

Report on an unannounced inspection of

HMP Buckley Hall

by HM Chief Inspector of Prisons

6 – 17 June 2016

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Glossary of terms

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

Introduction

HMP Buckley Hall near Rochdale is a category C training prison for adult male prisoners serving sentences of four years or more, and as such has no designated resettlement function. Prisoners at Buckley Hall are normally held for extended periods, with most staying for over two years and just under half in excess of four years. Prisoners are normally expected to progress eventually to open conditions or to be resettled from establishments closer to their home areas. This inspection took place four years after our previous inspection in 2012 and, despite some deterioration, as before we found a prison that continues to ensure reasonably good or better outcomes in most of the areas we inspect.

Prisoners had good access to time out of cell and the majority were involved in full-time work or learning. Senior managers were providing effective leadership and ensuring the development of learning and skills provision with good partnership working. Our colleagues from Ofsted judged the overall effectiveness of learning and skills work to be good. The range and quality of education and vocational training were good, although some workshops needed to be busier. Teaching and learning were effective and learner achievement on most courses was high. Attendance at activities and behaviour management in activities were also generally good.

We found resettlement services to be reasonably good. The resettlement strategy was based on a current analysis of need, with offender management work well-integrated and focused on linking prisoners to activity and work. Offender supervision was intended to be at the heart of the prisoner experience and work was in place to mitigate the frustrations of too many prisoners arriving at Buckley Hall without an up-to-date offender assessment system (OASys) assessment of risk. The quality of offender management and supervision we inspected was reasonably good, although too many sentence plans and risk management plans did need improvement. Public protection work was well-managed. Few prisoners were released directly from Buckley Hall so resettlement services were limited, although peer support was available for those who needed some intervention.

Buckley Hall was a generally safe prison. Prisoners were positive about their reception into the prison, despite some unwelcoming first night accommodation, and levels of violence were low. Arrangements to support those at risk of self-harm were adequate but, despite this, levels of self-harm had increased since we last inspected. Procedural security was satisfactory but there was clear evidence to suggest illicit drug use was too high. Some successful work had been undertaken to try to reduce drug supply, but nearly two-thirds of prisoners told us it was easy to get drugs. Use of force had also increased significantly and we recommended a reduction in use of force as well as better scrutiny and accountability regarding its use.

Buckley Hall had experienced some clear deterioration in the area of respect. The prison was settled and the environment was reasonable, but some of the accommodation required refurbishment. Staff-prisoner relationships were usually respectful but not universally so, and we highlighted in our report a small but significant number of staff who were disengaged and undermining the otherwise positive ethos in the prison. The promotion of equality needed more energy and direction and prisoners had, with some justification, limited confidence in the way their general complaints were addressed. Overall, health care provision met need but the health care facility itself required modernisation. Of immediate concern were the potentially unsafe practices in the prescribing and administration of methadone. This issue was the subject of one of our main recommendations as well as requirement notices from our partners during this inspection, the CQC.

This was a good and generally encouraging report. Buckley Hall was a settled institution which was clear about its role and purpose. Prisoners were mostly positive about their experiences and outcomes were good, notably in the prison's core function of providing work, learning and skills. We have highlighted a number of issues that require attention, one of them urgently, but overall these

are matters that can be addressed quickly and suggest Buckley Hall has the potential to be a high-performing establishment.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

September 2016

Fact page

Task of the establishment

Category C adult male training prison holding prisoners sentenced to four years and over.

Prison status

Public

Region

North West

Number held

450

Certified normal accommodation

409

Operational capacity

455

Date of last full inspection

16-20 April 2012

Brief history

Buckley Hall had been the first privately managed category C establishment holding medium-security prisoners. After tendering in June 2000, it reverted to Prison Service control. In April 2002 it re-roled to a closed female training prison, but re-roled back to a male category C prison in September 2005 and is currently run under contract to the Prison Service until 30 October 2018. Under the 'Transforming rehabilitation' model, Buckley Hall was designated as an adult male category C training prison in 2015, holding men serving four years and over.

Short description of residential units

Four residential units.

Name of governor/director

Peter Rawsthorne (acting governor)

Escort contractor

GEOAmey

Health service provider

Manchester Mental Health and Social Care Trust

Learning and skills provider

Novus

Independent Monitoring Board chair

Kevin McKeogh

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 IV respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

- S1 *Reception and induction procedures were generally good but undermined by some failings in the treatment of new arrivals. A significant majority of prisoners felt safe at Buckley Hall, and violence had not risen in the way it had at similar establishments. The incidence of self-harm had risen significantly since the last inspection and was high. The care for prisoners at risk of suicide or self-harm was mostly good. Security was managed well although too many prisoners still had access to illegal drugs. The number of adjudications remained high and there was minimal regime for segregated prisoners. The use of force had increased significantly and lacked sufficient scrutiny. Prisoners were very positive about substance misuse services. **Outcomes for prisoners were reasonably good against this healthy prison test.***
- S2 *At the last inspection in 2012 we found that outcomes for prisoners in Buckley Hall were reasonably good against this healthy prison test. We made 22 recommendations in the area of safety. At this follow-up inspection we found that 12 of the recommendations had been achieved, five had been partially achieved and five had not been achieved.*
- S3 The journey to the prison was short for most prisoners and they were positive about their experience. The reception area was spacious and clean, and procedures were efficient. Reception staff were welcoming, and two prisoner orderlies provided good support and useful information to new arrivals. The first night officer conducted a private interview that focused on safety. In our survey, an impressive 91% of prisoners said they felt safe on their first night, although we were concerned about the mix of prisoners on the induction wing. First night accommodation was stark and in poor condition, and we found some new arrivals without a pillow or a television. A local policy deprived new arrivals of much of their property in their first two weeks, which was illogical and harsh. Induction, provided by prisoner representatives and an officer, was comprehensive and informative.
- S4 In our survey, only 8% of prisoners said that they felt unsafe at the time of our inspection, against the comparator of 15%. Levels of serious violence remained low, which was notable given the recent rises at similar prisons. The prison had established a number of systems and practices for identifying violence. It used a range of data and intelligence to identify trends and hotspots, which were discussed at an impressive weekly multidisciplinary meeting. Perpetrators of violence were challenged appropriately, but the associated tackling anti-social attitudes documentation which was used to manage violent prisoners did not always reflect the efforts made.
- S5 Levels of self-harm and the number of assessment, care in custody and teamwork (ACCT) case management documents opened for prisoners at risk of suicide or self-harm were similar to other training prisons but had increased significantly since the last inspection. A quarterly safer custody meeting analysed a range of relevant data well. Care for prisoners most at risk was managed effectively through the weekly safer regimes meeting and multidisciplinary planning meetings for individuals. The quality of ACCT documentation was mostly good, and recorded comprehensive assessments and positive interaction. Too many prisoners on open ACCTs were segregated, and we were not assured these decisions were always justified. Investigation of acts of serious self-harm was inadequate. In our survey, prisoners were negative about their access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), and the Listeners themselves told us that they had few callouts, despite a high volume of calls to the Samaritans. Since the

last inspection a policy for safeguarding adults had been developed and the prison was represented at the local safeguarding adults board.

- S6 Security intelligence was well managed and risk management was effective. Security-led meetings were given a high priority and attendance was very good. Procedural security was proportionate. Despite some successful initiatives, the availability of drugs remained a problem, and there was a lack of a coordinated, prison-wide approach to supply reduction. Random mandatory drug testing positive rates were relatively high.
- S7 Prisoners were more negative than the comparators, and than at the last inspection, about their treatment under the incentives and earned privileges (IEP) scheme. Many prisoners aspired to become peer supporters and the prison's commitment to training in this area encouraged better behaviour.
- S8 The administration of adjudications was fair and courteous, but the number remained high and the documentation did not always show a full exploration of the issues. Use of force had increased since the previous inspection and was high. Written records indicated that its use was proportionate and staff regularly de-escalated difficult situations. However, this was not always the case with video footage, which often failed to focus on the incident and was not sufficiently scrutinised by senior managers at the prison. We viewed one concerning incident where the officer in charge of the restraint appeared to goad the prisoner and did not take the opportunities offered to de-escalate. The segregation unit was reasonably clean but cells were basic and showed signs of vandalism. The regime was limited but prisoners could shower and exercise outside daily. Strategic management of the unit was good and, although throughput was high, the length of stay was being reduced. Targets set at individual good order reviews were often perfunctory and of little value but there was evidence of good care and reintegration planning.
- S9 As indicated in our survey, outcomes for prisoners with substance misuse problems were good, although there had been some lapses in drug administration (see paragraph S16). The number of prisoners on clinical treatment was relatively high but we were satisfied that the prison was taking appropriate steps to reduce this. There was a range of psychosocial interventions, but the number of general prisoners located on the recovery unit who were not seeking help from the drug and alcohol service impacted on efforts to create a therapeutic recovery environment.

Respect

*S10 Outside communal areas were clean and well maintained. Residential areas were more neglected. Most cells were reasonable but the toilets remained completely unscreened. Relationships between staff and prisoners were mostly good, as were personal officer casework entries. However, there was a core of disrespectful staff whose behaviour had a disproportionately negative impact on prisoners' perceptions of their treatment. The use of peer mentoring was excellent. Equality and diversity work lacked strategic direction, and our survey revealed worse perceptions in most protected characteristic groups. The chaplaincy provided good faith and pastoral support. There was a lack of confidence in the complaints system, which was weak. Health care provision was generally good but there were potentially unsafe practices in the prescribing and administration of methadone. The food was good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S11 At the last inspection in 2012 we found that outcomes for prisoners in Buckley Hall were reasonably good against this healthy prison test. We made 23 recommendations in the area of respect. At this follow-up inspection we found that nine of the recommendations had been achieved, three had been partially achieved and 11 had not been achieved.

S12 The grounds and outside communal areas were clean and well maintained. A, B and C wings were old and tired looking, and some internal communal areas were dirty. Most cells were reasonably clean, adequately furnished and free from graffiti, but some were dirty and needed redecoration. Basic repairs to cells and important wing equipment were not carried out promptly. It was unacceptable that the in-cell toilets were not screened and that single cells were still used to accommodate two prisoners in cramped conditions. Conditions in D wing were very good.

S13 The day-to-day relationships we observed between staff and prisoners were usually respectful, and we saw many examples where staff engaged positively with prisoners. However, there was evidence that a small number of disengaged staff were undermining the generally positive ethos of the prison. The personal officer scheme had improved and many officers were involved in supporting prisoners through formal sentence planning. Written entries in prisoner records were often detailed and better than we usually see. Despite this, only half the prisoners we surveyed said that their personal officer was helpful.

S14 The prison's strategic approach to understanding diversity and ensuring equality was weak. Equality monitoring data were analysed each quarter and areas that were out of range discussed at the bimonthly equality meeting. Local monitoring had been used to identify potential areas of concern. Few discrimination complaints were submitted and the related documentation was not always complete; in some cases, investigations were not sufficiently rigorous. The use of prisoner diversity representatives was excellent and they were positive about their role, and the support they received from the small but committed equality team. In our survey, there were worse perceptions among prisoners from most of the protected characteristic groups. Despite some effort by the equality team, there were few opportunities for prisoners from minority groups to raise issues or discuss ideas, either in forums or through other means. Work with foreign national prisoners was limited. Faith provision was good. The chaplaincy was active around the prison and offered a range of services, classes and support to prisoners.

S15 The replies to too many prisoner complaints were cursory and did not evidence sufficient investigation; some were dismissive. We were not assured that complaints about staff were always taken seriously or fully investigated.

- S16 Governance of health care was as standard. However, there had been recent, significant lapses in governance of substance misuse services, and alleged poor practices in the prescribing and administration of methadone, which were potentially unsafe (see also Appendix III). The health centre required modernisation. Primary care services were appropriate to meet patient need, and dental services had improved since our last inspection. Provision for the social care of relevant prisoners was good. Pharmacy services were safe but required the supervision of a pharmacist and improved systems. The supervision of medicine queues in the health centre and on A wing was inadequate. Mental health services generally met the needs of patients, but there were not enough therapeutic options.
- S17 Prisoners were very positive about the quality of food and we found that it was varied and nutritious. Plans to introduce some self-catering had been unsuccessful with little justification. Muslim prisoners were fasting for Ramadan at the time of the inspection. Although they were well catered for by the kitchen, there were concerns about cross-contamination from inappropriate use of utensils on some serveries. Prisoners could buy a range of items from catalogues but orders were subject to an administration fee of 50p each.

Purposeful activity

- S18 *Time out of cell remained a real strength, facilitating prisoner work and domestic activities, and was much better than at similar prisons. The leadership and management of learning and skills were good and the prison had adapted the curriculum to meet the needs of longer term prisoners. A range of quality vocational training, education and work was available to all prisoners. Peer mentors were used well to support learning. Teaching and learning were good, and the positive and respectful learning environment encouraged good behaviour and achievements. However, the quality of individual learning plans was not consistently good and outcomes on a few courses, particularly mathematics, needed to improve. The library was good but prisoner access was very poor. PE was mostly good although there were currently limited opportunities for team sports. **Outcomes for prisoners were good against this healthy prison test.***
- S19 *At the last inspection in 2012 we found that outcomes for prisoners in Buckley Hall were good against this healthy prison test. We made eight recommendations in the area of purposeful activity. At this follow-up inspection we found that four of the recommendations had been achieved, three had been partially achieved and one had not been achieved.*

- S20 Time spent out of cell was good for most prisoners. During our roll checks we found around 10% of prisoners locked up, which was much lower than we usually find. The core day included evening association four nights a week, and the opportunity for outside exercise during the longer summer days. Survey results for access to association and outside exercise were better than the comparators and the 2012 inspection.
- S21 Senior managers and the prison education provider had changed the curriculum to better meet the needs of longer term prisoners. The prison self-assessment was comprehensive and provided a clear view of the strengths and weaknesses. The resulting action plan was effectively reviewed at quality improvement group meetings. Improvements in the allocation of prisoners to activities were working well and ensured that they were directed to the correct activity. Links between the prison and the education provider were good. Prisoner attendance at activities was generally good, but there was little follow-up of non-attendance.
- S22 The prison had sufficient places to engage prisoners in purposeful activities throughout the week, and most prisoners were engaged in activities. The variety and amount of vocational

training and education were good. The quality of prison work was mainly good, but in a minority of workshops not all prisoners were fully engaged in work.

- S23 Teaching and learning overall were effective. Coaching in vocational training was good and peer mentors were used particularly well to support learning. Support for prisoners with additional learning needs was effective. Behaviour management was very good and helped create a positive learning environment, with mutual respect between prisoners and tutors. However, individual learning plans and feedback to learners were not consistently good. Achievement on most courses was high but a minority of underperforming courses, such as mathematics, needed to improve.
- S24 Access to the library for prisoners was very poor and most prisoners could not get there at all. The library was well organised and planned, and the stock was appropriate. Distance learning students made good use of it.
- S25 The PE department generally provided good indoor facilities. However, there were no outdoor facilities and use of the sports hall was currently restricted, which meant that team sports were not taking place. Access to the gym was generally good. Induction was appropriate and provided good emphasis on health and safety and healthy living. Recreational and remedial PE were good with effective links with health care. Achievement of PE qualifications was good, although there had been no needs analysis to ensure that programmes fully met the needs of prisoners.

Resettlement

- S26 *The strategy to manage resettlement was appropriate, and links between the offender management unit (OMU) and other departments were good. Prisoners were very positive about the support from offender supervisors, and a committed team of staff provided a generally good service to prisoners. All prisoners were allocated an offender supervisor and contact was regular in most cases. Many prisoners continued to arrive without an OASys (offender assessment system) assessment. Assessments of reoffending and risk of harm were mostly good but the quality of sentence plans and risk management plans was too variable. Public protection and categorisation processes were sound. Indeterminate sentence prisoners were well managed. Few prisoners were released directly from Buckley Hall but there were appropriate arrangements for those who were. Children and families work was particularly good, and the weekly parental contact visits were an excellent initiative.*
Outcomes for prisoners were reasonably good against this healthy prison test.
- S27 *At the last inspection in 2012 we found that outcomes for prisoners in Buckley Hall reasonably good against this healthy prison test. We made nine recommendations in the area of resettlement. At this follow-up inspection we found that two of the recommendations had been achieved, five had not been achieved and two were no longer relevant.*

- S28 The function of the prison had changed and Buckley Hall was now a non-resettlement prison, which only held prisoners serving longer sentences. The prisoners there had typically completed offending behaviour work at previous establishments, and so the focus on activity and work was appropriate. Communication between the OMU and other departments had improved, and formal links between the OMU, interventions, work, safer custody and resettlement departments were good. While supervision of caseworkers required improvement, the monthly OMU meetings were a positive opportunity to develop offender supervisors. It was disappointing that the use of release on temporary licence had reduced significantly since the previous inspection and was now rare.

- S29 In our survey, prisoners were positive about having an offender supervisor, sentence plan and support to achieve their targets, and our findings supported this view. The OMU comprised equal numbers of probation and uniform offender supervisors, and the two groups worked well together in a positive atmosphere. All prisoners were allocated an offender supervisor, and there were good systems to offset the continued problem of prisoners arriving without an up-to-date OASys assessment. The sequencing board was a good initiative and ensured that prisoners were swiftly allocated to appropriate activities or programmes. Sentence plans were variable and only half the cases we saw were sufficiently well focused, and only half the risk management plans were of an acceptable standard. In most cases, contact between offender supervisors and prisoners was good and in keeping with Buckley Hall's purpose. There was evidence of structured one-to-one work in some cases.
- S30 Public protection arrangements remained well managed and appropriate. Recategorisation reviews were timely and the decisions we reviewed were appropriate. The number of indeterminate sentence prisoners had doubled since the previous inspection, and this group was appropriately managed by probation staff. The introduction of mock parole boards was a creative and positive initiative.
- S31 The majority of prisoners were transferred appropriately to resettlement prisons before release. However, we had concerns about the lack of provision for those who arrived without a completed basic custody screen.
- S32 A prisoner peer worker provided some excellent support to prisoners on accommodation and finance, benefit and debt needs, although we had concerns about the sustainability of this service. Careers advice and action planning with prisoners was good and focused on training and education while in prison, and they had opportunities to produce a CV and develop job search skills.
- S33 Prisoners had far better access to visits than at other category C prisons. The visitors' centre was welcoming and offered support for first-time visitors every day of the week. The visits hall provided a reasonable environment with a good play area. Provision of family days was good, and the weekly parental contact visits were an excellent initiative.
- S34 Provision for offending behaviour programmes was appropriate and waiting lists were well managed.

Main concerns and recommendations

- S35 Concern: The use of force had increased, and the lack of scrutiny of video footage could not provide assurance that force was always necessary.

Recommendation: The prison should take action to reduce the use of force and improve quality assurance arrangements, particularly in relation to the video records of planned interventions, which should be overseen by a senior manager.

- S36 Concern: A small but significant core of staff were disinterested and expressed low regard for prisoners. This group had a disproportionate impact on prisoner perceptions and was undermining the generally positive and respectful culture of the prison.

Recommendation: Managers should ensure that all staff behave in a professional and decent manner, and robustly challenge those who fail to do so.

S37 Concern: The management of diversity work was weak. In our survey, most prisoners with protected characteristics were far less positive than other prisoners across a range of important areas. There was insufficient informed strategic consideration of protected characteristics and how the needs of prisoners from each group would be addressed. Consultation arrangements were irregular and insufficient.

Recommendation: Provision and outcomes for prisoners with protected characteristics should be improved, and be informed by regular consultation with minority groups.

S38 Concern: There had been recent significant lapses in governance by Lifeline substance misuse services as potentially unsafe practices had not been promptly reported to the regulator or to the prison, in breach of the duty of candour placed upon health care personnel. The management of these incidents was inadequate.

