

Report on an unannounced inspection of

HMP Leyhill

by HM Chief Inspector of Prisons

5–16 September 2016

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



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Glossary of terms

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

Introduction

HMP Leyhill is a long-established open prison in Gloucestershire that currently holds some 500 men. A major element of the prison's role is of course the preparation of many of the men being held there for release back into the community. Given the serious nature of the offences committed by some of the men, the long sentences they have served and the changing nature of the prison population, this is a complex and challenging task.

Since the last inspection in 2012, the population of the prison had changed dramatically. In 2012, sex offenders accounted for about 20% of the prisoners at Leyhill. The figure was now around 60%. This could have led to many kinds of negative outcomes for prisoners but, to the credit of the prison, it had not. While some sex offenders complained of being bullied and victimised by other prisoners, the prison had a clear zero-tolerance attitude towards this kind of behaviour and this, of course, was exactly as it should be. This had undoubtedly contributed to Leyhill being the safe and decent establishment that we found it to be.

During the inspection I was invited by the senior management of the prison to look on Leyhill as a community where the management, staff and prisoners work together to 'make it work' and wherever possible to provide bespoke support for the men. The inspection found plenty of evidence to confirm that this was indeed the case, and the details of this can be found within the body of this report.

Despite the overwhelmingly positive findings of this inspection, there were some areas of concern. We commended the extensive use of prisoners as orderlies, mentors and advice workers, but care needed to be taken that they were properly trained and supervised. We were also concerned that, for an open prison, access to release on temporary licence (ROTL) was problematic, with too few placements available and delays in processing requests. These issues needed to be addressed, as did the barriers – such as the lack of approved premises – that delayed the release of some men who had been deemed ready for release by the Parole Board. This was clearly unacceptable.

Our confidence that these matters will be addressed was helped by the positive response to the recommendations made following our last inspection. On that occasion we made 47 recommendations, of which we found that 30 had been fully or partly achieved. This was higher than we have unfortunately become accustomed to seeing elsewhere, and no doubt accounted for the fact that the high standards seen in 2012 had not only been maintained, but improved upon. But for the concerns highlighted above, it is entirely possible that HMP Leyhill would have been awarded the highest possible judgements in all areas.

The outcome of this inspection is a credit to all of the staff at Leyhill and the way they have responded to the energetic and committed leadership given by the senior management of the prison.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

November 2016

Fact page

Task of the establishment

HMP Leyhill is an open prison, accommodating category D male prisoners over the age of 25. Its specialist function is to assess and prepare indeterminate-sentenced prisoners for release.

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

Public

Region/Department

South-West

Number held

506

Certified normal accommodation

515

Operational capacity

515

Date of last full inspection

16–20 April 2012

Brief history

HMP Leyhill originally opened in 1946 and was the first independent, minimum security prison in England and Wales. In 1986, offenders were re-housed from the original hutted accommodation into two new large units. This redevelopment programme also provided a new central kitchen and dining room.

During 1990, a new visits complex, reception, chapel, hospital and facilities for the farms and gardens, works department, and PE and education departments were completed.

In 2002, a further accommodation unit (C unit) was added. A palliative care suite was also constructed, providing two bed spaces for terminally ill prisoners entering the last few weeks of their life.

Short description of residential units

There are three units – A (holds 208 prisoners), B (holds 199 prisoners) and C (holds 108 prisoners) – all single-room accommodation, with the exception of 10 double rooms, spread between A and B units.

Name of governor/director

Helen Ryder

Escort contractor

GeoAmey

Health service provider

InspireBetterHealth Partnership

Learning and skills providers

Weston College

Independent Monitoring Board chair

Allan Taylor

Community rehabilitation company (CRC)

Bristol, Gloucestershire, Somerset and Wiltshire CRC

About this inspection and report

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

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

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

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

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

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

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
 - **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 early days processes were good. Few prisoners felt unsafe. Violent incidents were rare and low-level victimisation, including that directed towards sex offenders, was managed well. The number of self-harm incidents was very low and prisoners at risk of harm were supported well. Security was proportionate, the prison felt relaxed and stable, and the number of absconds had reduced year on year. The number of adjudications and levels of use of force were very low. A similar proportion of prisoners to that at other open prisons said that illicit drugs were readily available. The prison was proactively addressing supply and demand, and the use of new psychoactive substances had declined. Support for substance misusers was effective. **Outcomes for prisoners were good against this healthy prison test.***
- S2 *At the last inspection in April 2012 we found that outcomes for prisoners in HMP Leyhill were good against this healthy prison test. We made eight recommendations in the area of safety. At this follow-up inspection we found that four of the recommendations had been achieved, two had been partially achieved and two had not been achieved.*
- S3 Reception and first night processes were friendly and welcoming. They were led by peer workers, who provided valuable advice and support to new arrivals, but there was too little oversight and involvement from staff. There was no opportunity for prisoners to disclose safety or vulnerability concerns to staff in private.
- S4 First night rooms shared by two were spacious and well prepared. The first night induction session, delivered by the prisoner orderlies, was well pitched and helpful.
- S5 The seven-day induction process was thorough and well structured, with good continuing support from Insiders (prisoners who introduce new arrivals to prison life).
- S6 Few prisoners felt unsafe at the time of the inspection but perceptions of safety had deteriorated, and around a quarter said that they had felt unsafe at the establishment at some time. Recorded levels of physical violence were exceptionally low. Prisoners reported relatively high levels of victimisation from other prisoners, most of which was directed towards sex offenders and took the form of threatening behaviour and insulting remarks because of their sexual orientation or offence. The proportion of sex offenders had increased considerably since the previous inspection, and the establishment was aware of their safety concerns and addressed individual incidents of bullying very well.
- S7 There had been no self-inflicted deaths since the previous inspection and the number of self-harm incidents was low. The assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm that we saw showed good engagement with and support for prisoners, and those who had been subject to ACCT procedures felt well supported. There was a well-established group of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), with strong support from the local Samaritans.
- S8 Security arrangements were proportionate to the risks posed and the prison felt relaxed and stable. The number of absconds and prisoners returned to closed conditions had reduced year on year since the previous inspection. A good flow of intelligence reports was received from across the prison and responses to these were prompt.

- S9 In our survey, around a third of prisoners said that drugs were easily available, which was similar to the comparator and to the proportion at the time of the previous inspection. The random mandatory drug testing positive rate was relatively low but new psychoactive substances (NPS; new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects) were not tested for. There was evidence of some NPS use but following proactive measures to address this, the prevalence had reduced. The prison had developed a detailed supply reduction strategy and there was a coordinated approach between departments and service providers. In our survey, fewer prisoners than elsewhere and than at the time of the previous inspection said that alcohol was easily available at the prison.
- S10 Most prisoners were on the enhanced level of the incentives and earned privileges scheme, but in reality the key motivator for good behaviour was a desire to remain in open conditions.
- S11 The number of adjudications was low. A quarterly standardisation meeting reviewed themes and patterns of behaviour and the punishment tariff, but there was no quality assurance of adjudications. Levels of use of force were low, with only one incident in the year to date. The records indicated proportionate use and effective de-escalation. There was no segregation unit.
- S12 Prisoners with drug and alcohol problems could easily access the substance misuse service and almost all said that they had found the support helpful. Interventions appropriately focused on relapse prevention and there was good provision of peer support schemes. No prisoner had required clinical substance misuse treatment in the previous two years.

Respect

S13 *External areas and the prison grounds were attractive, well maintained and some of the best we had seen. Residential areas were clean and appropriately furnished. Staff–prisoner relationships were good. Applications and complaints were well managed. Equality and diversity arrangements had improved and outcomes for prisoners with protected characteristics were mostly good. Faith provision was very good and the chapel was a focal point for the community. Health services were reasonably good overall. The quality of the food provided was very good but opportunities for prisoners to self-cater were too limited. **Outcomes for prisoners were good against this healthy prison test.***

S14 *At the last inspection in April 2012 we found that outcomes for prisoners in HMP Leyhill were reasonably good against this healthy prison test. We made 17 recommendations in the area of respect.² At this follow-up inspection we found that eight of the recommendations had been achieved, three had been partially achieved and six had not been achieved.*

S15 The prison grounds were impressive, well maintained and some of the best we had seen. Living units were clean and most had pleasant communal areas. Most rooms were single occupancy and appropriately furnished. Washrooms were clean but some showers were poorly ventilated and mouldy. Landings contained sufficient telephones, which could be used in private. Applications were easy to make, dealt with promptly and fairly, and prisoners were positive about the process.

