeners, with 14 in place at the time of the inspection. Despite this, in our survey fewer prisoners than the comparator said they were able to speak to a Listener. This was supported by our observations of reception and the induction unit (see also paragraph I.6), and by individual prisoners who told us they could not access a Listener during the night. As at the previous inspection, the number of Listener call-outs remained low.

## Recommendations

- I.21** **The prison should ensure that prisoners in crisis do not spend long periods locked up without activity.**
- I.22** **Prisoners on an open assessment, care in custody and teamwork (ACCT) case management document should only be segregated in well-documented exceptional circumstances.**

## Safeguarding (protection of adults at risk)

### Expected outcomes:

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

- I.23** The prison now had an appropriate safeguarding policy and associated referral procedures. It had also made links with the local safeguarding adults board and was represented at some meetings. However, safeguarding processes were underused and many staff were unaware of them. We also had concerns that some of the prison's own systems to manage risk and prevent harm were weak, particularly in reception, on the induction wing and support for victims of violence (see also main recommendations S39 and S40).

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

## Security

### Expected outcomes:

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

- I.24** The majority of security measure continued to be broadly proportionate to the prison's risks, which were identified as trafficking and violence. The monthly security meetings were well attended and considered a comprehensive intelligence report that informed appropriate security objectives. The security team received a good flow of intelligence reports, which were processed quickly. Too many of the resulting actions that were allocated to other departments, in particular searches and suspicion drug testing, were delayed because of insufficient resources.
- I.25** In our survey, the proportion of prisoners who said it was easy to get illegal drugs at Isis had risen since the previous inspection, but it remained lower than the comparator. Isis had enhanced perimeter security as a result of being within the perimeter wall of the high-security HMP Belmarsh, which made it significantly more difficult to 'throw over' drugs and mobile phones. The prison was identifying and disrupting supply routes, which were predominantly through staff corruption and visits, but there was still no detailed supply reduction strategy and action plan. Information sharing between departments about supply reduction had improved.
- I.26** The random mandatory drug test positive rate had averaged 4.2% in the past six months, all for cannabis, which was relatively low and lower than at the 2014 inspection. However, new psychoactive substances (NPS)<sup>5</sup>, including spice and a strand called 'man down', had emerged as a problem since our last inspection and could not be detected under the drug testing regime. The prison only managed to complete a third of requested drug suspicion tests, although this had improved in the last month. The most recent test results indicated a rise in cannabis use, and prisoners told us that a recent possibly drug-related death had led to a switch away from NPS.
- I.27** The prison continued to manage a challenging population that was considerably younger than other category C training prisons. Levels of violence remained high and, while the majority of violent incidents were not gang-related, a significant minority of prisoners had gang affiliations, which presented additional challenges for managers. In response, the prison had developed good working relationships with external agencies, including Trident gang crime command in the Metropolitan police.
- I.28** Although the prison no longer imposed closed visits in response to violence, the majority of closed visits continued to be imposed for reasons that were not directly related to visits. Reviews were regular and sometimes resulted in the lifting of restrictions.
- I.29** The prison was also working to prevent extremism and radicalisation. There were regular multidisciplinary 'Pathfinder' meetings that identified individuals of concern because of possible radicalisation and allocated clear actions. Most staff we spoke to were aware of their responsibilities but, despite work to raise awareness of this issue, some staff remained unaware of how to identify and report suspected extremists and those at risk of radicalisation.

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<sup>5</sup> New drugs that mimic the effects of illegal drugs, such as cannabis, heroin or amphetamines, and may have unpredictable and life-threatening effects.

## Recommendations

- I.30** The prison should develop a detailed drug supply reduction strategy and action plan. (Repeated recommendation I.49)
- I.31** The mandatory drug testing programme should be sufficiently resourced to undertake the required level of suspicion testing. (Repeated recommendation I.48)
- I.32** Prisoners should only be placed on and remain on closed visits when there is sufficient intelligence relating to visits to support it. (Repeated recommendation I.50)

## 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.33** In our survey, only 26% of prisoners felt that they had been treated fairly under the incentives and earned privileges (IEP) scheme, which was significantly less than the comparator and at our previous inspection. We were told that the IEP scheme mirrored a model being applied across Greater London, in an attempt to provide consistency. The policy was comprehensive but provided little incentive between standard and enhanced levels. In our survey, only 38% of prisoners felt that the scheme offered any incentive to improve their behaviour.
- I.34** IEP documentation used to record warnings before any downgrade and provide behavioural targets for prisoners on basic was often missing or incomplete. Staff told us that much of this information was held electronically but many prisoners said that they had not received any paperwork and very few had been involved in any real review or individual target setting. The electronic files we checked varied in their quality.
- I.35** Prisoners on basic had an even more impoverished regime than other prisoners, with lengthy periods of isolation and an inability to shower for periods of three days or more in many cases.

## Recommendations

- I.36** The prison should explore and address prisoners' poor perceptions of the incentives and earned privileges scheme, to ensure the scheme is both legitimate and effective. (Repeated recommendation I.56)
- I.37** The prison should examine the differentials between standard and enhanced levels of the IEP scheme to provide a greater incentive for good behaviour.
- I.38** The regime for prisoners on basic should be improved and include access to showers and telephones every day. (Repeated recommendation I.55)

## 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.**

### Disciplinary procedures

- I.39** The number of adjudications had increased with 913 in the previous six months, compared with 848 in the same period before the last inspection. One in five charges had been dismissed by the establishment or independent adjudicator. There was appropriate referral to the independent adjudicator for those involved in repeated acts of violence.
- I.40** Hearings were courteous and conducted in a relaxed environment. The records of hearings we sampled showed that prisoners were given sufficient time to prepare their case and could seek legal assistance. However, as at the previous inspection, many charges were relatively minor and could have been dealt with by other means. Adjudication standardisation meetings were regular and supported by monthly quality checks by the Governor. The standardisation meetings were attended by relevant stakeholders and informed by comprehensive data, but minutes did not always provide relevant assurance that any trends or learning points had been addressed.

### Recommendation

- I.41 The adjudication standardisation meeting should explore and seek to reduce the high number of adjudications.**

### The use of force

- I.42** There had been 243 uses of force in the previous six months, which was an increase of 51% since the last inspection. In our survey, 25% of respondents said they had been restrained compared with 18% in 2014 and the 7% comparator.
- I.43** Use of force meetings were regular and usually chaired by the governor. Data were analysed but it was not always clear if actions from the meetings were complete or if they had been effective. The meetings discussed samples of completed use of force documentation. There had been improvements in this area with evidence of the events leading up to the incident and attempts to de-escalate clearly documented. Any concerns highlighted in relation to force had been appropriately investigated. Post-incident debriefing for prisoners was good. However, the level of incidents of force was too high.
- I.44** Planned interventions were normally filmed and reviewed. Those we watched showed that most incidents were managed well, although lack of CCTV/video cameras in some cases restricted the footage available.
- I.45** It was good that the use of special accommodation was low with no use in the previous six months. The dirty protest cell had been used once in the previous six months, and records indicated that the prisoner could have been removed sooner than he was.

## Recommendation

- I.46 Use of force, particularly as a consequence of prisoner non-compliance, and use of handcuffs should be further reduced.** (Repeated recommendation I.68)

## Segregation

- I.47** The use of segregation was comparable to the previous inspection with 217 prisoners segregated in the previous six months. In our survey, only 19% of prisoners, against the comparator of 38%, said that they had been treated well by segregation staff. However, during our inspection prisoners spoke well of the staff, and our observations showed that staff had a good knowledge of those in their care.
- I.48** The average length of stay was 10 days for cellular confinement and 17 days for good order. The number of prisoners held pending adjudication had reduced significantly but some were now locked behind their door on residential units if placed on report.
- I.49** The weekly meeting for those held under prison rule 45 gave prisoners an opportunity to discuss their concerns about segregation and also highlighted any emerging health concerns. However, the documentation from this meeting provided little assurance of exit or reintegration planning, and often did not address the reasons for initial segregation. We were told that care planning and reintegration planning were started following 10 days in segregation, but we were only shown evidence of this for September 2015 with no record of subsequent care plans, and the documentation did not alleviate our concerns in this area.
- I.50** The segregation monitoring group met quarterly and was informed by a variety of data and information about the prisoners located. The minutes from the meeting could not provide full assurance that the information discussed was used in a meaningful way to reduce any unnecessary use of segregation or address emerging themes - such as why use of segregation remained high overall, how many of the prisoners segregated were seeking own protection and why, and what reintegration planning could be done to avoid high use of segregation.
- I.51** Communal areas in the segregation unit were clean and well maintained. The exercise yard had been divided into two and both areas contained a bench and a small area of grass. Prisoners were not permitted to exercise together regardless of risk assessment. Cells were generally clean and properly furnished.
- I.52** Segregated prisoners could only have 30 minutes of daily outside exercise, and showers and telephone calls every other day, which was poor and no improvement since the previous inspection. Prisoners could have a radio while segregated but no TV and kettle, which meant that access to hot drinks was limited to main meal times. The education department did not provide outreach support, but we were told some prisoners could attend the gym and offending behaviour courses following risk assessment. There was limited library provision in the unit, but prisoners could access this regularly when collecting their meals.

## Recommendations

- I.53 The use of segregation should be reduced.** (Repeated recommendation I.76)
- I.54 The quality of documents authorising segregation should be improved and should include meaningful targets for prisoners.** (Repeated recommendation I.78)

- I.55** The regime in the segregation unit should be improved and should include daily access to showers, telephone calls and one hour of outside exercise. (Repeated recommendation I.77)

## 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.56** The substance misuse policy document was now part of the reducing reoffending strategy, which was informed by an annual needs analysis. A detailed 'drug strategy continual improvement plan' set out the development targets set at monthly substance misuse strategy meetings.
- I.57** In our survey, significantly more prisoners than the comparator (74% against 61%) said they had received help with their drug problem. An enthusiastic and well-resourced team from Lifeline Transform had increased the range of interventions and engaged with over 400 prisoners, three-quarters of the population. A four-week recovery programme, an NPS awareness module and an active peer mentor scheme had further improved service provision. Specialist roles in the team included a family worker and a dual-diagnosis worker (covering mental health and substance misuse). Twenty per cent of the caseload were prisoners who were dealers and the team's remit now also included behavioural change work with this group. This project had developed close links with the offender management unit (OMU) and was due to expand. In addition, behavioural change mentors engaged with gang-affiliated prisoners referred to the service to address associated behaviours and lifestyles. Both of these initiatives were examples of good practice.
- I.58** Demand for clinical interventions remained low, with only one prisoner currently and 15 in the last six months receiving opiate substitute treatment. Clinical substance misuse services for the cluster were now provided by Addaction, and a designated substance misuse nurse worked jointly with Lifeline staff to deliver good care. Although treatment regimes were flexible and reviewed regularly, additional options, such as naltrexone (an opiate blocker to support abstinence) or lofexidine (symptomatic relief of withdrawal symptoms), had not yet been made available.
- I.59** Controlled drug administration was safe and discreet, and the environment provided privacy. The care of patients with complex needs, such as mental health and substance-related problems, was well coordinated.

### Recommendation

- I.60** The clinical substance misuse service should include naltrexone and lofexidine as treatment options for opiate dependent prisoners working towards and wanting to maintain abstinence. (Repeated recommendation I.86)

### Good practice

- I.61** *Lifeline Transform carried out innovative behavioural change work with drug dealers and gang-affiliated prisoners to address their behaviour and lifestyles.*



## Section 2. Respect

### Residential units

#### Expected outcomes:

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

- 2.1 Living conditions for prisoners on the residential units (Thames and Meridian) were poor. Communal areas were dirty and rundown, particularly unacceptable for a relatively new prison. There were open bins full of rubbish on the landings, walls were stained and there was ground-in dirt on stairwells. Wing serveries were filthy (see also paragraph 2.81).
- 2.2 Many cells were dirty and lacked basic furniture, such as chairs and cupboards, as well as televisions or kettles. Prisoners told us that there was a shortage of cleaning materials, and in our survey, only 20% of respondents said that they got cell cleaning material each week.
- 2.3 All cells had emergency cell call bells, but we were not assured that they were always answered properly. We saw cases where officers cancelled the bell outside the cell door without addressing the prisoner within. In our survey, only 9% of prisoners said that their cell call bell was normally answered within five minutes.
- 2.4 Although the showers were reasonably clean, they were inadequately screened. The restricted regime meant that prisoners could not have a shower or make a telephone call every day - in our survey, only 24% of prisoners said they could shower every day, against the 94% comparator. (See main recommendation S43.) There were reasonable supplies of personal toiletries.
- 2.5 There were laundry rooms on the units where prisoners could wash their own clothes, but the supply of clean prison clothing was limited and staff and prisoners told us that there was a shortage of clean sheets and towels. In our survey, only 35% of prisoners, against the comparator of 74%, said that they could receive sheets every week and only 46%, against 68%, said that they were offered enough suitable clothing.
- 2.6 Prisoners still had use of biometric kiosks (with electronic screens similar to bank cash points) on all spurs and in other locations. From these they could access a range of services, such as choosing meals, shop orders, making appointments and booking visits. Although prisoners clearly found them helpful, some were broken and the restricted regime sometimes limited access. Prisoners could also make general applications electronically through the kiosks, which ensured that applications were received by relevant areas promptly and that progress could be effectively tracked.
- 2.7 Prisoners could send two free letters a week, and family and friends could use the 'email a prisoner' scheme.

#### Recommendations

- 2.8 **All residential units, including cells and communal areas, should be clean, free from graffiti and properly maintained.** (Repeated recommendation 2.8)
- 2.9 **All cells should be equipped with televisions, kettles and adequate cell furniture.**

- 2.10 Staff should answer cell bells correctly and respond to prisoners within five minutes.**
- 2.11 Prisoners should be able to access adequate clean clothing and bedding consistently.** (Repeated recommendation 2.9)

## Staff-prisoner relationships

### Expected outcomes:

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

- 2.12** Relations between prisoners and staff had deteriorated since our last inspection. Too many prisoners said that they were not treated with respect by staff and some reported poor treatment. In our survey, only 58% of respondents, against the comparator of 81%, said that most staff treated them with respect, and just 53%, against 74%, said there was a member of staff they could turn to if they had a problem. Only 11% said that staff checked on them regularly to see how they were getting on, and 42% said that they had been victimised by staff. Only 16% who said that they had experienced problems while at the prison said that they were supported by anyone, and only 10% said that staff normally spoke to them during association.
- 2.13** Although we observed relationships around the prison that were courteous and saw staff who engaged positively with prisoners - particularly the chaplaincy, drug services workers and education staff - others, such as residential staff, were generally ineffective. Too many wing officers expressed low expectations of prisoners, were disinterested in their personal circumstances and spoke of them dismissively. We saw many cases where prison officers responded passively to simple requests from prisoners, and there was little to show that they were supporting them through their sentence. Supervision on wings was often insufficient and staff did not always challenge inappropriate conduct by prisoners. We noticed a clear tension between officers and prisoners that was made worse by regime restrictions and a lack of basic amenities, such as access to showers, association and telephones. (See main recommendations S41 and S43.)
- 2.14** The personal officer scheme was not working effectively, and the amount of lock-up clearly inhibited the development of positive relationships on the wings. Although in our survey half of respondents said that they had a personal officer, only 41% of those said that they were helpful.
- 2.15** There were monthly consultation meetings with prisoner representatives to discuss the environment and facilities, but we were not assured that the issues raised were always followed up.

## Equality and diversity

### Expected outcomes:

**The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic<sup>6</sup> are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.**

### Strategic management

- 2.16** The strategic management of equality and diversity work continued to be inadequate. Although there was a policy that covered the protected characteristics, elements of it were not followed by the prison - for example, there were no regular forums for prisoners from protected groups. (See main recommendation S42.) The bimonthly equality action team meeting had reasonably good attendance but discussion of protected characteristics was sparse and meetings led to little discernable change. The equality action plan was still not comprehensive, and it was not clear who was responsible for progressing work for each protected characteristic group.
- 2.17** We could not be sure that all prisoners with protected characteristics were identified. For example, one prisoner who had regular contact with the Home Office about his immigration status was not recorded as a foreign national on his electronic case management records. A new equality officer had recently been appointed but was often cross-deployed to other duties, making it difficult to progress equality and diversity work. There were also vacancies for prisoner equality representatives, with a hiatus while the 36 prisoners who had applied for the role were assessed for suitability. When in post, prisoner representatives attended the equality action team but did not meet together as a group with the equality officer. (See main recommendation S42.)
- 2.18** The establishment used the equality monitoring tool data to monitor the impact of its regime on groups of prisoners. However, there was insufficient evidence of investigation and remedial action when data showed disproportionate outcomes for some minority groups. For example, although young adults (aged 18-21) were overrepresented in adjudications, segregation and on the basic regime for the last two quarters of 2015, minutes of meetings did not show any discussion of this.
- 2.19** Six discrimination incident reporting forms (DIRFs) had been submitted in the previous six months, which was low for the type of prison. The forms were not readily available on all spurs. The complaints that had been submitted had been dealt with adequately. Although we were told that DIRFs were checked by an independent charity, there was no evidence of this for the six most recent complaints. There were no interventions for prisoners who were found to have acted in a discriminatory way while at Isis or who had been convicted of an offence involving racism or homophobia, even though the prison maintained a list of such prisoners.
- 2.20** With the exception of religious festivals, there was very little promotion of diversity to raise the profile of diversity and encourage prisoner interest and participation.

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

## Recommendations

- 2.21** The staff resources for equality and diversity work should be consistently available and sufficient to meet need.
- 2.22** The prison should develop and implement a programme to challenge racist and discriminatory prisoner behaviour at Isis. (Repeated recommendation 2.25)

## Protected characteristics

- 2.23** Just under 70% of the population were from a black or minority ethnic background. Survey results from minority ethnic prisoners were mixed, and there was no consultation with this group of prisoners.
- 2.24** The prison had recorded six prisoners as Gypsy, Romany or Traveller. However, in our survey 4% of respondents self-identified as from this background, which equated to 25 prisoners. The chaplaincy facilitated a monthly group meeting for Gypsy, Romany and Traveller prisoners. The Council for Irish Prisoners Overseas provided some support for relevant prisoners.
- 2.25** In our survey, Muslim respondents were more negative about victimisation and feelings of safety than non-Muslims. The reasons for this were not clear, although Muslim prisoners had been overrepresented in the use of segregation in the last six months of 2015 and there was no evidence that the prison had explored the reasons for this. There was no formal consultation with this group, although they received good support from the Muslim chaplains.
- 2.26** Although the prison had identified 40 men as foreign national prisoners, we were not confident that all such prisoners were recorded accurately (see paragraph 2.18). The number included three detainees held beyond the end of their sentence – two for two months and one for one month after they had served their sentence. The authority to detain had arrived only two days before the release date for one and on the day before his release date for another. Such detainees did not have access to a less restrictive regime or the facilities that would be available at an immigration removal centre to progress their cases, although the prison was active in ensuring they were moved to a more appropriate place of detention.
- 2.27** Offender supervisors managed foreign national prisoners' cases, but there was no central expertise or policy advice. There was very little use of professional interpreting and little information available in foreign languages. No independent immigration advice was provided. Home Office immigration staff attended the prison weekly to see prisoners for interview and those who requested a meeting about their cases. Foreign national prisoners who did not receive a visit each month could have additional overseas telephone credit. However, prison records showed that some eligible prisoners were not receiving this credit and there was no follow up to check why.
- 2.28** New arrivals with disabilities were identified through induction questionnaires, although it was not clear how this information was used. The prison had recorded 71 prisoners as having some disability. We could not be certain that all prisoners with disabilities were identified or that they were consulted on the support they might need at Isis. In our survey, prisoners who said they had a disability were more negative than those without about many areas of prison life. There were six cells suitably adapted for prisoners with physical disabilities, and some evidence that adjustments had been made for those who needed them. Staff on one house block were unable to identify if there were any prisoners with personal

emergency evacuation plans (PEEPs), and there was uncertainty over who should be preparing these documents; this was rectified during the inspection.