Recommendation: The substance misuse service provider (Lifeline) should demonstrate that its personnel are aware of their obligation to operate the 'duty of candour' in all instances, and should agree its clinical governance practices with the local delivery board.

S39 Concern: Prisoners did not have access to an on-site pharmacist, and pharmacy processes and practices were not consistent with those in the community.

Recommendation: Prisoners should have regular access to an on-site pharmacist, who should provide pharmacy-led clinics, patient counselling and medicine use reviews, contribute to in-possession medication risk assessments, and ensure professional standards of stock management, auditing and dispensing.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 Most prisoners had short journeys to the prison. In our survey, only 34% said that they had journeys of more than two hours. More prisoners than at the previous inspection were offered something to eat or drink on longer journeys. More than the comparator said that they felt safe during the journey and that they were treated well by escort staff. The escort vans we looked at were reasonably clean and carried essential safety equipment.
- I.2 As at the last inspection, reception was closed at lunchtime, which meant that some new arrivals could wait outside on escort vans for up to an hour until it was opened.
- I.3 There were a high number of complaints about property (see also paragraph I.12), and reception and escort staff told us that sometimes they could not bring all the prisoners' property with them. In our survey, 23% of prisoners, significantly more than the comparator, said they had problems with loss of property when they arrived.
- I.4 The prisoner escort documents we looked at were fully completed, including all risk issues.

Recommendations

- I.5 **Reception should be open over the lunch period to accept and process prisoners expeditiously.** (Repeated recommendation I.5)
- I.6 **Prisoners' property should arrive with them at the prison.**

Early days in custody

Expected outcomes:

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

- I.7 The reception area was spacious and clean with reasonably comfortable holding rooms. However, there were large amounts of prisoner property awaiting processing in bags and parcels around the reception office and interview rooms.
- I.8 In our survey, 79% of prisoners said they were treated well in reception and 91% that they were searched in a respectful way. The processes we observed were carried out efficiently, and staff were friendly and welcoming to new arrivals. New arrivals had good support from prisoner orderlies who were induction mentors and Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners). They introduced themselves, provided initial information about the prison and offered a hot drink. All new arrivals were allowed a free telephone call and offered reception packs of tobacco or shop items.

- I.9** Reception staff emphasised prisoner safety. They completed new cell sharing risk assessments to ensure they were accurate and up to date. Health care and first night interviews were carried out in private and explored issues of vulnerability. We observed the first night officer in reception identifying safety and vulnerability concerns about one new arrival and managing this well.
- I.10** All new arrivals went to the induction wing. First night arrangements on the wing were mixed. Prisoners who had arrived the previous week told us that their cells had been cleaned and they were given everything they needed. However, prisoners who arrived during our inspection were accommodated in stark and poorly equipped cells, and some had no pillow or television.
- I.11** Not all prisoners on the induction wing were new arrivals. The population included 20% who were returning from segregation or had been moved there from other wings, presenting potential risks to vulnerable new arrivals. For example, the new arrival with vulnerability issues identified in reception had his tobacco pack stolen from him and was given drugs, which led to him being hospitalised. However, in our survey 91% of prisoners said that they felt safe on their first night. More new arrivals than at the previous inspection, 30% against 19%, said they were offered a shower, but this was still insufficient.
- I.12** New arrivals on the induction wing were not allowed to have their music players and personal bedding until they moved to their permanent accommodation, or for two weeks if they remained longer on the induction wing. This was justified as a measure to discourage refusals to move on to other wings. This was not only unfair but also illogical, since those remaining on the wing for more than two weeks were then allowed all their property, which led to unnecessary conflict between prisoners.
- I.13** Induction orderlies provided support and advice to new arrivals on the induction wing. The formal induction process usually started the day after arrival, and there was a comprehensive presentation from prisoner advisers and staff. Written information was provided and there was a video showing the risks of using synthetic drugs. In our survey, 91% of prisoners said they had been on an induction course. Arrangements to get new arrivals into work quickly and education assessments had improved since the last inspection. Although too many remained on the induction wing for more than two weeks, they participated in assessment workshops soon after their arrival and could begin work (see paragraph 3.7).

Recommendations

- I.14** **The induction wing should not accommodate prisoners who present a potential risk to new arrivals, who should be protected from abuse and exploitation, and first night accommodation should be adequately prepared.**
- I.15** **Prisoners on the induction wing should be allowed all the property to which they are entitled.**

Bullying and violence reduction

Expected outcomes:

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

- I.16** In the 12 months before our inspection, there had been 34 violent incidents, which was an increase since our previous inspection. There had been 14 serious incidents, which was lower than in many similar prisons where there had been a sharper rise in violence. In our survey, only 8% of prisoners said that they felt unsafe, against the comparator of 15%.
- I.17** A small and active safer custody team was focused on understanding and reducing levels of violence, and they maintained effective links with all departments. The strategy was continually reviewed and developed by the safer custody meeting. The prison had held a recent violence reduction workshop that was informed by surveys of both staff and prisoners, and an appropriate and realistic action plan. Newly appointed violence reduction prisoner peers were supported in their role to make prisoners at Buckley Hall feel safe.
- I.18** The quarterly safer custody meeting was well attended and focused on the wider strategy of the prison. It was supported by an innovative weekly meeting (see paragraph I.22), which covered other key aspects of safety, including prisoners at risk and those presenting a risk to others. It reviewed all sources of data from the previous week to ensure that all incidents of violence were identified and addressed. Actions were well documented and concluded appropriately.
- I.19** Both the perpetrators of violence and those who needed support were monitored through the prison's 'tackling antisocial attitudes' (TASA) system. All incidents of violence were followed by an initial investigation and paperwork was collated in a fact-finding pack. While it was evident that perpetrators were challenged and victims supported, the TASA documentation did not always fully reflect this work. In too many of the documents we examined, staff had not set meaningful targets and the system was used mainly as an observation record, which undermined the efforts of the safer custody team to implement it effectively.

Recommendation

- I.20** **The prison's documentation for perpetrators and victims of bullying and violence should set specific, measurable and achievable targets that are regularly reviewed.**

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.21** Levels of self-harm in the previous six months were much higher than at the last inspection, and had risen from 21 to 39.

- I.22** The monthly safer custody meeting (see paragraph I.18) generally made good use of information about self-harm to identify patterns and trends to inform strategic action. The weekly safer regimes meeting (see paragraph I.18) reviewed individual incidents of self-harm to plan any immediate support required for individuals and deal with emerging issues. Where there were heightened concerns about an individual prisoner, the meeting delegated assessment and support planning to a multidisciplinary case conference, which then reported back to the meeting. This demonstrated good multidisciplinary work involving security, mental health and offender management teams. Despite all of this, the depth of investigation into incidents of serious self-harm, in which prisoners could have died, was insufficient and therefore learning points that could reduce the risk of future harm were missed.
- I.23** The number of assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm opened in the previous six months had risen from 30 to 52 when compared to the same period before the last inspection. The quality of ACCT documents was mainly good. Assessments were comprehensive, and more reviews than we usually see were chaired by the same case manager to provide consistent care. There was regular meaningful interaction with prisoners at risk. Staff we spoke to had a good understanding of ACCT procedures.
- I.24** At the time of the inspection the number of prisoners subject to ACCT procedures who were held in the segregation unit varied, and we were not always assured it was necessary. The ACCT documents we examined in the unit did not always show evidence of authorisation of segregation by a governor or the exceptional circumstances leading to segregation.
- I.25** Only 50% of prisoners in our survey said they could speak to a Listener at any time, against the comparator of 57%. Listeners told us that they were well trained and supported but they had very few call-outs, despite extensive use of the Samaritans telephone line. There was no dedicated Listener suite and prisoners were seen in their own cells. Listeners said that it was easy to hear conversations through the walls of cells on the older wings, which compromised confidentiality and could be a disincentive to prisoners in requesting a Listener.
- I.26** There had been no self-inflicted deaths since the last inspection but there had been two due to natural causes. The prison and health care provider had addressed the recommendations about health care procedures made in the reports from the Prisons and Probation Ombudsman.

Recommendations

- I.27** **The prison should fully investigate all incidents of serious self-harm to identify learning points and reduce the likelihood of further harm.**
- I.28** **Prisoners subject to assessment, care in custody and teamwork (ACCT) case management should not be located in the segregation unit unless for exceptional reasons and with authorisation of a governor, which outlines how the needs described in their assessment and care plan will be met.**
- I.29** **The prison should investigate and address the reasons for the low use of Listeners and prisoners' reports that access is poor.**

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.²

- I.30** The prison had a safeguarding adults policy and a senior manager attended the Rochdale Safeguarding Adults Board. There were good links with local social services. A notice to staff and prisoners had been issued to inform them of safeguarding procedures and the establishment's duties under the Care Act. Staff had a good understanding of how to refer prisoners at risk due to their age, health or disability to internal safeguarding procedures, which were effective.

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.31** Procedural security was generally well managed but some procedures remained disproportionate, such as random strip searching at the end of visits and before most escorts, without supporting intelligence.
- I.32** Cell searching was carried out proportionately. There were regular checks and routine searches of the prison grounds, including perimeter fences at least twice a day, and searches of communal areas and activities buildings by operational support officers.
- I.33** The modified free-flow system to allow supervised prisoner movements at the beginning and end of planned regime activities was well managed and proportionate, and prisoners had good access to prison facilities. The management and use of security intelligence were good. Supervision in important areas around the prison, such as education and workshops, was effective and the prison regime was purposeful and predictable. However, we saw staff relationships with prisoners on residential units, particularly on C wing, that were distant and we were not assured that supervision on residential units was always sufficient (see also paragraph 2.12 and main recommendation S36).
- I.34** As at the last inspection, the security department received about 250 information reports a month, which were processed and communicated to appropriate areas quickly. Security-led meetings were well attended and links with other key prison departments, particularly the offender management unit (OMU) and safer custody, were very good. A monthly tasking meeting was particularly effective and fed into most decision-making processes in the prison.
- I.35** Risk management systems were well integrated and clearly effective, and we saw no evidence that the prison was risk averse in allocating prisoners to activity places. Closed visits were applied appropriately and sparingly. There were good links with the local police, particularly in operations related to organised crime and gang-related issues. Local corruption prevention measures were well organised and effective.

² We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

- I.36** The prison had an appropriate focus on extremism and the risks of radicalisation, which was well managed. Meetings to identify and manage prisoners suspected of extremist involvement or vulnerable to their influence were held monthly. Training to help staff identify extremist behaviour indicators and how to report them had been introduced.
- I.37** Despite some successful security initiatives to reduce supply, drugs (especially Spice³) were readily available, and there was a lack of a coordinated, prison-wide approach to supply reduction. In our survey, 63% of prisoners, against the comparator of 39%, said it was easy to get drugs. The positive random mandatory drug testing (MDT) rate for the six months to May 2016 was relatively high for a category C establishment, at 8.61%, although the target had been set at 9.8%. In the same six months, there had been only two suspicion tests, but neither was positive. Attendance at the drug strategy committee meeting was poor, and the residence department and OMU were not represented; this was disappointing given that drugs were known to be a particular problem. The MDT suite was clean and appropriately equipped, but had grubby holding rooms with graffiti on walls, doors and ceilings.

Recommendation

- I.38 Senior representatives of relevant departments and service providers should regularly attend the drug strategy committee to improve communication and the coordination of services and supply reduction.** (Repeated recommendation I.84)

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.39** In our survey, only 43% of prisoners felt that they had been treated fairly under the incentives and earned privileges (IEP) scheme. Many prisoners told us they did not understand the local policy and we could not find it displayed on all wing notice boards. The prison had adopted a stringent application of the Prison Service instruction on IEP, which gave the prison the option to review prisoners' IEP status within two weeks of their arrival. This had resulted in a third of prisoners since February 2016 losing the enhanced status they had earned at their previous establishment. The prison argued that those who had been demoted did not meet the Buckley Hall criteria. Prisoners felt that the system was unfair and that two weeks was insufficient to achieve Buckley Hall's criteria.
- I.40** The criteria to become enhanced included a commitment to becoming a peer mentor. This caused further frustration with the system because some prisoners held more than one peer support role – some held numerous – which limited the opportunities for others. These frustrations were having an impact on the effectiveness of the scheme to motivate good behaviour and warranted review.
- I.41** The documentation for IEP had been sensibly integrated into the tackling antisocial attitudes system (see paragraph I.19), but the documents we examined lacked any meaningful targets for prisoners placed on basic level. However, the regime for prisoners on basic included full-time employment, and their time out of cell was better than we usually see.

³ A synthetic drug that mimics the effects of cannabis but is much stronger, with no discernable odour and cannot be detected by drug tests.

Recommendations

- I.42** The local incentives and earned privileges (IEP) policy should be available for prisoners to view and publicised in residential units. The prison should explore and address the negative perceptions about its effectiveness.
- I.43** Targets set for prisoners on the basic level of the IEP scheme should be specific, measurable, achievable and clearly documented for the individual to follow.

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.44** The number of adjudications had increased since our last inspection and 591 had been opened between December 2015 and May 2016. The number adjourned at the time of inspection was just 32. The most common charges were for disobeying a lawful order, unauthorised items in possession and damaging property. There was appropriate referral to the police and independent adjudicator for those involved in acts of violence. However, some of the lower level adjudications could have been dealt with less formally.
- I.45** 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, we found records that did not always demonstrate that the full range of issues had been explored.
- I.46** Adjudication standardisation meetings were held quarterly and supported by further quality assurance. They were attended by relevant stakeholders and informed by comprehensive data. Minutes showed completed actions and regular review of tariffs, as part of wider strategies on emerging themes.

The use of force

- I.47** The number of incidents of force in the previous six months was double what we found in 2012, with 68 incidents against 33. More than half, 36 incidents, had involved control and restraint and there were 18 uses of ratchet handcuffs.
- I.48** A quarterly use of force meeting provided governance. It monitored data and identified any patterns or trends, which were acted on accordingly. Records indicated that use of force was appropriate and that de-escalation techniques were regularly used. Prisoners who had been subject to force were interviewed and debriefed to identify any further learning to reduce the number of incidents.
- I.49** A separate quality assurance meeting should have examined video footage of planned incidents, but this had not met regularly. In the footage we reviewed, it was often difficult to review the actual incident because the camera was focused elsewhere. In one case, we were concerned about the actions of the officer in charge of a restraint team who were moving a prisoner from the CSU to a residential unit. Despite numerous opportunities to de-escalate the situation, the officer was confrontational and appeared to be goading the prisoner. This

resulted in a further full restraint which could have led to serious injury and clearly could have been avoided. We subsequently referred this case to the deputy governor for further enquiry (see main recommendation S35).

Segregation

- I.50** Throughput of the segregation unit was high with 113 prisoners segregated in the previous six months and a gradual increase in the numbers segregated between January and March 2016. However, the average length of stay was decreasing to less than two weeks; six prisoners had been located there for over 42 days, with a maximum stay of 55 days.
- I.51** The cells were basic but were reasonably clean and mostly graffiti-free. However, the in-cell toilets were unscreened and some were dirty. The insides of nearly all cell doors showed signs of significant damage, and an observation panel in one cell that had been smashed off remained missing during the inspection while a prisoner was still located there. The exercise yard remained austere and cage-like.
- I.52** The regime for segregated prisoners was limited, and the lack of in-cell activity combined with the underuse of a unit workshop room were a missed opportunity to develop the regime. However, prisoners did have daily access to showers, telephone and exercise, and could also use the library three times a week (which was better access than for most prisoners). There was limited evidence of the provision of additional activities, such as education.
- I.53** Despite some challenging individual prisoners, the relationships between the staff and prisoners we saw were professional, and prisoners spoke highly of staff. A mental health nurse was located in the unit, which was beneficial to those who needed support (see paragraph I.24).
- I.54** Governance of segregation was through the quarterly segregation monitoring and review group. This meeting was well attended and considered detailed statistical reports and responses to emerging patterns and trends. There were regular multidisciplinary reviews of prisoners in segregation ('good order' reviews), and the ones we observed were detailed and met individual needs. However, the related documentation did not always demonstrate the detail of issues discussed or set appropriate targets that were shared in writing with the prisoner.

Recommendations

- I.55** **The regime for segregated prisoners should include access to in-reach education and offending behaviour programmes, and the use of the activity area in the unit for those suitably risk assessed.**
- I.56** **Targets for prisoners on good order reviews should be more meaningful and documented for the prisoner to see.**

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.57** Integrated clinical and psychosocial services through the drug and alcohol recovery service (DARS) were delivered by Lifeline. Outcomes for prisoners with substance misuse problems were generally good. In our survey, 96% of prisoners said support for their drug or alcohol problem was helpful. There were 130 prisoners on the psychosocial caseload, with access to an appropriate range of psychosocial interventions delivered by a competent and experienced team. DARS peer supporters, 'recovery champions', assisted effectively in group delivery and worked one-to-one with prisoners on the DARS caseload.
- I.58** The drug recovery unit housed prisoners in drug and alcohol treatment. Those on opiate substitution were separated from those who were abstinent. However, the abstinent side had too many 'lodgers' – prisoners not involved in recovery, some of whom were known to be current drug users and dealers. Prisoners in recovery told us this resulted in a less than therapeutic environment.
- I.59** There were 26 prisoners receiving opiate-substitution treatment, of whom 16 were on maintenance doses. While this level of maintenance was unusually high for a category C establishment, we were satisfied that the reasons for this were sound in each case. The DARS and specialist GP worked well together to motivate prisoners into reducing doses. We observed opiate-substitution treatment being given without officer supervision, but we were told that this was due to change under new staffing arrangements. The drug service's governance of the administration of controlled drugs needed to improve following two recent incidents involving administration errors, which were still under investigation (see also paragraph 2.38, main recommendation S38 and Appendix III Requirement Notice).

Recommendation

- I.60** **The prison and drug and alcohol recovery service should reduce the number of 'lodgers' on the drug recovery unit, whose presence has a negative affect on the therapeutic environment.**

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 There were four residential units (A, B, C and D wings), each with two galleried landings holding up to 133 prisoners. Cells were designed for single occupancy but many held two prisoners. D wing was a newer design holding up to 59 prisoners. The prison grounds were well kept.
- 2.2 A, B, and C wings looked worn and tired. Although some communal areas were reasonably clean, many were dirty and had ingrained dirt on some floors and on stairwells, and there was broken flooring on landings and peeling paint on some cell doors. Many cells were clean and reasonably well furnished but some were dirty and needed decoration, and there was graffiti on the backs of cell doors. Toilets were not adequately screened and many, particularly in double cells, were not screened at all. The cells used as doubles were too small, and many were not adequately furnished for two prisoners. Conditions on D wing generally were very good with screened sanitation and showers in cells. Communal areas were clean and most cells in a very good state of repair.
- 2.3 Basic repairs to cells and important wing equipment had not been carried out quickly enough. For example, leaking pipes in a few cells had taken weeks to deal with. We also saw a cell observation panel with shards of broken glass that had not been replaced, and wing washing machines that had not been working for several days. It was concerning that half of the CCTV cameras on C wing had been out of operation for at least a week waiting repair.
- 2.4 Association equipment was in poor condition. However, wings had a fitness room, which prisoners appreciated, and there were enough tables and chairs on landings to allow them to eat meals together. Some notices on display were not up to date.
- 2.5 There were reasonable supplies of personal toiletries, and prisoners could have a shower every day. However, the supply of clean prison work clothing was sometimes a problem, and staff and prisoners told us that there was a shortage of clean sheets and towels. In our survey, only 39% of prisoners said that they could receive clean sheets every week, against the comparator of 73%.
- 2.6 There were electronic kiosks on all wings through which prisoners could access a range of services, including choosing meals, shop orders, making appointments and booking visits. Prisoners could make general applications through wing offices, where they were recorded.
- 2.7 Prisoners could send two free letters a week, and family and friends could use the 'email-a-prisoner' scheme. Prisoners had access to telephones every day, including early evenings, which was better than we often see at training prisons.