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

- S16 Most prisoners, and more than at similar prisons, said that staff treated them respectfully and that they had a member of staff they could turn to if they had a problem. In our survey, prisoners were particularly positive about their personal officers. We saw good, supportive interactions, which were reflected in good case note entries. Prisoner consultation was effective.
- S17 The strategic management of equality had improved and was given good managerial attention. The well-attended diversity and race equality action team meeting addressed all of the protected characteristics. The range of monitoring had been extended, and action was taken when issues were identified. The prisoner diversity consultative group and a wide range of forums ensured that the views of prisoners from different minority groups were heard and informed management actions. Discrimination incident report forms were available on the units, and were dealt with thoroughly.
- S18 Around 15% of the population were from a black and minority ethnic background. In our survey, they mostly reported similarly to white prisoners. We found staff working hard to engage with these prisoners constructively. However, engagement with and support for foreign national prisoners was too limited. Gay, bisexual and transgender prisoners were well supported.
- S19 The prison held a substantial number of older prisoners and those with disabilities. Older prisoners were positive about their care, and there was good support for them, enhanced by some excellent activities and assistance provided by the Lobster Pot, a drop-in centre for the over-50s. The care for prisoners with disabilities was mostly good. Those with a high level of need were supported well by disability orderlies and social care workers but support plans were not available to residential unit staff, and orderlies required training and supervision to help to clarify and reinforce the limits of their demanding role. Prisoners with acute needs had no reliable means of raising an alarm in an emergency.
- S20 The chaplaincy catered successfully for a wide range of faiths, with a strong emphasis on making sure that the needs of minority faiths were properly met. Faith facilities were good. The chapel provided a focal point for a range of communal activities, and was popular and well used. Prisoners were encouraged to visit it for social as well as spiritual reasons.
- S21 The number of complaints submitted was relatively low. Many prisoners told us that they avoided making complaints because of the fear of transfer back to closed conditions. However, their perceptions were not borne out by the inspection. In our survey, prisoners were relatively positive about complaints, and these perceptions were supported by our findings. Confidential complaints were responded to in a timely manner but responses were not quality assured.
- S22 The integrated health services provided by the new health provider, InspireBetterHealth, were embedding well and were reasonably good overall. Clinical governance was generally good. Prisoners in our survey were negative about access to primary care services. Waiting times for a routine appointment with the GP and dentist were excessive, although the care provided once they were seen was good.
- S23 The range of primary care services was generally good, although some aspects of chronic disease management were underdeveloped. Support for the large proportion of prisoners with complex needs was generally good, although recorded care plans were poor. Prisoners with social care needs received good support, but care planning and communication were inadequate.
- S24 Medications management had improved and was mostly good. Demand for mental health services was relatively high. Overall, prisoners had prompt access to good mental health

support and reported positively on the service, although access to some services was inadequate. There was no regular mental health awareness training for discipline staff.

- S25 The Care Quality Commission (CQC) found breaches of the relevant regulations and has issued a requirement notice. (See Appendix III.)
- S26 Prisoners were very positive about the quality of the food provided. Self-catering facilities were too limited, particularly considering that the population consisted mostly of long-term prisoners who were working towards release.

Purposeful activity

S27 *Prisoners were unlocked all day, and had free movement across the site and good access to structured recreational activities. The management of learning and skills was good. There were sufficient, mostly high-quality activity places within the prison but too few release on temporary licence placements for work. The quality of teaching and learning was outstanding, and highly effective in most sessions. Trained peer mentors provided valuable support. Standards of work were high and prisoners achieved well in all but functional maths at level 1. Library and PE facilities were good and they were well used. **Outcomes for prisoners were good against this healthy prison test.***

S28 *At the last inspection in April 2012 we found that outcomes for prisoners in HMP Leyhill were good against this healthy prison test. We made nine recommendations in the area of purposeful activity. At this follow-up inspection we found that six of the recommendations had been achieved and three had been partially achieved.*

- S29 Prisoners were not locked in their rooms and had good freedom of movement across the site for over 12 hours a day. They had good access to association equipment and regular, structured recreational activities.
- S30 The strategic and operational planning of learning and skills and work provision had improved, and provided effective structures and a clear focus for the development and improvement of the overall provision. Quality improvement systems were effective. Numerous improvement actions had been or were being implemented but some key weaknesses remained, particularly the small number of release on temporary licence (ROTL) work places available and a lack of courses developing self-employment, general practical employability and business administration skills.
- S31 Sufficient activities were available within the prison for most prisoners, and all those who were fit for work were employed in some form of purposeful activity. Education, work and vocational training options were varied and prisoners could also combine work with part-time education. The range of national vocational qualifications available in the industrial workshops had increased, although some were still not yet linked directly to commercial activity.
- S32 The quality of teaching and learning was outstanding, and the classes we observed were lively and highly effective in most cases. Qualified and enthusiastic staff provided high-quality coaching in vocational training and work areas. Prisoners were keen and eager to learn, and suitably challenged. Teachers focused very well on building on prisoners' strengths and most learners made good progress. Peer mentors were supervised and used well in most sessions.

- S33 Punctuality and attendance were excellent. Learners displayed good conduct and respect towards teachers and tutors. Orderly and peer mentoring roles had raised the self-esteem and skills of these learners in particular. There was insufficient work to keep prisoners occupied in all workshops all of the time.
- S34 Most learners who started an education or vocational course completed it. A large proportion of learners gained their target qualification, but the number passing level 1 functional skills mathematics examinations was low and had been since the previous inspection.
- S35 The library was well stocked and inviting. Access arrangements were good, seven days a week, and use of the library was high. Support for reading schemes, including that of the Shannon Trust (which provides peer-mentored reading plan resources and training to prisoners), was good, and effective working links had been maintained between the library, education and training departments.
- S36 The PE department provided prisoners with good access to fitness and PE equipment, and around half the population used the facilities. A range of fitness and leadership-based qualifications had been introduced and learners' achievements were high on all the courses offered. Links with the health care department were good and there was sufficient provision for older prisoners and those with particular needs.

Resettlement

S37 *The prison held a substantial number of long-term prisoners who presented a high risk of harm. The offender management unit was appropriately focused on managing and reducing risk, and the quality of offender assessment system (OASys) assessments was good. Home detention curfew processes were effective and timely. Public protection measures were mostly sound and release on temporary licence (ROTL) assessments were of high quality. Avoidable delays in ROTL processes caused considerable frustration to prisoners. A wide range of accommodation, and finance and debt advice was provided but a lack of approved premises delayed some prisoners' release. Arrangements to support prisoners into employment on release were satisfactory but there were too few opportunities for work and training placements in the community. Visits and ROTL were used well to promote family contact. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S38 *At the last inspection in April 2012 we found that outcomes for prisoners in HMP Leyhill were reasonably good against this healthy prison test. We made 13 recommendations in the area of resettlement. At this follow-up inspection we found that four of the recommendations had been achieved, eight had not been achieved and one was no longer relevant.*

- S39 There was reasonable oversight of resettlement provision through a well-attended quarterly committee meeting, an action plan and an up-to-date strategy. The resettlement needs analysis was not sufficiently robust and was based entirely on prisoners' views. The number of ROTL events had decreased significantly and was much lower than at other open prisons.
- S40 The population had changed since the previous inspection. Most prisoners were sex offenders and/or serving an indeterminate sentence. Three-quarters had been assessed as presenting a high risk of harm to others. The offender management unit was appropriately focused on managing the risk of harm and the quality of offender assessment system (OASys) assessments and sentence plans was good. With the exception of ROTL, prisoners' perceptions of offender management were positive. Almost all prisoners in our survey knew

that they had an offender supervisor. We found sufficient offender supervisor contact for the preparation of risk assessments, but other contact to engage and motivate prisoners was too variable. The level of frustration among prisoners about ROTL was very high. We saw evidence of some avoidable delays, and a lack of communication with prisoners made the situation worse. Almost all of the home detention curfew applications had been approved and processes were applied soundly.

- S41 Public protection arrangements were robust. ROTL risk assessments were comprehensive and of high quality, and boards were meaningful. Multi-agency public protection arrangements (MAPPA) management levels were confirmed before release but not before ROTL. Enhanced behavioural monitoring was used well to provide additional oversight of individual prisoners and manage their specific risks.
- S42 Demand for resettlement services was relatively low, with about 25 releases each month. Good attention was paid to prisoners' resettlement needs and they could access a wide range of help, both in the prison and the community. The independent living skills programme provided excellent preparation for release but too few places were provided.
- S43 Owing to the nature of their offending, most prisoners were released into approved premises. The lack of places at approved premises meant that a small number of prisoners who had been approved by the parole board for release remained in prison, which was unacceptable. For some others, places in approved premises for overnight ROTL were cancelled at short notice. A few prisoners had been released with no fixed abode and there was no reliable method of checking the sustainability of accommodation placements.
- S44 Effective support from the National Careers Service helped prisoners to make informed choices about career paths and employment options. Prisoners could access some high-quality external work and training placements on ROTL but the number of prisoners routinely being released had reduced to around 40, with fewer than 30 in paid work. There were insufficient links with employers, community-based voluntary sector organisations, and education and training providers to expand the opportunities available to prisoners on release.
- S45 Pre-release arrangements to ensure continuity of care were appropriate for prisoners with physical and mental health needs. The facilities and care for prisoners with palliative and end-of-life needs were very good. High-quality release planning was provided for prisoners with substance misuse issues, and they received harm reduction information, which included the dangers of NPS use.
- S46 Prisoners requiring assistance with their finances and debts were well supported, with a comprehensive range of advice. Prisoners had access to a local Credit Union and would, very soon, be able to open a bank account.
- S47 Most prisoners were a long distance from home, making visits difficult and expensive for many, but nothing was being done to assist with travel arrangements. The visits environment was suitably relaxed and welcoming. Regular, well-structured family visits were well received but only available to those with children. ROTL was used well to support family ties.
- S48 Work to address attitudes, thinking and offending behaviour was reasonable but there was no current analysis of the offending behaviour needs of the population.

Main concerns and recommendations

S49 Concern: Prisoners were used widely across the prison as peer workers, including orderlies, mentors, and support and advice workers, which we commend. However, in some areas, a lack of training and supervision of peer workers placed them, and the prisoners they were supporting, at risk of exploitation.

Recommendation: All prisoners in peer worker and mentoring roles should be trained and have regular supervision from staff to help to clarify and reinforce the limits of their demanding roles.