- 2.29** Just under one-fifth of the population were young adults. There was no differentiation in services offered to them and the rest of the population and no work to consider their particular needs, although monitoring data showed they had poorer outcomes in some areas of prison life (see paragraph 2.18).
- 2.30** No prisoners had identified themselves as gay or bisexual to the prison or in our survey. Prisoners had access to a telephone support line to the Stonewall charity but there was nothing to raise awareness and encourage tolerance of different sexual orientations. We saw homophobic graffiti and heard homophobic comments directed at us. The prison had no experience of managing transgender prisoners.

## Recommendations

- 2.31** Immigration detainees should be transferred promptly to a facility more suitable for their needs.
- 2.32** The prison should provide a coordinated approach to managing the needs of foreign national prisoners, ensure that all essential information is translated into the necessary languages, and that foreign national prisoners have access to free independent immigration advice.
- 2.33** The prison should develop and promote more information and support services for gay and bisexual prisoners.

## Faith and religious activity

### Expected outcomes:

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

- 2.34** The chaplaincy continued to be integrated into prison life, were visible around the prison and accessible to prisoners. A chaplain met each new arrival within their first 24 hours. Most faiths were provided for, and there were appropriate arrangements while a part-time Catholic chaplain was being recruited. Volunteers from the local community participated in chaplaincy activities, and two community chaplains worked with prisoners nearing release. Chaplains made regular visits to at-risk prisoners on case management and prisoners in the segregation unit.
- 2.35** In our survey, about two-thirds of prisoners said they could speak to a religious leader in private, which was better than the comparator of 59% and the response of 46% at the previous inspection. More prisoners than the comparator and at the previous inspection also said it was easy to attend services. The faith facilities were large enough for corporate worship by most faiths, but Muslim Friday prayers took place in the visits hall, which had a washing area and suitable storage facilities.
- 2.36** The chaplaincy also provided a range of classes, groups and pastoral care, including support for prisoners experiencing bereavement. Visits to dying relatives and attendance at funerals were facilitated when possible, usually with a chaplain. Chaplains attended a range of prison

meetings, including a 'Pathfinder' group that planned the management of prisoners susceptible to radicalisation.

## 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.**

- 2.37** The number of formal complaints had reduced since the last inspection and was lower than we often see. There had been 578 complaints in the previous six months compared with over 1,000 in the same period before the 2014 inspection. Quality assurance was in place, and some complaints were discussed at senior management team meetings.
- 2.38** Too many prisoners said that they had little confidence in the complaints system. In our survey, only 22% of respondents who had made a complaint said that it operated fairly, and 23% said that they had been prevented from making a complaint. Although the quality of most replies that we saw was reasonably good, a smaller but significant number were superficial and did not evidence sufficient investigation. A few were particularly dismissive. We were not assured that complaints about staff were always dealt with properly, and a few cases did not indicate a full investigation of the facts. Some replies also promised a full investigation of a complaint but were not followed through.

### Recommendation

- 2.39** **Complaints processes should be consistently implemented, prisoners should always receive responses that are courteous and address the issues raised, and complaints against staff should be investigated thoroughly.**

## 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.**

- 2.40** Offender supervisors continued to direct prisoners to legal representation when requested, but legal service provision was not covered during prisoner induction. As at the previous inspection, restricted access to telephones inhibited prisoner contact with legal representatives (see also paragraph 2.4 and main recommendation S43). In our survey, only 28% of respondents said that it was easy to communicate with their legal representative. Provision for legal visits was sufficient, and designated visits rooms were private and well equipped. There was appropriate use of video link facilities, and a range of legal textbooks in the library.

## 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.**

- 2.41** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>7</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

### Governance arrangements

- 2.42** The Care Quality Commission found there were no breaches of the relevant regulations.
- 2.43** NHS England commissioned Oxleas NHS Foundation Trust to lead integrated health care provision in the prison. Partnership arrangements were generally good, but there was no prison input into the health partnership meeting and no current health needs assessment to inform care needs.
- 2.44** Core services were provided seven days a week up to 7pm with a dedicated out-of-hours health presence on site. Clinical governance processes were effective and identified lines of accountability, although there were no patient forums or systematic opportunities for prisoners to contribute to the development of health services. The reporting and governance of serious untoward incidents were sound, with clear evidence of learning.
- 2.45** Nursing and operational leadership arrangements were clear and effective. There were a few vacancies, but overall the staffing profile, skill mix and capacity to meet service requirements were appropriate, and staff opportunities to access training, supervision and professional development were good and well appreciated. There were good systems to provide assurance on accreditation and testing of professional skills. We observed staff who were professional and mostly courteous, although some prisoners told us they did not always feel well supported.
- 2.46** There were systems to prevent communicable disease, and we looked at information on a recent outbreak that demonstrated organisational competence. There was good evidence that information sharing protocols and the confidential sharing of health information were appropriate. Processes to consider and respond to social care needs had been developed and, although demand was very low, a well-developed social care team addressed and met prisoners' social care needs once identified. Prisoners had equity of access to all services, and interpreting/translation services were available in all clinical settings. Clinical environments were clean, appropriate and complied with infection prevention standards.
- 2.47** All the health care team had life support skills and access to strategically placed emergency equipment, including automated external defibrillators (AEDs), that were regularly checked. Internal and external responses to medical emergencies were timely and in line with agreed protocols. Not all custody staff had up-to-date life support skills, but first aid equipment and AEDs were accessible for a few identified and trained frontline staff who were expected to respond in support of the health care team if needed.

<sup>7</sup> CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.48** Information for prisoners about health care was reasonable and covered a range of subjects. The health complaints system was well advertised and generally provided appropriate responses. We saw examples where health care staff had met prisoners face-to-face to resolve concerns.
- 2.49** There were several health promotion initiatives but no coordinated strategic plan to engage prisoners and other stakeholders systematically. Regular clinics were promoted to ensure effective health screening. There was good access to vaccination programmes, and barrier protection was readily available.

## Recommendations

- 2.50** **Patient forums should be established to provide systematic opportunities for prisoners to contribute to the development of health services.**
- 2.51** **There should be a well-advertised programme of coordinated, multiagency health promotion initiatives.**

## Delivery of care (physical health)

- 2.52** Registered nursing staff completed an initial health screening of new arrivals, with a secondary follow-up within 24 hours. This approach picked up key health concerns and enabled early access to specialist health input, if clinically indicated. However, some other generic risk issues, such as the potential for self-harm, were not always communicated appropriately to prison staff.
- 2.53** In our survey, fewer prisoners than the comparator, 31% against 43%, believed the quality of health services was good. We found clinically effective and positive engagement with prisoners and good access to an appropriate range of clinics, although prisoners waited too long to see the optician. Patients were triaged by a nurse on the house blocks in well-equipped treatment rooms before seeing the GP, but there were no delays in accessing treatment and we observed a system that was flexible and responsive to patient need.
- 2.54** Prisoners had long waits in the health care department before and after consultations, and non-attendance rates for most clinics were significant, which wasted clinical time. High non-attendance was partly because prisoners had to choose between taking a shower or making a telephone call and health appointments (see also main recommendation S43). We also observed prisoners from C wing regarded as vulnerable being required to sit in a public area next to the main waiting room where they could be readily identified, which was stigmatising.
- 2.55** The clinical records we scrutinised were adequate, although a few were too brief and perfunctory. Chronic disease management arrangements needed further development but oversight and outcomes for prisoner with complex needs were adequate, and prisoners had appropriate access to external health appointments.

## Recommendations

- 2.56** **Health staff should share all non-health related risk issues that emerge from the health screening of new arrivals with the safer custody team.**
- 2.57** **Prisoner access to the optician should be equivalent to that in the community.**

- 2.58 The health care department should monitor the non-attendance rate and ensure it is maintained at under 10%, and prisoners should not have excessive waits in the health care department before or after health appointments.**
- 2.59 There should be discrete and safe waiting areas in the health care centre for prisoners with vulnerabilities.**

## Pharmacy

- 2.60** Medicines were supplied by Oxleas Prison Services Ltd (based at HMP Belmarsh) three times a week. Although the new provider had taken on the service in September 2015, Care UK pharmacy policies were still being used. A pharmacist from Belmarsh attended the prison for two hours a week to run a well-attended minor ailment clinic and provide smoking cessation support, but there were no medicine use reviews or general medicine advice clinics.
- 2.61** The figures for prisoners given weekly/monthly medicines in possession were not available, and we were given estimates ranging from 25% to 65% of all prisoners receiving medications. Risk assessments were carried out on the patient and the medication and were readily accessible on SystemOne (the clinical IT system), but there were no spot checks on in-possession medications.
- 2.62** Medication was administered from house block treatment rooms three times a day, with provision to supply night time medicines. Medicines were generally supplied by nurses on a named-patient basis with an effective audit trail for prescriptions and dispensed medicines. Missed doses were recorded and followed up appropriately. Biometric system and identity cards were checked when patients collected their medication. Supervision of medicine queues by prison staff was poor, and this lack of support sometimes left health practitioners vulnerable to abuse.
- 2.63** The treatment rooms were generally clean and tidy, and medicines were stored appropriately, but the fridge temperatures were outside the required range and no remedial actions were documented. The temperature record for the fridge in the nursing consulting room, which stored some vaccines, was stated as 24°C, but it was not clear whether staff were recording room temperature or fridge temperature.
- 2.64** Out of hours, there was an on-call GP service and a well-stocked 'night and weekend' drugs cupboard that was checked, restocked regularly by the technician and subject to audit. There was a range of less potent medicines in the homely remedies cupboard, although we found that it also held prescription-only medicines, like Metoclopramide (to treat nausea and vomiting) and Salbutamol inhalers, and there were no patient group directions authorising appropriate health care professionals to supply and administer the more potent medicines currently in use. There were appropriate standard operating procedures but these were not all in date or signed by all staff. The prescribing of drugs with the potential for abuse was minimal and well controlled.
- 2.65** A medicines management committee met quarterly to discuss key elements of medicines management and was attended by all relevant stakeholders. Adverse events were recorded appropriately and discussed at monthly meetings.

## Recommendations

- 2.66 There should be additional pharmaceutical services, such as medicine use reviews, to enable better health outcomes for patients.**

- 2.67** Medicine queues should be fully supervised by prison staff.
- 2.68** Patient group directions should be introduced to enable the supply of more potent medication by the pharmacist and/or nurse.
- 2.69** There should be robust procedures to ensure that heat-sensitive medicines are appropriately stored and fridge temperatures are recorded regularly, with remedial actions recorded when temperatures fall out of the required range of 2-8°C.
- 2.70** Relevant and in-date pharmacy policies (standard operating procedures) should be in place and signed by all staff who use them.

## Dentistry

- 2.71** A full range of NHS treatments was available and oral health advice was routinely provided to prisoners in clinics. Prisoners had timely access to the dentist for routine care and urgent referrals could be seen promptly, with the primary health care team offering triage and pain relief as required. Extreme acute concerns were referred to external emergency dental care if necessary. Most prisoners told us the dental care provided was good, which was supported by our observations. The dental suite was spacious and well equipped. Dental apparatus was appropriately maintained, and there were safe arrangements to dispose of waste materials.

## Delivery of care (mental health)

- 2.72** Oxleas NHS Foundation Trust provided an effective, integrated mental health service that was flexible and highly responsive and offered a range of treatments, which included facilitating self-help, counselling, psychological therapies and complex case management. There was a strong emphasis on psychological interventions, including timely provision of IAPT (improving access to psychological therapies). The team had an appropriate skill mix of nurses, psychologists and psychiatrists who linked closely with other specialist workers. These included a visiting professor specialising in attention deficit hyperactivity disorder (ADHD) who actively supported several prisoners.
- 2.73** There was an open referral system and demand was relatively low with the team undertaking around 24 referrals a month. The team's overall caseload was 50. Fifteen prisoners with enduring and significant mental health problems were managed under the care programme approach (CPA) but not all had comprehensive CPA plans, which could mean that some needs were not fully recognised.
- 2.74** The clinical team met weekly with other stakeholders to discuss new referrals, routine case management and complex care. The general clinical records we examined were very good, and the psychological emphasis in the care pathway was valued by prisoners taking part.
- 2.75** Working relationships with other areas of the prison were generally positive. Staff made a strong contribution to the work of the segregation unit, and there were systems to trigger assessment and reviews of men held for over two weeks in the unit. The team supported all relevant assessment, care in custody and teamwork (ACCT) case reviews for prisoners at risk of suicide or self-harm, and responded promptly to all requests for emergency psychiatric first aid. We found no delays in transferring prisoners to hospital who needed treatment for their condition under the Mental Health Act.

- 2.76** Many custody staff had received a mental health awareness training package, but it was unclear if this was still available for new staff.

## Recommendation

- 2.77** All prisoners identified as requiring enhanced input through the care programme approach (CPA) should have comprehensive CPA plans that demonstrate a full assessment and appropriate identification of care needs.

## 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.**

- 2.78** The quality of the meals we sampled was very good and portions were a good size. Nearly all the prisoners we spoke to enjoyed the food. In our survey, 57% of respondents said the food was good, which was much better than we usually see in prisons and almost double the comparator of 30%.
- 2.79** Lunch and dinner were selected from a four-week rolling menu that offered a reasonable variety of healthy options, including fruit and vegetables everyday. However, meals were served too early and the small breakfast packs were issued at lunch time for breakfast the following day. As at the last inspection, lunch was often served at the cell door, which was disrespectful and limited prisoners' opportunity to interact with staff or other prisoners. Although prisoners were allowed to dine out of their cells for their evening meal, there were not enough tables and chairs so most ate their meals while standing.
- 2.80** The kitchen was reasonably clean and very well managed. Catering staff provided an excellent working environment for the 20 or so prisoners who worked with them in the kitchen (see also paragraph 3.12). There were adequate chilled and frozen food storage facilities, with a separate area for halal products. A kitchen journal recorded the dates, times and food temperatures from delivery to placement on food trolleys to be taken to residential units.
- 2.81** The wing serveries on all the residential units were filthy, as were the food trolleys. Food was often left rotting overnight, and serving utensils were not cleaned. Servery workers on wings did not wear protective clothing, and supervision by staff was poor.

## Recommendations

- 2.82** Breakfast packs should be issued on the day they are to be eaten, meals should be served at standard meal times, and lunch should be served from the servery.
- 2.83** Wing serveries and food trolleys should be clean and well maintained, serveries should be properly supervised by staff, and servery workers should wear appropriate protective clothing.

## Purchases

### Expected outcomes:

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

**2.84** Prisoners could buy reasonable range of goods from the prison shop to meet diverse needs. New arrivals were advanced the cost of a smoker's or grocery pack but, depending on the day they arrived, they could wait up to 12 days for their first shop order, which increased opportunities for debt and bullying. Prisoners could place their shop orders through the kiosk system (see paragraph 2.6), and could choose from over 300 products, some of which had been suggested through regular prisoner consultation meetings. Despite this, in our survey, only 38% of respondents said that the shop sold a wide enough range of good to meet their needs. Prisoners could also shop from catalogues, and they could order newspapers and magazines every week

### Recommendation

**2.85** **New arrivals should be able to buy items from the prison shop within their first 24 hours.** (Repeated recommendation 2.97)

## Section 3. Purposeful activity

### Time out of cell

#### Expected outcomes:

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

- 3.1** The prison continued to run the restricted regime in place at the previous inspection. This severely limited the time prisoners could spend out of cell and most did not achieve the maximum eight hours unlocked on workdays specified by the core day. In our roll checks during the core working day we found between 34% and 44% of prisoners locked in their cells. At the same checks, only between 30% and 34% were engaged in some kind of off-spur activity, with the remainder in cleaning work or on association. These findings were poor for a training prison.
- 3.2** For prisoners who were subject to disciplinary punishments and not in any employment, time out of cell could be less than an hour a day. The two house blocks shared access to workshops and education, which meant that about half the population had the chance to attend at a time. Other prisoners remained on their house block and had some access to association and domestic periods when they could use telephones and showers. Exercise outside was limited to 30 minutes a day for all prisoners. There was no evening association and most prisoners could only shower every other day. We observed slippage in the core day, with prisoners locked up well in advance of advertised roll check times, although movement to and from off-spur activity was timely and managed well. (See main recommendation S43.)

#### Recommendation

- 3.3 The prison should offer prisoners at least one hour's exercise in the fresh air each 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.**

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

**3.4** Ofsted<sup>9</sup> made the following assessments about the learning and skills and work provision:

**Overall effectiveness of learning and skills and work:** **requires improvement**

*Achievements of prisoners engaged in learning and skills and work:* *requires improvement*

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

*Personal development and behaviour:* *requires improvement*

*Leadership and management of learning and skills and work:* *requires improvement*

## Management of learning and skills and work

**3.5** Prison leaders and managers had worked together to improve activities and had provided additional vocational training at a higher level in construction, horticulture and catering. However, the pace of change had been slow, and staff shortages and failure to recruit trained and experienced staff meant there were insufficient places for prisoners. The learning and skills provision contracted to Novus (part of The Manchester College) required improvement.

**3.6** Novus had taken over the education and vocational training contract in February 2015 and continued to provide an education curriculum focused on improving prisoners' English and mathematics skills. Most prisoners who transferred in from other prisons had already gained a qualification at level 1 in English and/or mathematics. However, Novus staff had made slow progress in raising the functional skills success rates in English and mathematics at level 2. Recent data showed that success rates were beginning to improve.

**3.7** Prison staff managed punctuality well and most prisoners arrived on time at their activities, behaved well and showed respect to staff and other prisoners. However, staff managed attendance less effectively. Too many prisoners were often allocated to an activity, and those not required were sent back to their residential spurs and locked up. Staff did not ensure that the allocation process was always fair and equitable.