Recommendations

- 2.8 **Cells designed to hold one prisoner should not be used to hold two.** (Repeated recommendation 2.12)

- 2.9 Toilets in all cells should be adequately screened.** (Repeated recommendation 2.13)
- 2.10 All residential units, including cells and communal areas, should be clean and properly maintained, and repairs to cells and equipment should be carried out quickly.**

Staff-prisoner relationships

Expected outcomes:

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

- 2.11** We observed that most relationships between staff and prisoners were good. Many officers engaged positively with prisoners, had an appropriate interest in their welfare and an awareness of their needs and personal circumstances. Most staff responses to demanding behaviour were not over-reactive or overly punitive, and we saw occasions where officers dealt patiently with difficult situations in a calm and mature way.
- 2.12** There was also evidence of a small but significant core of staff who were disinterested and expressed low expectations of prisoners. This group had a disproportionate impact on prisoner perceptions, and was clearly undermining the generally positive and respectful culture of the prison. (See main recommendation S36.) In our survey, 71% of prisoners said that most staff treated them with respect, which was significantly less than the comparator of 80%.
- 2.13** The personal officer scheme had improved. We saw officers who were interested in supporting prisoners through their sentence planning, and there was evidence of strong links between some personal officers and offender supervisors. Personal officer entries in prisoners' files were often detailed and better than we often see. Despite this, in our survey, only just over half of prisoners (52%) said that their personal officer was helpful.
- 2.14** Prisoner consultation arrangements were reasonably good. There were regular meetings between staff and prisoner representatives, with evidence that issues raised there were dealt with.

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 characteristic⁴ 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

- 2.15** Work to improve the strategic approach to equality and diversity had been slow. There was an overarching policy that covered the protected characteristics, supported to some extent by an action plan, but much of the work was left to the small group of equality staff to carry out. This group of one custodial manager, two officers and an administrator were also responsible for safer custody in the prison, and the two officers were sometimes redeployed to work on residential units. The team was committed to its work and supported prisoners with identified needs, but equality work had been given a lower priority in the prison until recently, which had hampered progress.
- 2.16** An equality committee met bimonthly with generally reasonable attendance from key departments, but it did not include prisoner representatives. Individual staff leads for each protected characteristic did not attend the meeting, and discussion of these areas was underdeveloped. Useful analysis of equality monitoring data was completed for the meetings, although there were few patterns or trends. Local monitoring enabled the prison to look at areas that needed attention, such as the allocation of prisoners from different ethnic backgrounds to the residential wings.
- 2.17** Discrimination incident reporting forms (DIRFs) had been withdrawn from use for part of 2015 and the generic complaints system used instead. Following their reintroduction, 15 had been submitted since the start of 2016, which was lower than at similar prisons. The quality of investigation into the complaints was variable. Some were poor and others did not contain evidence of replies to prisoners at the conclusion of the investigation. There was no external scrutiny of DIRFs. Internal quality assurance was identifying short fallings, but it was too soon to assess if this had improved the handling of complaints. We could not be certain that the prison had completed equality impact assessments.
- 2.18** Prisoner diversity representatives we met were enthusiastic about their role and the support they could provide to prisoners. They now met with the equality team regularly and were able to feed in prisoner views and concerns; some of the representatives had a good knowledge of the protected characteristic group they were linked with. The representatives were the main conduit of prisoner feedback as there were no regular support groups for prisoners from minority groups. Several of these meetings had been cancelled or postponed, which may have led prisoners to doubt the prison's commitment to equality and diversity. (See main recommendation S37.)

⁴ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Recommendation

- 2.19** **Discrimination incident report forms should be investigated thoroughly, and the quality of responses checked by prison managers and an independent external organisation.**

Protected characteristics

- 2.20** The questionnaire used to identify new arrivals with protected characteristics had been revised, with input from a university, to ensure the language used was clear. The equality team received the completed questionnaires, updated prisoner electronic case records and their own database, and spoke to prisoners who needed follow up.
- 2.21** Prisoners from a black and minority ethnic background comprised one-fifth of the population and were negative in our survey in response to questions about staff. The reasons for this were not clear, but there had been no opportunity for this group to share their views for some time. A forum planned for February 2016 had been cancelled, and one planned for the inspection week was postponed the day before it was to be held. (See main recommendation S37.)
- 2.22** In our survey, 4% of the population identified themselves as Gypsy, Romany or Traveller, which equated to 18 prisoners. Prison records showed only two prisoners from this group and there was little specific support for them.
- 2.23** Ten foreign nationals were held at the prison at the start of the inspection, even though Buckley Hall did not routinely accept such prisoners. Three were subsequently transferred to a prison that had more resources to support foreign nationals. The prison's foreign national policy was being revised; some elements were not being followed. For example, although foreign nationals were eligible for a free five-minute overseas telephone call each month there was no process to ensure they were aware of this entitlement, and none had made use of this provision. Although some staff were aware of telephone interpreting services to communicate with prisoners who did not speak English, no one was sure when it had last been used. The prison stated that they would request the Home Office Immigration Service to attend the prison if foreign national prisoners required immigration advice.
- 2.24** Fifteen per cent of prisoners were Muslim and, in our survey, they were negative about their treatment across several indicators, many relating to respect (see also paragraph 2.71). We were also told about a lack of religious awareness by some staff.
- 2.25** Sixty-one prisoners had been identified as having a disability. Twenty-six required personal emergency and evacuation plans, and staff knew where to find these in unit offices. The quality of the plans was variable, with some giving little information on the nature of the disability. A few prisoners with disabilities had had a 'buddy' to support them on their unit or in work. These prisoners were checked for suitability by the equality team but there was no formal paid scheme. In our survey, prisoners with disabilities were more negative across a range of indicators.
- 2.26** Provision for older prisoners was underdeveloped. A prisoner representative had consulted older prisoners for their views, and they said they wanted to meet regularly and have more activities for their age group, but nothing had yet been implemented. Although prisoners of retirement age and those unable to work due to disability were unlocked during the core day, there was little activity for them. Retirement pay was £3.25 a week which was inadequate, given they had to pay for their televisions out of this.

- 2.27** Few prisoners had identified themselves as gay or bisexual. In our survey, 3% of prisoners had self-identified. There was little support in place for them. The prison had previously managed two transgender prisoners, and had received support from NOMS to develop a policy and ensure appropriate care plans were developed. Care of transgender prisoners was covered in the induction for new staff.

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.

- 2.28** The chaplaincy was integrated into prison life, and chaplains were visible and active around the prison. A chaplain met new arrivals within their first 24 hours, and members of the team attended reviews of case-managed prisoners at risk of suicide or self-harm and visited the segregation unit daily, as well as attending a range of prison management groups.
- 2.29** There were very good multi-faith facilities in a purpose-built centre, which was large enough to meet the needs of all religious groups. The chaplaincy provided for the needs of most faiths, and volunteers from the local community participated in chaplaincy activities. Prisoners did not have to make applications to attend group worship. As well as services, prisoners had access to a range of faith-based groups and other activities - for example, a 'living with loss' course that they could access through application. There was appropriate support for prisoners who experienced bereavement and, where possible, they could attend funerals under escort. Those who could not attend funerals were offered individual services or could request a memorial, although the memorial garden required some attention.

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.

- 2.30** There had been 695 complaints in the previous six months, compared with over 1,000 in the same period before our last inspection. Many complaints were about low-level domestic issues that should have been dealt with informally by residential officers. We were not assured that complaints about staff were always dealt with properly, and some replies from managers did not indicate a full investigation of the facts. We also saw replies that promised a full investigation of a complaint but were not followed through.
- 2.31** Quality assurance was in place and some complaints were discussed at senior management team meetings. A sample of about 20% was checked each month by a senior manager, usually the deputy governor or head of residence. Although many of the replies we sampled were reasonably good, a smaller but significant number were superficial, and did not evidence sufficient investigation. A few were particularly abrupt and dismissive.

Recommendation

- 2.32** Complaints processes should be implemented consistently, and managers should ensure that each complainant receives a response that is courteous and addresses the issues raised, and that complaints against staff are fully investigated.

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.

- 2.33** The prison had no legal services advice officer. In practice, offender supervisors directed prisoners to legal representation when requested, but legal service provision was not covered during induction. Provision for legal visits was sufficient, and designated rooms in the main visits area were private and adequately equipped. Prisoners without legal representation could use laptops to work on their case, but access to the good range of legal textbooks in the library was poor (see paragraph 3.33). In our survey, only 27% of respondents said that it was easy to get legal books, which was below the comparator of 42% and the response of 38% at our last inspection.

Recommendation

- 2.34** Prisoners should have access to legal textbooks.

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.

- 2.35** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁵ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. A number of areas have been identified that require improvement with subsequent notices issued by the CQC, which have been detailed in Appendix III of this report.

Governance arrangements

- 2.36** Health services were commissioned by NHS England and provided by Manchester Mental Health and Social Care Trust (MMHSCT). MMHSCT subcontracted some health functions,

⁵ 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>.

including clinical management of substance misuse which was provided by the Lifeline Project (see paragraph 1.57).

- 2.37** A pertinent health needs analysis was supported by a prison health development plan and a twice-yearly prison partnership board, although this met less frequently than in most other prisons. Health personnel were visible at key prison meetings, including those led by security and safer custody.
- 2.38** MMHSCT's directly provided services took conventional approaches to clinical governance, with regular meetings and informative data. We were very concerned about recent significant lapses in governance by Lifeline substance misuse services with potentially unsafe practices. These included an incident in 2015 concerning application of the 'duty of candour'⁶ (which aims to help patients receive accurate, truthful information from health providers),⁶ and errors in the administration of methadone; and an incident in 2016 with alleged poor practices in the prescribing and administration of methadone. The management of these incidents was inadequate. (See also main recommendation S38 and CQC Requirement Notice in Appendix III.)
- 2.39** In our survey, prisoners were less satisfied with the quality of care provided than in 2012 (39% against 57%), although the patients we spoke to were more positive than negative about their health care.
- 2.40** An advanced nurse practitioner was the head of service and provided effective leadership to a small team of health care professionals (HCPs) with a reasonable range of competencies. They were supported by efficient administrative staff. Not all HCPs were in date for mandatory training, and not all received regular, documented clinical supervision.
- 2.41** MMHSCT had made the best clinical use of the health centre, although the extensive use of steel plate on the walls and doors and the high reception counter meant that it did not look like a community primary health care centre, and it required modernisation. Infection control measures were audited and led to action plans, although we did not receive a completed audit of the medicines administration room on A wing, despite requests.
- 2.42** There was standardised resuscitation equipment in the health centre and in strategic locations around the prison, with documented checking. Equipment included automated external defibrillators (AEDs) and oxygen, but no suction units to clear a patient's airway – although the health care manager agreed to pursue the provision of this apparatus. Around 20% of custody staff had been trained to use the AEDs, so a trained person was always available on site.
- 2.43** Clinical records were subject to regular clinical audit, which was good. Professional clinical guidelines were used as appropriate, although care plans were not used extensively enough.
- 2.44** A prisoner patient forum used wing representatives to seek views about health services. There had been no complaints about health care since April 2016 but 34 'comments'. In our sample, some of the comments we saw would have been logged as complaints in other prisons, although they were dealt with swiftly and all had appropriate written responses.
- 2.45** Since our last inspection, the prison had introduced a health and well-being strategy with an HCP contributing to activities. Health promotion materials were displayed in each wing and

⁶ The 'duty of candour' is a legal duty on hospital, community and mental health trusts to inform and apologise to patients if there have been mistakes in their care that have led to significant harm (Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 20).

in the health centre, which was an improvement. The need to control communicable diseases was recognised with policies to facilitate action as required, and there was an active screening and vaccination programme. There was also good promotion of harm minimisation, including discrete access to barrier protection.

- 2.46** Buckley Hall participated in a multi-agency arrangement for the provision of social care in prisons. One prisoner had been assessed for social care requirements in the last year, and staff commented that the process worked well
- 2.47** The Care Quality Commission issued 'requirement to improve' notices following the inspection (see Appendix III).

Recommendations

- 2.48 All health care professionals should be up to date with mandatory training and in receipt of documented clinical supervision.**
- 2.49 The health centre environment should be modernised to resemble a community primary health care centre, and promote patient well-being.**

Delivery of care (physical health)

- 2.50** Primary care services were appropriate for the prison population and met their needs. All new arrivals received a reception health screen and HCPs had access to the patient's SystemOne (clinical IT system) record in reception, which was an improvement and enabled continuity of care. All prisoners were invited to attend a secondary health assessment, although not all did. MMHSCT had recently introduced a well man screening clinic to attract new patients.
- 2.51** Health services were provided from 7.45am to 7.45pm on weekdays with a more limited service at weekends. Access to the GPs had improved and was similar to that in the community, and there was out-of-hours cover. Prisoners could also attend nurse triage clinics each morning. Waiting times and non-attendance rates for some clinics had improved since 2015/16 (for example, non-attendance for the GP had fallen from 16% to 8% in May 2016), and were generally comparable with other prisons, but sustained effort was required to reduce them further.
- 2.52** There were nurse-led clinics, including those for long-term conditions such as asthma and diabetes, although the range could have been wider. MMHSCT was considering the introduction of telemedicine as part of its strategy to improve access to more specialist clinics. Patients in the segregation unit were visited daily by HCPs, and staff there said they felt well supported by health staff.
- 2.53** Prisoner access to planned external hospital appointments was well organised. However, these appointments were cancelled if there were a number of urgent and unplanned health emergencies requiring immediate hospital treatment on the same day. In these circumstances staff would be diverted to escort the emergency patients to hospital. This was uncommon.

Pharmacy

- 2.54** All medicine supply functions and administration in the prison were undertaken by HCPs. There was no on-site pharmacist, pharmacy-led clinics, medicine use reviews or auditing of pharmacy stock. (See main recommendation S39.)
- 2.55** Most prisoners receiving medication had these supplied in possession (92%, compared with 83% in 2012) and by name from a commercial pharmacy. However, not all cells had facilities for secure storage of medicines, which was a potential risk for diversion. Medication supplied as not in possession was administered from stock. This stock was ordered from the pharmacy but delivered by a different branch, which led to delays. SystmOne was used to record all clinical notes for patients.
- 2.56** Patient group directions (authorising appropriate HCPs to supply and administer prescription-only medicine) were in use, but limited. A simple remedy list had been developed to treat minor ailments but had not yet been introduced. A small range of over-the-counter medicines were available from the prison shop. The receipt and transfer of controlled drugs was not consistently recorded in the relevant registers in the pharmacy area.
- 2.57** The last medicine administration was 4pm on Fridays, Saturdays and Sundays, which was too early for night time medication. We saw unsupervised medication queues in the health centre and on A wing, which increased the potential for diversion of medicines. The security camera in the health centre did not have an uninterrupted view of the waiting area, which made untoward activity more likely.
- 2.58** The pharmacy area and A wing treatment rooms were clean, tidy and appropriate. The equipment used for the administration and supply of methadone was cleaned and calibrated daily, and doses double checked for accuracy. Some plastic measures were in use, which could lead to inaccuracies. Drugs alerts were dealt with appropriately. Fridge temperatures were monitored and recorded daily, although pharmacy stock was not checked routinely or documented.
- 2.59** There was a bimonthly medicine management and medicine safety meeting, a prescribing formulary, and a full range of standard operating procedures (SOPs) and policies. This included an in-possession policy, which was accessible to staff electronically. There was no documentation to show that SOPs and policies had been read by staff.

Recommendations

- 2.60** **Lockable cupboards should be provided in all cells for patients prescribed in-possession medication.**
- 2.61** **Supervision of medicine administration should be improved to restrict patient access to a single individual and reduce the potential for illicit exchange of medicines between prisoners.** (Repeated recommendation 2.83)

Dentistry

- 2.62** Pennine Care NHS Foundation Trust provided a full range of NHS-equivalent services and oral hygiene promotion. In our survey, more prisoners than in 2012 said the quality of dentistry was good (71% against 49%), and this was better than the comparator of 42%. Access to the service was very good; patient satisfaction with access to the dentist was

almost double that of the comparator (27% against 14%). Dental clinics were provided five days a week and emergency appointments were available at each session. There was also access to external emergency treatment. The average wait for routine appointments was eight days. There were only five prisoners on the waiting list and 35 waiting for recall and follow-up appointments at the time of our inspection, which was good.

- 2.63** The dental suite was modern, spacious, met current infection control standards and was appropriately equipped. Decontamination processes took place away from the dental suite. Dental equipment, including an X-ray machine, was maintained and serviced regularly.

Delivery of care (mental health)

- 2.64** MMHSCT provided integrated primary and secondary mental health services through a team of four mental health nurses. There was currently one vacancy and also no psychiatrist, which were deficits, although there were plans to address these. The service was valued highly by prisoners and well respected by custody staff.
- 2.65** There were about 200 applications a month to see mental health practitioners, with an open referral system. Therapeutic options were limited to one-to-one crisis intervention, short-term solution-based approaches and brief cognitive therapies. There was also access to counselling services, which was good. There were plans to extend the range of therapeutic options once the staffing gaps were resolved.
- 2.66** The mental health team now used SystemOne, which was an improvement since 2012. About 12 patients had serious and enduring mental illnesses, and the care programme approach was used, as necessary.
- 2.67** There had been two patient transfers to secure mental health units in the past two years; both of which took longer than the transfer guideline of 14 days.
- 2.68** About 30% of custody staff had received mental health awareness training in the last three years, which was insufficient. However, staff we spoke with knew when to refer a prisoner to mental health services.

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.

- 2.69** Prisoners were very positive about the food, and in our survey 67%, against the comparator of 30%, said that the quality of food was good. Although some men said that food portions were too small, the portions we saw were sufficient.
- 2.70** Menus were on a four-weekly cycle. Options were varied and included sufficient provision for a range of religious and dietary needs, and fresh fruit. Prisoners selected their weekly meals through the kiosks (see paragraph 2.6). Menus included pictorial displays and allergen information for each item offered. Hot meals were offered twice a day. Lunch was served at noon and dinner at 5.30pm. However, a small, cold breakfast pack was issued with dinner on the evening before consumption, which was unsatisfactory.

- 2.71** Muslim prisoners who were fasting during Ramadan (at the time of our inspection) were well catered for, with a dedicated halal chef on duty. However, there were concerns about cross-contamination due to inappropriate use of utensils on some serveries.
- 2.72** Wing serveries and food trolleys were clean and servery workers were appropriately dressed. Food distribution was supervised by staff, and we observed it carried out in a fair and orderly way. Each wing had folding tables and chairs for communal dining, which prisoners appreciated. There were no opportunities to self-cook on the wings, although toasters had been introduced recently on wing serveries for use at the weekend. Efforts to introduce microwaves were unsuccessful with little explanation or meaningful justification provided.
- 2.73** The kitchen, equipment and storage areas were clean but the fabric of the building required updating. The kitchen employed 27 prisoners who were all trained in food safety. Although the kitchen was able to provide training in national vocational qualifications levels 1 and 2, only 12 prisoners had been put through the programme in the last three years.
- 2.74** Food consultation arrangements were good. There were food comment books on each wing, prisoners were surveyed annually and monthly consultation meetings were acted upon.