S50 Concern: Prisoners' access to ROTL was problematic and hindered their progress. There were too few external education, training and work ROTL placements available and prisoners experienced considerable and avoidable delays in the processing of their ROTL requests.

Recommendation: The number of high-quality work-related release on temporary licence (ROTL) placements should be increased and prisoners' should have timely access to ROTL, to enable them to progress.

S51 Concern: The lack of places at approved premises meant that a small number of prisoners who had been approved for release by the parole board remained in prison and others were not always able to undertake overnight ROTL.

Recommendation: Prisoners should not have their release delayed by the lack of approved premises.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 Transfers were handled appropriately by escort staff. Prisoners we spoke to had been given water and a sandwich during the journey. On arrival at the prison, they spent the minimum amount of time on the van and were disembarked promptly, making their way independently to the reception area.
- I.2 Reception staff planned effectively for new arrivals and knew their expected arrival times. Reception stayed open when needed, including at lunchtime if necessary. In our survey, fewer prisoners than at comparator prisons and than at the time of the previous inspection said that they had been given notice of their move to the establishment. However, all the new arrivals we saw had been given sufficient warning of their destination and were prepared for open conditions.

Early days in custody

Expected outcomes:

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

- I.3 The reception building was clean and welcoming. Reception and first night processes, led by enthusiastic peer workers, were friendly and the tone was well judged. A team of Insiders (prisoners who introduce new arrivals to prison life) and a safer custody orderly, who was also a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners), were present throughout to provide valuable advice and support. They talked to prisoners in the waiting room while they booked in, escorted them to their units, walked them up to their rooms and took them to the health centre. However, although all of these steps put new prisoners at ease, and the information that the peer workers provided was appropriate and accurate, there was too little oversight and involvement from staff (see main recommendation S49). Prisoner orderlies also helped staff to process new arrivals' property, which was inappropriate.
- I.4 There was no opportunity for prisoners to disclose safety or vulnerability concerns to staff in private on their first night. The only meaningful conversation with an officer took place while prisoners were having their photograph taken but this discussion lacked privacy. The officer explored how the prisoner was coping with the move to an open prison but did not ask him about suicide and self-harm, and some health care assessments did not take place until the next working day (see paragraph 2.44). In our survey, fewer prisoners than at comparator prisons and than at the time of the previous inspection said that they had felt safe on their first night (87% versus 91% and 94%, respectively).
- I.5 In our survey, fewer prisoners than at the time of the previous inspection said that they had been offered something to eat, tobacco, a shower, a telephone call and PIN telephone credit on arrival. Reception staff did not offer new arrivals a hot drink or a snack, which was poor.

However, they provided a reception pack (a grocery pack which usually contains basic food and drink items such as tea, milk, sugar, and tobacco or sweets). Once on their unit, prisoners could shower. Recent arrivals told us that their telephone access had been transferred from their previous prison on the first night and an extra £2 credit added.

- I.6** New arrivals were generally located with another prisoner, in shared rooms which were spacious and well prepared.
- I.7** The first night induction session, delivered by the prisoner orderlies, was well pitched and helpful but there was no staff oversight of this (see main recommendation S49).
- I.8** The seven-day induction process was thorough and well structured. Prisoners were given an induction booklet, which was stamped at each session to evidence completion. There was good support from Insiders throughout the induction programme.

Recommendations

- I.9 Prisoner orderlies should not be involved in processing the property of new arrivals.**
- I.10 All new arrivals should have a private interview with an officer on their first night to explore feelings of self-harm or suicide.**
- I.11 New arrivals should be offered food and drink in reception.**

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.12** In our survey, few prisoners (8%) said that they felt unsafe at the time of the inspection, in line with the percentage at comparator prisons, but more than elsewhere and than at the time of the previous inspection said that they had felt unsafe at the establishment at some time (25% versus 19% and 17%, respectively).
- I.13** Acts of violence were rare and there had been only one reported assault and two alleged fights in the year to the inspection, none of which had been proven on adjudication. There had been no reports of unexplained injuries in the previous six months.
- I.14** Levels of reported victimisation were relatively high, most of which was directed towards sex offenders and took the form of threatening behaviour and insulting remarks because of their sexual orientation or offence. The proportion of sex offenders had increased dramatically since the previous inspection, from around 20% to over 60%, and the establishment was aware of their safety concerns and addressed individual incidents of bullying very well.
- I.15** There was a widespread perception among the sex offender population that there were areas of the prison, such as some residential units and work places, where they were unwelcome or from which they were excluded, and there had been no investigation by the prison to either confirm or refute this. We reviewed the location of prisoners across the

residential units and were satisfied that there was no evidence to support this view in relation to the rooms to which prisoners were allocated.

- I.16** The policy of zero tolerance towards violence was widely publicised and was included in the literature issued before arrival at the prison and also during the induction process. There was a comprehensive and widely understood violence reduction strategy that included procedures for monitoring and challenging perpetrators and for supporting victims. Incidents of bullying were managed well and we were impressed by the comprehensive nature of the procedures. Records demonstrated a consistent and thorough approach, with a good level of oversight from residential managers.
- I.17** Prisoner violence reduction orderlies were an integral part of the safer custody team. They were well trained and were able to demonstrate a clear understanding of their roles and responsibilities, while having a good appreciation of the boundaries relating to their work. Consultation with and support for them was regular and effective.

Recommendation

- I.18 Regular monitoring of the offence demographics of the population and their access to work placements and location within the prison should be undertaken. The results should be widely publicised to help to address the negative perceptions held by some prisoners.**

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.19** There had been no self-inflicted deaths since the previous inspection and the number of self-harm incidents was low, with five incidents in the previous six months. The quarterly safer custody meeting explored trends but it was difficult to draw firm conclusions with such low numbers. Assessment, care in custody and teamwork (ACCT) case management documents tended to be opened to provide support for prisoners struggling to cope with a range of issues, such as the move to open conditions, bereavement and refusal of release on temporary licence.
- I.20** Recent ACCT documents that we checked showed good engagement with and support for prisoners. One prisoner was subject to ACCT procedures during the inspection and his case review was well attended and provided appropriate ongoing support. Another prisoner who had received support earlier in the year reported tangible, positive outcomes from ACCT procedures.
- I.21** There was a well-established group of 11 Listeners, with strong support from the Samaritans. Listeners suites were adequate but lacked comfortable seating.
- I.22** Emergency response provision out of hours was inadequate. Night staff did not carry anti-ligature knives or know where to locate one.

Recommendation

I.23 Operational staff should carry anti-ligature knives at all times.

Safeguarding (protection of adults at risk)

Expected outcomes:

The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.³

- I.24** The older population, some of whom were ill or had disabilities, had the potential to present significant safeguarding issues. The local safeguarding policy had recently been revised and was sufficiently robust, but was not yet embedded. Staff we spoke to were not sure what to do if they had concerns, and referral forms were not yet available.
- I.25** Links with the local safeguarding adults board had only been initiated in May 2016, and only one meeting had taken place so far.
- I.26** Potentially vulnerable adults were discussed at a monthly multidisciplinary complex cases meeting attended by the head of public protection, the safer custody team and the occupational therapist responsible for social care. At the meeting we attended, the discussion was thorough and appropriate. While there were serious concerns about the capacity of certain prisoners, none had so far been judged unable to report abuse or neglect (see also section on health services).

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.27** Security arrangements were proportionate to the risks posed, and the prison felt relaxed and stable. There was an appropriate approach to searching and to the list of items that prisoners could have in possession, and they had relatively free access to most of the prison grounds.
- I.28** The prison was well sighted on the risks posed by the large population of sex offenders, and there were good links to the police and other crime prevention agencies.
- I.29** A good level of intelligence was received each month from across the prison. The main subjects were drug-related activity, inappropriate behaviour and bullying. Intelligence reports were processed efficiently, and when actions such as the need for searches, patrols or drug tests were identified, they were carried out promptly.
- I.30** The monthly security meeting was well attended and focused on emerging threats and issues. Security objectives were routinely drawn up and communicated to all staff and there was

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

evidence of actions taking place around the prison – for example, the random stop and search of prisoners’ bags, searches of communal areas and random patrols of the grounds. Information updates were also provided to the weekly operations meeting, which enabled information to be shared quickly with key areas of the prison outside the more formal monthly meeting.

- I.31** The number of absconds had reduced year on year, with 10 in the previous year, compared with 23 in the year before the previous inspection. A full investigation was carried out into each abscond to ascertain the reasons and reduce future instances.
- I.32** A formal multidisciplinary review was convened if there were concerns about the suitability of prisoners on indeterminate sentences for open conditions. The number of prisoners returned to closed prison had reduced steadily. There was evidence of steps being taken to address poor behaviour rather than immediately returning prisoners to closed conditions following an increase in risky or negative behaviour (see also section on public protection).
- I.33** In our survey, 36% of respondents said that it was easy or very easy to get illegal drugs at the prison, which was similar to the comparator and to the percentage at the time of the previous inspection, and indicated ready availability of these substances. However, drug finds indicated lower availability, and the random mandatory drug testing rate was low, at 2.16%, although new psychoactive substances (NPS; new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects) were not tested for. In our survey, fewer prisoners than elsewhere and that at the time of the previous inspection said that alcohol was easily available at the prison (15% versus 21% and 25%, respectively).
- I.34** There was evidence of some NPS use but following some measures to address this, including the transfer out of some prisoners believed to have been involved in drugs, prevalence had reduced. The supply reduction strategy and action plan were comprehensive, and included steps to raise staff and prisoner awareness of the dangers of NPS. There was a coordinated approach to supply and demand reduction between departments and service providers.