**3.8** The prison's self-assessment report was evaluative and self-critical, and linked well to the quality improvement action plan. Managers had identified clearly priorities for improvement. However, action planning and target setting were not challenging enough. Observations of teaching, learning and assessment in the programmes managed by Novus were used effectively, and action points were followed up through structured continuing professional development.

<sup>9</sup> Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

## Recommendations

- 3.9 Allocation of prisoners to activities should ensure that the maximum number benefit from the spaces available while meeting their sentence planning needs.**
- 3.10 Prison leaders and managers should improve action planning for activities, including the setting of challenging targets, to ensure swift improvements.**

## Provision of activities

- 3.11** There continued to be insufficient places with only about 450 work spaces for around 600 prisoners, including around 150 education places, most of which were part-time. (See main recommendations S44.) The current regime restricted opportunities for prisoners to engage in full-time education. (See main recommendations S43.) Jobs included orderlies, cleaners, painters, peer mentors, Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), catering workers in the kitchens and Quay's restaurant, and work in grounds maintenance and waste management. The range of purposeful activity was still too narrow for the small number of prisoners on Meridian C spur, formerly the 'safer custody unit' (see paragraph 1.14).
- 3.12** Accredited programmes in education were designed to meet the needs of most prisoners. Popular programmes included music technology and radio production, business start-up, English for speakers of other languages (ESOL), peer mentoring, health and safety, and food hygiene. Approximately 70% of the population attended education sessions, compared with 75% at the previous inspection, although many went to too few sessions. Around 40 prisoners were making good progress through distance learning and Open University programmes.
- 3.13** Vocational training programmes offered opportunities to gain accredited qualifications, most at levels 1 and 2. These included barbering, painting and decorating, cycle maintenance, horticulture, interior fitting and cleaning. Sixteen prisoners had recently gained the construction skills certificate scheme (CSCS) awards, and the National Careers Service provider Prospects planned to offer more places. The carpentry and cycle workshops were not operating at the time of inspection. Only 16% of prisoners were involved in vocational training, which was low for a training prison, primarily due to a lack of trainers. Prison senior managers had developed plans to allow more prisoners to participate in activities and have more time in association. (See main recommendations S44.)
- 3.14** English and mathematics at level 1 continued to be compulsory programmes that prisoners had to complete before they could engage in certain purposeful activities. Induction required improvement. A small minority of prisoners were allocated to activities without initial assessment to determine their English and mathematics skills support needs.

## Recommendation

- 3.15 A wider range of work opportunities, including support towards the development of English and mathematics skills, should be provided to prisoners on the safer custody spur.**

## Quality of provision

- 3.16** Teaching, learning and assessment required improvement. The majority of tutors and trainers ensured most prisoners made good progress. Activities were generally stimulating and met the needs of prisoners, challenging them to develop their understanding, knowledge and skills effectively. Prisoners worked well in groups and enjoyed taking responsibility for planning their own learning, particularly in the Quay's restaurant.
- 3.17** Peer mentors were keen and motivated to learn, rapidly developed impressive mentoring skills, and most produced high quality written work in their evidence portfolios. Mentors worked productively with tutors and trainers and provided good support for prisoners during induction and learning sessions. Mentors on the barbering programme provided constructive peer assessment for prisoners and helped them progress at a good pace through their programmes.
- 3.18** Well-trained and experienced Novus and prison staff worked well together on the horticulture programme, and prisoners gained a range of practical skills in site survey and landscaping work, as well as achieve a variety of gardening machinery qualifications. In our survey, more prisoners than at the previous inspection (although fewer than the comparator) felt that the vocational skills training would help them on release.
- 3.19** Not all prisoners made sufficient progress in functional skills sessions in English and mathematics. Less able prisoners were supported effectively, but the more able prisoners were not challenged enough to make the progress they were capable of.
- 3.20** Tutors and trainers used practical activities effectively in horticulture and catering to develop prisoners' English and mathematics skills. However, planning and support for prisoners in other activities was underdeveloped, particularly for those on the former safer custody unit. Staff used individual learning plans to identify clear targets for prisoners to achieve qualifications. However, very few indicated personal development or English and mathematics targets to help prisoners know what to do to improve further. Managers recognised the need to improve planning to meet individual needs but had made insufficient progress.
- 3.21** Staff promoted some aspects of equality and diversity well through themed activities, such as Europe day and mental health awareness events. Different cultures were also explored in the barbering workshop and the training restaurant.

## Recommendations

- 3.22 Prisoners' development of English and mathematics skills should be improved across all activities, and in particular their achievement rates at level 2.**
- 3.23 Tutors and trainers should plan learning more effectively to ensure that all prisoners make good progress.**
- 3.24 Target-setting for individual prisoners should be further developed to make sure that they know what they need to do to improve.**

## Personal development and behaviour

- 3.25** Prisoners demonstrated good skills and produced high quality work swiftly on the media and radio broadcasting programmes, with several pieces of work recognised by Prison Service national radio awards. Prisoners working in the Quay's restaurant provided a range of high quality meals, and Michelin chefs had visited to share their experience and encourage prisoners to develop their skills further.
- 3.26** Although peer mentors (see paragraph 3.17) were enthusiastic, showed high levels of maturity and self-confidence, and were often keen to help less able prisoners, their personal development was not sufficiently recognised or recorded.
- 3.27** Overall attendance at activities had declined since the previous inspection to around 60%. During the inspection, attendance was too low in English and mathematics learning sessions. In a small minority of sessions, prisoners were removed for behavioural reasons.

## Recommendation

- 3.28** **Prison leaders and managers should ensure a high rate of attendance at activities to maximise prisoners' learning and engagement opportunities.**

## Education and vocational achievements

- 3.29** Most prisoners achieved well at levels 1 and level 2 on most vocational programmes, particularly in barbering, peer mentoring, horticulture and catering. The achievement of qualifications had remained at a high level since the previous year. However, success rates in functional skills English and mathematics qualifications were too low at level 2 (see recommendation 3.22).

## Library

- 3.30** The library facilities provided by Greenwich Leisure continued to be good. Library staff, assisted by an orderly, managed the library well. The library was warm, inviting and relaxed, with space for prisoner research and computers linked to the virtual campus, giving prisoners internet access to community education, training and employment opportunities. The range of stock included 'easy readers', a few periodicals and newspapers, and Prison Service instructions and legal texts that prisoners could borrow.
- 3.31** Although all prisoners had access to the library, in our survey only 41% said they used it at least once a week, compared with 52% at the previous inspection. Prisoners attending education and vocational training programmes had good library access, and the tutors and trainers used the resource well. Despite planned access for prisoners on the residential spurs, too few could benefit from this as there was insufficient priority to escorting prisoners to the library. Library staff provided a mobile book service to prisoners in the segregation unit and those on the residential spurs unable to get to the library.
- 3.32** Library staff provided a range of activities to promote development of reading skills, including the six-book challenge, the Shannon Trust 'Turning Pages' learning reading project, an active book club and creative writing events. There were plans to reintroduce the Storybook Dads' scheme enabling prisoners to record a story for their children.

## Recommendation

- 3.33** There should be improved access to the library for prisoners not participating in education and vocational training.

## 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.**

- 3.34** The PE facilities and resources remained very good. They included a large high quality sports hall, two well-used outdoor artificial pitches, and two fitness suites with a range of good quality cardiovascular equipment. Staffing levels had increased since the previous inspection to five and very few sessions were cancelled. Relationships between gym staff and prisoners were very good, and gym orderlies were used effectively to support staff and prisoners. Changing facilities continued to be good and staff provided appropriate gym kit for contact sports.
- 3.35** Physical education was effectively promoted to all prisoners at a well-structured induction that included a manual handling course and a 'Heartstart' basic life support programme. Every prisoner was assessed by health care staff before induction and completed a fitness questionnaire. Gym staff monitored those referred by health care staff effectively and provided an appropriate range of exercises to meet their health needs.
- 3.36** Gym staff had recently introduced a new programme that ensured all prisoners had access to PE. They had also recently reintroduced gym instructor and Football Association awards. Links with external leisure organisations were very positive and offered good opportunities for employment. Data of use indicated that 52% of prisoners used the gym regularly, which was significantly higher than the 32% at the previous inspection and our survey results. Prisoners were very positive about the PE provision. Physical recreation was available at the weekend for those in full-time work and on the enhanced regime. However, PE was not provided in the evenings.

## Recommendation

- 3.37** Prison managers should offer more accredited PE qualifications, and should consider opening the PE facilities in the evenings.

## 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 prison's offender management policy was over five years' old, and while the reducing reoffending strategy covered all key areas, it had not been updated since the introduction of the 'through-the-gate' model of community rehabilitation companies (CRCs)<sup>10</sup> in May 2015. As a consequence, neither document linked effectively to the other or clearly outlined the through-the-gate model to follow. We found considerable variation in practice, especially in the work of offender management unit (OMU) staff.
- 4.2** The introduction of the through-the-gate model of resettlement in 2015 had been managed reasonably well with CRC staff (Catch22, sub-contracted by MTCnovo), who were co-located with offender supervisors in the OMU. Links and communication between the two departments, while variable, were generally good. Monthly strategic meetings between the head of reducing reoffending, senior probation officer and CRC prison lead were helping to ensure the effective implementation of the through-the-gate model.
- 4.3** Despite these good links, understanding of and engagement with resettlement and offender management by staff elsewhere in the prison were low. The personal officer scheme was very limited in its effectiveness (see paragraph 2.14), and most main grade officers we spoke to saw the role of offender management and resettlement as uniquely that of CRC or OMU staff. This was also reflected in the lack of attendance by staff from some key departments, including safer custody and residential staff, at the quarterly reducing reoffending meetings.
- 4.4** Prisoners continued to arrive at Isis without an up-to-date offender assessment system (OASys) assessment and, in many cases, no assessment at all. Isis staff were trained in the completion of offender assessments but not resourced for the work, and there remained a continual tension between the completion of OASys assessments and other tasks appropriate to a training prison. As at the 2014 inspection, there was still a backlog of around half the cases that were the prison's responsibility. This shortfall affected prisoners' ability to progress, address their offending behaviour or reduce their levels of risk before release. The issue was compounded by the continued redeployment of uniform offender supervisors to other duties. Although this problem had diminished recently, we were told that it had previously not been unusual for the department to lose more than 150 staff hours a month.

### Recommendations

- 4.5 The prison should pursue a 'whole prison' approach to resettlement and encourage and support staff from all departments, especially personal officers, to take an active role in the work of the offender management unit in assessing and**

<sup>10</sup> 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 has maintained responsibility for high- and very high-risk offenders.

**implementing prisoner objectives to reduce their risk of reoffending.** (Repeated recommendation 4.7)

- 4.6 Prisoners should not be transferred to Isis without an up-to-date offender assessment system (OASys) assessment.** (Repeated recommendation 4.17)

## Offender management and planning

### Expected outcomes:

**All prisoners have a sentence plan based on an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody. Prisoners, together with all relevant staff, are involved in drawing up and reviewing plans.**

- 4.7** We were joined on this inspection by colleagues from HM inspectorate of Probation who looked in detail at 12 prisoner cases, made up of six in scope for offender management (serving more than 12 months and considered to pose a high or very high risk of harm) and six who were out of scope. The cases of a further 12 prisoners due to be released within the following fortnight were looked at, but in less detail.
- 4.8** Data indicated that over half the prison's population were convicted of a violent offence (including robbery) with almost 40% sentenced to over four years. A third of the population were identified as either high or very high risk of harm. All prisoners (including those on remand or sentenced to less than 12 months, about 1% of the population) were allocated to an offender supervisor. In principle, high and very high-risk prisoners were allocated to a probation offender supervisor, of whom there were three in post (plus one vacancy). However, given the high numbers, some of the eight officer-offender supervisors were also allocated high-risk cases. OMU had a slot during induction and saw all new arrivals as a group, and this was followed by individual initial meetings with the allocated offender supervisor. In our survey, 80% of respondents, against the comparator of 75%, said they had a named offender supervisor.
- 4.9** The large backlog of OASys meant that many prisoners did not have a sentence plan. In only five of the 12 cases looked at in detail were prisoners fully engaged in a sentence plan that included key or critical aspects linked to offending and risk of harm. And in our survey, only 44% of prisoners, against the comparator of 65%, said they had a sentence plan. The absence of completed risk assessments in the majority of cases in our sample was a concern, and in several cases clearly identifiable risk factors relating to the prisoner's previous offending and behaviour in the prison had been missed.
- 4.10** The prison's own needs analysis in 2015 found similar responses from prisoners about their experience of offender management. Although over half of prisoners knew who their offender supervisor was, over 50% said they had no sentence plan and almost 60% that they did not know what their sentence plan objectives were, and 67% said no one was working with them to achieve sentence plan objectives. The needs analysis found that 57% of respondents were unhappy about their relationship with their offender supervisor.
- 4.11** Although the prison had done little to address these shortfalls, there had been some steps to offset their impact. All new arrivals were screened by the senior probation officer to prioritise those of greatest concern and, following initial meetings, some basic sentence plan targets were noted on P-Nomis (the prison's electronic recording system). However, targets were rarely based on assessments (given the lack of OASys). They were invariably very broad, with objectives such as, 'comply with staff instructions' and 'work towards enhanced'.

They did not focus on criminogenic factors, and were ineffectual overall, with no quality assurance to evaluate the effectiveness of these targets. (See main recommendation S44.)

- 4.12** In many cases, continued contact between offender supervisors and prisoners was minimal, and sometimes just limited to that in passing when offender supervisors were on their other officer duties. In some of the cases we reviewed, contact was infrequent at best. It was evident that expectations raised by the initial OMU input to prisoners on induction were not always met, which affected morale, motivation and, in some cases, the progress made by those prisoners. Some of those we interviewed felt that they had been abandoned and left to their own devices. However, there were exceptions and we did see some good work, focused on the risk of harm, which addressed identified risk and included regular contact with prisoners – but the majority of these were cases held by probation officer-offender supervisors. (See main recommendation S44.)
- 4.13** Although there was evidence of good working relationships between officer and probation offender supervisors, these were mainly still two separate teams. Probation staff received regular casework supervision, access to training and focused their work on risk. Officers, however, did not receive any casework supervision, and their access to training and personal development was minimal. As a result, their contact with prisoners focused largely on practical issues (such as home detention curfew, HDC, reviews or categorisation) rather than on the risk of harm. Although there were some encouraging examples of joint working and mentoring by probation staff with uniform offender supervisors, these were relatively rare.
- 4.14** In the previous six months, 92 prisoners had been considered by the HDC board with 60 successful. We reviewed the cases considered by the board, and decisions were broadly appropriate and well considered. However, we were very concerned about delays. The prison had begun monitoring this. Since February 2016, only two of the 23 prisoners granted HDC had been released on the day they became eligible; 30% were more than 56 days past their date. There were many reasons for these problems, the major one being delays in getting information, sometimes of an appropriate quality, from community offender managers.
- 4.15** We were disappointed to find that no prisoners were released on temporary licence (ROTL). The main reason was that those identified as potentially appropriate were usually transferred to open conditions. However, there were some release opportunities for prisoners who were category C that were not currently pursued, although we were told that there were plans to address this, particularly in relation to catering jobs/training.

## Recommendations

- 4.16** **There should be casework reviews and regular professional supervision for all offender supervisors to ensure consistent standards of service delivery and effective case management.** (Repeated recommendation 4.19)
- 4.17** **Delays in home detention curfew releases should be minimised.**
- 4.18** **The prison should increase the opportunity for prisoners to access release on temporary licence.**

## Public protection

- 4.19** Arrangements for managing public protection were generally good. Rather than rely on an administrative process, all prisoners were screened six months before release by the senior probation officer to ensure that multi-agency public protection arrangements (MAPPA) level 2 prisoners were picked up in good time before release. The interdepartmental risk management team met monthly and there was evidence of good discussion and information sharing, with further necessary reviews identified as appropriate. The quality of MAPPA assessments for community meetings was generally good.

## Categorisation

- 4.20** Categorisation reviews were generally held on time with review dates identified well in advance. At the time of the inspection, there were nine prisoners categorised as D with the rest all category C. We were told that there were relatively short delays in transferring prisoners to open conditions, with the majority going to Hollesley Bay in Suffolk. However, in several cases prisoners were reviewed without a full OASys assessment completed, diminishing the board's ability to evaluate fully the prisoner's potential level of risk. Because prisoners were not accepted for transfer to open conditions without an OASys, the assessments were completed after the board had made at least a provisional decision.

## Recommendation

- 4.21 Prisoners being considered for recategorisation should have an up-to-date OASys assessment completed, including a risk assessment, before they are approved for category D status.**

## Indeterminate sentence prisoners

- 4.22** Isis no longer accommodated prisoners serving an indeterminate sentence.

## 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.**

- 4.23** The prison released approximately 60 prisoners a month. Catch22, contracted by MTCNovo CRC, assessed all prisoners approximately 12 weeks before release. Catch22 acted largely as case managers brokering work where identified to other providers, including Depaul UK for housing and Lifeline for drug and alcohol support. The cases we reviewed were generally well managed and clear about areas of concerns, and resettlement plans were of a good standard. There were generally good links with offender supervisors, especially probation staff, and in many cases appropriate links where necessary to community responsible officers (formally offender managers) from either CRCs or the National Probation Service.
- 4.24** The recording of the outcomes of referrals was less consistent. Given the importance of continuity of provision on release, it was concerning that only one of the 12 cases we reviewed had outcomes recorded on OASys. While plans put in place to provide housing on release had at least been communicated by email, some departments had not recorded their

work and any plans made for release. For example, there were generally good employment, training and education outcomes for prisoners and support for those with drug and alcohol problems. However, this was not always known, recorded or communicated to responsible officers by CRC staff. This made it unlikely that responsible officers in the community knew what was planned for a prisoner's release and diminished their ability to support them once released.

- 4.25** There were monthly strategic meetings between the lead manager for Catch22, the head of reducing reoffending and senior probation officer that covered quality assurance and case sampling. However, while this had focused on resettlement plans, it did not look at prisoners' cases immediately before their release.