Recommendations

- 2.75** **Breakfast should be served on the day it is eaten and should be of adequate quantity.**
- 2.76** **The prison should explore the opportunities for self-cook facilities for prisoners, and should install microwaves on the wings.**

Purchases

Expected outcomes:

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

- 2.77** Prisoners could order from the prison shop weekly using the wing kiosks (see paragraph 2.6). The shop list contained a range of products, and prisoners were regularly consulted about it and could propose changes. Community representatives also regularly compiled information on the top and bottom items, to ensure that the list fairly represented the needs of most prisoners. The process for delivering shop goods was appropriate, and prisoners told us that there were no particular problems.
- 2.78** Prisoners could also shop from an adequate range of catalogues once a week, but orders were subject to an administration fee of 50p per order, and we were told that there was a shortage of catalogues on the wings. Daily and weekly newspapers and magazines could be ordered from a local newsagent once a week.

Recommendation

- 2.79** **Prisoners should not have to pay an administration charge for catalogue orders.** (Repeated recommendation 2.103)

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁷

- 3.1** Most prisoners were involved in full-time activity and had reasonable time out of cell each day. The core day provided 10 hours unlocked Monday to Thursday for fully employed prisoners, and over eight hours on other days. However, the small number of unemployed prisoners could spend less than two hours out of cell each day. Evening association was available four times a week, and included some time outside during summer hours. The morning exercise period was only 30 minutes. In our survey, 82% of prisoners, against the 66% comparator, said they went on association more than five times a week, and 79%, against 52%, said they went outside for exercise three or more times a week. We did not see regime slippage during the inspection, although prisoners told us they were sometimes unlocked late. Association areas remained reasonable.
- 3.2** In our roll checks during the morning and afternoon core day, we found between 9% and 10% of the population locked in their cell. The prison was active in checking the reasons for this each day and trying to get all prisoners into activities.

Recommendation

- 3.3 All prisoners should have one hour's exercise per day.** (Repeated recommendation 3.5)

⁷ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

Learning and skills and work activities

Expected outcomes:

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

3.4 Ofsted⁸ made the following assessments about the learning and skills and work provision:

Overall effectiveness of learning and skills and work:	Good
<i>Achievements of prisoners engaged in learning and skills and work:</i>	<i>Good</i>
<i>Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:</i>	<i>Good</i>
<i>Personal development and behaviour:</i>	<i>Requires improvement</i>
<i>Leadership and management of learning and skills and work:</i>	<i>Good</i>

Management of learning and skills and work

3.5 Senior managers had managed the changes to the prison population well (see paragraph 4.1). Good partnership working with the Offender Learning and Skills Service (OLASS) provider Novus had resulted in an effective curriculum review, which better met the needs of prisoners serving longer sentences. There was a good strategic plan that focused on improving the provision.

3.6 The prison learning and skills self-assessment process was inclusive and comprehensive, and helped produce a self-assessment report that was realistic and based on a range of evidence. The strengths and areas for development identified in the self-assessment report closely matched those that we found. The resulting action plan was realistic with clear objectives, which were reviewed effectively at the quality improvement group. Learners were listened to to inform planning and curriculum development. A clear functional skills strategy had been introduced since the last inspection, which had encouraged prisoners in vocational training and prison work to improve their skills in English and mathematics.

3.7 Senior managers had made improvements to the allocation process, and as a result new arrivals were better directed to the most appropriate course to support their longer-term employment objectives. Allocation was fair and equitable, and took place soon after arrival. Improvements to the observation of teaching, learning and assessment in the OLASS provision had also resulted in better identification of key areas for tutor development, which linked to effective staff development. The education and vocational training provided by Novus were good.

⁸ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.8** Senior managers had improved the quality and variety of prison work available for prisoners. However, none of the prison work was accredited and work skills developed by prisoners were not recognised or recorded.
- 3.9** Prisoner attendance and punctuality at learning and skills activities was mainly good. However, senior managers did not use data sufficiently well to identify the reasons behind non-attendance, and so were not aware of potential persistent non-attenders.

Recommendation

- 3.10** **The work skills developed by prisoners in prison work should be recognised and recorded.**

Provision of activities

- 3.11** The prison provided 427 activity places, which was sufficient to enable prisoners to engage in full-time or part-time activities throughout the week, and most prisoners took part in activities. The variety and range of vocational training and education were particularly good. Courses were available from entry to intermediate level, with a small amount at advanced level in education.
- 3.12** The education department provided 134 full-time-equivalent places. The main education courses were English and mathematics, which were delivered in the education building but also in prison work, vocational training and the gym. Courses were also available in business, art, customer service and information technology (IT). A personal development course focused on prisoners who had diverse learning needs and were difficult to engage. There were 16 prisoners following Open University courses, with most supported by the education provider.
- 3.13** The prison had 115 places in vocational training, which included courses in carpentry, fitted interiors, groundworks, horticulture and plastering. Work was provided in a variety of prison workshops, with additional work places as orderlies and wing cleaners.
- 3.14** New arrivals received good information on the learning opportunities during their prison induction. Timely and effective initial career advice and guidance provided by The Work Company, a careers advice company, had a clear focus on both the short-term and long-term resettlement objectives of the prisoner. Pay rates did not disadvantage prisoners attending education.

Quality of provision

- 3.15** In education, most tutors challenged prisoners to progress and achieve their qualification. Tutor feedback on prisoners' work was good and, as a result, they had a clear understanding of what they needed to do to progress. English lessons were particularly engaging for prisoners where tutors used their interests to stimulate discussion - for example, using current newspapers to teach prisoners to analyse text.
- 3.16** Assessment of learning was good. Tutors ensured that through good questioning techniques, they checked learners' understanding, knowledge and skills well. In business and enterprise lessons, the tutor encouraged learners to question each other about their business ideas for their projects. Tutors used IT well to make learning enjoyable and more effective. The assessment of prisoners' starting points in English and mathematics, where appropriate, was

carried out effectively during induction, and was used well by most tutors to plan their learning.

- 3.17** The use of peer mentors to support the least-able learners was good. In mathematics, the planning of learning was not sufficiently good to meet the abilities of all learners effectively. Tutors in mathematics lessons did not ensure that all prisoners had a good understanding of fundamental concepts before introducing new topics. As a result, most prisoners made slow progress.
- 3.18** Coaching on vocational training courses was very effective and helped prisoners develop new skills quickly. Tutors provided clear demonstrations of practical skills and good explanations to learners, who consequently made good progress. In vocational training, peer mentors were used effectively to support and improve learning, and took on supervisory roles - this was particularly effective in plastering, the staff mess and the pallet workshop.
- 3.19** Tutors used their commercial experience well to help prisoners apply their learning in realistic work situations, particularly in the staff mess and horticulture. The tutor in the staff mess had a clear work plan that ensured that all learners had the opportunity to develop different work skills in a commercial kitchen. Tutors were skilled at ensuring that learners understood the links between their practical and theory work.
- 3.20** Tutors used individual learning plans effectively to set targets to help prisoners progress on professional catering courses working in the staff mess. However, targets for learners in other areas of vocational training were not sufficiently challenging, and so they were not sufficiently clear on what they needed to do to progress.
- 3.21** Tutors and instructors managed classroom and workshop behaviour well, producing a positive learning environment that fostered mutually respectful attitudes and tolerance of the views and beliefs of others.

Recommendations

- 3.22** **The planning of learning in mathematics should ensure that all learners make good progress.**
- 3.23** **Targets set for learners should ensure they have a clear understanding of what they need to do to progress.**

Personal development and behaviour

- 3.24** Learners enjoyed their learning, were engaged and motivated and had a good attitude to developing new skills. In vocational training, they were confident to talk about their work and responded to questions well. Standards of behaviour were good and learners were respectful to their tutors.
- 3.25** Tutors helped peer mentors develop good support skills, which they used effectively to support the least-able learners. In most cases, learners developed a good understanding of English and mathematics; however, in a minority of cases, they did not have a sufficient understanding of the practical application of mathematics.
- 3.26** Learners took pride in their work and, as a result of the regular awards events organised by the prison, developed their confidence and self-esteem. They developed good personal skills, such as working together and taking instructions. Prisoners working in the staff mess gained

good experience of working in a commercial environment, and tutors were skilled at helping them develop an understanding of customer service. Careers advisers helped learners understand their short- and longer-term objectives, and the opportunities available to them to improve their skills while in prison.

- 3.27** Most prisoners engaged in prison work developed good work skills. However, in a minority of prison work, some prisoners were not sufficiently engaged in completing the tasks set for them. They were reluctant to follow agreed work practices, and so failed to develop a good work ethic.

Recommendations

- 3.28** **Learners' understanding of the practical applications of mathematics should be improved.**
- 3.29** **All prisoners in workshops should be encouraged to follow agreed work practices and actively engage with the work in order to develop an appropriate work ethic.**

Education and vocational achievements

- 3.30** The majority of learners made good progress during their education and training, and success rates were high. Success rates were particularly high in English, business, customer service, art and creative media but low in level 1 mathematics and site carpentry. Most learners make the expected progress in lessons and over time. Prisoners received good support to ensure they made progress and achieved their qualification, and we found no significant differences in achievement between different learner groups. Standards of written work were mainly good.
- 3.31** In vocational training, learners developed good skills to industry standards. Work was to a particularly high standard in plastering, gardening, and catering in the staff mess and prison kitchen, where the quality of work exceeded the standards required for the qualification.

Recommendation

- 3.32** **The prison should improve success rates on underperforming courses, particularly mathematics at level 1.**

Library

- 3.33** The library was managed by Rochdale library services with one part-time librarian and a prison orderly. The library was well planned and provided a welcoming environment, with a range of resources. The stock was appropriate and included DVDs, a range of fiction, non-fiction, easy-reads, audio books, books on vocational topics and legal texts, and the relevant Prison Service orders, as well as a range of daily newspapers. Prisoners on distance learning courses had adequate access to the library.
- 3.34** However, prisoners' access to the library and its resources was very poor. The facility was open four weekday afternoons but data collected indicated that only 10-15 prisoners a day used it. Only those on education courses could access the library and there were no adequate arrangements to ensure that all prisoners could attend. There were plans to extend the opening times of the library to four evenings a week.

- 3.35** The library worked with the Shannon Trust 'turning pages' reading programme, with three prison mentors supporting five participants.

Recommendation

- 3.36** The library should be open for longer hours to ensure that all prisoners have access.

Physical education and healthy living

Expected outcomes:

All prisoners understand the importance of healthy living, and are encouraged and enabled to participate in physical education in safe and decent surroundings.

- 3.37** The physical education (PE) department generally provided good indoor facilities. However, there were no outdoor facilities and the use of the sports hall was restricted due to a damaged floor, which meant that team sports did not take place. There was a small range of cardiovascular equipment on each wing for prisoner use.
- 3.38** The induction into PE was appropriate and timely, and included training in first aid, manual handling and a health screening. Prisoners had good access to the gym and used it well. Healthy living and personal fitness were effectively promoted on induction, at the kiosk information points and notice boards on wings, and by gym mentors.
- 3.39** The department had good links with health services staff for referrals and offender management for sentence planning targets. Health promotion activities included slimming and healthy lifestyle sessions, tackling drug and alcohol addiction, exercise on prescription, and remedial physical education. There was a variety of recreational PE programmes, but there had been no needs analysis to ensure they fully met the needs of all prisoners.
- 3.40** The gym was well managed by four PE officers with a range of specialist qualifications and experience. Prisoner gym mentors held relevant PE and mentor qualifications and were used effectively to enhance the provision.
- 3.41** The PE department provided a range of accredited qualifications up to level 2, including community sports leaders, lifestyle management and gym instructors. Achievement and attendance rates for completed courses were high. There were good links with the education provider, with English and mathematics support delivered in the gym classroom.

Recommendations

- 3.42** The sports hall floor should be repaired and team games for prisoners reintroduced.
- 3.43** There should be a needs analysis to ensure that PE programmes fully meet the needs of all prisoners.

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 population of the prison and its function had changed since the previous inspection; nearly all prisoners were now serving over four years, and the proportion of indeterminate sentence prisoners had doubled and now made up a third of the population. As a non-resettlement prison, Buckley Hall had no community rehabilitation company presence, and instead nearly all prisoners coming up to release were transferred to a prison where they could access rehabilitation services.
- 4.2 The reducing reoffending strategy, which was based on an up-to-date needs analysis, was focused on the provision of activity and work appropriate for prisoners who had typically completed offending behaviour work at previous establishments.
- 4.3 The head of reducing reoffending and head of offender management worked well together, and communication between the various departments had improved. Formal and informal links between the offender management unit (OMU), interventions, work, safer custody and resettlement departments were better than we normally see, as was residential staff use of the P-NOMIS prisoner electronic case note system to support the work of OMU.
- 4.4 As at most category C training prisons, too many prisoners arrived at Buckley Hall without an up-to-date OASys (offender assessment system) assessment. This placed an unnecessary strain on the department, but we found good systems to offset this problem. The prison operated a model that aimed to put offender supervision at the centre of the process. Offender supervisors were tasked with making contact with each new arrival within 10 days. At this meeting, they discussed the prisoner's targets and sentence plan, and the prisoner was referred to the sequencing and progression board. This was a good initiative that ensured all prisoners, including those who arrived needing an assessment, had targets set for their time at Buckley Hall and were allocated to appropriate interventions or activity within 14 days of arrival.
- 4.5 The monthly OMU meeting facilitated effective communication within the department, as well as some opportunity to develop practice. This was important as formal supervision for offender supervisors remained underdeveloped.
- 4.6 There was a small group of 10 offender supervisors, of whom half were probation staff - an unusually high proportion, which enhanced the service to prisoners. Offender supervisors were supported by case administrators. This model worked well and we found a positive and committed staff group. Caseloads averaged around 50 each, which was reasonable given that many prisoners did not require a great input for lengthy periods of time.
- 4.7 Uniformed offender supervisors were redeployed to other tasks too often; in the previous three months, they had lost an average of 55% of their time. As a result, work from the uniformed group tended to be more reactive than for their probation colleagues. Nevertheless, we found examples of good quality work from this group.

- 4.8** It was disappointing that the use of release on temporary licence (ROTL) to support resettlement outcomes had ceased. This was a missed opportunity for a settled prisoner population, many of whom were working towards open conditions. (See recommendation 4.31.)

Recommendations

- 4.9 Prisoners should not be transferred to Buckley Hall without an up-to-date OASys assessment.**
- 4.10 There should be formal supervision for all offender supervisors to improve their practice.**

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.

- 4.11** We were joined on this inspection by colleagues from HM Inspectorate of Probation who looked in detail at 12 prisoner cases - 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 out of scope. Three cases were lifers, four were serving indeterminate sentences and the remaining five were on determinate sentences of between four and a half and 22 years. The cases of a further 11 prisoners were looked at, but in less detail.
- 4.12** In our survey, more prisoners than the comparators said they had a named offender manager in the community and an offender supervisor in the prison. They were also more positive about contact with their offender manager, having a sentence plan and being involved in its development, and more than the comparator reported that their offender supervisor was working with them to achieve their sentence plan. Our findings broadly supported these responses.
- 4.13** The head of OMU had good systems to monitor the processing of tasks in the department and, as a consequence, most prisoners had an in-date OASys and reviews were generally timely. However, there was currently insufficient focus on the quality of work.
- 4.14** In the cases we reviewed in detail, all but three had a sufficient and timely assessment of the likelihood of reoffending. Assessments were generally comprehensive and well evidenced. In most cases, sentence plans covered key factors associated with the likelihood of reoffending, but only half the cases contained sufficiently clear objectives and appropriate timescales. Too many plans had been imported from previous prisons and were based on interventions not available at Buckley Hall, or were very generic. Objectives in sentence plans were not suitably outcome-focused, and timescales for achievement tended to be routinely one year. Despite this, most prisoners were engaged with their sentence plan.
- 4.15** We found the great majority of risk of serious harm screenings were accurate, and most went on to carry out a full analysis. Where deficiencies were found, these usually took too narrow a view of risk, relying too much on the prisoner's view or attaching too much weight to his behaviour in prison. All the cases we reviewed had a current OASys assessment that was less than a year old. However, too many had been adopted uncritically from the

previous prison and not reviewed to reflect the sentence planning and risk management that related to Buckley Hall. This affected prisoners' ability to prove that they were making progress against the risks they posed. Only half the relevant cases had a sufficiently good current risk management plan that adequately reflected actions to be taken at Buckley Hall, as well as in the community. The better plans tended to have been written by community offender managers.

- 4.16** There was no general expectation of minimum levels of contact between offender supervisors and prisoners, but in our case sample we found that most contact was sufficient and meaningful. Although such contacts usually peaked in connection with key events, such as sentence planning and parole processes, the general entries we saw indicated a more general maintenance of the relationship. We also found evidence of offender supervisors undertaking one-to-one interventions with prisoners. This was not confined to probation staff, which was positive; however, these were often delivered without being part of an OASys-based sentence plan.
- 4.17** Most prisoners interviewed were positive about their offender supervisors. With some exceptions, offender supervisor contact was well recorded on P-NOMIS prisoner case records. We also found entries from staff outside the OMU that indicated some knowledge of the prisoners' plans, especially those from personal officers. However, management oversight of P-NOMIS entries was inconsistent.

Recommendations

- 4.18 Offender supervisors should review prisoners' sentence plans and risk management plans inherited from other prisons to ensure they are of sufficient quality and relevant to the available opportunities at Buckley Hall.**
- 4.19 Offender supervisor entries on P-NOMIS prisoner case records should be quality assured for frequency and content, and the findings fed into formal supervision.**

Public protection

- 4.20** Public protection arrangements remained well managed. Case administrators screened all new arrivals for alerts, and appropriate restrictions were imposed to protect victims and, where appropriate, children from contact. The interdepartmental risk management team met monthly; the meetings were well managed and had good attendance, particularly from offender supervisors.
- 4.21** As so few prisoners were released directly from Buckley Hall there was little multi-agency public protection arrangements (MAPPAs) work. The MAPPAs F forms (assessments for community meetings) and MAPPAs minutes that were available demonstrated good work by offender supervisors. In one case, a prisoner had been moved from HMP Haverigg for security reasons without the MAPPAs alerts being set, and was now within a couple of weeks of release. The systems at Buckley Hall spotted this and arranged emergency consideration of his case, which indicated good awareness by the staff concerned.

Categorisation

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

Indeterminate sentence prisoners

- 4.23** The number of indeterminate sentence prisoners had doubled since the previous inspection and they now made up over a third of the population. While there was little specific provision for this group, they were appropriately managed by probation staff and had access to some good general provision, including family days (see paragraph 4.37).
- 4.24** National delays in Parole Board hearings had frustrated many indeterminate sentence prisoners at Buckley Hall. The prison prepared prisoners well for their hearing and the development of 'mock' Parole Board hearings was positive. This initiative aimed to assist the Parole Board by preparing prisoners to participate fully in hearings. At each event, around 10 prisoners watch a role play lasting about an hour acted out by OMU staff and could then ask questions. The session we observed was realistic and engaging.

Good practice

- 4.25** *'Mock' Parole Board hearings aimed to assist the Parole Board by preparing prisoners to participate in hearings fully. Prisoners watched offender management unit staff act out a role play and could ask questions.*

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.

- 4.26** Very few prisoners were released directly from Buckley Hall other than in exceptional circumstances (such as late security moves). The prison was effective in its function of providing activity and training for long-term prisoners before their progression to open conditions or to a resettlement establishment for local release. It was positive that the National Careers Service engaged with all men on arrival and throughout their time at Buckley Hall.
- 4.27** As a non-resettlement prison, there was no community rehabilitation company (CRC) presence to support prisoners with practical issues on arrival or before release. Issues such as accommodation and finance, benefit and debts needs should have been identified and addressed through the basic custody screen (BCS) carried out at the local prison, but in practice around a fifth of new arrivals had not been given a BCS. The OMU worked to identify issues and referred prisoners to a peer worker, but we had concerns about the impact of this unnecessary delay for some prisoners.