Incentives and earned privileges⁴

Expected outcomes:

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

- I.35** The IEP scheme was clear and well publicised. At the time of the inspection, 399 prisoners were on the enhanced level and about 100 were on the standard level. However, there was little difference between the two levels, and in reality the key motivator for good behaviour was the desire to remain in open conditions.
- I.36** We were told that three men had been placed on the basic level of the scheme in the previous nine months, but their behaviour had been managed effectively without transferring them back to closed conditions.

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

Discipline

Expected outcomes:

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

Disciplinary procedures

- I.37** Adjudication levels were low, with an average of around four a week in the previous six months. Most charges related to unauthorised possession of articles such as DVDs, excess kit, breaches of licence conditions and, occasionally, drug-related activity.
- I.38** There was a quarterly standardisation meeting, where emerging themes and patterns of behaviour were discussed and the punishment tariff was reviewed, but there was no quality assurance of adjudications.
- I.39** The adjudications and records we observed demonstrated a reasonable level of enquiry and also good involvement of prisoners, affording them the opportunity to explain their actions fully.

The use of force

- I.40** There were few incidents requiring the use of force, with only one use of restraint techniques in the year to date. The records of this incident showed a proportionate response and also demonstrated effective use of de-escalation techniques.
- I.41** Use of force forms were completed following such incidents, and also following the use of handcuffs when removing a prisoner from the establishment. These were completed comprehensively and provided a good insight into the events.

Segregation

- I.42** There was no segregation unit at the prison.

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.43** The substance misuse policy was up to date and contained detailed action plans, which were informed by internal and external needs assessments and reviewed at the bimonthly drug strategy meetings. The substance misuse strategy was well led and there was a good level of joint working between prison departments and drug and alcohol service providers.
- I.44** In our survey, a large proportion of prisoners said that they had received support with their drug or alcohol problem, and almost all had found the support helpful. The Avon and Wiltshire Partnership Trust formed part of the consortium InspireBetterHealth, and provided substance misuse services at the prison. A model of integrated substance misuse, mental health and learning disability services was being implemented.

- I.45** The substance misuse team was located in the health care building and had good facilities. A temporary staff shortage was affecting group work but the service was easily accessible, and at the time of the inspection 45 prisoners were actively engaged with the team. The induction programme included the dangers of NPS use.
- I.46** Case files evidenced detailed recovery plans and regular, structured one-to-one work. A five-week group-work programme, 'Out of the Gate', appropriately focused on relapse prevention.
- I.47** In addition, prisoners could attend Alcoholics Anonymous and Narcotics Anonymous groups, but self-management and recovery training (SMART) groups had only run twice in the previous three months. An active substance misuse peer support scheme had been developed and five peer mentors participated in delivering induction input (see above) and group work. They also staffed 'recovery hubs' on A and B units, where prisoners could drop in during the evenings and weekends for support and information.
- I.48** Bristol Community Health was responsible for providing clinical substance misuse treatment. Integrated working was facilitated by the co-location and daily meetings of all health and psychosocial support teams. There had been no demand for opiate substitute treatment in the previous two years but the expertise and the facilities were in place if the need were to arise.

Recommendation

- I.49** **Sufficient staff should be available to deliver substance misuse groups regularly.**

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1** The prison grounds were impressive and well maintained, providing a calm and pleasant environment, and were some of the best we had seen. There were three residential units (A, B and C), with C unit designated as an enhanced unit. One of the landings on B unit contained 20 rooms especially adapted for prisoners with limited mobility. Most rooms were single occupancy and appropriately furnished. There were also double rooms, and these were spacious (see also paragraph 1.6).
- 2.2** Communal areas in all units were clean and free of graffiti, and had excellent display boards containing useful information. Landings contained a sufficient number of telephones, which could be used in private. The large association room on each unit contained a seating area, a television and a variety of table and board games. All units had a kitchen but, with the exception of microwave ovens, had insufficient cooking facilities (see also paragraph 2.77 and recommendation 2.80).
- 2.3** There were sufficient showers and toilets. Washrooms were clean but some taps and toilet seats were missing or broken. Some shower areas were mouldy as a result of poor ventilation. Prisoners had good access to cleaning materials. Laundry services were good, with bedding and clothing washed weekly. In our survey, more prisoners than elsewhere said that they received clean sheets every week. All prisoners could wear their own clothes, and there was good access to prison-issue clothing for those who needed it.
- 2.4** Application forms were readily available. In our survey, more prisoners than at other open prisons said that applications were easy to make and dealt with fairly and promptly. As well as using the official application process, prisoners could make written applications to the prisoners consultative committee (PCC), which was able to deal with a number of basic issues directly.

Recommendation

- 2.5 Washrooms should be refurbished where necessary, and showers should be regularly deep cleaned to remove mould.**

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.

- 2.6** Staff–prisoner relationships were good and the interactions we observed were friendly, respectful, relaxed and supportive. In our survey, more respondents than at other open prisons said that staff treated them respectfully (88% versus 78%), and that there was a member of staff they could turn to if they had a problem (86% versus 77%).

- 2.7** Most prisoners had a personal officer, and those we spoke to were very positive about them. In our survey, most respondents said that their personal officer was helpful or very helpful. Personal officer case note entries were detailed, respectful and demonstrated a good level of knowledge and understanding of the prisoner.
- 2.8** The PCC was active. Monthly meetings were attended by the 15 PCC members (each tasked with a different area), the governor and the head of residence. The agenda, as well as minutes from the meetings, were prominently displayed on unit noticeboards.

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic⁵ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

Strategic management

- 2.9** The strategic management and oversight of equality had improved. An overarching equality policy had been developed which described how support should be provided to prisoners within each of the protected characteristic groups. This was complemented by a series of more detailed policies covering each protected characteristic.
- 2.10** The diversity and race equality action team meeting was held bimonthly, usually chaired by the deputy governor, and addressed all protected characteristics. It was well attended by prison-based staff and prisoner representatives but there was no independent, external representation.
- 2.11** Since the previous inspection, the range of data monitoring had been extended from race to include all of the protected characteristics. The population at the prison was extremely diverse and, unusually, most individuals fell under one or more of the protected characteristics. As the population was small and complex, this created problems when using the standard monitoring tool and it was sometimes difficult to obtain clear data that could be used to determine if any discrimination was taking place. Despite this, an action plan had recently been put in place to address the concerns which had been identified – for example, in relation to the number of black and ethnic minority prisoners being released on temporary licence.
- 2.12** The prisoner diversity consultative group, which involved representatives from most of the minority groups, provided a useful forum to help to ensure that individuals with distinctive needs could express themselves. This forum was supported by a wide range of other support forums and led to action being taken by the management team.
- 2.13** Discrimination incident report forms were available on the units and prisoners were aware of how to use them. Most of the recent reports related to allegations of insulting comments or offensive graffiti. Investigations were thorough and most contained detailed witness statements. It was clear that discriminatory behaviour was not tolerated; for example, we

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

found evidence of homophobic behaviour being dealt with firmly. Although the overall standard of investigations had improved since the previous inspection, there was no external quality assurance.

Recommendation

- 2.14 Arrangements should be made to ensure that there is regular external community involvement and scrutiny of the work of the diversity and race equality action team, including discrimination incident report forms.** (Repeated recommendation 2.29)

Protected characteristics

- 2.15** Around 15% of prisoners were from a black and minority ethnic background, and in our survey they reported similarly to white prisoners across most areas. However, those we spoke to were negative about their experiences in the prison. One of their main complaints was that there were few staff members from a black and minority ethnic background and that staff in general did not understand them. We found that reasonable efforts were made by staff to take account of the needs of this population.
- 2.16** A wide range of events and forums were carried out regularly, giving individuals from most minority groups the opportunity to express their views and participate in activities. Prisoners were often given the opportunity to organise these activities, and the events were well advertised across the prison. The catering team provided support for celebrating all of the principal religious festivals.
- 2.17** The number of foreign national prisoners held had decreased considerably and there were just 14 at the time of the inspection. Those who were eligible received free telephone calls and, occasionally, some of them were interviewed by Home Office staff. However, apart from this, support was too limited, and these prisoners did not appear to participate actively in focus groups or forums.
- 2.18** Since the previous inspection, the proportion of prisoners over the age of 50 had increased from almost a third to almost half. Older prisoners indicated that they were generally content with their treatment, and their survey responses reflected similar views to those expressed by the younger population. The Lobster Pot, a drop-in centre for the over-50s, was an excellent resource, providing a creative range of activities, support and assessment of need.
- 2.19** According to our survey, approximately a fifth of the population regarded themselves as having some form of disability. Many were located on B unit, where the living conditions had been appropriately adapted for prisoners with disabilities and mobility issues. The level of day-to-day care for them was generally good. However, in our survey, prisoners with disabilities had relatively poor perceptions about safety; for example, far more prisoners with a disability than those without said that they had been victimised by other prisoners (42% versus 18%).
- 2.20** A number of prisoners located on B unit had been assessed as having complex needs. In addition to professional input by social care staff (see also section on health services), some of these men depended heavily on disability orderlies for day-to-day practical support. These orderlies had job descriptions and carried out their roles with energy and commitment; those we spoke to were positive about the support they received from staff, although this tended to be informal and ad hoc, and they had no training or supervision (see main

recommendation S49). Officers on B unit maintained a detailed log of daily events concerning prisoners with complex needs but there were no unit-based care plans. Such prisoners had no means of alerting staff directly in an emergency; orderlies were expected to be the first point of contact in this situation, which was inappropriate.