## Recommendation

- 4.26** **Quality assurance of resettlement provision should focus on both resettlement plans and progress at the point of release to improve outcomes for prisoners.**

## Accommodation

- 4.27** MTCnovo contracted with Depaul UK (a national homelessness charity) to provide housing advice, support and guidance as part of a cluster arrangement with HMP Thameside and HMP/YOI Feltham. Staffing levels had recently been reduced leaving Isis with one full-time worker and a part-time team member working exclusively with issues relating to tenancy support, and a team leader across all three establishments. Depaul UK staff were no longer present at the induction for new arrivals and received most of their referrals via Catch22. Since no prisoners came to Isis directly from court, the prison carried out no initial screenings, via the basic custody tool. This meant that prisoners with outstanding housing debt or tenancy issues could be missed, but there was a Depaul UK peer mentor based on the induction unit, which helped reduce this risk.
- 4.28** There were good links between Depaul UK and the Catch22 team, and we saw several examples of close working with difficult-to-place prisoners. However, some of the innovative work by Depaul UK that we reported at the last inspection, including family conciliation, was no longer provided, although this now fell under the work of the family engagement worker (see paragraph 4.39). Nevertheless, Depaul UK worked with around 20 prisoners at a time and outcomes were generally very positive with relatively few prisoners released without accommodation, despite the problems associated with release into the London housing market and lack of affordable accommodation. However, there was no formal follow-up of released prisoners in the community, and the sustainability of accommodation remained difficult to establish. For instance, around half of all prisoners released returned to live with family or friends but it was not clear how long-term such arrangements were.

## Education, training and employment

- 4.29** The quality of the careers advice and guidance contracted to Prospects was good. Its engagement and resettlement team worked effectively with prisoners throughout their stay. Interviews with new arrivals were timely and identified their needs clearly, and most action plans drawn up during these interviews were good. However, the action plans were not linked to prisoners' sentence plans effectively enough.
- 4.30** Prospects, Jobcentre Plus and CRC staff were based in the prison and worked very effectively together to support prisoners. They provided comprehensive pre-release

programmes and help to apply for benefits and get jobs. The prison provided a range of vocational training programmes that reflected local and national labour market skills needs, and had recognised that the range could be extended to meet other skills shortages. Links with employers through projects such as 'Ban the Box' (supporting employment of ex-offenders) were particularly effective. Partnerships with Switchback (a London prison rehabilitation charity) and The Prince's Trust continued to be productive and supported prisoners in the community. Prison job fairs remained a successful initiative and were well supported by employers.

- 4.31** Data from Prospects indicated that in the previous four months approximately two-thirds of prisoners entered education, training or employment on release. The majority went into sustained employment in construction, catering, horticulture and catering trades offered through the Ban the Box scheme. The 'virtual campus', giving prisoners internet access to community education, training and employment opportunities, was well-used for job search and support in applying for jobs.

## Recommendation

- 4.32** **Staff from the offender management unit should share prisoners' sentence plans with resettlement and learning and skills staff to ensure that prisoners' needs are prioritised.**

## Health care

- 4.33** Prisoners were appropriately supported for their health needs before discharge with all seen and reviewed by a member of the primary health care team. They were supplied with information about registering with a GP and a supply of medicines to take out, if required. There were strong links with local community mental health teams and other partners to support discharge planning for prisoners with ongoing mental health needs, which was supported by an identified transfer coordinator.

## Drugs and alcohol

- 4.34** The Lifeline team had developed good links with the OMU, especially on its behavioural change work with drug dealers and gang-affiliated prisoners (see paragraph 1.57). Some staff were able to provide post-release support: The family worker currently engaged with the families of seven prisoners, and the behavioural change mentor could continue his work with gang-affiliated prisoners post-release for six sessions. There was evidence of good release planning and preparation, which included referrals to community drug intervention programmes and liaison with the CRC and community service providers.

## Finance, benefit and debt

- 4.35** There was limited support for prisoners' finance, benefit and debt needs. Prisoners could open a bank account through Catch22 but there was little else available. Information about the national debt line was provided and prisoners could add this number to their telephone accounts, but there was no monitoring to see how many, if any, did so. Some basic debt management advice was given by Catch22 staff but this was very limited. Depaul UK no longer offered debt advice. The prison's own needs analysis did not ask about debt and it was not clear how extensive this problem was.

## Recommendation

- 4.36** The prison should undertake regular analyses to establish the extent of prisoners' debt problems, and provide appropriate and sufficient support and guidance to prisoners.

## Children, families and contact with the outside world

- 4.37** The children's charity Spurgeons operated the visitors' centre next to Belmarsh prison and visitors could use this before and after visiting Isis. A worker was also available at Isis itself. In our survey, prisoners said that it was easy for their family to visit them but only 22%, against the comparator of 35%, said that staff helped them maintain contact with family and friends. Since the 2014 inspection, the prison had introduced two separate visits sessions rather than one to reduce the pressure on limited places, and this had caused considerable problems. Visits sessions were now restricted to just one hour, with no flexibility. The sessions started at 2.15pm and 4pm, but the gate for visitors was closed at exactly those times and anyone arriving any later was prevented from visiting. On the two days we observed visits, several visitors had not arrived in time and their visits did not take place. Although we were told that there was some flexibility to this arrangement, in practice this was not the case. Visits were still only available on Tuesday and Wednesday afternoons and all day Saturday.
- 4.38** The visits hall was a reasonable environment, if austere. A play area was staffed by Spurgeons, but still not for all visits sessions. The seating in the hall was appropriate and prisoners did not have to wear bibs during sessions. The snack bar, part-staffed by prisoner orderlies, offered a reasonable range of sandwiches, drinks and other snacks.
- 4.39** In July 2015, the prison had introduced a family engagement worker, provided through PACT (Prison Advice and Care Trust). The worker was engaged with around 40 families at a time, offering support and advice. Such work included liaison to help prisoners estranged from their families regain contact and we saw one example of this during the inspection. PACT was also due to deliver the 'Time to connect' parenting programme and the 'Building stronger families' family relationships programme to run in tandem with the four family days provided each year. The 'Create, inside stories' project also offered prisoners the opportunity to create a unique book and CD for their children

## Recommendation

- 4.40** The prison should offer sufficient flexibility to ensure prisoners can receive their full visits entitlement.

## Attitudes, thinking and behaviour

- 4.41** Isis offered two nationally accredited offending behaviour programmes, the Thinking Skills Programme (TSP) and Resolve – designed to address aggression and violence. Both programmes were appropriate for the population but delivery and staffing difficulties during 2015-16 meant that only 23 prisoners had completed courses, against a target of 58. In two cases we looked at, prisoners about to be released – one at the end of a seven-year sentence - had been identified as needing Resolve or TSP but had not been able to access it, or transfer elsewhere to attend, and as a consequence were leaving having done little or nothing to address their offending behaviour directly. There were some examples of one-to-one work in offender management but this was relatively rare. We assessed that sufficient

offending behaviour work was being done in only two of the 12 offender management cases we reviewed.

- 4.42** During 2015-16, 47 prisoners had also completed the 'Silence the violence' course, but this was not accredited and it remained unclear how effective it was in addressing identified issues. The prison provided the Sycamore Tree victim awareness programme through the chaplaincy.
- 4.43** Although the prison expected the two accredited programmes to meet their targets in the current year, we remained concerned, given the offending profile of the population and the number of prisoners released each month, whether the number of places was sufficient to meet the needs of the population. This issue was compounded further by the number of prisoners without an OASys assessment and/or effective sentence plan.

### Recommendation

- 4.44** **The prison should fully explore the offending behaviour profile of its population and ensure that it provides sufficient work, including offending behaviour programmes, to address this need effectively.**

# Section 5. Summary of recommendations and good practice

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

## Main recommendations

### To the governor

- 5.1** The prison should ensure that all aspects of early days procedures are improved to provide better support for new arrivals to the prison. (S39)
- 5.2** The number of fights and assaults should be reduced and the prison should monitor and address prisoner perceptions about their safety. Governance of prisoners on formal violence reduction measures should be improved. There should be a purposeful and structured regime for such prisoners, and planned interventions to address bullying behaviour and support victims. (S40)
- 5.3** Staff should actively engage with prisoners and help support them through their sentence. They should challenge inappropriate conduct and behave fairly and consistently while responding to meet their basic needs. Prisoners should have a nominated individual officer they can turn to for support or to resolve problems in the prison. (S41)
- 5.4** The management and promotion of equality work should be robust and informed by routine consultation with groups with protected characteristics and effective use of prisoner representatives. (S42)
- 5.5** Prisoners should be able to access a full prison regime every day, including all planned activities and opportunities to maximise their learning, ensure their personal hygiene needs are met, and have the opportunity to maintain regular telephone contact with family and friends. (S43)
- 5.6** Additional activity places should be provided urgently to meet the needs of the population. (S44)
- 5.7** All appropriate prisoners should have a completed and up-to-date OASys assessment and sentence plan based on this information. Sentence plans should address identified risk factors, and offender supervisors should engage effectively with prisoners to help them meet these objectives. (S45)

## Recommendation

### To the Home Office

- 5.8** Immigration detainees should be transferred promptly to a facility more suitable for their needs. (2.31)

## Recommendation

To the deputy director of custody

- 5.9** Prisoners should not be transferred to Isis without an up-to-date offender assessment system (OASys) assessment. (4.6, repeated recommendation 4.17)

## Recommendation

To Prisoner Escort and Custody Services

- 5.10** Prison escort vans should be clean and free from graffiti. (1.2, repeated recommendation 1.3)

## Recommendations

To the governor

### Courts, escort and transfers

- 5.11** Prisoners arriving during the staff lunch period should be disembarked from escort vans immediately. (1.3, repeated recommendation 1.5)

### Bullying and violence reduction

- 5.12** Safer custody officers should be allocated sufficient time to carry out their duties. (1.15)

### Self-harm and suicide

- 5.13** The prison should ensure that prisoners in crisis do not spend long periods locked up without activity. (1.21)
- 5.14** Prisoners on an open assessment, care in custody and teamwork (ACCT) case management document should only be segregated in well-documented exceptional circumstances. (1.22)

### Security

- 5.15** The prison should develop a detailed drug supply reduction strategy and action plan. (1.30, repeated recommendation 1.49)
- 5.16** The mandatory drug testing programme should be sufficiently resourced to undertake the required level of suspicion testing. (1.31, repeated recommendation 1.48)
- 5.17** Prisoners should only be placed on and remain on closed visits when there is sufficient intelligence relating to visits to support it. (1.32, repeated recommendation 1.50)

### Incentives and earned privileges

- 5.18** The prison should explore and address prisoners' poor perceptions of the incentives and earned privileges scheme, to ensure the scheme is both legitimate and effective. (1.36, repeated recommendation 1.56)
- 5.19** The prison should examine the differentials between standard and enhanced levels of the IEP scheme to provide a greater incentive for good behaviour. (1.37)
- 5.20** The regime for prisoners on basic should be improved and include access to showers and telephones every day. (1.38, repeated recommendation 1.55)

## Discipline

- 5.21** The adjudication standardisation meeting should explore and seek to reduce the high number of adjudications. (1.41)
- 5.22** Use of force, particularly as a consequence of prisoner non-compliance, and use of handcuffs should be further reduced. (1.46, repeated recommendation 1.68)
- 5.23** The use of segregation should be reduced. (1.53, repeated recommendation 1.76)
- 5.24** The quality of documents authorising segregation should be improved and should include meaningful targets for prisoners. (1.54, repeated recommendation 1.78)
- 5.25** The regime in the segregation unit should be improved and should include daily access to showers, telephone calls and one hour of outside exercise. (1.55, repeated recommendation 1.77)

## Substance misuse

- 5.26** The clinical substance misuse service should include naltrexone and lofexidine as treatment options for opiate dependent prisoners working towards and wanting to maintain abstinence. (1.60, repeated recommendation 1.86)

## Residential units

- 5.27** All residential units, including cells and communal areas, should be clean, free from graffiti and properly maintained. (2.8, repeated recommendation 2.8)
- 5.28** All cells should be equipped with televisions, kettles and adequate cell furniture. (2.9)
- 5.29** Staff should answer cell bells correctly and respond to prisoners within five minutes. (2.10)
- 5.30** Prisoners should be able to access adequate clean clothing and bedding consistently. (2.11, repeated recommendation 2.9)

## Equality and diversity

- 5.31** The staff resources for equality and diversity work should be consistently available and sufficient to meet need. (2.21)
- 5.32** The prison should develop and implement a programme to challenge racist and discriminatory prisoner behaviour at Isis. (2.22, repeated recommendation 2.25)
- 5.33** The prison should provide a coordinated approach to managing the needs of foreign national prisoners, ensure that all essential information is translated into the necessary languages, and that foreign national prisoners have access to free independent immigration advice. (2.32)
- 5.34** The prison should develop and promote more information and support services for gay and bisexual prisoners. (2.33)

## Complaints

- 5.35** Complaints processes should be consistently implemented, prisoners should always receive responses that are courteous and address the issues raised, and complaints against staff should be investigated thoroughly. (2.39)

## Health services

- 5.36** Patient forums should be established to provide systematic opportunities for prisoners to contribute to the development of health services. (2.50)
- 5.37** There should be a well-advertised programme of coordinated, multiagency health promotion initiatives. (2.51)
- 5.38** Health staff should share all non-health related risk issues that emerge from the health screening of new arrivals with the safer custody team. (2.56)
- 5.39** Prisoner access to the optician should be equivalent to that in the community. (2.57)
- 5.40** The health care department should monitor the non-attendance rate and ensure it is maintained at under 10%, and prisoners should not have excessive waits in the health care department before or after health appointments. (2.58)
- 5.41** There should be discrete and safe waiting areas in the health care centre for prisoners with vulnerabilities. (2.59)
- 5.42** There should be additional pharmaceutical services, such as medicine use reviews, to enable better health outcomes for patients. (2.66)
- 5.43** Medicine queues should be fully supervised by prison staff. (2.67)
- 5.44** Patient group directions should be introduced to enable the supply of more potent medication by the pharmacist and/or nurse. (2.68)
- 5.45** There should be robust procedures to ensure that heat-sensitive medicines are appropriately stored and fridge temperatures are recorded regularly, with remedial actions recorded when temperatures fall out of the required range of 2-8°C. (2.69)
- 5.46** Relevant and in-date pharmacy policies (standard operating procedures) should be in place and signed by all staff who use them. (2.70)
- 5.47** All prisoners identified as requiring enhanced input through the care programme approach (CPA) should have comprehensive CPA plans that demonstrate a full assessment and appropriate identification of care needs. (2.77)

## Catering

- 5.48** Breakfast packs should be issued on the day they are to be eaten, meals should be served at standard meal times, and lunch should be served from the servery. (2.82)
- 5.49** Wing serveries and food trolleys should be clean and well maintained, serveries should be properly supervised by staff, and servery workers should wear appropriate protective clothing. (2.83)

## Purchases

- 5.50** New arrivals should be able to buy items from the prison shop within their first 24 hours. (2.85, repeated recommendation 2.97)

## Time out of cell

- 5.51** The prison should offer prisoners at least one hour's exercise in the fresh air each day. (3.3, repeated recommendation 3.5)

## Learning and skills and work activities

- 5.52** Allocation of prisoners to activities should ensure that the maximum number benefit from the spaces available while meeting their sentence planning needs. (3.9)
- 5.53** Prison leaders and managers should improve action planning for activities, including the setting of challenging targets, to ensure swift improvements. (3.10)
- 5.54** A wider range of work opportunities, including support towards the development of English and mathematics skills, should be provided to prisoners on the safer custody spur. (3.15)
- 5.55** Prisoners' development of English and mathematics skills should be improved across all activities, and in particular their achievement rates at level 2. (3.22)
- 5.56** Tutors and trainers should plan learning more effectively to ensure that all prisoners make good progress. (3.23)
- 5.57** Target-setting for individual prisoners should be further developed to make sure that they know what they need to do to improve. (3.24)
- 5.58** Prison leaders and managers should ensure a high rate of attendance at activities to maximise prisoners' learning and engagement opportunities. (3.28)
- 5.59** There should be improved access to the library for prisoners not participating in education and vocational training. (3.33)

## Physical education and healthy living

- 5.60** Prison managers should offer more accredited PE qualifications, and should consider opening the PE facilities in the evenings. (3.37)

## Strategic management of resettlement

- 5.61** The prison should pursue a 'whole prison' approach to resettlement and encourage and support staff from all departments, especially personal officers, to take an active role in the work of the offender management unit in assessing and implementing prisoner objectives to reduce their risk of reoffending. (4.5, repeated recommendation 4.7)

## Offender management and planning

- 5.62** There should be casework reviews and regular professional supervision for all offender supervisors to ensure consistent standards of service delivery and effective case management. (4.16, repeated recommendation 4.19)

- 5.63** Delays in home detention curfew releases should be minimised. (4.17)
- 5.64** The prison should increase the opportunity for prisoners to access release on temporary licence. (4.18)
- 5.65** Prisoners being considered for recategorisation should have an up-to-date OASys assessment completed, including a risk assessment, before they are approved for category D status. (4.21)

### **Reintegration planning**

- 5.66** Quality assurance of resettlement provision should focus on both resettlement plans and progress at the point of release to improve outcomes for prisoners. (4.26)
- 5.67** Staff from the offender management unit should share prisoners' sentence plans with resettlement and learning and skills staff to ensure that prisoners' needs are prioritised. (4.32)
- 5.68** The prison should undertake regular analyses to establish the extent of prisoners' debt problems, and provide appropriate and sufficient support and guidance to prisoners. (4.36)
- 5.69** The prison should offer sufficient flexibility to ensure prisoners can receive their full visits entitlement. (4.40)
- 5.70** The prison should fully explore the offending behaviour profile of its population and ensure that it provides sufficient work, including offending behaviour programmes, to address this need effectively. (4.44)

### **Example of good practice**

- 5.71** Lifeline Transform carried out innovative behavioural change work with drug dealers and gang-affiliated prisoners to address their behaviour and lifestyles. (1.61)

## Section 6. Appendices

### Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Deborah Butler	Team leader
Ian Dickens	Inspector
Angus Mulready-Jones	Inspector
Keith McInnis	Inspector
Angela Johnson	Inspector
Gordon Riach	Inspector
Tim McSweeney	Researcher
Patricia Taflan	Researcher
Heidi Webb	Researcher
Anna Fenton	Researcher
Sigrid Engelen	Substance misuse inspector
Stephen Eley	Health services inspector
Noor Mohammed	Pharmacist
Gary Turney	Care Quality Commission inspector
Bob Cowdrey	Ofsted inspector
Mark Shackleton	Ofsted inspector
Maria Navarro	Ofsted inspector
Paddy Doyle	Offender management inspector
Ruth Johnson	Offender management inspector
Simi Badachha	Offender management inspector
Sharon Shalev	Observer



## 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 2014 the reception experience was reasonable for most, and first night assessments were good. Induction was mostly consistent but lacked some necessary and timely local information. Prisoners' perceptions across a range of safety indicators were very poor, and the extremely limited regime increased tensions considerably. There was a high number of violent incidents, many serious, and yet the strategy to address perpetrators was almost solely punitive and failed to reinforce positive behaviour. Arrangements to support prisoners at risk of self-harm were good. Safeguarding arrangements were underdeveloped. Security procedures were broadly proportionate, and there was some active work to tackle gangs, although they sometimes had a disproportionate effect on the regime and some decision making. The incentives and earned privileges (IEP) scheme was applied consistently. There had been a large reduction in the use of force. Prisoners were positive about staff support in the segregation unit, but while some aspects of the regime were good, it was unacceptable that prisoners could not shower or use telephones daily. Substance misuse services were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