Recommendation

- 4.28** All prisoners should be given a basic custody screen on their arrival into custody.

Accommodation

- 4.29** A prisoner peer worker trained by Shelter provided some excellent accommodation support to prisoners, and no prisoners had been released without accommodation during the previous six months. This prisoner was due to be transferred shortly and, despite some succession planning by the prison, we had concerns about the sustainability of this work.

Education, training and employment

- 4.30** The quality of the National Careers Service provided by 'The Work Company' was good, with careers advice and action planning with prisoners for employment and training throughout their time at Buckley Hall. There was a good focus on short- and longer-term goals, and prisoners had a realistic action plan to help them benefit from the provision available while in prison. Advisers made good use of wider labour information to inform prisoners' longer-term career objectives. Opportunities for prisoner to produce CV and job applications were good. There were good quality work and vocational training places to enable prisoners to develop the work skills to enhance their employment opportunities. However, release on temporary licence was not used to develop work skills.

Recommendation

- 4.31** **There should be greater use of release on temporary licence to improve the development of prisoner work skills.**

Health care

- 4.32** There was appropriate support for continuity of health care for patients being discharged or transferred. Palliative care policies had been developed but were rarely required.

Drugs and alcohol

- 4.33** The drug and alcohol recovery service (DARS) had effective links with OMU and regularly attended parole and sentence review boards to give reports on their cases. Recently introduced DARS family days, organised by a dedicated family worker, were well received by prisoners and their families. Although there were relatively few direct releases from the prison, the team had effective links with local and regional community service providers. Transfer planning was also given a high priority, to ensure effective continuity of recovery support in other establishments.

Finance, benefit and debt

- 4.34** Many prisoners arrived at Buckley Hall before they had undertaken a basic custody screen at their previous establishment or dealt with outstanding debt. Although there was no systematic assessment of need on arrival, in practice offender supervisors or induction staff referred prisoners to the trained peer support worker (see paragraph 4.29). The peer support worker provided advice and support and was able to write to creditors on prisoners' behalf. He could also provide national numbers for prisoners coming up to release, but could no longer open bank accounts.

Children, families and contact with the outside world

- 4.35** Provision to help prisoners maintain ties with the outside world remained strong. The majority of prisoners, 85%, lived within 50 miles of Buckley Hall. In our survey, 50% of respondents, against the comparator of only 28%, said it was easy for friends and family to visit. There were daily visits sessions for prisoners, and evening visits on Wednesdays.
- 4.36** The visitors' centre was small but welcoming, and provided relevant information for first-time visitors. The visits hall was a pleasant environment containing a play area and coffee bar, which were open for all sessions. However, there were still some short delays in getting visitors through the search procedures. The use of coloured sashes to identify prisoners and temporary bracelets for visitors was disproportionate given the presence of a biometric identification system.
- 4.37** The parental contact visit was also an excellent initiative. These two-hour sessions took place every Sunday morning and gave prisoners and their children an opportunity to have contact under more child-friendly conditions. Prisoners were able to move around the visits hall, play games, help their children with homework and make use of the attractive outside space. In addition fathers were given the opportunity to plan activities before each session.

Recommendation

- 4.38** **Prisoners should not have to wear coloured sashes during visits.** (Repeated recommendation 4.43)

Good practice

- 4.39** *The weekly parental contact visit gave fathers the opportunity to plan activities with their child, and they could interact more normally during these two-hour sessions.*

Attitudes, thinking and behaviour

- 4.40** Accredited interventions to address prisoners' likelihood of reoffending and risk of harm were limited to Resolve (cognitive-behavioural intervention for violent offenders) and Thinking Skills Programme (TSP), addressing offenders' thinking and behaviour. This provision was generally appropriate for Buckley Hall's role as most prisoners had completed core offending behaviour work elsewhere. In addition to the accredited programmes, offender managers carried out one-to-one work with a few prisoners (see paragraph 4.16), and prisoners had access to the Sycamore Tree victim awareness course run by the chaplaincy.

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 take action to reduce the use of force and improve quality assurance arrangements, particularly in relation to the video records of planned interventions, which should be overseen by a designated senior manager. (S35)
- 5.2 Managers should ensure that all staff behave in a professional and decent manner, and robustly challenge those who fail to do so. (S36)
- 5.3 Provision and outcomes for prisoners with protected characteristics should be improved, and be informed by regular consultation with minority groups. (S37)
- 5.4 The substance misuse service provider (Lifeline) should demonstrate that its personnel are aware of their obligation to operate the 'duty of candour' in all instances, and should agree its clinical governance practices with the local delivery board. (S38)
- 5.5 Prisoners should have regular access to an on-site pharmacist, who should provide pharmacy-led clinics, patient counselling and medicine use reviews, contribute to in-possession medication risk assessments, and ensure professional standards of stock management, auditing and dispensing. (S39)

Recommendations

To NOMS

- 5.6 Prisoners should not be transferred to Buckley Hall without an up-to-date OASys assessment. (4.9)
- 5.7 All prisoners should be given a basic custody screen on their arrival into custody. (4.28)

Recommendation

To Prisoner Escort and Custody Services

- 5.8 Prisoners' property should arrive with them at the prison. (1.6)

Recommendations

To the governor

Courts, escort and transfers

- 5.9 Reception should be open over the lunch period to accept and process prisoners expeditiously. (1.5, repeated recommendation 1.5)

Early days in custody

- 5.10** The induction wing should not accommodate prisoners who present a potential risk to new arrivals, who should be protected from abuse and exploitation, and first night accommodation should be adequately prepared. (1.14)
- 5.11** Prisoners on the induction wing should be allowed all the property to which they are entitled. (1.15)

Bullying and violence reduction

- 5.12** The prison's documentation for perpetrators and victims of bullying and violence should set specific, measurable and achievable targets that are regularly reviewed. (1.20)

Self-harm and suicide

- 5.13** The prison should fully investigate all incidents of serious self-harm to identify learning points and reduce the likelihood of further harm. (1.27)
- 5.14** Prisoners subject to assessment, care in custody and teamwork (ACCT) case management should not be located in the segregation unit unless for exceptional reasons and with authorisation of a governor, which outlines how the needs described in their assessment and care plan will be met. (1.28)
- 5.15** The prison should investigate and address the reasons for the low use of Listeners and prisoners' reports that access is poor. (1.29)

Security

- 5.16** Senior representatives of relevant departments and service providers should regularly attend the drug strategy committee to improve communication and the coordination of services and supply reduction. (1.38, repeated recommendation 1.84)

Incentives and earned privileges

- 5.17** The local incentives and earned privileges (IEP) policy should be available for prisoners to view and publicised in residential units. The prison should explore and address the negative perceptions about its effectiveness. (1.42)
- 5.18** Targets set for prisoners on the basic level of the IEP scheme should be specific, measurable, achievable and clearly documented for the individual to follow. (1.43)

Discipline

- 5.19** The regime for segregated prisoners should include access to in-reach education and offending behaviour programmes, and the use of the activity area in the unit for those suitably risk assessed. (1.55)
- 5.20** Targets for prisoners on good order reviews should be more meaningful and documented for the prisoner to see. (1.56)

Substance misuse

- 5.21** The prison and drug and alcohol recovery service should reduce the number of 'lodgers' on the drug recovery unit, whose presence has a negative affect on the therapeutic environment. (1.60)

Residential units

- 5.22** Cells designed to hold one prisoner should not be used to hold two. (2.8, repeated recommendation 2.12)
- 5.23** Toilets in all cells should be adequately screened. (2.9, repeated recommendation 2.13)
- 5.24** All residential units, including cells and communal areas, should be clean and properly maintained, and repairs to cells and equipment should be carried out quickly. (2.10)

Equality and diversity

- 5.25** Discrimination incident report forms should be investigated thoroughly, and the quality of responses checked by prison managers and an independent external organisation. (2.19)

Complaints

- 5.26** Complaints processes should be implemented consistently, and managers should ensure that each complainant receives a response that is courteous and addresses the issues raised, and that complaints against staff are fully investigated. (2.32)

Legal rights

- 5.27** Prisoners should have access to legal textbooks. (2.34)

Health services

- 5.28** All health care professionals should be up to date with mandatory training and in receipt of documented clinical supervision. (2.48)
- 5.29** The health centre environment should be modernised to resemble a community primary health care centre, and promote patient well-being. (2.49)
- 5.30** Lockable cupboards should be provided in all cells for patients prescribed in-possession medication. (2.60)
- 5.31** Supervision of medicine administration should be improved to restrict patient access to a single individual and reduce the potential for illicit exchange of medicines between prisoners. (2.61, repeated recommendation 2.83)

Catering

- 5.32** Breakfast should be served on the day it is eaten and should be of adequate quantity. (2.75)
- 5.33** The prison should explore the opportunities for self-cook facilities for prisoners, and should install microwaves on the wings. (2.76)

Purchases

- 5.34** Prisoners should not have to pay an administration charge for catalogue orders. (2.79, repeated recommendation 2.103)

Time out of cell

- 5.35** All prisoners should have one hour's exercise per day. (3.3, repeated recommendation 3.5)

Learning and skills and work activities

- 5.36** The work skills developed by prisoners in prison work should be recognised and recorded. (3.10)
- 5.37** The planning of learning in mathematics should ensure that all learners make good progress. (3.22)
- 5.38** Targets set for learners should ensure they have a clear understanding of what they need to do to progress. (3.23)
- 5.39** Learners' understanding of the practical applications of mathematics should be improved. (3.28)
- 5.40** All prisoners in workshops should be encouraged to follow agreed work practices and actively engage with the work in order to develop an appropriate work ethic. (3.29)
- 5.41** The prison should improve success rates on underperforming courses, particularly mathematics at level 1. (3.32)
- 5.42** The library should be open for longer hours to ensure that all prisoners have access. (3.36)

Physical education and healthy living

- 5.43** The sports hall floor should be repaired and team games for prisoners reintroduced. (3.42)
- 5.44** There should be a needs analysis to ensure that PE programmes fully meet the needs of all prisoners. (3.43)

Strategic management of resettlement

- 5.45** There should be formal supervision for all offender supervisors to improve their practice. (4.10)

Offender management and planning

- 5.46** Offender supervisors should review prisoners' sentence plans and risk management plans inherited from other prisons to ensure they are of sufficient quality and relevant to the available opportunities at Buckley Hall. (4.18)
- 5.47** Offender supervisor entries on P-NOMIS prisoner case records should be quality assured for frequency and content, and the findings fed into formal supervision. (4.19)

Reintegration planning

- 5.48** There should be greater use of release on temporary licence to improve the development of prisoner work skills. (4.31)
- 5.49** Prisoners should not have to wear coloured sashes during visits. (4.38, repeated recommendation 4.43)

Examples of good practice

- 5.50** 'Mock' Parole Board hearings aimed to assist the Parole Board by preparing prisoners to participate in hearings fully. Prisoners watched offender management unit staff act out a role play and could ask questions. (4.25)
- 5.51** The weekly parental contact visit gave fathers the opportunity to plan activities with their child, and they could interact more normally during these two-hour sessions. (4.39)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Deborah Butler	Team leader
Ian Dickens	Inspector
Angela Johnson	Inspector
Angus Mulready-Jones	Inspector
Gordon Riach	Inspector
Andy Rooke	Inspector
Sharon Shalev	Inspector
Catherine Shaw	Researcher
Joe Simmonds	Researcher
Anna Fenton	Researcher
Paul Roberts	Substance misuse inspector
Paul Tarbuck	Health services inspector
Rachel O'Callaghan	Pharmacist
Kathleen Byrne	Care Quality Commission inspector
Stephen Miller	Ofsted inspector
Shahram Safavi	Ofsted inspector
Mary Devane	Ofsted inspector
Sheena Maberley	Ofsted inspector (shadowing)
Martyn Griffiths	Offender management inspector
Simi Badachha	Offender management inspector
Fiona Grossick	NHS England (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 2012, the reception process was efficient but induction was basic. Although first night procedures were reasonable, new arrivals could wait several days for their induction to start spending lengthy periods locked in their cells. The number of violent incidents was low and victims felt supported, bullies were challenged and investigations were robust. Self-harm monitoring documents were of reasonable quality and mental health support was good. There was an effective Listener scheme. Security was well managed and use of force was commendably low, although we noted some under-reporting. The segregation unit regime was reasonable although the environment was grim. Mandatory drug testing figures had dropped significantly, although drug availability remained a concern and still needed to be addressed. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

The prison should work strategically, proactively and across all departments to reduce the availability of drugs. (HP42)

Partially achieved

Governance concerning the use of force, including special accommodation and planned interventions, should be improved. (HP43)

Partially achieved

Recommendations

Prison escort vans should be clean, and prisoners travelling long distances should be offered a toilet break and refreshments. (1.4)

Achieved

Reception should be open over the lunch period to accept and process prisoners expeditiously. (1.5)

Not achieved (recommendation repeated, 1.5)

Prisoners should be offered a shower on the day they arrive. (1.17)

Achieved

The induction programme should provide prisoners with all the relevant information they need, using a range of media to convey it, and prisoners should be moved off the induction landing as soon as possible to minimise the time spent locked in their cell. (1.18)

Achieved

The prison should survey prisoners on safety, including addressing the poor perceptions of black and minority ethnic prisoners, and use the results to inform the guidance on safer custody. (I.28)

Achieved

The strategy to protect vulnerable prisoners should be incorporated into the guidance to staff on safer custody. (I.29)

Achieved

All staff should be trained in assessment, care in custody and teamwork (ACCT) self-harm monitoring procedures. (I.36)

Not achieved

The gated cell on the care and separation unit (CSU) should be taken out of use and the gated cell on D wing should be used in times of crisis. (I.37)

Achieved

The prison should explore the reasons for the number of prisoners held in the CSU on open ACCT documents, and assess whether this is the best place to hold prisoners at risk. (I.38)

Not achieved

The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (I.43)

Achieved

Target drug testing should be undertaken within the required timeframe. (I.49)

Achieved

Security arrangements should be commensurate with the security category of the prison. (I.50)

Achieved

Strip searching of prisoners should only be intelligence-led or based on specific suspicion. (I.51)

Partially achieved

Closed visits should only continue to be applied when there is specific intelligence on visits to support this. (I.52)

Achieved

Information collated on segregation should be analysed and used more effectively to inform strategy. (I.70)

Achieved

All areas in the care and separation unit (CSU) should be clean and well maintained, and cells should be properly equipped. (I.71)

Partially achieved

Prisoners in the CSU should have access to televisions, subject to an appropriate risk assessment and the reasons for their location. (I.72)

Not achieved

Targets for prisoners in the CSU should be more meaningful, and care and reintegration plans for longer-term residents should be improved. (I.73)

Partially achieved

The prison should work with the contracted provider of clinical drug services, Pennine Care, to formulate a robust strategic approach to encouraging prisoners into reduction, detoxification and recovery that is balanced with clinical needs and in line with the Department of Health's 'Updated guidance for prison based opioid maintenance prescribing' (2010). (1.83)

Achieved

Senior representatives of relevant departments and service providers should regularly attend the drug strategy committee to improve communication and the coordination of services and supply reduction. (1.84)

Not achieved (recommendation repeated, 1.38)

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2012, cells were clean but communal areas were generally grubby. Prisoners had restricted access to sufficient clothes and showers. Staff-prisoner relationships were limited but most prisoners felt they could turn to officers for support, although minority groups had more negative perceptions. Work on equality and diversity was underdeveloped, and communication and consultation were limited. The chaplaincy was well integrated into the establishment and delivered a good service. Prisoners were generally satisfied with their access to health services, and mental health services were good. Prisoners were positive about the food, although supervision of meal times needed improvement. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendations

All prisoners should have an adequate supply of their own clothes in possession, with clear and equitable opportunities to replace or exchange items. (HP44)

Partially achieved

The prison should investigate and address the negative perceptions of black and minority ethnic and Muslim prisoners as well as those with disabilities. (HP45)

Not achieved

Recommendations

Cells designed to hold one prisoner should not be used to hold two. (2.12)

Not achieved (recommendation repeated, 2.8)

Toilets in all cells should be adequately screened. (2.13)

Not achieved (recommendation repeated, 2.9)

Prisoners should be allowed to shower daily in showers that are fit for purpose. (2.14)

Achieved

All prisoners should be allowed to have suitable clothing sent in or be able to buy clothes through the prison shop. (2.15)

Achieved

The prison should encourage staff to interact more with prisoners on the residential wings. (2.24)

Partially achieved

There should be an overarching equality and diversity strategy and equality action plan covering each protected characteristic, including comprehensive information on how key responsibilities and support for prisoners will be delivered. (2.30)

Partially achieved

There should be monitoring to ensure equality of treatment for prisoners under all protected characteristics. (2.31)

Achieved

The quality of all aspects of discrimination incident reporting form (DIRF) process should be improved to increase prisoner confidence in it. (2.32)

Not achieved

There should be support groups or forums for all minority groups that are open to all prisoners from that group. (2.33)

Not achieved

The prison should ensure adequate provision for the care and support of foreign national prisoners until their transfer to a more appropriate prison. (2.43)

Not achieved

A non-uniformed member of staff should empty the complaints boxes daily. (2.52)

Not achieved

There should be sufficient legal visits rooms to meet demand. (2.57)

Achieved

The health promotion strategy should be developed and coordinated by a qualified member of the health care team. (2.68)

Achieved

The health care room in reception should be appropriately equipped and include access to SystemOne. (2.74)

Achieved

Patient access to a GP for a routine appointment should be within an acceptable waiting time of less than three weeks. (2.75)

Achieved

Nurses should receive appropriate training in the delivery of triage clinics. (2.76)

Achieved

Prisoners should have access to the pharmacist. (2.82)

Not achieved

Supervision of medicine administration should be improved to restrict patient access to a single individual and reduce the potential for illicit exchange of medicines between prisoners. (2.83)

Not achieved (recommendation repeated, 2.61)

Patients should be able to see a dentist for routine treatment within a timescale equivalent to that in the NHS. (2.89)

Achieved

Breakfast packs should be issued on the day they are to be eaten. (2.98)

Not achieved

Prisoners should not have to pay an administration charge for catalogue orders. (2.103)

Not achieved (recommendation repeated, 2.79)

Purposeful activity

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

At the last inspection, in 2012, prisoners were offered reasonable time out of their cells, although unemployed prisoners could be limited to three hours a day. There was a sound learning and skills strategy and a good curriculum delivered by well-qualified teaching staff. There were sufficient activity places and the work was meaningful, with a good work ethic at the core of vocational training. The library was well stocked and prisoners had good access. Physical education was well managed, facilities were good and accredited courses had increased. Outcomes for prisoners were good against this healthy prison test.