- 2.21** The rights of gay and bisexual prisoners were well respected and there was an active support group. No transgender prisoners had been held at the prison for some time, but there were suitable arrangements to support them.

Recommendations

- 2.22** The poor perceptions of safety by prisoners with a disability should be explored and action taken to improve them.
- 2.23** Unit-based care plans should be available for all prisoners with complex needs.
- 2.24** Prisoners with limited mobility and complex health needs should be able to contact staff in an emergency.

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.

- 2.25** The chaplaincy catered successfully for a wide range of faiths. There was good access to facilities, and a strong emphasis on making sure that the needs of minority faiths were properly met.
- 2.26** Faith facilities were good and included a centrally located, well-equipped chapel, a separate multi-faith room and outside areas for contemplation and worship. The chapel was open every day until 7.30pm, and provided a focal point for a range of communal activities, including concerts and music groups, and was popular and well used. Prisoners were encouraged to visit it for social as well as spiritual reasons.

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.

- 2.27** The number of complaints submitted was relatively low, with 200 in the previous six months, of which 21 had been confidential.
- 2.28** Complaint forms were readily available. In our survey, more prisoners than at other open prisons said that it was easy to make a complaint and that they were dealt with fairly, but only 39% said that they were dealt with promptly. We found that complaints were dealt with in a timely and appropriate manner, with regular quality assurance of responses.

- 2.29** Several prisoners told us that they avoided making complaints because of the fear of being returned to closed conditions. However, their perception was not borne out by the inspection. Data analysis carried out by equality team found that only three of the 39 prisoners transferred out in the previous three months had made a complaint before their transfer.
- 2.30** Confidential complaints were logged and responded to in a timely manner, but they were not held centrally and responses were not quality assured.

Recommendation

- 2.31 Confidential complaints should be stored centrally and responses should be quality assured.**

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.

- 2.32** There was no longer any formal legal services provision but there was little demand for such support, other than making arrangements for prisoners to speak to their solicitors, and this was carried out adequately. Telephone access during the working day was good and prisoners were able to remain on their units to make official telephone calls if the need arose.
- 2.33** There was good provision for legal visits. The library held an appropriate range of legal texts and Prison Service Instructions, which prisoners could consult, borrow or photocopy.

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.

- 2.34** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁶ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. One area has been identified which requires improvement with a subsequent notice issued by the CQC which has been detailed within Appendix III of this report.

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

Governance arrangements

- 2.35** The Care Quality Commission issued a ‘requirement to improve’ notice following the inspection (see Appendix III).
- 2.36** InspireBetterHealth, a partnership of eight health care providers led by Bristol Community Health CIC, had provided all health and substance misuse services since April 2016. Joint working between the prison, health providers and commissioners was effective. Regular, well-attended clinical governance and partnership board meetings addressed all essential areas. A 2015 health needs assessment had informed the new service specification. Learning from prisoner feedback, adverse incidents, audits and complaints informed service improvement.
- 2.37** The small health services team had experienced significant staffing shortages and inconsistent clinical leadership for many months. However, it had expanded and stabilised in the month before the inspection. An acting clinical lead, supported by a cluster manager, provided effective clinical leadership. Health services staff were on site from 8am to 4pm, Monday to Friday, although additional input was occasionally provided, based on clinical need, such as palliative care.
- 2.38** Most prisoners we spoke to, and 62% of respondents to our survey, said that the overall quality of health services was good, which was similar to the comparator but much lower than at the time of the previous inspection (76%).
- 2.39** Health services staff were easily identifiable and their interactions with prisoners were professional and compassionate. They were in date with all mandatory training and had good access to appraisals and clinical supervision. Access to wider training and development opportunities, including triage skills, had been restricted owing to staffing shortages but this was being addressed. Staff had easy access to an appropriate range of policies, including communicable diseases, and communication within the wider team was good.
- 2.40** Health services were delivered from a dedicated and good facility. Clinical rooms were spacious and well equipped but there were some non-compliant fixtures and fittings. An enhanced cleaning schedule was introduced during the inspection to meet the required standards.
- 2.41** Health services staff had access to appropriate emergency equipment, which was checked regularly. Ambulances were called promptly for medical emergencies. Thirteen prisoners had died from natural causes since the previous inspection, and the Prisons and Probation Ombudsman had reported positively on the health care received in all of the 10 published reports.
- 2.42** Written information on health services was easily accessible. Prisoners knew how to complain, make suggestions about or compliment the health services through the confidential ‘Listening to You’ process. A total of 43 complaints and 14 compliments had been received in the five months to August 2016. Most responses we sampled were timely and appropriate. Prisoners were often seen individually to resolve their issues.
- 2.43** A satisfactory range of health promotion information was available in the health centre waiting rooms. There was good access to age-sensitive community health screening campaigns and health checks for older prisoners, and also to immunisations, support for blood-borne viruses, smoking cessation services and barrier protection. The Lobster Pot (see paragraph 2.18) ran regular, well-advertised health care events linked to national initiatives, including dementia and prostate cancer awareness, although its links with the health care department were underdeveloped.

Delivery of care (physical health)

- 2.44** Nurses completed a comprehensive health screen on all new arrivals, although these were sometimes completed on the day after arrival and we were concerned that arrivals were not prioritised on clinical need. Of four prisoners we saw arriving, two were seen the next day, one of whom had complex needs, so there was a risk that his first night needs were not identified or addressed promptly.
- 2.45** In our survey, prisoners were negative about access to a doctor and nurses. Prisoners requested services by attending the health centre. Appropriate measures had been implemented to allow them to communicate their needs confidentially in the cramped main waiting room. Those who worked outside the prison told us of difficulties in accessing health services due to the restricted opening hours, but an evening clinic was due to start in October 2016.
- 2.46** A wide range of clinics was available, including a new musculoskeletal service. Access to most health care professionals was good, although waiting times for routine GP appointments and for the podiatrist were excessive, at four weeks and five months, respectively. Some waiting lists, such as for the podiatry and routine nurse clinics, were not adequately prioritised to ensure that those prisoners most in need were seen first. However, urgent and same-day GP and nurse appointments were available. Non-attendance rates were low. Prison staff we spoke to knew how to access the out-of-hours GP service and reported positively on it.
- 2.47** A small team of experienced nurses provided effective clinics for prisoners with most long-term conditions, except for coronary heart disease, which was managed by GPs in the absence of an appropriately qualified nurse.
- 2.48** Electronic prisoner clinical records were adequate but there was a lack of individualised care plans for prisoners with complex health needs. Such prisoners were reviewed at monthly multidisciplinary meetings but the recording of reviews in clinical records was inconsistent.
- 2.49** External health appointments were well managed and rarely cancelled due to lack of prison staff escorts.

Recommendations

- 2.50 Prisoners should receive all primary care services within community-equivalent waiting times and be prioritised based on clinical need.**
- 2.51 Prisoners with complex health and social care needs should have recorded, regularly reviewed care plans.**

Social care

- 2.52** Prisoners with social care needs were identified appropriately. A South Gloucester Council coordinator assessed the needs of individual prisoners promptly. Access to aids and adaptations was good.
- 2.53** Visiting carers from Agincare UK delivered individual care packages. During the inspection, two prisoners were receiving personal care (see also paragraph 2.20). The care planning by Agincare staff was poor and we were concerned to see that key information which had a direct impact on one prisoner's overall care had not been passed to health services staff (see Appendix III).

- 2.54** The social care coordinator had good links with the health care department and the prison, and attended the weekly additional needs meeting, where prisoners with complex needs were discussed. However, these meetings did not lead to a collaborative recorded plan of care for those with the greatest need. Prison, health services and social care staff held separate records and care plans, which did not promote effective communication to ensure that prisoners' needs were met (see also paragraph 2.20).

Pharmacy

- 2.55** HMP Bristol had supplied daily medication since April 2016. Health services staff told us that timely medication delivery had been compromised between April and June 2016 owing to the large number of prisoners on medication, change in pharmacy provider and move to electronic prescribing. However, this had been resolved, supported by the recent recruitment of a health care assistant who focused on many of the administrative aspects of medication management, including ordering.
- 2.56** Appropriate, up-to-date protocols and prescribing guidance were available and followed. Prescribing and administration records were completed electronically on SystemOne (the electronic clinical record). Prisoners attended timed appointments to collect medicines in a private environment.
- 2.57** All medicines, except a few controlled drugs, were given in-possession, following a regularly reviewed risk assessment. Tradable medicines were monitored effectively and were supplied weekly. Prisoners ordered their own monthly and ad-hoc medication monthly, which gave them responsibility for their health. Intelligence-led recorded spot checks of medication held in-possession occurred regularly.
- 2.58** Three patients received supervised consumption of controlled drugs on weekdays and had them in-possession for the weekend, which was in line with community provision. Procedures for the administration of potent medicines, including end-of-life medications, were satisfactory.
- 2.59** Medicines were stored securely and well organised. An appropriate stock of emergency medication and medicines for minor ailments was held, although their use was not recorded or monitored effectively. Mechanisms to ensure that stock (including dressings) was in-date were not sufficiently robust. Refrigerator temperatures were not recorded daily and we found evidence that some had been outside the required range, with no record of remedial action. Errors, near misses and drug alerts were managed appropriately.
- 2.60** The pharmacist attended fortnightly to complete clinical audits and to review any prisoners she had identified as requiring a medicines use review. Pharmacy staff liaised effectively with clinicians, and interventions were recorded on SystemOne. Regular local and cluster medicines and therapeutics meetings discussed all key issues, including incidents.
- 2.61** Nurses could administer an adequate range of medicines to treat minor ailments without a doctor's prescription. However, prisoners could not buy or obtain basic remedies, such as paracetamol and antacids, via the health centre or the prison shop. During office hours, they had to book a nurse assessment to access these remedies, which caused delays and increased the nursing workload. Out of hours, prisoners could access single doses of paracetamol from discipline staff but there was no system to ensure that officers knew who should not receive this drug.