#### **Main recommendation**

The number of fights and assaults should be reduced and the prison should monitor and address prisoner perceptions about their safety. (S44)

**Partially achieved**

#### **Recommendations**

Prison escort vans should be clean and free from graffiti. (1.3, repeated recommendation 1.6)

**Not achieved** (recommendation repeated, 1.2)

Escort staff should be more concerned about prisoners' needs and the support they require. (1.4)

**Not achieved**

Prisoners arriving during the staff lunch period should be disembarked from escort vans immediately. (1.5, repeated recommendation 1.7)

**Not achieved** (recommendation repeated, 1.3)

All reception holding rooms should have televisions and/or sufficient prison information to keep prisoners occupied. (1.12)

**Not achieved**

Reception procedures should be completed more swiftly (1.13)

**Not achieved**

All new arrivals should be able to shower and make a free telephone on their first night. (I.14)

**Not achieved**

Induction should include specific and timely information about Isis in a format understood by all prisoners. (I.15)

**Not achieved**

Governance arrangements for prisoners on formal violence reduction measures should be improved, and there should be a purposeful and structured regime for such prisoners. (I.25)

**Not achieved**

The prison should introduce a casework approach to deal with levels of violence, including planned interventions to address bullying behaviour and to support victims. (I.26)

**Not achieved**

Safer custody officers should have enough time to carry out their duties. (I.27 repeated recommendation I.18)

**Not achieved**

The number of Listeners should be increased. (I.35)

**Achieved**

Strip clothing should only be used in exceptional circumstances when all other options have been exhausted, and should be properly authorised. (I.36)

**Achieved**

The governor should develop the prison's contacts with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to create local safeguarding processes. (I.40)

**Achieved**

The mandatory drug testing programme should be sufficiently resourced to undertake the required level of suspicion testing. (I.48)

**Not achieved** (recommendation repeated, I.31)

The prison should develop a detailed drug supply reduction strategy and action plan. (I.49)

**Not achieved** (recommendation repeated, I.30)

Prisoners should only be placed on and remain on closed visits when there is sufficient intelligence relating to visits to support it. (I.50, repeated recommendation 7.11)

**Not achieved** (recommendation repeated, I.32)

The regime for prisoners on basic should be improved and include access to showers and telephones every day. (I.55)

**Not achieved** (recommendation repeated, I.39)

The prison should explore and address prisoners' poor perceptions of the incentives and earned privileges scheme, to ensure the scheme is both legitimate and effective. (I.56)

**Not achieved** (recommendation repeated, I.37)

All disciplinary charges should be fully investigated, with clear reasons given for the decisions reached, and the quality assurance of adjudication records should be improved. (I.61)

**Achieved**

Use of force, particularly as a consequence of prisoner non-compliance, and use of handcuffs should be further reduced. (I.68)

**Partially achieved** (recommendation repeated, I.47)

The quality and timeliness of use of force records should be improved. (I.69)

**Achieved**

Special accommodation should only be used in exceptional circumstances, and accountability for its use should be improved. (I.70)

**Achieved**

The use of segregation should be reduced. (I.76)

**Not achieved** (recommendation repeated, I.54)

The regime in the segregation unit should be improved and should include daily access to showers, telephone calls and one hour of outside exercise. (I.77)

**Not achieved** (recommendation repeated, I.56)

The quality of documents authorising segregation should be improved and should include meaningful targets for prisoners. (I.78)

**Not achieved** (recommendation repeated, I.55)

Prisoners segregated for longer than a month should have an individual care plan to monitor their psychological welfare and assist them to reintegrate successfully. (I.79)

**Not achieved**

The clinical substance misuse service should include naltrexone as a treatment option for opiate dependent prisoners wanting to remain drug-free. (I.86)

**Not achieved** (recommendation repeated, I.61)

The drug and alcohol strategy document should be updated, contain detailed development targets and be informed by a comprehensive needs analysis. (I.87)

**Achieved**

## Respect

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

*At the last inspection, in 2014, the prison was generally clean but some communal areas and cells required attention. Prisoner access to showers and telephones was poor, due to the restrictions on the regime. Although prisoner perceptions of relationships with staff were mostly negative, we saw positive engagement, but the limited regime created tensions. Formal arrangements to promote equality and diversity were poor, as were consultation arrangements for all minority groups. Faith provision was good and the chaplaincy offered good support. Formal complaints were dealt with appropriately. Health services were good. Many prisoners were critical about the food but we found the meals adequate. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendation

The prison should make effective use of monitoring data and revise its equality and diversity plan to identify and address the concerns of black and minority ethnic prisoners, show how the needs of prisoners within each diversity strand will be addressed and provide assurance that allegations of discriminatory behaviour will be effectively addressed. (S45)

**Not achieved**

## Recommendations

All residential units, including cells and communal areas, should be clean, free from graffiti and properly maintained. (2.8)

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

Prisoners should be able to access adequate clean clothing and bedding consistently. (2.9, repeated recommendation 2.16)

**Not achieved** (recommendation repeated, 2.11)

Prisoners should be able to make telephone calls every day, including some time in the evening. (2.10)

**Not achieved**

The prison should explore and address prisoners' negative perceptions about their relationships with staff. (2.15)

**Not achieved**

The personal officer scheme should be better developed to support prisoners effectively through their sentence. (2.16)

**Not achieved**

There should be regular consultation meetings with prisoners from all minority groups about their needs and experiences. Issues raised should be pursued appropriately and any changes implemented communicated to prisoners. (2.23, repeated recommendation 4.10)

**Not achieved**

There should be adequately resourced arrangements to cover and support the role of the equality officer. (2.24)

**Not achieved**

The prison should develop and implement a programme to challenge racist and discriminatory prisoner behaviour at Isis. (2.25)

**Not achieved** (recommendation repeated, 2.22)

The prison should promote all aspects of equality and diversity. (2.26)

**Not achieved**

Immigration detainees should not be held in prison unless there are exceptional reasons to do so following risk assessment. (2.33)

**Not achieved**

Foreign national prisoners should have access to free independent immigration advice. (2.34)

**Not achieved**

The prison should provide a coordinated approach to managing the needs of foreign national prisoners, and ensure that essential information covering all aspects of safety, respect, purposeful activity and resettlement is translated into the necessary languages. (2.35)

**Not achieved**

There should be support available for gay or bisexual prisoners. (2.36)

**Not achieved**

Prisoner access to religious leaders should be improved. (2.41)

**Achieved**

Complaints about staff should be investigated thoroughly. (2.46)

**Not achieved**

There should be a full health needs assessment to ensure that the services commissioned meet the needs of the population. (2.58, repeated recommendation 5.5)

**Not achieved**

All prison staff should have up-to-date resuscitation skills training, including use of the automated defibrillator. (2.59)

**Not achieved**

Prisoners should be able to access health care appointments without having to choose between basic priorities, like a shower or telephone call. (2.66)

**Not achieved**

A single prescription should be used, and there should be appropriate monitoring of missed doses patients. (2.72)

**Achieved**

Prescription-only medicines should only be supplied under the appropriate authority, and nurses should be clear about the specific authority for administering a medication. (2.73)

**Not achieved**

There should be efforts to ensure the continued prescribing of medication and ongoing specialist support for prisoners started on the Ciao trial following their release. (2.82)

**Not achieved**

There should be mental health awareness training for officers. (2.83, repeated recommendation 5.55)

**Not achieved**

Breakfast packs should be issued on the day they are to be eaten. (2.89)

**Not achieved**

Meals should be served at standard meal times and the lunch should be served from the servery. (2.90)

**Not achieved**

Prisoners should be able to dine out of their cells. (2.91, repeated recommendation 8.9)

**Partially achieved**

There should be sufficient staff oversight of serveries to ensure the appropriate management of food and consistent portion control, food should only be served with the correct utensils, and serveries, including equipment, should be cleaned after each meal service. (2.92)

**Not achieved**

New arrivals should be able to buy items from the prison shop within their first 24 hours. (2.97)

**Not achieved** (recommendation repeated, 2.85)

## Purposeful activity

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

*At the last inspection, in 2014, the restricted regime meant that prisoner opportunities for time out of cell were poor for a training prison. There was a significant shortfall of activity places and far too many prisoners were locked in their cells with nothing meaningful to do. Strategic planning of learning and skills provision had improved, and the provision and quality of education and vocational training were good for those prisoners who could access them, as were their achievement outcomes. The library was well resourced and the opportunities for learning were good. The gym facilities were good but access was poor. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendation

Prisoners should be able to spend a reasonable amount of time out of their cell and be able to access a full prison regime every day, including all planned activities and opportunities to maximise their learning. (S46)

**Not achieved**

### Recommendations

The prison should offer prisoners at least one hour's exercise in the fresh air each day. (3.5, repeated recommendation 6.7)

**Not achieved** (recommendation repeated, 3.3)

The prison should improve the range of work opportunities to ensure that all prisoners can engage in purposeful activity. (3.18)

**Not achieved**

The prison should provide higher level accredited learning programmes in construction skills. (3.19)

**Partially achieved**

The prison should provide a better range of vocational training and education programmes for prisoners on the safer custody unit (C spur). (3.20)

**Not achieved**

The prison should identify those prisoners needing English for speakers of other languages (ESOL) support and provide appropriate support to meet their needs fully. (3.21)

**Achieved**

The prison should improve the achievements of functional English at level 2 and in resettlement employability programmes. (3.29)

**Not achieved**

The prison should increase prisoner use of the gym. (3.36)

**Achieved**

The prison should increase PE staffing to the full complement to reduce session cancellations, and expand the range of accredited courses. (3.37)

**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 2014, sentence planning was poor, there was no coordinated interdepartmental approach to prisoner resettlement and insufficient regular contact with prisoners. A very substantial offender assessment system (OASys) assessment backlog included some high risk cases, among a population that contained many convicted of violent offences. Public protection arrangements were mostly good but were potentially undermined by some deficiencies in risk assessment procedures. Resettlement pathway provision had improved, with some positive outcomes. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

#### Main recommendation

All appropriate prisoners should have a completed and up-to-date OASys assessment, and sentence plans based on this information should be improved and informed by contributions from departments across the prison. (S47)

**Not achieved**

#### Recommendations

The reducing reoffending and offender management functions of the establishment should be better integrated to ensure coordination of provision to meet prisoner needs, and there should be a clear plan to rectify the offender management shortfall caused by offender management unit (OMU) staff deployment. (4.6)

**Partially achieved**

The prison should pursue a 'whole prison' approach to resettlement and encourage and support staff from all departments, especially personal officers, to take an active role in the work of the offender management unit in assessing and implementing prisoner objectives to reduce their risk of reoffending. (4.7, repeated recommendation 9.7)

**Not achieved** (recommendation repeated, 4.5)

Prisoners should not be transferred to Isis without an up-to-date offender assessment system (OASys) assessment. (4.17)

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

Prison officer offender supervisors should be allocated consistent and sufficient time to complete offender management tasks. (4.18)

**Partially achieved**

There should be casework reviews and regular professional supervision for all offender supervisors to ensure consistent standards of service delivery and effective case management. (4.19)

**Not achieved** (recommendation repeated, 4.16)

The prison should develop a protocol with the London Probation Trust to improve the speed with which reports for home detention curfew are returned. (4.20)

**Not achieved**

Opportunities for release on temporary licence (ROTL) should be improved. (4.21)

**Not achieved**

Offender supervisors should effectively collate and manage reintegration management with offender managers, including work undertaken by resettlement pathway providers. (4.31)

**Achieved**

The prison should coordinate the resettlement employability programmes with its activities programme and sentence planning needs of prisoners to ensure prisoners gain the maximum benefit. (4.38)

**Partially achieved**

The prison should have a palliative care policy that supports prisoners with life-limiting conditions both in prison and after discharge into the community. (4.40)

**Achieved**

The period for validity of visiting orders should be extended, and the system for booking visits should ensure equality of access for all prisoners. (4.48)

**Achieved**

Play areas in all visits sessions should be staffed by supervised play workers. (4.49)

**Not achieved**

The prison should fully evaluate the Silence the Violence and Leap programmes to ensure that they have a positive impact on the population of Isis. (4.52)

**Not achieved**

## Appendix III: Prison population profile

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

### Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	115	464	94.5%
Recall	5	29	5.5%
<b>Total</b>	<b>120</b>	<b>493</b>	<b>100%</b>

Sentence	18–20 yr olds	21 and over	%
Unsentenced	0	1	0.2%
Less than six months	1	1	0.3%
Six months to less than 12 months	2	3	0.8%
12 months to less than 2 years	11	54	10.6%
2 years to less than 4 years	31	115	23.8%
4 years to less than 10 years	37	197	38.3%
10 years and over (not life)	2	5	1.1%
<b>Total</b>	<b>120</b>	<b>493</b>	<b>100%</b>

Age	Number of prisoners	%
Under 21 years	120	19.6%
21 years to 29 years	490	79.9%
30 years to 39 years	3	0.5%
<b>Total</b>	<b>613</b>	<b>100%</b>

Nationality	18–20 yr olds	21 and over	%
British	106	459	92.2%
Foreign nationals	13	27	6.5%
Not stated	1	7	1.3%
<b>Total</b>	<b>120</b>	<b>493</b>	<b>100%</b>

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	0	1	0.2%
Category C	1	481	78.6%
Category D	0	8	1.3%
YOI closed	119	3	19.9%
<b>Total</b>	<b>120</b>	<b>493</b>	<b>100%</b>

Ethnicity	18–20 yr olds	21 and over	%
White			
British	21	128	24.3%
Irish	1	5	1%
Gypsy/Irish Traveller	1	5	1%
Other white	3	26	4.7%
Mixed			
White and black Caribbean	10	29	6.4%
White and black African	2	6	1.3%
White and Asian	0	1	0.2%
Other mixed	8	13	3.4%

Asian or Asian British			
Indian	2	7	1.5%
Pakistani	0	6	1%
Bangladeshi	3	18	3.4%
Other Asian	4	15	3.1%
Black or black British			
Caribbean	20	101	19.7%
African	31	83	18.6%
Other black	9	63	7.3
Other ethnic group			
Arab	0	1	0.2%
Other ethnic group	5	10	2.4%
Not stated	0	3	0.5%
<b>Total</b>	<b>120</b>	<b>493</b>	<b>100%</b>

Religion	18–20 yr olds	21 and over	%
Church of England	14	57	11.6%
Roman Catholic	17	94	18.1%
Other Christian denominations	39	109	24.1%
Muslim	35	166	32.8%
Sikh	1	5	1.0%
Hindu	0	1	0.2%
Buddhist	1	2	0.5%
Jewish	0	1	0.2%
Other	0	2	0.3%
No religion	13	56	11.3%
<b>Total</b>	<b>120</b>	<b>493</b>	<b>100%</b>

**Sentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	13	2.1%	62	10.1%
1 month to 3 months	36	5.9%	113	18.4%
3 months to six months	29	4.7%	113	18.4%
six months to 1 year	23	3.8%	104	17%
1 year to 2 years	18	2.9%	86	14%
2 years to 4 years	1	0.2%	14	2.3%
<b>Total</b>	<b>120</b>	<b>19.6%</b>	<b>492</b>	<b>80.3%</b>

**Unsentenced prisoners only**

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
3 months to six months	0	0	1	0.2%
<b>Total</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0.2%</b>

## Appendix IV: Summary of prisoner questionnaires and interviews

### Prisoner survey methodology

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

### Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment<sup>11</sup>. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

### Distributing and collecting questionnaires

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

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

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

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

### Survey response

At the time of the survey on 3 May 2016 the prisoner population at HMP/YOI Isis was 602. Using the method described above, questionnaires were distributed to a sample of 201 prisoners.

We received a total of 185 completed questionnaires, a response rate of 92%. This included one questionnaire completed via interview. Five respondents refused to complete a questionnaire and 11 questionnaires were not returned.

### Presentation of survey results and analyses

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

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%.

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<sup>11</sup> 95% confidence interval with a sampling error of 7%. 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.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences<sup>12</sup> 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 Isis in 2016 compared with responses from prisoners surveyed in all other category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 36 category C training prisons since April 2012.
- The current survey responses from HMP/YOI Isis in 2016 compared with the responses of prisoners surveyed at HMP/YOI Isis in 2014.
- A comparison within the 2016 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2016 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2016 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2016 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 2016 survey between those who are aged 21 and under and those over 21.
- A comparison within the 2016 survey between C wing and the rest of the establishment.