Recommendations

All prisoners should have one hour's exercise a day. (3.5)

Partially achieved (recommendation repeated, 3.3)

The observation of teaching and learning process should be more rigorously applied in education with a better focus on measuring learning and identifying good practice to use for improvement. (3.11)

Achieved

Prisoners should be allocated to activities without delay. (3.18)

Achieved

The prison should improve the planning and range of activities in teaching sessions to meet prisoners' individual needs, and learners should be set clear short-term targets so that they know what they have to achieve at each session. (3.23)

Partially achieved

There should be more resources to support learning, such as computers and the use of smartboards. (3.24)

Achieved

The skills that prisoners develop at work and as mentors should be accredited. (3.28)

Partially achieved

Routine risk assessment should be reintroduced into the gym area. (3.37)

Achieved

There should be an analysis of gym use at least annually to ensure the recreation offered is appropriate for the population. (3.38)

Not achieved

Resettlement

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

At the last inspection, in 2012, the establishment had implemented a new model for resettlement work with a renewed focus on risk, although it was still too early to assess its effectiveness. All prisoners now had an offender supervisor, which was commendable, but sentence planning contributions from across the prison were inconsistent and attendance at formal boards was unreliable. Sentence planning targets were restricted to what was available rather than based on prisoner need, and contact with offender supervisors was limited. Public protection arrangements were generally good. Pathway provision was generally good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

All staff and departments in contact with prisoners, especially those who are high risk, should be actively involved in their sentence planning, which should focus on risk and its reduction, with targets based on the individual's need rather than what is available. (HP46)

Not achieved

Recommendations

Links between the offender management and reducing reoffending departments should be improved to ensure consistent and effective communication and integration. (4.9)

Achieved

All prisoners should be assessed against resettlement pathway need on arrival at Buckley Hall, and this information should be used to inform sentence planning. (4.18)

Not achieved

There should be quality assurance to ensure consistency in offender supervisor work with prisoners, and that staff receive sufficient training, supervision and support to manage, assess and help reduce prisoners' risk of reoffending and harm. (4.19)

Not achieved

Quality assurance arrangements should ensure that all assessments of risk of harm and risk management plans are completed appropriately. (4.22)

Not achieved

Category D indeterminate-sentenced prisoners should be moved to appropriate establishments as soon as possible. (4.26)

Achieved

The prison should improve prisoners' knowledge of the resettlement provision available. (4.29)

No longer relevant

The prison should strengthen its links with employers and community and voluntary organisations to provide prisoners with more support and work opportunities on release. (4.35)

No longer relevant

Prisoners should not have to wear coloured bibs during domestic visits. (4.43)

Not achieved (recommendation repeated, 4.38)

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: Lifeline Project
Location: HMP Buckley Hall
Location ID: 1-473665048
Regulated activities: Treatment of disease, disorder, or injury, Diagnostic and screening

Action we have told the provider to take

The table below shows the regulations that were not being met. The provider must send CQC a report that says what action it is going to take to meet these regulations.

Regulation 12 Safe care and treatment	12.-(1) Care and treatment must be provided in a safe way for service users.
--	--

How the regulation was not being met:

Providers must make sure that medicines are managed safely and administered appropriately to make sure people are safe.

On the 3 June 2016 a nurse confirmed a prescription for a prisoner prescribed methadone via the telephone and instructed a member of nursing staff by telephone to administer the medicine. Nursing staff administered the medicine without having sight of the prescription.

Staff who subsequently administered the prescribed dose of methadone to the prisoner did not immediately complete a medication record to confirm that they had administered the medicine given.

Regulation 20 Duty of candour	20.- (1) Registered persons must act in an open and transparent way with relevant persons in relation to care and treatment provided to service users in carrying on a regulated activity
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How the regulation was not being met:

The intention of this regulation is to ensure that providers are open and transparent with people who use services and other 'relevant persons' (people acting lawfully on their behalf) in general in relation to care and treatment. It also sets out some specific

requirements that providers must follow when things go wrong with care and treatment, including informing people about the incident, providing reasonable support, providing truthful information and an apology when things go wrong.

Following an incident that occurred on 25 September 2015 when 218mls of methadone, a controlled drug was unaccounted for, it was suspected that prisoners may have received excess methadone than their prescribed doses.

You failed to notify Manchester Mental Health & Social Care Trust, whom subcontracts your service to provide a clinical and psychosocial substance misuse service in a timely manner.

You failed to immediately notify services users of the potential that they might have been affected by a suspected overdose. It wasn't until approximately four days later that a member of your staff team at HMP Buckley provided truthful information to those prisoners potentially affected by the incident and one prisoner wasn't notified because they had been transferred out to another prison.

You failed to inform the governor and staff at HMP Buckley Hall of the incident.

Appendix IV: 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	21 and over	%
Sentenced	430	94.92%
Recall	23	5.07%
Total	453	

Sentence	21 and over	%
12 months to less than 2 years	1	0.24%
2 years to less than 4 years	11	2.47%
4 years to less than 10 years	225	49.66%
10 years and over (not life)	99	22.07%
ISPP (indeterminate sentence for public protection)	44	9.90%
Life	73	16.66%
Total	453	

Age	Number of prisoners	%
Under 21 years	5	1.12%
21 years to 29 years	130	28.37%
30 years to 39 years	170	37.38%
40 years to 49 years	85	18.69%
50 years to 59 years	48	11.03%
60 years to 69 years: <i>maximum age=68</i>	15	3.37%
Total	453	

Nationality	21 and over	%
British	443	97.34%
Foreign nationals	10	2.25%
Total	453	

Security category	21 and over	%
Category C	432	94.81%
Category D	21	4.95%
Other		
Total	453	

Ethnicity	21 and over	%
White		
British	351	77.48
Irish	4	0.88
Gypsy/Irish Traveller	2	0.44
Other white	5	1.10
Mixed		
White and black Caribbean	10	2.20
White and black African	3	0.66
Other mixed	2	0.44
Asian or Asian British		
Indian	5	1.10
Pakistani	31	6.84
Bangladeshi	4	0.88
Other Asian	8	1.76
Black or black British		
Caribbean	15	3.31
African	5	1.10
Other black	13	2.86
Other ethnic group	2	0.44
Code missing	1	0.22
Not stated	2	0.44
Total	453	

Religion	21 and over	%
Church of England	86	18.98
Roman Catholic	131	28.91
Other Christian denominations	21	4.63
Muslim	69	15.23
Buddhist	13	2.86
Jewish	5	1.10
Other	24	5.29
No religion	104	22.95
Total	453	

Other demographics	21 and over	%
Veteran (ex-armed services)	3	0.67%
Total	3	

Sentenced prisoners only

Length of stay	21 and over	
	Number	%
1 month to 3 months	2	0.45%
3 months to six months	2	0.45%
Six months to 1 year	6	1.35%
1 year to 2 years	50	11.26%
2 years to 4 years	186	41.05
4 years or more	207	45.69%
Total	453	

Sentenced prisoners only

	21 and over	%
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	55	12.14%
Total		

Main offence	21 and over	%
Violence against the person	107	23.62
Sexual offences	1	0.22%
Burglary	41	9.23%
Robbery	72	15.89%
Theft and handling	2	0.22%
Fraud and forgery	6	1.35%
Drugs offences	118	26.04%
Other offences	96	21.19%
Total	453	

Appendix V: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment⁹. Respondents were then randomly selected from a P-NOMIS prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 6 June 2016 the prisoner population at HMP Buckley Hall was 444. Using the method described above, questionnaires were distributed to a sample of 179 prisoners.

We received a total of 145 completed questionnaires, a response rate of 81%. Eight respondents refused to complete a questionnaire and 26 questionnaires were not returned.

Wing/Unit	Number of completed survey returns
A	38
B	45
C	38
D	21
Segregation unit	3

⁹ 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.

Presentation of survey results and analyses

Over the following pages we present the survey results for HMP Buckley Hall.

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences¹⁰ are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Buckley Hall 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 Buckley Hall in 2016 compared with the responses of prisoners surveyed at HMP Buckley Hall in 2012.
- 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 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 50 and over and those under 50.
- A comparison within the 2016 survey between the responses of prisoners on D wing (the newest wing) and the responses of prisoners on all other wings (A, B and C).

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

Survey summary

Section I: About you

Q1.2	How old are you?	
	<i>Under 21</i>	1 (1%)
	<i>21 - 29</i>	45 (31%)
	<i>30 - 39</i>	50 (35%)
	<i>40 - 49</i>	25 (17%)
	<i>50 - 59</i>	13 (9%)
	<i>60 - 69</i>	8 (6%)
	<i>70 and over</i>	1 (1%)
Q1.3	Are you sentenced?	
	<i>Yes</i>	136 (95%)
	<i>Yes - on recall</i>	7 (5%)
	<i>No - awaiting trial</i>	0 (0%)
	<i>No - awaiting sentence</i>	0 (0%)
	<i>No - awaiting deportation</i>	0 (0%)
Q1.4	How long is your sentence?	
	<i>Not sentenced</i>	0 (0%)
	<i>Less than 6 months</i>	1 (1%)
	<i>6 months to less than 1 year</i>	0 (0%)
	<i>1 year to less than 2 years</i>	0 (0%)
	<i>2 years to less than 4 years</i>	6 (4%)
	<i>4 years to less than 10 years</i>	68 (48%)
	<i>10 years or more</i>	34 (24%)
	<i>IPP (indeterminate sentence for public protection)</i>	8 (6%)
	<i>Life</i>	24 (17%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	<i>Yes</i>	6 (4%)
	<i>No</i>	137 (96%)
Q1.6	Do you understand spoken English?	
	<i>Yes</i>	140 (99%)
	<i>No</i>	2 (1%)
Q1.7	Do you understand written English?	
	<i>Yes</i>	141 (99%)
	<i>No</i>	2 (1%)

Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	102 (71%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	3 (2%)	<i>Asian or Asian British - other</i> 3 (2%)
	<i>White - other</i>	6 (4%)	<i>Mixed race - white and black Caribbean</i> 4 (3%)
	<i>Black or black British - Caribbean</i>	8 (6%)	<i>Mixed race - white and black African</i> 0 (0%)
	<i>Black or black British - African</i>	2 (1%)	<i>Mixed race - white and Asian</i> 0 (0%)
	<i>Black or black British - other</i>	0 (0%)	<i>Mixed race - other</i> 2 (1%)
	<i>Asian or Asian British - Indian</i>	0 (0%)	<i>Arab</i> 0 (0%)
	<i>Asian or Asian British - Pakistani</i>	11 (8%)	<i>Other ethnic group</i> 2 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	0 (0%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	<i>Yes</i>		5 (4%)
	<i>No</i>		128 (96%)
Q1.10	What is your religion?		
	<i>None</i>	34 (24%)	<i>Hindu</i> 0 (0%)
	<i>Church of England</i>	37 (26%)	<i>Jewish</i> 1 (1%)
	<i>Catholic</i>	34 (24%)	<i>Muslim</i> 20 (14%)
	<i>Protestant</i>	6 (4%)	<i>Sikh</i> 0 (0%)
	<i>Other Christian denomination</i>	2 (1%)	<i>Other</i> 3 (2%)
	<i>Buddhist</i>	4 (3%)	
Q1.11	How would you describe your sexual orientation?		
	<i>Heterosexual/ Straight</i>		138 (97%)
	<i>Homosexual/Gay</i>		0 (0%)
	<i>Bisexual</i>		4 (3%)
Q1.12	Do you consider yourself to have a disability (i.e do you need help with any long term physical, mental or learning needs)?		
	<i>Yes</i>		25 (17%)
	<i>No</i>		118 (83%)
Q1.13	Are you a veteran (ex-armed services)?		
	<i>Yes</i>		5 (4%)
	<i>No</i>		134 (96%)
Q1.14	Is this your first time in prison?		
	<i>Yes</i>		51 (36%)
	<i>No</i>		91 (64%)
Q1.15	Do you have children under the age of 18?		
	<i>Yes</i>		74 (52%)
	<i>No</i>		68 (48%)

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>	90 (63%)
	<i>2 hours or longer</i>	48 (34%)
	<i>Don't remember</i>	5 (3%)

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>	90 (63%)
	Yes	46 (32%)
	No	6 (4%)
	Don't remember	1 (1%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	90 (63%)
	Yes	6 (4%)
	No	45 (32%)
	Don't remember	1 (1%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	90 (63%)
	No	42 (29%)
	Don't remember	12 (8%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	120 (85%)
	No	19 (13%)
	Don't remember	3 (2%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	44 (31%)
	<i>Well</i>	64 (44%)
	<i>Neither</i>	27 (19%)
	<i>Badly</i>	5 (3%)
	<i>Very badly</i>	1 (1%)
	Don't remember	3 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	104 (73%)
	<i>Yes, I received written information</i>	6 (4%)
	<i>No, I was not told anything</i>	30 (21%)
	Don't remember	3 (2%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	116 (82%)
	No	24 (17%)
	Don't remember	2 (1%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	71 (50%)
	<i>2 hours or longer</i>	63 (44%)
	Don't remember	9 (6%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	130 (91%)
	No	8 (6%)
	Don't remember	5 (3%)

Q3.3	Overall, how were you treated in reception?		
	<i>Very well</i>		36 (25%)
	<i>Well</i>		76 (54%)
	<i>Neither</i>		24 (17%)
	<i>Badly</i>		4 (3%)
	<i>Very badly</i>		1 (1%)
	<i>Don't remember</i>		1 (1%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)		
	<i>Loss of property</i>	33 (23%)	<i>Physical health</i> 9 (6%)
	<i>Housing problems</i>	5 (4%)	<i>Mental health</i> 27 (19%)
	<i>Contacting employers</i>	1 (1%)	<i>Needing protection from other prisoners</i> 0 (0%)
	<i>Contacting family</i>	15 (11%)	<i>Getting phone numbers</i> 19 (13%)
	<i>Childcare</i>	1 (1%)	<i>Other</i> 8 (6%)
	<i>Money worries</i>	14 (10%)	<i>Did not have any problems</i> 59 (42%)
	<i>Feeling depressed or suicidal</i>	13 (9%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	<i>Yes</i>		27 (19%)
	<i>No</i>		53 (38%)
	<i>Did not have any problems</i>		59 (42%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	<i>Tobacco</i>		110 (77%)
	<i>A shower</i>		43 (30%)
	<i>A free telephone call</i>		91 (64%)
	<i>Something to eat</i>		55 (38%)
	<i>PIN phone credit</i>		78 (55%)
	<i>Toiletries/ basic items</i>		41 (29%)
	<i>Did not receive anything</i>		11 (8%)
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>		88 (62%)
	<i>Someone from health services</i>		97 (69%)
	<i>A Listener/Samaritans</i>		43 (30%)
	<i>Prison shop/ canteen</i>		32 (23%)
	<i>Did not have access to any of these</i>		22 (16%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)		
	<i>What was going to happen to you</i>		84 (62%)
	<i>What support was available for people feeling depressed or suicidal</i>		65 (48%)
	<i>How to make routine requests (applications)</i>		62 (46%)
	<i>Your entitlement to visits</i>		61 (45%)
	<i>Health services</i>		78 (57%)
	<i>Chaplaincy</i>		72 (53%)
	<i>Not offered any information</i>		22 (16%)

Q3.9	Did you feel safe on your first night here?	
	Yes	129 (91%)
	No	10 (7%)
	Don't remember	3 (2%)
Q3.10	How soon after you arrived here did you go on an induction course?	
	Have not been on an induction course	12 (9%)
	Within the first week	91 (65%)
	More than a week	32 (23%)
	Don't remember	5 (4%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	Have not been on an induction course	12 (9%)
	Yes	74 (53%)
	No	46 (33%)
	Don't remember	8 (6%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment	20 (14%)
	Within the first week	52 (37%)
	More than a week	54 (39%)
	Don't remember	14 (10%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		Very easy	Easy	Neither	Difficult	Very difficult N/A
	Communicate with your solicitor or legal representative?	27 (19%)	42 (30%)	14 (10%)	22 (16%)	11 (8%) 23 (17%)
	Attend legal visits?	24 (19%)	52 (41%)	12 (9%)	6 (5%)	4 (3%) 30 (23%)
	Get bail information?	7 (6%)	9 (8%)	13 (12%)	5 (4%)	7 (6%) 71 (63%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?					
	Not had any letters					37 (27%)
	Yes					51 (37%)
	No					49 (36%)
Q4.3	Can you get legal books in the library?					
	Yes					37 (27%)
	No					28 (21%)
	Don't know					70 (52%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on.					
		Yes	No	Don't know		
	Do you normally have enough clean, suitable clothes for the week?	98 (71%)	41 (29%)	0 (0%)		
	Are you normally able to have a shower every day?	135 (97%)	4 (3%)	0 (0%)		
	Do you normally receive clean sheets every week?	52 (39%)	71 (53%)	11 (8%)		
	Do you normally get cell cleaning materials every week?	100 (71%)	39 (28%)	1 (1%)		
	Is your cell call bell normally answered within five minutes?	47 (34%)	65 (47%)	26 (19%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	75 (54%)	61 (44%)	2 (1%)		
	If you need to, can you normally get your stored property?	31 (22%)	79 (57%)	29 (21%)		

Q4.5	What is the food like here?	
	Very good	27 (19%)
	Good	67 (48%)
	Neither	29 (21%)
	Bad	11 (8%)
	Very bad	6 (4%)
Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	
	Have not bought anything yet/ don't know	0 (0%)
	Yes	62 (46%)
	No	74 (54%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	71 (50%)
	No	14 (10%)
	Don't know	56 (40%)
Q4.8	Are your religious beliefs respected?	
	Yes	70 (51%)
	No	15 (11%)
	Don't know/ N/A	53 (38%)
Q4.9	Are you able to speak to a chaplain of your faith in private if you want to?	
	Yes	77 (55%)
	No	9 (6%)
	Don't know/ N/A	54 (39%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	I don't want to attend	30 (22%)
	Very easy	39 (28%)
	Easy	27 (19%)
	Neither	6 (4%)
	Difficult	6 (4%)
	Very difficult	3 (2%)
	Don't know	28 (20%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?			
	Yes	119 (85%)		
	No	18 (13%)		
	Don't know	3 (2%)		
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)			
		Not made one		
		Yes		
		No		
	Are applications dealt with fairly?	10 (8%)	64 (48%)	58 (44%)
	Are applications dealt with quickly (within seven days)?	10 (8%)	47 (38%)	66 (54%)
Q5.3	Is it easy to make a complaint?			
	Yes	95 (68%)		
	No	20 (14%)		
	Don't know	24 (17%)		

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

	<i>Not made one</i>	Yes	No
Are complaints dealt with fairly?	46 (35%)	27 (20%)	59 (45%)
Are complaints dealt with quickly (within seven days)?	46 (35%)	29 (22%)	55 (42%)

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

Yes	24 (17%)
No	114 (83%)

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

<i>Don't know who they are</i>	22 (16%)
Very easy	19 (14%)
Easy	49 (36%)
Neither	28 (21%)
Difficult	13 (10%)
Very difficult	4 (3%)

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

<i>Don't know what the IEP scheme is</i>	3 (2%)
Yes	59 (42%)
No	68 (49%)
<i>Don't know</i>	9 (6%)

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

<i>Don't know what the IEP scheme is</i>	3 (2%)
Yes	60 (44%)
No	63 (46%)
<i>Don't know</i>	10 (7%)

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

Yes	10 (7%)
No	127 (93%)

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

<i>I have not been to segregation in the last 6 months</i>	113 (83%)
Very well	3 (2%)
Well	7 (5%)
Neither	3 (2%)
Badly	6 (4%)
Very badly	4 (3%)

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

Yes	98 (71%)
No	40 (29%)

Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	100 (73%)
	No	37 (27%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	35 (25%)
	No	106 (75%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	6 (4%)
	<i>Never</i>	32 (23%)
	<i>Rarely</i>	39 (28%)
	<i>Some of the time</i>	39 (28%)
	<i>Most of the time</i>	12 (9%)
	<i>All of the time</i>	9 (7%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	38 (28%)
	<i>In the first week</i>	32 (24%)
	<i>More than a week</i>	49 (36%)
	<i>Don't remember</i>	16 (12%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	38 (27%)
	<i>Very helpful</i>	22 (16%)
	<i>Helpful</i>	31 (22%)
	<i>Neither</i>	27 (19%)
	<i>Not very helpful</i>	9 (6%)
	<i>Not at all helpful</i>	12 (9%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	Yes	39 (28%)		
	No	101 (72%)		
Q8.2	Do you feel unsafe now?			
	Yes	10 (7%)		
	No	125 (93%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)			
	<i>Never felt unsafe</i>	101 (75%)	<i>At meal times</i>	5 (4%)
	<i>Everywhere</i>	13 (10%)	<i>At health services</i>	9 (7%)
	<i>Segregation unit</i>	3 (2%)	<i>Visits area</i>	2 (1%)
	<i>Association areas</i>	12 (9%)	<i>In wing showers</i>	7 (5%)
	<i>Reception area</i>	4 (3%)	<i>In gym showers</i>	3 (2%)
	<i>At the gym</i>	3 (2%)	<i>In corridors/stairwells</i>	4 (3%)
	<i>In an exercise yard</i>	10 (7%)	<i>On your landing/wing</i>	10 (7%)
	<i>At work</i>	10 (7%)	<i>In your cell</i>	8 (6%)
	<i>During movement</i>	11 (8%)	<i>At religious services</i>	2 (1%)
	<i>At education</i>	4 (3%)		