Recommendations

- 2.62** Stock medicines should be date-checked and their use should be recorded and audited.
- 2.63** Prisoners should be able to access basic medications easily and safely, to allow them to self-care as they would in the community.

Dentistry

- 2.64** Time for Teeth provided a full range of NHS-equivalent services through two dentist and two dental therapist sessions weekly. The new provider had inherited a waiting list of 150 prisoners requiring routine dental assessments and, although this was reducing, at the time of the inspection waiting times were excessive, at 18 weeks. However, treatment generally started promptly following assessment. Appointments were allocated based on clinical need, and access for urgent and emergency care was prompt. Effective oral health promotion was provided.
- 2.65** The dental facility was spacious and well equipped, with a clear separation between clean and dirty areas, although there was no separate decontamination room. Clinical governance, equipment maintenance, record keeping and storage, and infection control were appropriate.

Recommendation

- 2.66** Prisoners requiring routine dental assessments should be seen within six weeks.

Delivery of care (mental health)

- 2.67** In our survey, more prisoners than at comparator prisons said that they had emotional well-being or mental health problems (22% versus 14%), although many more prisoners than elsewhere said that they had been helped or supported by someone at the prison (73% versus 58%). Joint working between prison, health and mental health staff was very good. There was no regular mental health awareness training for discipline staff.
- 2.68** Avon and Wiltshire Partnership NHS Trust (AWP) provided integrated mental health services to around 40 prisoners with mild-to-moderate, and 10 prisoners with severe and enduring, mental health needs. Prisoners referred through the open referral system were seen promptly by mental health nurses, based on clinical need. A psychiatrist attended monthly. A weekly joint meeting with substance misuse workers supported effective communication and allocation.
- 2.69** No groups or counselling were provided, although a new delivery model, which included groups and access to community-equivalent stepped interventions, was to be introduced in the next few months. Support for those with learning disabilities was accessible from AWP; however, most prisoners diagnosed with or suspected to have attention-deficit hyperactivity disorder or autism spectrum disorders could not access specialist services. This was a significant gap for the small number of prisoners affected.
- 2.70** Clinical records demonstrated that prisoners received good levels of input, and the care planning approach was maintained for those who required it.

- 2.71** There had been no transfers under the Mental Health Act since the previous inspection. Prisoners who required more intensive mental health support were transferred to HMP Bristol.

Recommendations

- 2.72** Prison staff should have regular mental health awareness training.
- 2.73** Prisoners should have access to attention-deficit hyperactivity disorder and autism spectrum disorder 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.

- 2.74** Prisoners were very positive about the quality of the food provided. In our survey, far more respondents than elsewhere said that the food at the prison was good or very good (73% versus 35%). However, this was not the case for black and minority ethnic compared with white prisoners, with only 48% of the former prisoners saying that the food was good. The reasons for this dissatisfaction were not clear.
- 2.75** We found that the menus were varied and catered for various dietary, religious and cultural needs. All meals were served in the large dining hall, and prisoners could make their food choices daily at the servery, rather than having to make them a week in advance. Hot food was served twice a day.
- 2.76** The kitchen was of a reasonable size and fairly clean but the fabric of the building needed updating. Many floor and wall tiles were missing or damaged, some of the equipment was not working and some fixtures were broken. However, funds to rectify these issues had been approved.
- 2.77** Self-catering facilities on the units were limited (see also paragraph 2.2), which was particularly disappointing considering that the population consisted mostly of long-term prisoners who were working towards release.
- 2.78** Prisoners were regularly consulted about the food provided, through comment books and an annual survey, and their views were taken into account by the catering staff.

Recommendations

- 2.79** The reasons for the apparent dissatisfaction of black and minority ethnic prisoners with the food should be explored. (Repeated recommendation 2.112)
- 2.80** Self-catering facilities should be improved, so that prisoners can develop some essential independent living skills needed for their release from prison.

Purchases

Expected outcomes:

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

- 2.81** The prison shop list contained a wide range of goods and products, and prisoners could ask for items to be added to it through the PCC. In our survey, far more respondents than at other open prisons said that the shop sold a wide enough range of goods to meet their needs (65% versus 51%). The perceptions of black and minority ethnic prisoners were far less positive, with less than half of those surveyed saying that the range of goods met their needs.
- 2.82** Items bought through the prison shop were distributed once a week, in an orderly fashion, and there were processes to deal with missing and damaged items. Newly arrived prisoners could receive a reception pack on arrival (see also paragraph 1.5), but sometimes had to wait up to two weeks to receive their first full shop order.
- 2.83** Prisoners could order goods from an appropriate range of catalogues and were not charged a handling fee.

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** Prisoners were not locked in their rooms and had freedom of movement across the site from 6am to 8.30pm, when residential unit external doors were locked. They were expected to remain in their room between 11pm and 6am unless they were using the communal toilet facilities.
- 3.2** The regime ran to time and there were no delays in prisoner movements to activity places. Association periods were regular and all of the equipment on residential units was in good order. There was a wide range of structured recreational and leisure activities during evenings and weekends.

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.

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

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

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

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

Personal development and behaviour: *Good*

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

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.

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>.

Management of learning and skills and work

- 3.4** Experienced and skilled prison managers provided good strategic direction and leadership to prison staff and partners. The strategic and operational planning of learning, skills and work had greatly improved, leading to effective and constructive joint working arrangements with the education and training provider, Weston College, and a clear focus on the development and improvement of the overall provision. The prison had made good progress in tackling all the recommendations for improvement identified at the previous inspection and had implemented effective solutions for most of them. The prison and the education and training provider were actively and successfully focusing on continuous improvement across the learning, skills and work provision. The provision provided by Weston College was outstanding.
- 3.5** Prison managers had devised and implemented effective quality improvement systems which were well structured and effective, allowing for quick identification of, and responses to, areas for improvement. Particularly good use was made of a detailed annual prisoner needs analysis and regular surveys to identify what was working well and what could be improved. Weston College's system for observing and evaluating the quality of teaching and learning was thorough but the prison's observation system was neither evaluative enough nor sufficiently developmental.
- 3.6** Numerous improvement actions had been or were being implemented by the time of the inspection, but some key areas for improvement remained which the prison recognised. These included substantially increasing the number of prisoners accessing release on temporary licence (ROTL) (see below and main recommendation S50) and introducing discrete courses in self-employment, general practical employability and business administration skills.

Recommendation

- 3.7** **The prison's observations of teaching, training and learning in workshops should be appropriately evaluative and developmental for prison workshop staff.**

Provision of activities

- 3.8** Sufficient activities were available for most prisoners, and all but a small number were employed in meaningful purposeful activity during the working week. Prisoners were able to combine work with part-time education sessions in functional skills English and mathematics. Waiting lists for all activities were short. Thirty prisoners were making reasonable progress in Open University or distance learning courses in a broad range of subjects.
- 3.9** The range of vocational training had increased since the previous inspection and included popular level 2 courses in barbering, professional cookery options and a site carpentry course. Weston College was in the process of appointing a tutor for a new fork-lift truck course and a new tutor for the level 2 painting and decorating course. However, the prison was aware that there was a need to offer more training and qualifications, particularly in relation to construction trades. Self-employment and business-related themes were often integrated well into vocational training – for example, as part of the horticulture and dry-stone walling courses – but the prison recognised that it was not yet meeting prisoners' long-expressed requests for specific courses covering self-employment and business aspects.
- 3.10** The number and breadth of national vocation qualifications (NVQs) offered in the prison's industrial workshops had increased, and were good. Most NVQs were linked directly to a

specific commercial activity, such as warehousing, but others, notably in the industry-standard print shop, were not. Prison managers were in the process of identifying a more relevant print-based qualification. Prisoners in the market garden worked in a commercial environment, growing produce for the main kitchen and a local farm shop.

- 3.11** Many more prisoners in the previous academic year than previously had attended functional skills English and mathematics courses at level 2, partly because the prison had mandated that a level 2 mathematics or English qualification was a minimum requirement before prisoners could be considered for ROTL. The number of prisoners taking a level 1 functional skills course in English or mathematics was relatively low as a proportion of the prison population and had remained broadly the same over the previous two years. Almost all prisoners we spoke to were critical of the arrangements to allocate them to functional skills classes at levels 1 and 2, and most expressed the view that they were re-doing functional skills qualifications at levels which they had already achieved. We were unable to verify these claims as formal records or certificates of prisoners' prior attainment in functional skills at other prisons were not passed routinely to Leyhill prison staff.
- 3.12** Until recently, the weekly pay rate for prisoners taking education classes had been low compared with work. Most of the prisoners we spoke to said that this had acted as a disincentive to their involvement in education. A new pay rate equivalent to that of work had been introduced for prisoners taking functional skills classes but most prisoners were unclear how the new pay structure operated.
- 3.13** Those prisoners accessing ROTL were learning and implementing very good work and social skills, and were generally much appreciated by the employers and voluntary agencies they worked for. However, the number experiencing ROTL was very low for a prison of this type, so most prisoners had few opportunities to develop real-world employment, employability and social skills (see also paragraph 4.38 and main recommendation S50).