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<sup>12</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

## Survey summary

### Section I: About you

<b>Q1.2</b>	<b>How old are you?</b>		
	<i>Under 21</i>		39 (21%)
	<i>21 - 29</i>		144 (78%)
	<i>30 - 39</i>		1 (1%)
	<i>40 - 49</i>		0 (0%)
	<i>50 - 59</i>		0 (0%)
	<i>60 - 69</i>		0 (0%)
	<i>70 and over</i>		0 (0%)
<b>Q1.3</b>	<b>Are you sentenced?</b>		
	<i>Yes</i>		164 (90%)
	<i>Yes - on recall</i>		19 (10%)
	<i>No - awaiting trial</i>		0 (0%)
	<i>No - awaiting sentence</i>		0 (0%)
	<i>No - awaiting deportation</i>		0 (0%)
<b>Q1.4</b>	<b>How long is your sentence?</b>		
	<i>Not sentenced</i>		0 (0%)
	<i>Less than 6 months</i>		6 (3%)
	<i>6 months to less than 1 year</i>		13 (7%)
	<i>1 year to less than 2 years</i>		31 (17%)
	<i>2 years to less than 4 years</i>		65 (36%)
	<i>4 years to less than 10 years</i>		62 (34%)
	<i>10 years or more</i>		5 (3%)
	<i>IPP (indeterminate sentence for public protection)</i>		0 (0%)
	<i>Life</i>		0 (0%)
<b>Q1.5</b>	<b>Are you a foreign national (i.e. do not have UK citizenship)?</b>		
	<i>Yes</i>		21 (11%)
	<i>No</i>		162 (89%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>		
	<i>Yes</i>		183 (100%)
	<i>No</i>		0 (0%)
<b>Q1.7</b>	<b>Do you understand written English?</b>		
	<i>Yes</i>		183 (100%)
	<i>No</i>		0 (0%)
<b>Q1.8</b>	<b>What is your ethnic origin?</b>		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	41 (23%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	2 (1%)	<i>Asian or Asian British - other</i> 2 (1%)
	<i>White - other</i>	12 (7%)	<i>Mixed race - white and black Caribbean</i> 17 (9%)
	<i>Black or black British - Caribbean</i>	40 (22%)	<i>Mixed race - white and black African</i> 2 (1%)
	<i>Black or black British - African</i>	37 (21%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	6 (3%)	<i>Mixed race - other</i> 3 (2%)
	<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Arab</i> 5 (3%)

<i>Asian or Asian British - Pakistani</i>	1 (1%)	<i>Other ethnic group</i>	0 (0%)
<i>Asian or Asian British - Bangladeshi</i>	8 (4%)		

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

Yes	7 (4%)
No	169 (96%)

**Q1.10 What is your religion?**

<i>None</i>	29 (16%)	<i>Hindu</i>	0 (0%)
<i>Church of England</i>	40 (22%)	<i>Jewish</i>	1 (1%)
<i>Catholic</i>	24 (13%)	<i>Muslim</i>	60 (34%)
<i>Protestant</i>	0 (0%)	<i>Sikh</i>	2 (1%)
<i>Other Christian denomination</i>	19 (11%)	<i>Other</i>	3 (2%)
<i>Buddhist</i>	1 (1%)		

**Q1.11 How would you describe your sexual orientation?**

<i>Heterosexual/ Straight</i>	182 (100%)
<i>Homosexual/Gay</i>	0 (0%)
<i>Bisexual</i>	0 (0%)

**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	27 (15%)
No	154 (85%)

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

Yes	3 (2%)
No	181 (98%)

**Q1.14 Is this your first time in prison?**

Yes	75 (41%)
No	108 (59%)

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

Yes	54 (29%)
No	130 (71%)

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

<i>Less than 2 hours</i>	93 (51%)
<i>2 hours or longer</i>	74 (40%)
<i>Don't remember</i>	17 (9%)

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

<i>My journey was less than two hours</i>	93 (51%)
Yes	51 (28%)
No	33 (18%)
<i>Don't remember</i>	5 (3%)

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

<i>My journey was less than two hours</i>	93 (51%)
Yes	6 (3%)
No	80 (44%)
<i>Don't remember</i>	4 (2%)

<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>		
	Yes		71 (39%)
	No		93 (51%)
	Don't remember		20 (11%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>		
	Yes		126 (68%)
	No		46 (25%)
	Don't remember		12 (7%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>		
	Very well		23 (13%)
	Well		67 (36%)
	Neither		69 (38%)
	Badly		13 (7%)
	Very badly		9 (5%)
	Don't remember		3 (2%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)</b>		
	Yes, someone told me		81 (44%)
	Yes, I received written information		36 (20%)
	No, I was not told anything		66 (36%)
	Don't remember		3 (2%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>		
	Yes		145 (79%)
	No		38 (21%)
	Don't remember		1 (1%)

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

<b>Q3.1</b>	<b>How long were you in reception?</b>			
	Less than 2 hours		74 (40%)	
	2 hours or longer		101 (55%)	
	Don't remember		8 (4%)	
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>			
	Yes		129 (71%)	
	No		40 (22%)	
	Don't remember		13 (7%)	
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>			
	Very well		19 (10%)	
	Well		69 (38%)	
	Neither		63 (35%)	
	Badly		18 (10%)	
	Very badly		11 (6%)	
	Don't remember		1 (1%)	
<b>Q3.4</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>			
	Loss of property	41 (23%)	Physical health	15 (8%)
	Housing problems	24 (13%)	Mental health	26 (14%)
	Contacting employers	6 (3%)	Needing protection from other prisoners	24 (13%)
	Contacting family	33 (18%)	Getting phone numbers	42 (23%)

<i>Childcare</i>	2 (1%)	<i>Other</i>	7 (4%)
<i>Money worries</i>	27 (15%)	<i>Did not have any problems</i>	66 (36%)
<i>Feeling depressed or suicidal</i>	25 (14%)		

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

<i>Yes</i>	18 (10%)
<i>No</i>	97 (54%)
<i>Did not have any problems</i>	66 (36%)

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

<i>Tobacco</i>	136 (74%)
<i>A shower</i>	28 (15%)
<i>A free telephone call</i>	79 (43%)
<i>Something to eat</i>	114 (62%)
<i>PIN phone credit</i>	89 (48%)
<i>Toiletries/ basic items</i>	113 (61%)
<i>Did not receive anything</i>	16 (9%)

**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>	104 (57%)
<i>Someone from health services</i>	129 (71%)
<i>A Listener/Samaritans</i>	30 (16%)
<i>Prison shop/ canteen</i>	34 (19%)
<i>Did not have access to any of these</i>	27 (15%)

**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>	59 (33%)
<i>What support was available for people feeling depressed or suicidal</i>	45 (25%)
<i>How to make routine requests (applications)</i>	60 (33%)
<i>Your entitlement to visits</i>	51 (28%)
<i>Health services</i>	74 (41%)
<i>Chaplaincy</i>	80 (44%)
<i>Not offered any information</i>	52 (29%)

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

<i>Yes</i>	122 (67%)
<i>No</i>	49 (27%)
<i>Don't remember</i>	11 (6%)

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

<i>Have not been on an induction course</i>	18 (10%)
<i>Within the first week</i>	88 (49%)
<i>More than a week</i>	68 (38%)
<i>Don't remember</i>	7 (4%)

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

<i>Have not been on an induction course</i>	18 (10%)
<i>Yes</i>	61 (34%)
<i>No</i>	84 (46%)
<i>Don't remember</i>	19 (10%)

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

<i>Did not receive an assessment</i>	29 (16%)
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Within the first week	45 (24%)
More than a week	89 (48%)
Don't remember	21 (11%)

#### Section 4: Legal rights and respectful custody

<b>Q4.1</b>	<b>How easy is it to...</b>						
		Very easy	Easy	Neither	Difficult	Very difficult	N/A
	Communicate with your solicitor or legal representative?	8 (4%)	42 (23%)	45 (25%)	27 (15%)	31 (17%)	28 (15%)
	Attend legal visits?	11 (6%)	46 (26%)	43 (24%)	26 (15%)	11 (6%)	42 (23%)
	Get bail information?	4 (2%)	8 (5%)	35 (20%)	31 (18%)	24 (14%)	71 (41%)
<b>Q4.2</b>	<b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b>						
	Not had any letters						46 (25%)
	Yes						84 (46%)
	No						52 (29%)
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>						
	Yes						48 (27%)
	No						24 (13%)
	Don't know						107 (60%)
<b>Q4.4</b>	<b>Please answer the following questions about the wing/unit you are currently living on:</b>						
		Yes	No	Don't know			
	Do you normally have enough clean, suitable clothes for the week?	83 (46%)	94 (52%)	3 (2%)			
	Are you normally able to have a shower every day?	44 (24%)	137 (75%)	1 (1%)			
	Do you normally receive clean sheets every week?	62 (35%)	115 (65%)	1 (1%)			
	Do you normally get cell cleaning materials every week?	37 (20%)	142 (78%)	2 (1%)			
	Is your cell call bell normally answered within five minutes?	16 (9%)	155 (87%)	8 (4%)			
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	99 (56%)	76 (43%)	1 (1%)			
	If you need to, can you normally get your stored property?	31 (18%)	99 (57%)	44 (25%)			
<b>Q4.5</b>	<b>What is the food like here?</b>						
	Very good						19 (10%)
	Good						85 (47%)
	Neither						48 (26%)
	Bad						16 (9%)
	Very bad						14 (8%)
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>						
	Have not bought anything yet/ don't know						5 (3%)
	Yes						69 (38%)
	No						109 (60%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>						
	Yes						61 (33%)
	No						31 (17%)
	Don't know						92 (50%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>						
	Yes						95 (52%)
	No						33 (18%)
	Don't know/ N/A						56 (30%)

<b>Q4.9</b>	<b>Are you able to speak to a chaplain of your faith in private if you want to?</b>	
	Yes	119 (65%)
	No	13 (7%)
	Don't know/ N/A	51 (28%)
<b>Q4.10</b>	<b>How easy or difficult is it for you to attend religious services?</b>	
	<i>I don't want to attend</i>	16 (9%)
	Very easy	49 (27%)
	Easy	62 (34%)
	Neither	24 (13%)
	Difficult	10 (5%)
	Very difficult	6 (3%)
	Don't know	17 (9%)

### Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>	
	Yes	126 (68%)
	No	46 (25%)
	Don't know	12 (7%)
<b>Q5.2</b>	<b>Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)</b>	
		Not made one    Yes    No
	Are applications dealt with fairly?	21 (12%)    71 (39%)    90 (49%)
	Are applications dealt with quickly (within seven days)?	21 (12%)    73 (40%)    87 (48%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>	
	Yes	105 (58%)
	No	40 (22%)
	Don't know	37 (20%)
<b>Q5.4</b>	<b>Please answer the following questions about complaints. (If you have not made a complaint please tick the 'not made one' option.)</b>	
		Not made one    Yes    No
	Are complaints dealt with fairly?	62 (34%)    27 (15%)    94 (51%)
	Are complaints dealt with quickly (within seven days)?	62 (34%)    34 (19%)    86 (47%)
<b>Q5.5</b>	<b>Have you ever been prevented from making a complaint when you wanted to?</b>	
	Yes	42 (23%)
	No	138 (77%)
<b>Q5.6</b>	<b>How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?</b>	
	<i>Don't know who they are</i>	42 (24%)
	Very easy	10 (6%)
	Easy	38 (21%)
	Neither	55 (31%)
	Difficult	23 (13%)
	Very difficult	10 (6%)

### Section 6: Incentive and earned privileges scheme

<b>Q6.1</b>	<b>Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)</b>	
	<i>Don't know what the IEP scheme is</i>	3 (2%)
	Yes	47 (26%)
	No	118 (65%)
	<i>Don't know</i>	13 (7%)
<b>Q6.2</b>	<b>Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)</b>	
	<i>Don't know what the IEP scheme is</i>	3 (2%)
	Yes	69 (38%)
	No	87 (48%)
	<i>Don't know</i>	22 (12%)
<b>Q6.3</b>	<b>In the last six months have any members of staff physically restrained you (C&amp;R)?</b>	
	Yes	46 (25%)
	No	137 (75%)
<b>Q6.4</b>	<b>If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?</b>	
	<i>I have not been to segregation in the last 6 months</i>	130 (73%)
	Very well	2 (1%)
	Well	7 (4%)
	Neither	11 (6%)
	Badly	10 (6%)
	Very badly	17 (10%)

### Section 7: Relationships with staff

<b>Q7.1</b>	<b>Do most staff treat you with respect?</b>	
	Yes	104 (57%)
	No	77 (43%)
<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	Yes	94 (53%)
	No	85 (47%)
<b>Q7.3</b>	<b>Has a member of staff checked on you personally in the last week to see how you are getting on?</b>	
	Yes	21 (11%)
	No	162 (89%)
<b>Q7.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<i>Do not go on association</i>	6 (3%)
	Never	40 (22%)
	Rarely	60 (33%)
	Some of the time	58 (32%)
	Most of the time	15 (8%)
	All of the time	3 (2%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i>	91 (50%)
	<i>In the first week</i>	13 (7%)
	<i>More than a week</i>	50 (27%)
	<i>Don't remember</i>	28 (15%)

<b>Q7.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<i>Do not have a personal officer/ I have not met him/ her</i>	91 (51%)
	<i>Very helpful</i>	15 (8%)
	<i>Helpful</i>	20 (11%)
	<i>Neither</i>	11 (6%)
	<i>Not very helpful</i>	18 (10%)
	<i>Not at all helpful</i>	22 (12%)

### Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>	
	<i>Yes</i>	78 (43%)
	<i>No</i>	103 (57%)

<b>Q8.2</b>	<b>Do you feel unsafe now?</b>	
	<i>Yes</i>	40 (22%)
	<i>No</i>	139 (78%)

<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>	
	<i>Never felt unsafe</i>	103 (59%)
	<i>Everywhere</i>	28 (16%)
	<i>Segregation unit</i>	8 (5%)
	<i>Association areas</i>	22 (13%)
	<i>Reception area</i>	7 (4%)
	<i>At the gym</i>	14 (8%)
	<i>In an exercise yard</i>	28 (16%)
	<i>At work</i>	12 (7%)
	<i>During movement</i>	34 (19%)
	<i>At education</i>	26 (15%)
	<i>At meal times</i>	18 (10%)
	<i>At health services</i>	19 (11%)
	<i>Visits area</i>	16 (9%)
	<i>In wing showers</i>	24 (14%)
	<i>In gym showers</i>	13 (7%)
	<i>In corridors/stairwells</i>	15 (9%)
	<i>On your landing/wing</i>	21 (12%)
	<i>In your cell</i>	10 (6%)
	<i>At religious services</i>	14 (8%)

<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>	
	<i>Yes</i>	53 (29%)
	<i>No</i>	129 (71%)

<b>Q8.5</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i>	22 (12%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	22 (12%)
	<i>Sexual abuse</i>	3 (2%)
	<i>Feeling threatened or intimidated</i>	25 (14%)
	<i>Having your canteen/property taken</i>	20 (11%)
	<i>Medication</i>	2 (1%)
	<i>Debt</i>	9 (5%)
	<i>Drugs</i>	9 (5%)
	<i>Your race or ethnic origin</i>	9 (5%)
	<i>Your religion/religious beliefs</i>	6 (3%)
	<i>Your nationality</i>	8 (4%)
	<i>You are from a different part of the country than others</i>	8 (4%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	1 (1%)
	<i>Your age</i>	7 (4%)
	<i>You have a disability</i>	4 (2%)
	<i>You were new here</i>	18 (10%)
	<i>Your offence/ crime</i>	4 (2%)
	<i>Gang related issues</i>	19 (10%)

<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>	
	Yes	76 (42%)
	No	104 (58%)
<b>Q8.7</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i>	34 (19%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	23 (13%)
	<i>Sexual abuse</i>	3 (2%)
	<i>Feeling threatened or intimidated</i>	30 (17%)
	<i>Medication</i>	7 (4%)
	<i>Debt</i>	1 (1%)
	<i>Drugs</i>	3 (2%)
	<i>Your race or ethnic origin</i>	9 (5%)
	<i>Your religion/religious beliefs</i>	11 (6%)
	<i>Your nationality</i>	9 (5%)
	<i>You are from a different part of the country than others</i>	5 (3%)
	<i>You are from a traveller community</i>	3 (2%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	8 (4%)
	<i>You have a disability</i>	7 (4%)
	<i>You were new here</i>	23 (13%)
	<i>Your offence/ crime</i>	5 (3%)
	<i>Gang related issues</i>	6 (3%)
<b>Q8.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	<b>Not been victimised</b>	89 (53%)
	Yes	23 (14%)
	No	57 (34%)

### Section 9: Health services

<b>Q9.1</b>	<b>How easy or difficult is it to see the following people?</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	15 (8%)	9 (5%)	36 (20%)	42 (24%)	51 (29%)	24 (14%)
	The nurse	9 (5%)	18 (10%)	72 (42%)	39 (23%)	24 (14%)	10 (6%)
	The dentist	19 (11%)	6 (4%)	18 (11%)	26 (15%)	49 (29%)	53 (31%)
<b>Q9.2</b>	<b>What do you think of the quality of the health service from the following people?</b>						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	27 (15%)	10 (6%)	46 (26%)	34 (19%)	39 (22%)	22 (12%)
	The nurse	11 (6%)	6 (3%)	44 (25%)	48 (27%)	30 (17%)	37 (21%)
	The dentist	52 (30%)	7 (4%)	26 (15%)	33 (19%)	22 (13%)	32 (19%)
<b>Q9.3</b>	<b>What do you think of the overall quality of the health services here?</b>						
	<i>Not been</i>					9 (5%)	
	<i>Very good</i>					10 (6%)	
	<i>Good</i>					42 (24%)	
	<i>Neither</i>					40 (23%)	
	<i>Bad</i>					40 (23%)	
	<i>Very bad</i>					35 (20%)	
<b>Q9.4</b>	<b>Are you currently taking medication?</b>						
	Yes					51 (28%)	
	No					128 (72%)	
<b>Q9.5</b>	<b>If you are taking medication, are you allowed to keep some/ all of it in your own cell?</b>						
	<i>Not taking medication</i>					128 (72%)	

Yes, all my meds	13 (7%)
Yes, some of my meds	10 (6%)
No	28 (16%)

<b>Q9.6</b>	<b>Do you have any emotional or mental health problems?</b>	
	Yes	50 (28%)
	No	126 (72%)
<b>Q9.7</b>	<b>Are you being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?</b>	
	<i>Do not have any emotional or mental health problems</i>	126 (72%)
	Yes	18 (10%)
	No	31 (18%)

### Section 10: Drugs and alcohol

<b>Q10.1</b>	<b>Did you have a problem with drugs when you came into this prison?</b>	
	Yes	36 (20%)
	No	144 (80%)
<b>Q10.2</b>	<b>Did you have a problem with alcohol when you came into this prison?</b>	
	Yes	20 (11%)
	No	160 (89%)
<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	Very easy	43 (24%)
	Easy	14 (8%)
	Neither	12 (7%)
	Difficult	5 (3%)
	Very difficult	8 (4%)
	Don't know	97 (54%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy	11 (6%)
	Easy	6 (3%)
	Neither	11 (6%)
	Difficult	12 (7%)
	Very difficult	21 (12%)
	Don't know	119 (66%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	Yes	21 (12%)
	No	160 (88%)
<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	Yes	9 (5%)
	No	170 (95%)
<b>Q10.7</b>	<b>Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?</b>	
	<i>Did not / do not have a drug problem</i>	130 (75%)
	Yes	32 (18%)
	No	11 (6%)
<b>Q10.8</b>	<b>Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?</b>	
	<i>Did not / do not have an alcohol problem</i>	160 (89%)

Yes	14 (8%)
No	6 (3%)

<b>Q10.9</b>	<b>Was the support or help you received, whilst in this prison, helpful?</b>	
	<i>Did not have a problem/ did not receive help</i>	137 (79%)
	Yes	27 (16%)
	No	9 (5%)

### Section II: Activities

<b>Q11.1</b>	<b>How easy or difficult is it to get into the following activities, in this prison?</b>					
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>
						<i>Very difficult</i>
	Prison job	7 (4%)	3 (2%)	20 (11%)	19 (11%)	60 (34%)
	Vocational or skills training	17 (10%)	11 (7%)	40 (24%)	39 (23%)	27 (16%)
	Education (including basic skills)	10 (6%)	27 (16%)	65 (38%)	34 (20%)	15 (9%)
	Offending behaviour programmes	29 (17%)	5 (3%)	26 (15%)	38 (22%)	41 (24%)

<b>Q11.2</b>	<b>Are you currently involved in the following? (Please tick all that apply to you.)</b>	
	<i>Not involved in any of these</i>	53 (31%)
	Prison job	63 (36%)
	Vocational or skills training	26 (15%)
	Education (including basic skills)	57 (33%)
	Offending behaviour programmes	14 (8%)

<b>Q11.3</b>	<b>If you have been involved in any of the following, while in this prison, do you think they will help you on release?</b>				
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	52 (33%)	41 (26%)	46 (29%)	18 (11%)
	Vocational or skills training	52 (35%)	46 (31%)	30 (20%)	21 (14%)
	Education (including basic skills)	38 (24%)	65 (42%)	29 (19%)	24 (15%)
	Offending behaviour programmes	61 (41%)	39 (26%)	28 (19%)	20 (14%)