Q8.4	Have you been victimised by other prisoners here?	
	Yes	19 (14%)
	No	121 (86%)
Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	5 (4%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	5 (4%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	11 (8%)
	<i>Having your canteen/property taken</i>	6 (4%)
	<i>Medication</i>	1 (1%)
	<i>Debt</i>	4 (3%)
	<i>Drugs</i>	3 (2%)
	<i>Your race or ethnic origin</i>	2 (1%)
	<i>Your religion/religious beliefs</i>	2 (1%)
	<i>Your nationality</i>	1 (1%)
	<i>You are from a different part of the country than others</i>	2 (1%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	3 (2%)
	<i>Your age</i>	3 (2%)
	<i>You have a disability</i>	3 (2%)
	<i>You were new here</i>	3 (2%)
	<i>Your offence/ crime</i>	5 (4%)
	<i>Gang related issues</i>	2 (1%)
Q8.6	Have you been victimised by staff here?	
	Yes	45 (32%)
	No	95 (68%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	17 (12%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	5 (4%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	18 (13%)
	<i>Medication</i>	3 (2%)
	<i>Debt</i>	1 (1%)
	<i>Drugs</i>	1 (1%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	6 (4%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	1 (1%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	0 (0%)
	<i>You have a disability</i>	5 (4%)
	<i>You were new here</i>	3 (2%)
	<i>Your offence/ crime</i>	6 (4%)
	<i>Gang related issues</i>	1 (1%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	<i>Not been victimised</i>	86 (64%)
	Yes	22 (16%)
	No	26 (19%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	14 (10%)	8 (6%)	40 (29%)	16 (12%)	51 (38%)	7 (5%)
	The nurse	13 (10%)	20 (15%)	55 (41%)	15 (11%)	26 (19%)	5 (4%)
	The dentist	19 (14%)	6 (4%)	30 (22%)	12 (9%)	42 (31%)	25 (19%)
Q9.2	What do you think of the quality of the health service from the following people?						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	15 (11%)	12 (9%)	46 (33%)	24 (17%)	23 (17%)	18 (13%)
	The nurse	12 (9%)	16 (12%)	48 (35%)	20 (15%)	21 (15%)	19 (14%)
	The dentist	24 (18%)	38 (29%)	39 (29%)	15 (11%)	8 (6%)	9 (7%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						9 (7%)
	<i>Very good</i>						16 (12%)
	<i>Good</i>						33 (24%)
	<i>Neither</i>						26 (19%)
	<i>Bad</i>						39 (29%)
	<i>Very bad</i>						13 (10%)
Q9.4	Are you currently taking medication?						
	Yes						73 (53%)
	No						65 (47%)
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?						
	<i>Not taking medication</i>						65 (47%)
	<i>Yes, all my meds</i>						56 (41%)
	<i>Yes, some of my meds</i>						11 (8%)
	<i>No</i>						6 (4%)
Q9.6	Do you have any emotional or mental health problems?						
	Yes						42 (31%)
	No						94 (69%)
Q9.7	Are you being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?						
	<i>Do not have any emotional or mental health problems</i>						94 (69%)
	Yes						25 (18%)
	No						17 (13%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	23 (17%)
	No	116 (83%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	16 (12%)
	No	123 (88%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	63 (46%)
	Easy	22 (16%)
	Neither	7 (5%)
	Difficult	3 (2%)
	Very difficult	1 (1%)
	Don't know	40 (29%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	14 (10%)
	Easy	17 (12%)
	Neither	14 (10%)
	Difficult	17 (12%)
	Very difficult	7 (5%)
	Don't know	68 (50%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	18 (13%)
	No	121 (87%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	10 (7%)
	No	128 (93%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	104 (78%)
	Yes	18 (13%)
	No	12 (9%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?	
	<i>Did not / do not have an alcohol problem</i>	123 (90%)
	Yes	9 (7%)
	No	5 (4%)
Q10.9	Was the support or help you received, while in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	111 (83%)
	Yes	21 (16%)
	No	1 (1%)

Section 11: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	6 (4%)	27 (19%)	59 (41%)	15 (10%)	20 (14%)	18 (12%)
	Vocational or skills training	10 (7%)	16 (11%)	54 (38%)	21 (15%)	22 (16%)	18 (13%)
	Education (including basic skills)	8 (6%)	26 (19%)	65 (47%)	19 (14%)	11 (8%)	9 (7%)
	Offending behaviour programmes	26 (20%)	7 (5%)	29 (22%)	21 (16%)	27 (20%)	22 (17%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				14 (10%)
	Prison job				91 (66%)
	Vocational or skills training				40 (29%)
	Education (including basic skills)				28 (20%)
	Offending behaviour programmes				16 (12%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	Yes	No	Don't know
	Prison job	12 (10%)	44 (37%)	52 (44%)	10 (8%)
	Vocational or skills training	17 (16%)	67 (61%)	19 (17%)	6 (6%)
	Education (including basic skills)	16 (15%)	61 (55%)	27 (25%)	6 (5%)
	Offending behaviour programmes	23 (22%)	45 (43%)	25 (24%)	12 (11%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				19 (14%)
	Never				64 (48%)
	<i>Less than once a week</i>				32 (24%)
	<i>About once a week</i>				10 (8%)
	<i>More than once a week</i>				7 (5%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				49 (38%)
	Yes				37 (28%)
	No				44 (34%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				21 (16%)
	0				20 (15%)
	1 to 2				36 (27%)
	3 to 5				54 (40%)
	More than 5				4 (3%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				4 (3%)
	0				4 (3%)
	1 to 2				21 (16%)
	3 to 5				37 (27%)
	More than 5				69 (51%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				3 (2%)
	0				4 (3%)
	1 to 2				5 (4%)
	3 to 5				13 (9%)
	More than 5				113 (82%)

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>	9 (7%)
	<i>2 to less than 4 hours</i>	14 (10%)
	<i>4 to less than 6 hours</i>	12 (9%)
	<i>6 to less than 8 hours</i>	29 (21%)
	<i>8 to less than 10 hours</i>	40 (29%)
	<i>10 hours or more</i>	26 (19%)
	<i>Don't know</i>	8 (6%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	46 (34%)
	<i>No</i>	90 (66%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	52 (38%)
	<i>No</i>	86 (62%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	20 (15%)
	<i>No</i>	116 (85%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	8 (6%)
	<i>Very easy</i>	30 (22%)
	<i>Easy</i>	39 (28%)
	<i>Neither</i>	20 (15%)
	<i>Difficult</i>	25 (18%)
	<i>Very difficult</i>	15 (11%)
	<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>	116 (88%)
	<i>No</i>	16 (12%)
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>	16 (12%)
	<i>No contact</i>	37 (28%)
	<i>Letter</i>	32 (24%)
	<i>Phone</i>	43 (33%)
	<i>Visit</i>	47 (36%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	126 (94%)
	<i>No</i>	8 (6%)

Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	Yes	107 (80%)
	No	26 (20%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	26 (19%)
	<i>Very involved</i>	32 (24%)
	<i>Involved</i>	49 (37%)
	<i>Neither</i>	9 (7%)
	<i>Not very involved</i>	8 (6%)
	<i>Not at all involved</i>	10 (7%)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)	
	<i>Do not have a sentence plan/ not sentenced</i>	26 (20%)
	<i>Nobody</i>	37 (28%)
	<i>Offender supervisor</i>	55 (42%)
	<i>Offender manager</i>	30 (23%)
	<i>Named/ personal officer</i>	14 (11%)
	<i>Staff from other departments</i>	9 (7%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	26 (20%)
	Yes	84 (64%)
	No	12 (9%)
	<i>Don't know</i>	9 (7%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	26 (20%)
	Yes	25 (19%)
	No	62 (47%)
	<i>Don't know</i>	20 (15%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	26 (20%)
	Yes	29 (22%)
	No	43 (33%)
	<i>Don't know</i>	33 (25%)
Q13.10	Do you have a needs based custody plan?	
	Yes	8 (6%)
	No	70 (54%)
	<i>Don't know</i>	52 (40%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes	25 (19%)
	No	105 (81%)

**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	36 (28%)	20 (15%)	74 (57%)
Accommodation	33 (27%)	28 (23%)	63 (51%)
Benefits	28 (23%)	20 (17%)	72 (60%)
Finances	30 (25%)	17 (14%)	72 (61%)
Education	37 (31%)	25 (21%)	57 (48%)
Drugs and alcohol	43 (36%)	24 (20%)	51 (43%)

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

<i>Not sentenced</i>	0 (0%)
Yes	74 (58%)
No	53 (42%)

Main comparator and comparator to last time



Prisoner survey responses HMP Buckley Hall 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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	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		145	6,354	145	153
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	2%	1%	0%
1.3	Are you sentenced?	100%	100%	100%	100%
1.3	Are you on recall?	5%	9%	5%	7%
1.4	Is your sentence less than 12 months?	1%	6%	1%	4%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	9%	6%	8%
1.5	Are you a foreign national?	4%	9%	4%	5%
1.6	Do you understand spoken English?	99%	99%	99%	100%
1.7	Do you understand written English?	99%	98%	99%	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.)	22%	25%	22%	19%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	4%	4%	3%
1.1	Are you Muslim?	14%	13%	14%	16%
1.11	Are you homosexual/gay or bisexual?	3%	4%	3%	4%
1.12	Do you consider yourself to have a disability?	18%	21%	18%	15%
1.13	Are you a veteran (ex-armed services)?	4%	6%	4%	6%
1.14	Is this your first time in prison?	36%	38%	36%	32%
1.15	Do you have any children under the age of 18?	52%	51%	52%	60%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	34%	46%	34%	24%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	87%	73%	87%	53%
2.3	Were you offered a toilet break?	11%	8%	11%	12%
2.4	Was the van clean?	63%	62%	63%	66%
2.5	Did you feel safe?	85%	79%	85%	90%
2.6	Were you treated well/very well by the escort staff?	75%	73%	75%	68%
2.7	Before you arrived here were you told that you were coming here?	74%	60%	74%	83%
2.7	Before you arrived here did you receive any written information about coming here?	3%	14%	3%	5%
2.8	When you first arrived here did your property arrive at the same time as you?	82%	86%	82%	93%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	50%	54%	50%	55%
3.2	When you were searched in reception, was this carried out in a respectful way?	91%	85%	91%	81%
3.3	Were you treated well/very well in reception?	79%	76%	79%	73%
	When you first arrived:				
3.4	Did you have any problems?	58%	60%	58%	53%
3.4	Did you have any problems with loss of property?	23%	18%	23%	17%
3.4	Did you have any housing problems?	4%	12%	4%	10%
3.4	Did you have any problems contacting employers?	1%	2%	1%	1%
3.4	Did you have any problems contacting family?	11%	18%	11%	9%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	1%	1%	1%
3.4	Did you have any money worries?	10%	13%	10%	13%
3.4	Did you have any problems with feeling depressed or suicidal?	9%	14%	9%	5%
3.4	Did you have any physical health problems?	6%	13%	6%	7%
3.4	Did you have any mental health problems?	19%	16%	19%	11%
3.4	Did you have any problems with needing protection from other prisoners?	0%	5%	0%	1%
3.4	Did you have problems accessing phone numbers?	13%	16%	13%	11%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	34%	36%	34%	39%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	77%	75%	77%	72%
3.6	A shower?	30%	28%	30%	19%
3.6	A free telephone call?	64%	42%	64%	68%
3.6	Something to eat?	38%	56%	38%	41%
3.6	PIN phone credit?	55%	51%	55%	56%
3.6	Toiletries/ basic items?	29%	47%	29%	24%

Key to tables

Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction continued					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	62%	53%	62%	65%
3.7	Someone from health services?	69%	70%	69%	80%
3.7	A Listener/Samaritans?	31%	34%	31%	30%
3.7	Prison shop/ canteen?	23%	24%	23%	14%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	62%	50%	62%	55%
3.8	Support was available for people feeling depressed or suicidal?	48%	40%	48%	46%
3.8	How to make routine requests?	46%	44%	46%	41%
3.8	Your entitlement to visits?	45%	40%	45%	45%
3.8	Health services?	58%	52%	58%	59%
3.8	The chaplaincy?	53%	48%	53%	57%
3.9	Did you feel safe on your first night here?	91%	82%	91%	91%
3.10	Have you been on an induction course?	91%	90%	91%	91%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	58%	60%	58%	60%
3.12	Did you receive an education (skills for life) assessment?	86%	84%	86%	79%
SECTION 4: Legal rights and respectful custody					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	50%	45%	50%	52%
4.1	Attend legal visits?	59%	47%	59%	64%
4.1	Get bail information?	14%	14%	14%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	37%	39%	37%	45%
4.3	Can you get legal books in the library?	27%	42%	27%	38%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	71%	67%	71%	79%
4.4	Are you normally able to have a shower every day?	97%	93%	97%	85%
4.4	Do you normally receive clean sheets every week?	39%	73%	39%	71%
4.4	Do you normally get cell cleaning materials every week?	72%	66%	72%	78%
4.4	Is your cell call bell normally answered within five minutes?	34%	36%	34%	37%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	54%	70%	54%	55%
4.4	Can you normally get your stored property, if you need to?	22%	24%	22%	21%
4.5	Is the food in this prison good/very good?	67%	30%	67%	66%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	46%	49%	46%	53%
4.7	Are you able to speak to a Listener at any time, if you want to?	50%	57%	50%	50%
4.8	Are your religious beliefs are respected?	51%	53%	51%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	55%	59%	55%	61%
4.10	Is it easy/very easy to attend religious services?	48%	50%	48%	57%

Main comparator and comparator to last time

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Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints				
5.1 Is it easy to make an application?	85%	82%	85%	86%
For those who have made an application:				
5.2 Do you feel applications are dealt with fairly?	53%	58%	53%	62%
5.2 Do you feel applications are dealt with quickly (within seven days)?	42%	40%	42%	48%
5.3 Is it easy to make a complaint?	68%	60%	68%	62%
For those who have made a complaint:				
5.4 Do you feel complaints are dealt with fairly?	31%	34%	31%	38%
5.4 Do you feel complaints are dealt with quickly (within seven days)?	35%	29%	35%	35%
5.5 Have you ever been prevented from making a complaint when you wanted to?	17%	19%	17%	11%
5.6 Is it easy/very easy to see the Independent Monitoring Board?	50%	29%	50%	32%
SECTION 6: Incentives and earned privileges scheme				
6.1 Do you feel you have been treated fairly in your experience of the IEP scheme?	43%	49%	43%	56%
6.2 Do the different levels of the IEP scheme encourage you to change your behaviour?	44%	45%	44%	51%
6.3 In the last six months have any members of staff physically restrained you (C&R)?	7%	7%	7%	8%
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?	44%	37%	44%	32%
SECTION 7: Relationships with staff				
7.1 Do most staff, in this prison, treat you with respect?	71%	80%	71%	75%
7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	73%	74%	73%	75%
7.3 Has a member of staff checked on you personally in the last week to see how you were getting on?	25%	31%	25%	26%
7.4 Do staff normally speak to you most of the time/all of the time during association?	15%	21%	15%	18%
7.5 Do you have a personal officer?	72%	65%	72%	58%
For those with a personal officer:				
7.6 Do you think your personal officer is helpful/very helpful?	52%	63%	52%	75%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	28%	36%	28%	27%
8.2	Do you feel unsafe now?	8%	15%	8%	10%
8.4	Have you been victimised by other prisoners here?	14%	28%	14%	18%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	4%	12%	4%	9%
8.5	Hit, kicked or assaulted you?	4%	8%	4%	3%
8.5	Sexually abused you?	0%	2%	0%	1%
8.5	Threatened or intimidated you?	8%	16%	8%	10%
8.5	Taken your canteen/property?	4%	7%	4%	4%
8.5	Victimised you because of medication?	1%	4%	1%	4%
8.5	Victimised you because of debt?	3%	4%	3%	3%
8.5	Victimised you because of drugs?	2%	4%	2%	1%
8.5	Victimised you because of your race or ethnic origin?	1%	4%	1%	2%
8.5	Victimised you because of your religion/religious beliefs?	1%	3%	1%	4%
8.5	Victimised you because of your nationality?	1%	3%	1%	2%
8.5	Victimised you because you were from a different part of the country?	1%	4%	1%	4%
8.5	Victimised you because you are from a Traveller community?	0%	1%	0%	3%
8.5	Victimised you because of your sexual orientation?	2%	2%	2%	1%
8.5	Victimised you because of your age?	2%	3%	2%	2%
8.5	Victimised you because you have a disability?	2%	3%	2%	2%
8.5	Victimised you because you were new here?	2%	5%	2%	4%
8.5	Victimised you because of your offence/crime?	4%	5%	4%	2%
8.5	Victimised you because of gang related issues?	1%	4%	1%	4%

Main comparator and comparator to last time

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	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	32%	29%	32%	30%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	13%	11%	13%	11%
8.7	Hit, kicked or assaulted you?	4%	4%	4%	1%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	13%	12%	13%	12%
8.7	Victimised you because of medication?	2%	3%	2%	5%
8.7	Victimised you because of debt?	1%	2%	1%	2%
8.7	Victimised you because of drugs?	1%	2%	1%	3%
8.7	Victimised you because of your race or ethnic origin?	4%	4%	4%	5%
8.7	Victimised you because of your religion/religious beliefs?	4%	3%	4%	4%
8.7	Victimised you because of your nationality?	2%	3%	2%	3%
8.7	Victimised you because you were from a different part of the country?	1%	3%	1%	5%
8.7	Victimised you because you are from a Traveller community?	0%	1%	0%	2%
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	1%
8.7	Victimised you because of your age?	0%	2%	0%	1%
8.7	Victimised you because you have a disability?	4%	3%	4%	1%
8.7	Victimised you because you were new here?	2%	4%	2%	6%
8.7	Victimised you because of your offence/crime?	4%	4%	4%	4%
8.7	Victimised you because of gang related issues?	1%	2%	1%	4%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	46%	40%	46%	30%

Main comparator and comparator to last time

Key to tables

		HMP Buckley Hall 2016	Category C training prisons comparator	HMP Buckley Hall 2016	HMP Buckley Hall 2012
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	35%	29%	35%	30%
9.1	Is it easy/very easy to see the nurse?	56%	51%	56%	63%
9.1	Is it easy/very easy to see the dentist?	27%	14%	27%	11%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	47%	48%	47%	57%
9.2	The nurse?	52%	56%	52%	70%
9.2	The dentist?	71%	42%	71%	49%
9.3	The overall quality of health services?	39%	43%	39%	57%
9.4	Are you currently taking medication?	53%	49%	53%	48%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	92%	83%	92%	83%
9.6	Do you have any emotional well being or mental health problems?	31%	32%	31%	23%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	60%	51%	60%	74%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	17%	24%	17%	24%
10.2	Did you have a problem with alcohol when you came into this prison?	12%	16%	12%	12%
10.3	Is it easy/very easy to get illegal drugs in this prison?	63%	39%	63%	39%
10.4	Is it easy/very easy to get alcohol in this prison?	23%	24%	23%	21%
10.5	Have you developed a problem with drugs since you have been in this prison?	13%	9%	13%	9%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	7%	7%	7%	7%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	60%	62%	60%	61%
10.8	Have you received any support or help with your alcohol problem while in this prison?	65%	64%	65%	77%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	96%	77%	96%	81%