Recommendation

- 3.14 The prison should develop and implement discrete self-employment and business-related courses and further expand the vocational training provision.**

Quality of provision

- 3.15** Prisoners were unanimous in their high praise for the professionalism, dedication and skills of their teachers and instructors. Qualified and enthusiastic vocational training tutors provided high-quality coaching in the vocational training and work areas, although a minority did not routinely record prisoners' progress and achievement of skills in the workplace.
- 3.16** Prisoners' induction to the learning, skills and work provision was comprehensive and included constructive and informed contributions from a peer mentor. Induction included an individual, confidential interview with a careers adviser, who ensured that a detailed skills action plan was developed and shared with other staff.
- 3.17** Teaching and learning in English and mathematics classes and much of the vocational training sessions were lively and highly effective in most cases. Teachers focused well on identifying and building on prisoners' strengths and most learners made good progress.
- 3.18** There was insufficient work to keep prisoners occupied in all workshops all of the time. Teachers and instructors applied assessment practice effectively in classroom and workshop areas, to plan learning and help prisoners to achieve their learning goals. Teachers' support in

education classroom sessions for the relatively large proportion of learners with a learning disability or difficulty was well-resourced and effective.

- 3.19** Teachers used peer mentors well to support prisoners' learning. This support was well planned and effective, and mentors were supervised closely. Carpentry learners augmented their practical learning well during a weekly session led by a peer mentor in the virtual campus (see below) suite, in which they revised course notes and reflected on their learning.
- 3.20** The quality of the equipment used in most commercial and training workshops was very good, but of a lesser standard in a few other areas, such as the carpentry shop, where the roof was not weatherproof.

Recommendation

- 3.21 Prisoners' progress and achievement of skills in the workplace should be better recorded.**

Personal development and behaviour

- 3.22** Learners' attendance and punctuality at education and training sessions and work were excellent. Weston College's data indicated that learners' attendance at education and vocational training sessions was high across the whole academic year, and routinely close to the prison target of 90%.
- 3.23** Learners were confident and motivated. They displayed very good conduct and respect towards teachers and tutors during education and training sessions, and at work. Prisoners with orderly and peer mentoring roles in particular increased their self-esteem and learning support skills.
- 3.24** Prisoners' health and safety were a declared a high priority for the prison, but a small minority of prisoners in one work area did not wear all their appropriate protective equipment. The prison had ensured that prisoners with disabilities were able to gain easy access to work environments but those using a wheelchair had difficulty in gaining access to the virtual campus (internet access for prisoners to community education, training and employment opportunities).

Recommendation

- 3.25 All prisoners should wear the required protective equipment during work sessions.**

Education and vocational achievements

- 3.26** Most learners who started an education or vocational course completed it and a high proportion gained their target qualification, but the number passing level 1 functional skills mathematics examinations was too low, and had been since the previous inspection. By contrast, a large proportion of learners on the level 2 mathematics programme, many more than in the previous year, passed their examinations.

- 3.27** Prisoners' attainment of customer service qualifications in 2015/16 was low and the course had since been revised. Prisoners were successful in attaining NVQs, with around 280 prisoners achieving certificate- or diploma-level NVQs in each of the previous two years.

Recommendation

- 3.28 Attainment in level 1 mathematics should be improved.**

Library

- 3.29** The library, managed by South Gloucester County library services, was well stocked and well managed. It was open every day, and in the evenings and weekends was run successfully by well-trained orderlies. Around 75% of prisoners had joined the library and most prisoners used it regularly. The stock loss rate was low.
- 3.30** A wide range of newspapers and magazines was available, and there was a welcoming and comfortable seating area in which to read them. The stock comprised a wide range of fiction and non-fiction books, music CDs, DVDs, foreign language texts and quick-reads, together with legal texts and Prison Service Instructions.
- 3.31** Library staff obtained books for prisoners from outside library services on a timely basis. There were no computers in the library for prisoners to carry out Open University or distance learning studies.
- 3.32** A number of creative projects that promoted reading and literacy, including that of the Shannon Trust (which provides peer-mentored reading plan resources and training to prisons), were managed well by library staff. Projects helped prisoners to develop their reading skills in a supportive environment and produce audio books for their children (see paragraph 4.54). Effective working links had been maintained between the library, education and training departments.

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.

- 3.33** The PE provision was managed well. Staffing was adequate, consisting of three PE instructors and several trained orderlies. Accredited gym programmes at levels 1, 2 and 3 had been introduced since the previous inspection. Programmes in first aid, together with fitness and exercise programmes to instructor level, were provided. Learners' retention and achievements were high on all the courses offered.
- 3.34** Access to recreational PE was very good. The programme was planned well and the timetable ensured that all prisoners could attend for a minimum of two sessions a week. Prison data indicated that approximately 50% of all prisoners, on average, participated in PE each week and 31% attended for two or more sessions. Instructors had developed the programme to include team sports and recreational activities for older and less mobile prisoners. Some of the equipment in the fitness suite was in need of repair.

3.35 The PE department had excellent links with the health care and education departments. Remedial programmes provided prisoners with specific health and fitness needs, with good support.

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 There was reasonable oversight of resettlement provision. Well-attended quarterly committee meetings were held. These provided updates across the resettlement pathways but did not cover offender management in sufficient detail.
- 4.2 There was an up-to-date strategy, supported by an action plan and an annual needs analysis. However, offender management was not placed at the heart of the strategy, to ensure that it was at the forefront of the delivery of resettlement services. Moreover, the analysis of resettlement needs was not comprehensive enough as it only used prisoners' views, without making use of more robust data – from offender assessment system (OASys) assessments and P-NOMIS (electronic case notes), for example.
- 4.3 In the previous six months, there had been 11,000 release on temporary licence (ROTL) events. We found that the number of ROTL events had decreased significantly, by around 50%, and was much lower than at other open prisons. Difficulties in securing work opportunities in the community for sex offenders and delays in the completion of ROTL processes had contributed to this decline (see also sections on learning and skills and work, and offender management and planning, and main recommendation S50).
- 4.4 Community rehabilitation company (CRC) provision was delivered by Catch 22 for the Bristol, Gloucestershire, Somerset and Wiltshire CRC (see also section on reintegration planning) and they were reasonably well integrated into the prison, but day-to-day links to, and information exchange with, the offender management unit (OMU) about individual case management were not yet fully developed.

Recommendation

- 4.5 **The resettlement needs analysis should be more comprehensive and the reducing reoffending strategy should place offender management at the forefront of the work.**

Offender management and planning

Expected outcomes:

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

- 4.6 The population had changed dramatically since the previous inspection. The number of sex offenders had trebled, over half of the population was serving an indeterminate sentence and three-quarters had been assessed as presenting a high risk of harm to others.

- 4.7** The OMU was appropriately focused on managing risk of harm, and the quality of OASys assessments and sentence plans was good, with no backlog in either. In almost all of the cases we looked at, there had been an appropriate and timely assessment of the likelihood of reoffending, a satisfactory full analysis of the risk of harm and a reasonably high-quality risk management plan.
- 4.8** With the exception of ROTL, prisoners' perceptions about offender management were positive. Almost all prisoners in our survey knew that they had an offender manager in the community, and more than at other open prisons and than at the time of the previous inspection knew that they had an offender supervisor in the prison. In addition, more than elsewhere and than at the time of the previous inspection said that they were being supported by their offender manager and offender supervisor to achieve their sentence plan targets.
- 4.9** Although we found that there was sufficient offender supervisor contact with prisoners for the preparation of risk assessments such as parole reports, the level of contact aimed at engaging and motivating prisoners outside of these events was too variable and in some cases absent.
- 4.10** The level of frustration among prisoners about the poor access to ROTL was very high and we saw evidence of some avoidable delays, particularly for restricted ROTL cases (high risk of harm cases). In our survey, views about ROTL were negative, and much worse than we normally find in open prisons.
- 4.11** There were several flaws in the application of the restricted ROTL processes, which caused delays for prisoners. These included too few ROTL boards; a backlog of risk assessments waiting for consideration; too many delayed reports from offender managers in the community; a disjointed administrative process split between the ROTL hub team and case administrators, with too little oversight of timescales and progress made; and too little involvement of offender supervisors in the preparation stages. P-NOMIS was not well used by OMU staff, so evidence of progress made was not readily visible to others, which limited information exchange. We also found a lack of communication with prisoners about progress with their ROTL assessments, which made the situation worse.
- 4.12** Home detention curfew (HDC) assessments were started well before the earliest eligibility date. Applications were well managed and 90% were approved, which was much higher than at the time of the previous inspection. Some late releases were beyond the control of the prison, including some prisoners arriving at the establishment with only a few weeks of their sentence left to serve. The quality of HDC assessments was good and the reasons for refusal were defensible.

Recommendation

- 4.13** **Offender supervisors should have regular and meaningful contact with all prisoners on their caseload, in order to reinforce skills learnt, motivate them and keep them engaged in progression.**

Public protection

- 4.14** Most prisoners fell under multi-agency public protection arrangements (MAPPA) owing to the serious nature of their offending, and many presented significant risks to children. Public protection arrangements were sound. Prisoners were screened on arrival for public protection issues, and restrictions, such as no contact with children, were applied effectively.

Applications for contact with children were also dealt with appropriately, consulting all relevant people and considering the best interests of the children involved.