<b>Q11.4</b>	<b>How often do you usually go to the library?</b>	
	<i>Don't want to go</i>	14 (8%)
	Never	53 (30%)
	<i>Less than once a week</i>	37 (21%)
	<i>About once a week</i>	42 (24%)
	<i>More than once a week</i>	29 (17%)

<b>Q11.5</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	<i>Don't use it</i>	50 (29%)
	Yes	52 (30%)
	No	72 (41%)

<b>Q11.6</b>	<b>How many times do you usually go to the gym each week?</b>	
	<i>Don't want to go</i>	20 (11%)
	0	29 (16%)
	1 to 2	69 (39%)
	3 to 5	57 (32%)
	More than 5	3 (2%)

<b>Q11.7</b>	<b>How many times do you usually go outside for exercise each week?</b>	
	<i>Don't want to go</i>	27 (15%)
	0	16 (9%)

<i>1 to 2</i>	27 (15%)
<i>3 to 5</i>	31 (17%)
<i>More than 5</i>	79 (44%)

**Q11.8 How many times do you usually have association each week?**

<i>Don't want to go</i>	2 (1%)
<i>0</i>	7 (4%)
<i>1 to 2</i>	15 (8%)
<i>3 to 5</i>	147 (82%)
<i>More than 5</i>	9 (5%)

**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>	33 (19%)
<i>2 to less than 4 hours</i>	47 (27%)
<i>4 to less than 6 hours</i>	35 (20%)
<i>6 to less than 8 hours</i>	27 (15%)
<i>8 to less than 10 hours</i>	9 (5%)
<i>10 hours or more</i>	11 (6%)
<i>Don't know</i>	14 (8%)

**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>	39 (22%)
<i>No</i>	141 (78%)

**Q12.2 Have you had any problems with sending or receiving mail (letters or parcels)?**

<i>Yes</i>	98 (55%)
<i>No</i>	80 (45%)

**Q12.3 Have you had any problems getting access to the telephones?**

<i>Yes</i>	68 (38%)
<i>No</i>	112 (62%)

**Q12.4 How easy or difficult is it for your family and friends to get here?**

<i>I don't get visits</i>	16 (9%)
<i>Very easy</i>	16 (9%)
<i>Easy</i>	44 (25%)
<i>Neither</i>	34 (19%)
<i>Difficult</i>	38 (21%)
<i>Very difficult</i>	31 (17%)
<i>Don't know</i>	0 (0%)

**Section 13: Preparation for release****Q13.1 Do you have a named offender manager (home probation officer) in the probation service?**

<i>Not sentenced</i>	0 (0%)
<i>Yes</i>	105 (61%)
<i>No</i>	68 (39%)

**Q13.2 What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)**

<i>Not sentenced/ NA</i>	68 (40%)
<i>No contact</i>	52 (30%)
<i>Letter</i>	20 (12%)

	Phone	14 (8%)
	Visit	28 (16%)
<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes	141 (80%)
	No	35 (20%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	Not sentenced	0 (0%)
	Yes	77 (44%)
	No	99 (56%)
<b>Q13.5</b>	<b>How involved were you in the development of your sentence plan?</b>	
	Do not have a sentence plan/ not sentenced	99 (57%)
	Very involved	17 (10%)
	Involved	25 (14%)
	Neither	13 (7%)
	Not very involved	10 (6%)
	Not at all involved	10 (6%)
<b>Q13.6</b>	<b>Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)</b>	
	Do not have a sentence plan/ not sentenced	99 (58%)
	Nobody	40 (23%)
	Offender supervisor	24 (14%)
	Offender manager	10 (6%)
	Named/ personal officer	4 (2%)
	Staff from other departments	8 (5%)
<b>Q13.7</b>	<b>Can you achieve any of your sentence plan targets in this prison?</b>	
	Do not have a sentence plan/ not sentenced	99 (58%)
	Yes	41 (24%)
	No	19 (11%)
	Don't know	13 (8%)
<b>Q13.8</b>	<b>Are there plans for you to achieve any of your sentence plan targets in another prison?</b>	
	Do not have a sentence plan/ not sentenced	99 (57%)
	Yes	15 (9%)
	No	33 (19%)
	Don't know	27 (16%)
<b>Q13.9</b>	<b>Are there plans for you to achieve any of your sentence plan targets in the community?</b>	
	Do not have a sentence plan/ not sentenced	99 (57%)
	Yes	23 (13%)
	No	27 (16%)
	Don't know	25 (14%)
<b>Q13.10</b>	<b>Do you have a needs based custody plan?</b>	
	Yes	8 (5%)
	No	84 (48%)
	Don't know	82 (47%)
<b>Q13.11</b>	<b>Do you feel that any member of staff has helped you to prepare for your release?</b>	
	Yes	23 (13%)
	No	150 (87%)

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

	<i>Do not need help</i>	Yes	No
Employment	30 (18%)	60 (36%)	75 (45%)
Accommodation	37 (22%)	52 (32%)	76 (46%)
Benefits	37 (23%)	47 (29%)	76 (48%)
Finances	39 (25%)	26 (17%)	91 (58%)
Education	40 (26%)	44 (28%)	72 (46%)
Drugs and alcohol	54 (35%)	42 (27%)	59 (38%)

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

<i>Not sentenced</i>	0 (0%)
Yes	88 (50%)
No	87 (50%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP & YOI Isis 2016

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

#### Key to tables

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	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>185</b>	<b>6,322</b>	<b>185</b>	<b>187</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	21%	1%	21%	34%
1.3	Are you sentenced?	100%	100%	100%	99%
1.3	Are you on recall?	10%	9%	10%	8%
1.4	Is your sentence less than 12 months?	11%	6%	11%	16%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	9%	0%	1%
1.5	Are you a foreign national?	11%	9%	11%	15%
1.6	Do you understand spoken English?	100%	99%	100%	98%
1.7	Do you understand written English?	100%	98%	100%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	69%	24%	69%	70%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	4%	4%	2%
1.1	Are you Muslim?	34%	12%	34%	39%
1.11	Are you homosexual/gay or bisexual?	0%	4%	0%	1%
1.12	Do you consider yourself to have a disability?	15%	21%	15%	11%
1.13	Are you a veteran (ex-armed services)?	2%	6%	2%	3%
1.14	Is this your first time in prison?	41%	38%	41%	46%
1.15	Do you have any children under the age of 18?	29%	52%	29%	31%
<b>SECTION 2: Transfers and escorts</b>					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	40%	45%	40%	33%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	57%	73%	57%	41%
2.3	Were you offered a toilet break?	7%	8%	7%	1%
2.4	Was the van clean?	39%	63%	39%	36%
2.5	Did you feel safe?	68%	80%	68%	72%
2.6	Were you treated well/very well by the escort staff?	49%	73%	49%	47%
2.7	Before you arrived here were you told that you were coming here?	44%	61%	44%	33%
2.7	Before you arrived here did you receive any written information about coming here?	20%	14%	20%	33%
2.8	When you first arrived here did your property arrive at the same time as you?	79%	86%	79%	78%

## Main comparator and comparator to last time

### Key to tables

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<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	41%	54%	41%	38%
3.2	When you were searched in reception, was this carried out in a respectful way?	71%	86%	71%	68%
3.3	Were you treated well/very well in reception?	49%	76%	49%	44%
	When you first arrived:				
3.4	Did you have any problems?	64%	60%	64%	80%
3.4	Did you have any problems with loss of property?	23%	18%	23%	29%
3.4	Did you have any housing problems?	13%	12%	13%	21%
3.4	Did you have any problems contacting employers?	3%	2%	3%	4%
3.4	Did you have any problems contacting family?	18%	18%	18%	34%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	1%	1%	2%
3.4	Did you have any money worries?	15%	13%	15%	21%
3.4	Did you have any problems with feeling depressed or suicidal?	14%	14%	14%	13%
3.4	Did you have any physical health problems?	8%	13%	8%	8%
3.4	Did you have any mental health problems?	14%	16%	14%	11%
3.4	Did you have any problems with needing protection from other prisoners?	13%	5%	13%	16%
3.4	Did you have problems accessing phone numbers?	23%	16%	23%	27%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	16%	37%	16%	26%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	74%	75%	74%	72%
3.6	A shower?	15%	28%	15%	16%
3.6	A free telephone call?	43%	42%	43%	37%
3.6	Something to eat?	62%	55%	62%	60%
3.6	PIN phone credit?	48%	51%	48%	43%
3.6	Toiletries/ basic items?	61%	46%	61%	55%

Key to tables

Main comparator and comparator to last time

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<b>SECTION 3: Reception, first night and induction continued</b>					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	57%	53%	57%	48%
3.7	Someone from health services?	71%	70%	71%	61%
3.7	A Listener/Samaritans?	17%	34%	17%	19%
3.7	Prison shop/ canteen?	19%	24%	19%	22%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	33%	50%	33%	35%
3.8	Support was available for people feeling depressed or suicidal?	25%	40%	25%	24%
3.8	How to make routine requests?	33%	44%	33%	31%
3.8	Your entitlement to visits?	28%	40%	28%	21%
3.8	Health services?	41%	52%	41%	43%
3.8	The chaplaincy?	44%	48%	44%	44%
3.9	Did you feel safe on your first night here?	67%	82%	67%	60%
3.10	Have you been on an induction course?	90%	90%	90%	89%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	37%	61%	37%	36%
3.12	Did you receive an education (skills for life) assessment?	84%	84%	84%	87%
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	28%	46%	28%	25%
4.1	Attend legal visits?	32%	48%	32%	33%
4.1	Get bail information?	7%	15%	7%	5%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	46%	39%	46%	44%
4.3	Can you get legal books in the library?	27%	43%	27%	26%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	46%	68%	46%	30%
4.4	Are you normally able to have a shower every day?	24%	94%	24%	14%
4.4	Do you normally receive clean sheets every week?	35%	74%	35%	22%
4.4	Do you normally get cell cleaning materials every week?	20%	68%	20%	16%
4.4	Is your cell call bell normally answered within five minutes?	9%	36%	9%	11%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	56%	70%	56%	57%
4.4	Can you normally get your stored property, if you need to?	18%	24%	18%	10%
4.5	Is the food in this prison good/very good?	57%	30%	57%	24%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	38%	49%	38%	42%
4.7	Are you able to speak to a Listener at any time, if you want to?	33%	58%	33%	28%
4.8	Are your religious beliefs are respected?	52%	53%	52%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	59%	65%	46%
4.10	Is it easy/very easy to attend religious services?	60%	49%	60%	51%

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<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	68%	82%	68%	65%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	44%	58%	44%	34%
5.2	Do you feel applications are dealt with quickly (within seven days)?	46%	40%	46%	38%
5.3	Is it easy to make a complaint?	58%	60%	58%	66%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	22%	35%	22%	25%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	28%	29%	28%	31%
5.5	Have you ever been prevented from making a complaint when you wanted to?	23%	19%	23%	27%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	27%	29%	27%	25%
<b>SECTION 6: Incentives and earned privileges scheme</b>					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	26%	50%	26%	34%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	46%	38%	39%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	25%	7%	25%	18%
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?	19%	38%	19%	29%
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	58%	81%	58%	51%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	53%	74%	53%	48%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	11%	31%	11%	13%
7.4	Do staff normally speak to you most of the time/all of the time during association?	10%	21%	10%	9%
7.5	Do you have a personal officer?	50%	65%	50%	36%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	41%	64%	41%	26%

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<b>SECTION 8: Safety</b>					
8.1	Have you ever felt unsafe here?	43%	36%	43%	54%
8.2	Do you feel unsafe now?	22%	15%	22%	32%
8.4	Have you been victimised by other prisoners here?	29%	27%	29%	34%
Since you have been here, have other prisoners:					
8.5	Made insulting remarks about you, your family or friends?	12%	12%	12%	15%
8.5	Hit, kicked or assaulted you?	12%	7%	12%	16%
8.5	Sexually abused you?	2%	1%	2%	1%
8.5	Threatened or intimidated you?	14%	16%	14%	22%
8.5	Taken your canteen/property?	11%	7%	11%	13%
8.5	Victimised you because of medication?	1%	4%	1%	1%
8.5	Victimised you because of debt?	5%	4%	5%	3%
8.5	Victimised you because of drugs?	5%	4%	5%	3%
8.5	Victimised you because of your race or ethnic origin?	5%	4%	5%	5%
8.5	Victimised you because of your religion/religious beliefs?	3%	3%	3%	3%
8.5	Victimised you because of your nationality?	4%	3%	4%	4%
8.5	Victimised you because you were from a different part of the country?	4%	4%	4%	3%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.5	Victimised you because of your sexual orientation?	1%	2%	1%	1%
8.5	Victimised you because of your age?	4%	3%	4%	2%
8.5	Victimised you because you have a disability?	2%	3%	2%	1%
8.5	Victimised you because you were new here?	10%	5%	10%	9%
8.5	Victimised you because of your offence/crime?	2%	5%	2%	4%
8.5	Victimised you because of gang related issues?	11%	4%	11%	11%

## Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	42%	29%	42%	43%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	19%	11%	19%	19%
8.7	Hit, kicked or assaulted you?	13%	4%	13%	6%
8.7	Sexually abused you?	2%	1%	2%	2%
8.7	Threatened or intimidated you?	17%	12%	17%	14%
8.7	Victimised you because of medication?	4%	3%	4%	3%
8.7	Victimised you because of debt?	1%	2%	1%	1%
8.7	Victimised you because of drugs?	2%	2%	2%	1%
8.7	Victimised you because of your race or ethnic origin?	5%	4%	5%	6%
8.7	Victimised you because of your religion/religious beliefs?	6%	3%	6%	3%
8.7	Victimised you because of your nationality?	5%	3%	5%	2%
8.7	Victimised you because you were from a different part of the country?	3%	3%	3%	2%
8.7	Victimised you because you are from a Traveller community?	2%	1%	2%	1%
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	2%
8.7	Victimised you because of your age?	4%	2%	4%	3%
8.7	Victimised you because you have a disability?	4%	3%	4%	1%
8.7	Victimised you because you were new here?	13%	3%	13%	11%
8.7	Victimised you because of your offence/crime?	3%	4%	3%	8%
8.7	Victimised you because of gang related issues?	3%	2%	3%	7%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	29%	41%	29%	33%

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<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	25%	29%	25%	32%
9.1	Is it easy/very easy to see the nurse?	52%	51%	52%	50%
9.1	Is it easy/very easy to see the dentist?	14%	14%	14%	11%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	37%	48%	37%	49%
9.2	The nurse?	30%	57%	30%	49%
9.2	The dentist?	27%	43%	27%	34%
9.3	The overall quality of health services?	31%	43%	31%	40%
9.4	Are you currently taking medication?	29%	50%	29%	24%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	45%	83%	45%	47%
9.6	Do you have any emotional well being or mental health problems?	28%	32%	28%	18%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	37%	51%	37%	48%
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	20%	24%	20%	22%
10.2	Did you have a problem with alcohol when you came into this prison?	11%	16%	11%	9%
10.3	Is it easy/very easy to get illegal drugs in this prison?	32%	40%	32%	23%
10.4	Is it easy/very easy to get alcohol in this prison?	9%	24%	9%	10%
10.5	Have you developed a problem with drugs since you have been in this prison?	12%	9%	12%	3%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	7%	5%	1%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	74%	61%	74%	63%
10.8	Have you received any support or help with your alcohol problem while in this prison?	70%	64%	70%	66%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	75%	77%	75%	78%

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<b>SECTION 11: Activities</b>					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	13%	48%	13%	12%
11.1	Vocational or skills training?	30%	42%	30%	31%
11.1	Education (including basic skills)?	54%	56%	54%	58%
11.1	Offending behaviour programmes?	18%	23%	18%	14%
Are you currently involved in any of the following activities:					
11.2	A prison job?	36%	60%	36%	23%
11.2	Vocational or skills training?	15%	16%	15%	12%
11.2	Education (including basic skills)?	33%	22%	33%	51%
11.2	Offending behaviour programmes?	8%	12%	8%	8%
11.3	Have you had a job while in this prison?	67%	84%	67%	64%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	39%	44%	39%	33%
11.3	Have you been involved in vocational or skills training while in this prison?	65%	75%	65%	65%
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?	48%	57%	48%	35%
11.3	Have you been involved in education while in this prison?	76%	79%	76%	85%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	55%	59%	55%	51%
11.3	Have you been involved in offending behaviour programmes while in this prison?	59%	71%	59%	62%
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?	45%	50%	45%	37%
11.4	Do you go to the library at least once a week?	41%	43%	41%	52%
11.5	Does the library have a wide enough range of materials to meet your needs?	30%	46%	30%	31%
11.6	Do you go to the gym three or more times a week?	34%	34%	34%	4%
11.7	Do you go outside for exercise three or more times a week?	61%	52%	61%	56%
11.8	Do you go on association more than five times each week?	5%	67%	5%	1%
11.9	Do you spend ten or more hours out of your cell on a weekday?	6%	18%	6%	4%
<b>SECTION 12: Friends and family</b>					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	22%	35%	22%	20%
12.2	Have you had any problems with sending or receiving mail?	55%	42%	55%	60%
12.3	Have you had any problems getting access to the telephones?	38%	20%	38%	64%
12.4	Is it easy/ very easy for your friends and family to get here?	34%	28%	34%	32%

## Main comparator and comparator to last time

### Key to tables

		HMP & YOI Isis 2016	Category C Training Prisons comparator	HMP & YOI Isis 2016	HMP & YOI Isis 2014
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 13: Preparation for release</b>					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	61%	82%	61%	68%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	53%	36%	53%	46%
13.2	Contact by letter?	17%	35%	17%	22%
13.2	Contact by phone?	14%	26%	14%	9%
13.2	Contact by visit?	25%	32%	25%	36%
13.3	Do you have a named offender supervisor in this prison?	80%	75%	80%	65%
For those who are sentenced:					
13.4	Do you have a sentence plan?	44%	65%	44%	38%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	56%	53%	56%	36%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	55%	47%	55%	73%
13.6	Offender supervisor?	33%	37%	33%	12%
13.6	Offender manager?	14%	27%	14%	9%
13.6	Named/ personal officer?	6%	13%	6%	1%
13.6	Staff from other departments?	11%	15%	11%	11%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	56%	62%	56%	32%
13.8	Are there plans for you to achieve any of your targets in another prison?	20%	19%	20%	23%
13.9	Are there plans for you to achieve any of your targets in the community?	31%	28%	31%	27%
13.10	Do you have a needs based custody plan?	5%	7%	5%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	16%	13%	9%
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?	44%	34%	44%	45%
13.12	Accommodation?	41%	37%	41%	44%
13.12	Benefits?	38%	39%	38%	31%
13.12	Finances?	22%	28%	22%	23%
13.12	Education?	38%	34%	38%	41%
13.12	Drugs and alcohol?	42%	44%	42%	40%
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	50%	55%	50%	55%