Main comparator and comparator to last time

Key to tables

		HMP Buckle Hall 2016	Category C training prisons comparator	HMP Buckle Hall 2016	HMP Buckle Hall 2012
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	59%	47%	59%	48%
11.1	Vocational or skills training?	50%	42%	50%	42%
11.1	Education (including basic skills)?	66%	56%	66%	56%
11.1	Offending behaviour programmes?	27%	23%	27%	17%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	66%	60%	66%	64%
11.2	Vocational or skills training?	29%	16%	29%	17%
11.2	Education (including basic skills)?	20%	22%	20%	22%
11.2	Offending behaviour programmes?	12%	12%	12%	10%
11.3	Have you had a job while in this prison?	90%	83%	90%	82%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	42%	44%	42%	46%
11.3	Have you been involved in vocational or skills training while in this prison?	84%	74%	84%	78%
	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?	73%	57%	73%	62%
11.3	Have you been involved in education while in this prison?	86%	79%	86%	80%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	65%	59%	65%	65%
11.3	Have you been involved in offending behaviour programmes while in this prison?	78%	71%	78%	66%
	For those who have been involved in offending behaviour programmes while in this prison:				
11.3	Do you feel the offending behaviour programme(s) will help you on release?	55%	50%	55%	49%
11.4	Do you go to the library at least once a week?	13%	43%	13%	32%
11.5	Does the library have a wide enough range of materials to meet your needs?	28%	46%	28%	40%
11.6	Do you go to the gym three or more times a week?	43%	34%	43%	39%
11.7	Do you go outside for exercise three or more times a week?	79%	52%	79%	50%
11.8	Do you go on association more than five times each week?	82%	66%	82%	70%
11.9	Do you spend ten or more hours out of your cell on a weekday?	19%	17%	19%	10%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	34%	34%	30%
12.2	Have you had any problems with sending or receiving mail?	38%	42%	38%	38%
12.3	Have you had any problems getting access to the telephones?	15%	21%	15%	33%
12.4	Is it easy/ very easy for your friends and family to get here?	50%	28%	50%	56%

Main comparator and comparator to last time

Key to tables

		HMP Buckley Hall 2016	Category C training prisons comparator	HMP Buckley Hall 2016	HMP Buckley Hall 2012
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	88%	82%	88%	81%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	32%	36%	32%	34%
13.2	Contact by letter?	28%	35%	28%	35%
13.2	Contact by phone?	37%	25%	37%	26%
13.2	Contact by visit?	41%	32%	41%	39%
13.3	Do you have a named offender supervisor in this prison?	94%	75%	94%	59%
For those who are sentenced:					
13.4	Do you have a sentence plan?	80%	64%	80%	80%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	75%	53%	75%	63%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	36%	47%	36%	40%
13.6	Offender supervisor?	53%	37%	53%	35%
13.6	Offender manager?	29%	27%	29%	25%
13.6	Named/ personal officer?	14%	13%	14%	15%
13.6	Staff from other departments?	9%	15%	9%	20%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	80%	62%	80%	68%
13.8	Are there plans for you to achieve any of your targets in another prison?	24%	19%	24%	20%
13.9	Are there plans for you to achieve any of your targets in the community?	28%	28%	28%	22%
13.10	Do you have a needs based custody plan?	6%	7%	6%	9%
13.11	Do you feel that any member of staff has helped you to prepare for release?	19%	16%	19%	14%
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?	21%	34%	21%	35%
13.12	Accommodation?	31%	37%	31%	40%
13.12	Benefits?	22%	39%	22%	41%
13.12	Finances?	19%	28%	19%	29%
13.12	Education?	31%	34%	31%	36%
13.12	Drugs and alcohol?	32%	44%	32%	45%
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?	58%	55%	58%	52%

Diversity analysis



Key question responses HMP Buckley Hall 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

		Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		32	111	20	121
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	12%	2%	10%	3%
1.6	Do you understand spoken English?	100%	98%	100%	99%
1.7	Do you understand written English?	100%	98%	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			100%	10%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	5%	0%	4%
1.1	Are you Muslim?	62%	0%		
1.12	Do you consider yourself to have a disability?	6%	21%	0%	21%
1.13	Are you a veteran (ex-armed services)?	0%	5%	0%	4%
1.14	Is this your first time in prison?	50%	32%	61%	32%
2.6	Were you treated well/very well by the escort staff?	59%	79%	61%	77%
2.7	Before you arrived here were you told that you were coming here?	62%	77%	61%	77%
3.2	When you were searched in reception, was this carried out in a respectful way?	82%	94%	80%	94%
3.3	Were you treated well/very well in reception?	59%	84%	61%	82%
3.4	Did you have any problems when you first arrived?	65%	57%	71%	56%
3.7	Did you have access to someone from health care when you first arrived here?	59%	71%	39%	74%
3.9	Did you feel safe on your first night here?	94%	90%	95%	90%
3.10	Have you been on an induction course?	88%	93%	85%	92%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	41%	51%	39%	50%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White 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?	71%	70%	80%	69%
4.4	Are you normally able to have a shower every day?	97%	97%	95%	97%
4.4	Is your cell call bell normally answered within five minutes?	25%	36%	30%	34%
4.5	Is the food in this prison good/very good?	59%	69%	71%	67%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	37%	48%	31%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	41%	52%	39%	52%
4.8	Do you feel your religious beliefs are respected?	53%	50%	69%	48%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	62%	52%	75%	51%
5.1	Is it easy to make an application?	81%	86%	85%	85%
5.3	Is it easy to make a complaint?	65%	69%	75%	68%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	48%	41%	41%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	50%	42%	53%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	7%	11%	6%
7.1	Do most staff, in this prison, treat you with respect?	75%	70%	71%	72%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	64%	75%	61%	75%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	6%	18%	0%	18%
7.4	Do you have a personal officer?	84%	69%	90%	71%
8.1	Have you ever felt unsafe here?	25%	29%	25%	29%
8.2	Do you feel unsafe now?	10%	7%	10%	7%
8.3	Have you been victimised by other prisoners?	9%	15%	10%	14%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	3%	10%	0%	9%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	1%	5%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	2%	0%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	1%	0%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	3%	0%	3%

Diversity analysis

Key to tables

		Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	33%	33%	45%	29%
8.7	Have you ever felt threatened or intimidated by staff here?	13%	14%	15%	13%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	13%	2%	20%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	19%	0%	30%	0%
8.7	Have you been victimised because of your nationality? (By staff)	10%	0%	15%	0%
8.7	Have you been victimised because you have a disability? (By staff)	0%	5%	0%	4%
9.1	Is it easy/very easy to see the doctor?	26%	37%	21%	37%
9.1	Is it easy/ very easy to see the nurse?	45%	58%	36%	59%
9.4	Are you currently taking medication?	55%	52%	53%	53%
9.6	Do you feel you have any emotional well being/mental health issues?	16%	36%	21%	33%
10.3	Is it easy/very easy to get illegal drugs in this prison?	58%	64%	53%	64%
11.2	Are you currently working in the prison?	65%	67%	66%	67%
11.2	Are you currently undertaking vocational or skills training?	29%	30%	30%	29%
11.2	Are you currently in education (including basic skills)?	15%	21%	15%	20%
11.2	Are you currently taking part in an offending behaviour programme?	3%	15%	0%	13%
11.4	Do you go to the library at least once a week?	10%	13%	10%	13%
11.6	Do you go to the gym three or more times a week?	39%	45%	30%	46%
11.7	Do you go outside for exercise three or more times a week?	75%	79%	75%	79%
11.8	On average, do you go on association more than five times each week?	85%	83%	75%	84%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	21%	18%	25%	18%
12.2	Have you had any problems sending or receiving mail?	44%	37%	61%	34%
12.3	Have you had any problems getting access to the telephones?	19%	14%	16%	15%

Diversity Analysis



Key question responses (disability, age over 50) HMP Buckley Hall 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 aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		25	118	22	121
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	8%	3%	0%	5%
1.6	Do you understand spoken English?	96%	99%	100%	98%
1.7	Do you understand written English?	96%	99%	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	8%	26%	0%	26%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	4%	5%	4%
1.1	Are you Muslim?	0%	17%	0%	17%
1.12	Do you consider yourself to have a disability?			38%	13%
1.13	Are you a veteran (ex-armed services)?	4%	3%	14%	2%
1.14	Is this your first time in prison?	25%	38%	23%	38%
2.6	Were you treated well/very well by the escort staff?	76%	75%	78%	74%
2.7	Before you arrived here were you told that you were coming here?	88%	71%	78%	73%
3.2	When you were searched in reception, was this carried out in a respectful way?	96%	90%	91%	91%
3.3	Were you treated well/very well in reception?	88%	77%	91%	77%
3.4	Did you have any problems when you first arrived?	74%	56%	54%	60%
3.7	Did you have access to someone from health care when you first arrived here?	80%	66%	87%	65%
3.9	Did you feel safe on your first night here?	91%	91%	82%	92%
3.10	Have you been on an induction course?	91%	91%	95%	91%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	59%	47%	59%	47%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	67%	71%	91%	67%
4.4	Are you normally able to have a shower every day?	100%	97%	100%	97%
4.4	Is your cell call bell normally answered within five minutes?	18%	36%	46%	32%
4.5	Is the food in this prison good/very good?	50%	70%	82%	65%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	31%	48%	57%	43%
4.7	Are you able to speak to a Listener at any time, if you want to?	50%	49%	69%	46%
4.8	Do you feel your religious beliefs are respected?	43%	52%	73%	47%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	54%	54%	87%	49%
5.1	Is it easy to make an application?	82%	85%	87%	85%
5.3	Is it easy to make a complaint?	73%	67%	57%	70%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	22%	46%	36%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	45%	50%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	6%	5%	7%
7.1	Do most staff, in this prison, treat you with respect?	59%	73%	91%	67%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	72%	73%	85%	71%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	0%	19%	28%	13%
7.4	Do you have a personal officer?	66%	74%	85%	70%
8.1	Have you ever felt unsafe here?	54%	23%	48%	24%
8.2	Do you feel unsafe now?	5%	8%	5%	8%
8.3	Have you been victimised by other prisoners?	23%	12%	18%	13%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	23%	5%	13%	7%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	1%	5%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	1%	5%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	0%	0%	1%
8.5	Have you been victimised because of your age? (By prisoners)	9%	1%	9%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	14%	0%	5%	2%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	73%	25%	36%	31%
8.7	Have you ever felt threatened or intimidated by staff here?	25%	12%	15%	12%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	4%	0%	5%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	5%	0%	5%
8.7	Have you been victimised because of your nationality? (By staff)	0%	3%	0%	3%
8.7	Have you been victimised because of your age? (By staff)	0%	0%	0%	0%
8.7	Have you been victimised because you have a disability? (By staff)	25%	0%	10%	3%
9.1	Is it easy/very easy to see the doctor?	31%	35%	39%	34%
9.1	Is it easy/ very easy to see the nurse?	67%	54%	71%	53%
9.4	Are you currently taking medication?	80%	48%	81%	48%
9.6	Do you feel you have any emotional well being/mental health issues?	52%	28%	31%	31%
10.3	Is it easy/very easy to get illegal drugs in this prison?	63%	63%	59%	62%
11.2	Are you currently working in the prison?	52%	70%	69%	67%
11.2	Are you currently undertaking vocational or skills training?	38%	28%	13%	32%
11.2	Are you currently in education (including basic skills)?	33%	17%	31%	18%
11.2	Are you currently taking part in an offending behaviour programme?	23%	10%	9%	12%
11.4	Do you go to the library at least once a week?	12%	12%	39%	8%
11.6	Do you go to the gym three or more times a week?	34%	45%	36%	45%
11.7	Do you go outside for exercise three or more times a week?	86%	77%	77%	79%
11.8	On average, do you go on association more than five times each week?	81%	84%	77%	84%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	14%	20%	23%	18%
12.2	Have you had any problems sending or receiving mail?	48%	37%	23%	40%
12.3	Have you had any problems getting access to the telephones?	23%	13%	0%	17%



Prisoner survey responses HMP Buckley Hall 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

		D wing	A, B, C wings
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
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Number of completed questionnaires returned		21	121
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	1%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	0%	6%
1.4	Is your sentence less than 12 months?	0%	1%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	6%
1.5	Are you a foreign national?	5%	4%
1.6	Do you understand spoken English?	100%	98%
1.7	Do you understand written English?	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	14%	24%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	4%
1.1	Are you Muslim?	5%	16%
1.11	Are you homosexual/gay or bisexual?	0%	3%
1.12	Do you consider yourself to have a disability?	19%	17%
1.13	Are you a veteran (ex-armed services)?	14%	2%
1.14	Is this your first time in prison?	43%	34%
1.15	Do you have any children under the age of 18?	33%	56%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	63%	28%
2.5	Did you feel safe?	95%	82%
2.6	Were you treated well/very well by the escort staff?	81%	74%
2.7	Before you arrived here were you told that you were coming here?	86%	71%
2.8	When you first arrived here did your property arrive at the same time as you?	86%	81%

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SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	63%	47%
3.2	When you were searched in reception, was this carried out in a respectful way?	100%	89%
3.3	Were you treated well/very well in reception?	95%	76%
	When you first arrived:		
3.4	Did you have any problems?	50%	60%
3.4	Did you have any problems with loss of property?	25%	23%
3.4	Did you have any housing problems?	0%	4%
3.4	Did you have any problems contacting employers?	0%	1%
3.4	Did you have any problems contacting family?	10%	11%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	1%
3.4	Did you have any money worries?	5%	10%
3.4	Did you have any problems with feeling depressed or suicidal?	5%	9%
3.4	Did you have any physical health problems?	0%	8%
3.4	Did you have any mental health problems?	10%	21%
3.4	Did you have any problems with needing protection from other prisoners?	0%	0%
3.4	Did you have problems accessing phone numbers?	15%	13%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	77%	77%
3.6	A shower?	33%	30%
3.6	A free telephone call?	72%	63%
3.6	Something to eat?	38%	39%
3.6	PIN phone credit?	48%	56%
3.6	Toiletries/ basic items?	48%	26%

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SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	67%	62%
3.7	Someone from health services?	81%	67%
3.7	A Listener/Samaritans?	43%	27%
3.7	Prison shop/ canteen?	19%	24%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	71%	60%
3.8	Support was available for people feeling depressed or suicidal?	61%	45%
3.8	How to make routine requests?	66%	41%
3.8	Your entitlement to visits?	55%	43%
3.8	Health services?	75%	54%
3.8	The chaplaincy?	61%	51%
3.9	Did you feel safe on your first night here?	80%	93%
3.10	Have you been on an induction course?	90%	91%
3.12	Did you receive an education (skills for life) assessment?	74%	87%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	66%	47%
4.1	Attend legal visits?	62%	59%
4.1	Get bail information?	0%	16%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	30%	39%
4.3	Can you get legal books in the library?	25%	28%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	95%	67%
4.4	Are you normally able to have a shower every day?	100%	98%
4.4	Do you normally receive clean sheets every week?	69%	34%
4.4	Do you normally get cell cleaning materials every week?	90%	68%
4.4	Is your cell call bell normally answered within five minutes?	80%	26%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	95%	47%
4.4	Can you normally get your stored property, if you need to?	39%	20%
4.5	Is the food in this prison good/very good?	66%	67%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	55%	43%
4.7	Are you able to speak to a Listener at any time, if you want to?	90%	43%
4.8	Are your religious beliefs are respected?	75%	48%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	66%	54%
4.10	Is it easy/very easy to attend religious services?	69%	45%

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SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	95%	84%
5.3	Is it easy to make a complaint?	80%	67%
5.5	Have you ever been prevented from making a complaint when you wanted to?	6%	20%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	73%	46%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	95%	34%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	61%	41%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	0%	7%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	100%	66%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	100%	69%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	61%	18%
7.4	Do staff normally speak to you most of the time/all of the time during association?	55%	9%
7.5	Do you have a personal officer?	100%	68%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	39%	25%
8.2	Do you feel unsafe now?	0%	8%
8.4	Have you been victimised by other prisoners here?	30%	10%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	10%	2%
8.5	Hit, kicked or assaulted you?	5%	3%
8.5	Sexually abused you?	0%	0%
8.5	Threatened or intimidated you?	15%	6%
8.5	Taken your canteen/property?	0%	5%
8.5	Victimised you because of medication?	0%	1%
8.5	Victimised you because of debt?	0%	3%
8.5	Victimised you because of drugs?	0%	3%
8.5	Victimised you because of your race or ethnic origin?	5%	1%
8.5	Victimised you because of your religion/religious beliefs?	5%	1%
8.5	Victimised you because of your nationality?	0%	1%
8.5	Victimised you because you were from a different part of the country?	0%	2%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	5%	2%
8.5	Victimised you because of your age?	10%	1%
8.5	Victimised you because you have a disability?	5%	2%
8.5	Victimised you because you were new here?	0%	3%
8.5	Victimised you because of your offence/crime?	15%	2%
8.5	Victimised you because of gang related issues?	0%	2%

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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	20%	33%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	0%	13%
8.7	Hit, kicked or assaulted you?	0%	4%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	5%	14%
8.7	Victimised you because of medication?	5%	2%
8.7	Victimised you because of debt?	0%	1%
8.7	Victimised you because of drugs?	0%	1%
8.7	Victimised you because of your race or ethnic origin?	0%	5%
8.7	Victimised you because of your religion/religious beliefs?	5%	4%
8.7	Victimised you because of your nationality?	0%	3%
8.7	Victimised you because you were from a different part of the country?	0%	1%
8.7	Victimised you because you are from a traveller community?	0%	0%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	0%	0%
8.7	Victimised you because you have a disability?	5%	4%
8.7	Victimised you because you were new here?	0%	3%
8.7	Victimised you because of your offence/crime?	10%	4%
8.7	Victimised you because of gang related issues?	0%	1%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	66%	30%
9.1	Is it easy/very easy to see the nurse?	85%	50%
9.1	Is it easy/very easy to see the dentist?	50%	24%
9.4	Are you currently taking medication?	75%	50%
9.6	Do you have any emotional well being or mental health problems?	25%	32%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	0%	19%
10.2	Did you have a problem with alcohol when you came into this prison?	5%	11%
10.3	Is it easy/very easy to get illegal drugs in this prison?	75%	59%
10.4	Is it easy/very easy to get alcohol in this prison?	20%	21%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	15%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	0%	9%

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SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	72%	57%
11.1	Vocational or skills training?	52%	48%
11.1	Education (including basic skills)?	63%	66%
11.1	Offending Behaviour Programmes?	34%	26%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	90%	63%
11.2	Vocational or skills training?	15%	32%
11.2	Education (including basic skills)?	15%	22%
11.2	Offending Behaviour Programmes?	15%	11%
11.4	Do you go to the library at least once a week?	15%	12%
11.5	Does the library have a wide enough range of materials to meet your needs?	38%	26%
11.6	Do you go to the gym three or more times a week?	59%	42%
11.7	Do you go outside for exercise three or more times a week?	75%	79%
11.8	Do you go on association more than five times each week?	100%	81%
11.9	Do you spend ten or more hours out of your cell on a weekday?	34%	17%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	59%	30%
12.2	Have you had any problems with sending or receiving mail?	30%	39%
12.3	Have you had any problems getting access to the telephones?	10%	15%
12.4	Is it easy/ very easy for your friends and family to get here?	66%	48%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	100%	94%
13.10	Do you have a needs based custody plan?	5%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	38%	15%