## Diversity analysis



### Key question responses (ethnicity, foreign national and religion) HMP & YO1 Isis 2016

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

#### Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
Any percentage highlighted in blue is significantly worse							
Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
<b>Number of completed questionnaires returned</b>		<b>124</b>	<b>55</b>	<b>21</b>	<b>162</b>	<b>60</b>	<b>119</b>
1.3	Are you sentenced?	100%	100%	100%	100%	100%	100%
1.5	Are you a foreign national?	12%	11%			12%	12%
1.6	Do you understand spoken English?	100%	100%	100%	100%	100%	100%
1.7	Do you understand written English?	100%	100%	100%	100%	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			71%	69%	88%	60%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	1%	9%	5%	4%	2%	4%
1.1	Are you Muslim?	42%	13%	33%	33%		
1.12	Do you consider yourself to have a disability?	15%	17%	38%	12%	17%	15%
1.13	Are you a veteran (ex-armed services)?	3%	0%	4%	1%	4%	1%
1.14	Is this your first time in prison?	44%	36%	57%	39%	39%	43%
2.6	Were you treated well/very well by the escort staff?	54%	40%	45%	49%	51%	47%
2.7	Before you arrived here were you told that you were coming here?	43%	48%	55%	42%	38%	47%
3.2	When you were searched in reception, was this carried out in a respectful way?	73%	69%	70%	71%	67%	74%
3.3	Were you treated well/very well in reception?	50%	47%	55%	48%	53%	46%
3.4	Did you have any problems when you first arrived?	66%	59%	70%	63%	66%	61%
3.7	Did you have access to someone from health care when you first arrived here?	79%	56%	80%	69%	68%	72%
3.9	Did you feel safe on your first night here?	66%	69%	68%	66%	67%	68%
3.10	Have you been on an induction course?	91%	87%	89%	90%	88%	91%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	28%	27%	29%	28%	27%	28%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
4.4	Are you normally offered enough clean, suitable clothes for the week?	42%	58%	48%	46%	41%	49%
4.4	Are you normally able to have a shower every day?	24%	23%	40%	22%	28%	24%
4.4	Is your cell call bell normally answered within five minutes?	11%	4%	20%	7%	11%	9%
4.5	Is the food in this prison good/very good?	64%	49%	57%	57%	63%	55%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	34%	49%	38%	38%	31%	40%
4.7	Are you able to speak to a Listener at any time, if you want to?	30%	40%	52%	31%	31%	34%
4.8	Do you feel your religious beliefs are respected?	58%	36%	81%	47%	63%	46%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	65%	67%	71%	64%	67%	65%
5.1	Is it easy to make an application?	67%	71%	67%	68%	66%	70%
5.3	Is it easy to make a complaint?	60%	54%	33%	60%	46%	64%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	25%	31%	35%	25%	23%	27%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	38%	53%	37%	30%	41%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	27%	18%	15%	26%	33%	22%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	57%	62%	71%	55%	60%	58%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	53%	57%	57%	52%	47%	56%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	9%	13%	20%	9%	9%	11%
7.4	Do you have a personal officer?	52%	48%	60%	48%	44%	52%
8.1	Have you ever felt unsafe here?	45%	37%	55%	42%	49%	39%
8.2	Do you feel unsafe now?	23%	21%	30%	21%	32%	16%
8.3	Have you been victimised by other prisoners?	27%	34%	40%	28%	31%	28%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	12%	21%	20%	13%	12%	15%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	4%	15%	4%	10%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	2%	11%	3%	7%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	2%	20%	3%	7%	3%
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	2%	11%	1%	4%	2%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
8.6	Have you been victimised by a member of staff?	41%	43%	40%	43%	55%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	17%	19%	15%	17%	22%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	7%	0%	11%	5%	12%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	8%	2%	15%	5%	14%	2%
8.7	Have you been victimised because of your nationality? (By staff)	7%	2%	20%	3%	12%	2%
8.7	Have you been victimised because you have a disability? (By staff)	4%	4%	5%	4%	7%	2%
9.1	Is it easy/very easy to see the doctor?	27%	23%	11%	27%	18%	29%
9.1	Is it easy/ very easy to see the nurse?	53%	51%	50%	53%	50%	52%
9.4	Are you currently taking medication?	28%	29%	32%	29%	27%	28%
9.6	Do you feel you have any emotional well being/mental health issues?	27%	33%	42%	27%	32%	27%
10.3	Is it easy/very easy to get illegal drugs in this prison?	29%	39%	32%	32%	26%	35%
11.2	Are you currently working in the prison?	33%	47%	42%	36%	32%	38%
11.2	Are you currently undertaking vocational or skills training?	20%	4%	11%	16%	11%	18%
11.2	Are you currently in education (including basic skills)?	39%	20%	47%	31%	32%	34%
11.2	Are you currently taking part in an offending behaviour programme?	8%	10%	16%	7%	4%	9%
11.4	Do you go to the library at least once a week?	45%	35%	47%	39%	39%	42%
11.6	Do you go to the gym three or more times a week?	35%	30%	44%	32%	28%	37%
11.7	Do you go outside for exercise three or more times a week?	63%	57%	65%	61%	54%	66%
11.8	On average, do you go on association more than five times each week?	3%	7%	11%	3%	4%	6%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	7%	4%	5%	7%	7%	5%
12.2	Have you had any problems sending or receiving mail?	60%	44%	32%	58%	53%	56%
12.3	Have you had any problems getting access to the telephones?	40%	31%	30%	39%	38%	37%

## Diversity Analysis



### Key question responses (disability, under 21) HMP & YOI Isis 2016

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

#### Key to tables

		Consider themselves to have a disability	Do not consider themselves to have a disability		Prisoners under the age of 21	Prisoners aged 21 and over
	Any percentage highlighted in green is significantly better					
	Any percentage highlighted in blue is significantly worse					
	Any percentage highlighted in orange shows a significant difference in prisoners' background details					
	Percentages which are not highlighted show there is no significant difference					
<b>Number of completed questionnaires returned</b>		<b>27</b>	<b>154</b>		<b>39</b>	<b>145</b>
1.3	Are you sentenced?	100%	100%		100%	100%
1.5	Are you a foreign national?	30%	9%		13%	11%
1.6	Do you understand spoken English?	100%	100%		100%	100%
1.7	Do you understand written English?	100%	100%		100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	67%	71%		65%	70%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	9%	3%		2%	5%
1.1	Are you Muslim?	38%	34%		27%	35%
1.12	Do you consider yourself to have a disability?				13%	16%
1.13	Are you a veteran (ex-armed services)?	3%	1%		0%	2%
1.14	Is this your first time in prison?	48%	40%		67%	34%
2.6	Were you treated well/very well by the escort staff?	42%	51%		31%	53%
2.7	Before you arrived here were you told that you were coming here?	42%	45%		59%	40%
3.2	When you were searched in reception, was this carried out in a respectful way?	66%	72%		72%	70%
3.3	Were you treated well/very well in reception?	52%	49%		36%	52%
3.4	Did you have any problems when you first arrived?	85%	60%		54%	66%
3.7	Did you have access to someone from health care when you first arrived here?	77%	69%		64%	73%
3.9	Did you feel safe on your first night here?	50%	72%		71%	66%
3.10	Have you been on an induction course?	91%	90%		92%	89%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	33%	27%		33%	26%

## 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 under the age of 21	Prisoners aged 21 and over
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	23%	51%	59%	43%
4.4	Are you normally able to have a shower every day?	15%	26%	31%	22%
4.4	Is your cell call bell normally answered within five minutes?	9%	9%	8%	9%
4.5	Is the food in this prison good/very good?	58%	58%	58%	57%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	41%	38%	39%	38%
4.7	Are you able to speak to a Listener at any time, if you want to?	41%	33%	18%	37%
4.8	Do you feel your religious beliefs are respected?	48%	53%	54%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	74%	64%	63%	66%
5.1	Is it easy to make an application?	71%	68%	82%	65%
5.3	Is it easy to make a complaint?	52%	58%	61%	57%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	15%	28%	21%	28%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	54%	36%	39%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	39%	23%	23%	26%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	52%	58%	49%	60%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	58%	53%	48%	54%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	3%	11%	13%	9%
7.4	Do you have a personal officer?	63%	48%	55%	48%
8.1	Have you ever felt unsafe here?	74%	37%	21%	49%
8.2	Do you feel unsafe now?	42%	19%	13%	24%
8.3	Have you been victimised by other prisoners?	63%	23%	19%	32%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	41%	9%	8%	16%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	11%	4%	2%	6%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	3%	0%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	15%	3%	6%	4%
8.5	Have you been victimised because of your age? (By prisoners)	11%	3%	8%	3%
8.5	Have you been victimised because you have a disability? (By prisoners)	15%	0%	2%	2%

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners under the age of 21	Prisoners aged 21 and over
	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?	61%	40%	37%	44%
8.7	Have you ever felt threatened or intimidated by staff here?	31%	15%	6%	20%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	8%	5%	0%	6%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	12%	5%	6%	6%
8.7	Have you been victimised because of your nationality? (By staff)	12%	4%	2%	6%
8.7	Have you been victimised because of your age? (By staff)	8%	4%	11%	3%
8.7	Have you been victimised because you have a disability? (By staff)	24%	1%	2%	4%
9.1	Is it easy/very easy to see the doctor?	24%	26%	32%	23%
9.1	Is it easy/ very easy to see the nurse?	61%	51%	63%	49%
9.4	Are you currently taking medication?	58%	23%	24%	30%
9.6	Do you feel you have any emotional well being/mental health issues?	69%	22%	29%	29%
10.3	Is it easy/very easy to get illegal drugs in this prison?	46%	30%	24%	34%
11.2	Are you currently working in the prison?	35%	37%	19%	42%
11.2	Are you currently undertaking vocational or skills training?	9%	16%	17%	15%
11.2	Are you currently in education (including basic skills)?	27%	35%	35%	32%
11.2	Are you currently taking part in an offending behaviour programme?	9%	8%	6%	9%
11.4	Do you go to the library at least once a week?	31%	43%	45%	39%
11.6	Do you go to the gym three or more times a week?	24%	36%	21%	37%
11.7	Do you go outside for exercise three or more times a week?	71%	58%	71%	59%
11.8	On average, do you go on association more than five times each week?	4%	5%	8%	4%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	4%	5%	6%	6%
12.2	Have you had any problems sending or receiving mail?	54%	55%	48%	57%
12.3	Have you had any problems getting access to the telephones?	52%	36%	37%	38%



## Prisoner survey responses HMP & YOI Isis 2016

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

### Key to tables

	Any percentage highlighted in green is significantly better	C wing	A, B, D, E, F, G and H 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		
<b>Number of completed questionnaires returned</b>		<b>24</b>	<b>158</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	13%	22%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	4%	11%
1.4	Is your sentence less than 12 months?	9%	11%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	0%
1.5	Are you a foreign national?	9%	12%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	35%	74%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	13%	3%
1.1	Are you Muslim?	21%	34%
1.11	Are you homosexual/gay or bisexual?	0%	0%
1.12	Do you consider yourself to have a disability?	33%	12%
1.13	Are you a veteran (ex-armed services)?	0%	2%
1.14	Is this your first time in prison?	37%	42%
1.15	Do you have any children under the age of 18?	37%	29%
<b>SECTION 2: Transfers and escorts</b>			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	48%	40%
2.5	Did you feel safe?	48%	72%
2.6	Were you treated well/very well by the escort staff?	44%	50%
2.7	Before you arrived here were you told that you were coming here?	52%	44%
2.8	When you first arrived here did your property arrive at the same time as you?	83%	78%

**Key to tables**

	Any percentage highlighted in green is significantly better	C wing	A, B, D, E, F, G and H 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		
<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	41%	40%
3.2	When you were searched in reception, was this carried out in a respectful way?	52%	74%
3.3	Were you treated well/very well in reception?	50%	49%
	When you first arrived:		
3.4	Did you have any problems?	78%	61%
3.4	Did you have any problems with loss of property?	23%	22%
3.4	Did you have any housing problems?	14%	12%
3.4	Did you have any problems contacting employers?	4%	3%
3.4	Did you have any problems contacting family?	18%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	1%
3.4	Did you have any money worries?	14%	15%
3.4	Did you have any problems with feeling depressed or suicidal?	28%	12%
3.4	Did you have any physical health problems?	14%	7%
3.4	Did you have any mental health problems?	28%	12%
3.4	Did you have any problems with needing protection from other prisoners?	36%	10%
3.4	Did you have problems accessing phone numbers?	14%	24%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	83%	72%
3.6	A shower?	9%	17%
3.6	A free telephone call?	61%	39%
3.6	Something to eat?	48%	64%
3.6	PIN phone credit?	56%	48%
3.6	Toiletries/ basic items?	65%	61%

### Key to tables

	Any percentage highlighted in green is significantly better	C wing	A, B, D, E, F, G and H 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		
<b>SECTION 3: Reception, first night and induction continued</b>			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	59%	57%
3.7	Someone from health services?	68%	72%
3.7	A Listener/Samaritans?	28%	15%
3.7	Prison shop/ canteen?	18%	18%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	41%	32%
3.8	Support was available for people feeling depressed or suicidal?	32%	25%
3.8	How to make routine requests?	32%	34%
3.8	Your entitlement to visits?	23%	29%
3.8	Health services?	32%	43%
3.8	The chaplaincy?	32%	46%
3.9	Did you feel safe on your first night here?	54%	69%
3.10	Have you been on an induction course?	85%	91%
3.12	Did you receive an education (skills for life) assessment?	83%	85%
<b>SECTION 4: Legal rights and respectful custody</b>			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	13%	30%
4.1	Attend legal visits?	14%	34%
4.1	Get bail information?	0%	8%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	52%	45%
4.3	Can you get legal books in the library?	31%	27%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	46%	47%
4.4	Are you normally able to have a shower every day?	13%	26%
4.4	Do you normally receive clean sheets every week?	28%	35%
4.4	Do you normally get cell cleaning materials every week?	13%	20%
4.4	Is your cell call bell normally answered within five minutes?	10%	9%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	41%	60%
4.4	Can you normally get your stored property, if you need to?	14%	18%
4.5	Is the food in this prison good/very good?	39%	60%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	39%	37%
4.7	Are you able to speak to a Listener at any time, if you want to?	30%	34%
4.8	Are your religious beliefs are respected?	30%	55%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	75%	64%
4.10	Is it easy/very easy to attend religious services?	33%	65%

**Key to tables**

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	Percentages which are not highlighted show there is no significant difference		
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	71%	68%
5.3	Is it easy to make a complaint?	46%	60%
5.5	Have you ever been prevented from making a complaint when you wanted to?	33%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	31%	26%
<b>SECTION 6: Incentive and earned privileges scheme</b>			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	21%	26%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	48%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	27%	24%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	65%	57%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	67%	51%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	17%	11%
7.4	Do staff normally speak to you most of the time/all of the time during association?	4%	11%
7.5	Do you have a personal officer?	52%	49%

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<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	67%	39%
8.2	Do you feel unsafe now?	30%	21%
8.4	Have you been victimised by other prisoners here?	52%	26%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	27%	10%
8.5	Hit, kicked or assaulted you?	9%	12%
8.5	Sexually abused you?	0%	2%
8.5	Threatened or intimidated you?	35%	10%
8.5	Taken your canteen/property?	21%	10%
8.5	Victimised you because of medication?	0%	1%
8.5	Victimised you because of debt?	4%	5%
8.5	Victimised you because of drugs?	4%	5%
8.5	Victimised you because of your race or ethnic origin?	9%	5%
8.5	Victimised you because of your religion/religious beliefs?	4%	3%
8.5	Victimised you because of your nationality?	9%	4%
8.5	Victimised you because you were from a different part of the country?	13%	3%
8.5	Victimised you because you are from a traveller community?	4%	1%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	9%	3%
8.5	Victimised you because you have a disability?	0%	2%
8.5	Victimised you because you were new here?	21%	8%
8.5	Victimised you because of your offence/crime?	0%	3%
8.5	Victimised you because of gang related issues?	21%	9%

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<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	39%	42%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	17%	19%
8.7	Hit, kicked or assaulted you?	13%	12%
8.7	Sexually abused you?	0%	2%
8.7	Threatened or intimidated you?	21%	16%
8.7	Victimised you because of medication?	0%	4%
8.7	Victimised you because of debt?	4%	0%
8.7	Victimised you because of drugs?	0%	2%
8.7	Victimised you because of your race or ethnic origin?	9%	5%
8.7	Victimised you because of your religion/religious beliefs?	4%	5%
8.7	Victimised you because of your nationality?	4%	5%
8.7	Victimised you because you were from a different part of the country?	0%	3%
8.7	Victimised you because you are from a traveller community?	4%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	0%	5%
8.7	Victimised you because you have a disability?	4%	3%
8.7	Victimised you because you were new here?	17%	12%
8.7	Victimised you because of your offence/crime?	0%	3%
8.7	Victimised you because of gang related issues?	0%	3%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	17%	27%
9.1	Is it easy/very easy to see the nurse?	54%	51%
9.1	Is it easy/very easy to see the dentist?	9%	14%
9.4	Are you currently taking medication?	35%	26%
9.6	Do you have any emotional well being or mental health problems?	48%	25%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	35%	17%
10.2	Did you have a problem with alcohol when you came into this prison?	13%	10%
10.3	Is it easy/very easy to get illegal drugs in this prison?	52%	28%
10.4	Is it easy/very easy to get alcohol in this prison?	13%	8%
10.5	Have you developed a problem with drugs since you have been in this prison?	13%	10%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	9%	4%

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<b>SECTION 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	17%	13%
11.1	Vocational or skills training?	4%	35%
11.1	Education (including basic skills)?	23%	59%
11.1	Offending Behaviour Programmes?	4%	21%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	59%	34%
11.2	Vocational or skills training?	0%	18%
11.2	Education (including basic skills)?	14%	37%
11.2	Offending Behaviour Programmes?	10%	8%
11.4	Do you go to the library at least once a week?	32%	43%
11.5	Does the library have a wide enough range of materials to meet your needs?	27%	31%
11.6	Do you go to the gym three or more times a week?	21%	36%
11.7	Do you go outside for exercise three or more times a week?	58%	61%
11.8	Do you go on association more than five times each week?	0%	6%
11.9	Do you spend ten or more hours out of your cell on a weekday?	4%	7%
<b>SECTION 12: Friends and family</b>			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	39%	20%
12.2	Have you had any problems with sending or receiving mail?	59%	54%
12.3	Have you had any problems getting access to the telephones?	46%	36%
12.4	Is it easy/ very easy for your friends and family to get here?	30%	35%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	91%	78%
13.10	Do you have a needs based custody plan?	10%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	13%