- 4.15 The interdepartmental risk management team was reasonably effective. Complex cases were selected for discussion on arrival and MAPPA cases were discussed before their final release from prison. A multidisciplinary case conference (see paragraph 1.32) was held if urgent issues about risks and behaviour came to light, which further promoted the effective management of prisoners.
- 4.16 Completed ROTL risk assessments were of a very high quality. Prisoners were fully engaged in meaningful and well-led review boards which scrutinised plans and challenged the prisoner to consider the importance of good and purposeful behaviour while on ROTL.
- 4.17 Multi-agency public protection meetings were consulted as part of final release planning but not all prisoners who were eligible for MAPPA had their management level reviewed before undertaking ROTL, even when this involved overnight stays in the community.
- 4.18 Enhanced behavioural monitoring (EBM) provided a mechanism for managing risk of harm and protecting the public. All prisoners were assessed on arrival at the establishment, through a case file review by a psychologist. Some of the more complex prisoners were placed on the EBM scheme, which involved monitoring for six months and regular meetings with an offender supervisor to provide oversight of ongoing risk factors and the prisoner's coping skills. However, in some cases not enough feedback about the prisoner's behaviour was received from other departments, which sometimes reduced the effectiveness of this approach.

Recommendation

- 4.19 **Reviewed multi-agency public protection arrangements (MAPPA) management levels should be confirmed before starting ROTL, particularly for overnight releases.**

Categorisation

- 4.20 The number of prisoners recategorised and returned to closed conditions had reduced sharply. The reasons for returning prisoners to closed conditions were valid and decision making was defensible (see also section on security). Indeterminate-sentenced prisoners were referred back to the parole board for a decision on their recategorisation.
- 4.21 Prisoners who were struggling with living in open conditions were provided with good support to try to avoid the need to return them to closed conditions.

Indeterminate sentence prisoners

- 4.22 At the time of the inspection, there were 308 indeterminate-sentenced prisoners, which was well over half of the population and almost double the number held at the time of the previous inspection. Most were managed by probation officers in the OMU.
- 4.23 Parole report preparation was a major focus of the OMU, and work was up to date. However, too many parole hearings were deferred owing to the delays in prisoners accessing ROTL, causing high levels of frustration for prisoners (see section on offender management and planning and main recommendation S50).

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.

- 4.24** Demand for resettlement services was relatively low, with about 25 releases each month, but most involved high risk of harm prisoners. Good attention was paid to prisoners' resettlement needs and they could access a wide range of help, both in the prison and the community, including the Prisoner Advice Centre, offender supervisors, the CRC and a reasonable range of partnership agencies in the prison and in the community.
- 4.25** All newly arrived prisoners were seen by an orderly based in the Prisoner Advice Centre and were asked to complete a resettlement questionnaire. Anyone needing support with resettlement was referred to the relevant department.
- 4.26** Catch 22 was contracted by the Bristol, Gloucestershire, Somerset and Wiltshire CRC to provide some resettlement help before release. They provided information about their services during the induction period and then met all prisoners 12 weeks before release in order to review their resettlement plan.
- 4.27** The 'Making a Change' (MAC) resettlement programme was available, and delivered either in groups or individually. This provided information and help with most of the resettlement pathways. Prisoners were allocated to one or more of the seven modules as required.
- 4.28** CRC staff did not always use P-NOMIS to record actions taken or the outcome of their interventions, which meant that the offender supervisors were not always aware of progress made. Links and information exchange with the OMU were inadequate, including reference to known risks and steps already taken before the CRC review of the resettlement plan.
- 4.29** The independent living skills programme provided excellent preparation for release, including ROTL into local towns, to familiarise prisoners with life in the community and equip them with some basic life skills such as budgeting. However, we were told that too few places were provided on the programme for the large number of long-term prisoners who would have potentially benefitted from it (see also paragraph 2.77 and recommendation 2.80).

Recommendations

- 4.30** **Links and information exchange between the community rehabilitation company and the offender management unit should be improved, to provide better awareness of risk issues and progress made.**
- 4.31** **The number of places on the independent living skills programme should be increased to meet demand.**

Accommodation

- 4.32** Almost all prisoners were provided with accommodation on release. Owing to the serious nature of their offending and their risk of harm to others, most were placed in approved premises. However, because of a national shortage of places in approved premises, a few prisoners who had been granted release by the parole board had not been given such a placement, and as a result were still in prison, which was unacceptable. Others who had

been approved for overnight ROTL to an approved premises found that there was no place for them or had their place cancelled at the last minute, leaving them unable to take ROTL as planned. (see also section on offender management and planning and main recommendation S51)

- 4.33** A few prisoners had been released without accommodation but the number of prisoners released into sustainable accommodation was not reliably collated, making it impossible to make judgements about the effectiveness of the help provided.

Recommendation

- 4.34** **The number of prisoners released into suitable and sustainable accommodation should be reliably collated and used to evaluate the effectiveness of the provision.**

Education, training and employment

- 4.35** National Careers Service (NCS) advisers provided effective support and advice during induction, to help prisoners to make informed choices about career paths and employment options.
- 4.36** Prison staff made good use of the virtual campus (internet access for prisoners to community education, training and employment opportunities). The resettlement programme (MAC) delivered by Catch 22 included a module designed to equip prisoners with the skills and knowledge needed to secure employment. However, attendance on this programme was often low. The CRC did not use the skills action plan, produced by the NCS to inform its service to individual prisoners. The prison and CRC did not offer a wide enough range of training and skills development courses for prisoners nearing release, notably dealing with self-employment and business-start-up-related aspects (see also paragraph 3.9 and recommendation 3.14).
- 4.37** There was a lack of validated data on the impact of interventions – for example, how many prisoners entered and remained in education, training or employment on release.
- 4.38** The number of prisoners routinely being released on ROTL for work had reduced to around 40, with fewer than 30 in paid work (see also paragraph 3.13). There were insufficient links and working relationships with employers, community-based voluntary sector organisations, and education and training providers to expand the currently limited opportunities available to prisoners on release.

Recommendations

- 4.39** **The number of prisoners released into employment, education or training should be reliably collated and used to evaluate the effectiveness of the provision.**
- 4.40** **Links with employers, training providers and voluntary sector organisations should be improved, to extend employment and training opportunities for prisoners on release.**

Health care

- 4.41** All prisoners were seen by health services staff before release and provided with medicines and information about community services. Mental health staff worked effectively with OMU staff and liaised with community services many months before release, to ensure continuity of care.
- 4.42** Patients with palliative care needs were supported in conjunction with local community services. The palliative care suite provided excellent end-of-life facilities for up to two prisoners in individual rooms, and their families. Effective care plans and developing care pathways ensured that dying patients' needs were met.

Drugs and alcohol

- 4.43** There was good joint working between substance misuse, primary and mental health services. The five-week 'Out of the Gate' group-work module appropriately focused on relapse prevention and acted as a refresher programme for long-term prisoners before release. The substance misuse team shared post-programme reports with the OMU and contributed to parole reports.
- 4.44** Release plans for those with substance misuse issues were detailed and of good quality. A pre-release review provided harm reduction information, which included the dangers of NPS use. Prisoners were encouraged to access community support services on release, and the substance misuse team had facilitated access to day care and residential rehabilitation services for some prisoners.

Finance, benefit and debt

- 4.45** Prisoners who needed assistance with their finances were well supported and this was reflected in positive survey findings, with 64% saying that they knew where to go for help with benefits, compared with 49% at other open prisons.
- 4.46** Catch 22 staff were able to provide advice and guidance in relation to fairly basic financial problems. Prisoners with more complex difficulties – for example, debts – could access expert advice from the Money Advice Service (although this was due to end). Staff working in the Lobster Pot drop-in centre (see paragraph 2.18) also provided some support to individuals who needed help to sort out their finances and debts.
- 4.47** At the time of the inspection, prisoners not accessing ROTL could not open a bank account (except for a Credit Union account, which incurred a charge). However, the facility to open bank accounts was to be introduced in the month following the inspection.

Children, families and contact with the outside world

- 4.48** In our survey, many more prisoners than at the time of the previous inspection said that staff had supported them in maintaining contact with family and friends while at the prison (54% versus 40%). However, only 28%, compared with 42% at other open prisons, said that it was easy for families and friends to get to the prison, and only 24%, compared with 51% elsewhere, said that the prison was near their release address.
- 4.49** For many visitors, the distance from the prison resulted in long and expensive journeys. There was no longer any prison transport to and from local public transport points, and

journeys to the prison using public transport were long and difficult. However, information about the Assisted Prison Visits scheme was available, which helped with the cost of transport and other related services.

- 4.50** The chaplaincy operated an official prison visitor scheme, which was targeted at those who did not receive visits from family and friends. At the time of the inspection, there were 25 prisoners receiving such visits.
- 4.51** The visits hall was clean, bright, spacious and welcoming, and had open access to two outside spaces with plenty of tables and chairs. Levels of supervision were appropriate without being overbearing, and due consideration was given to the risk to children, with one of the outside areas being available only to prisoners who had children visiting and the other for adults only. There was also a large, well-equipped, unsupervised children's play area.
- 4.52** Visits started on time and were rarely full. Bookings were made either by the visitor, using an email system, or by the prisoner. The visits annex opened at 12pm on visits days for those who arrived early. The area was clean and tidy, with seating and tables. A small play area was also available there, to keep smaller children occupied. However, there was nowhere for visitors to seek advice or buy refreshments until the visits session started.
- 4.53** Family days were run quarterly and were well received by prisoners. While these were well structured to develop and support relationships, they were only available to prisoners with children. There was no qualified family support worker to help prisoners to maintain contact and help to rebuild relationships.
- 4.54** Subject to referral from the OMU, a family relationships course, run by Weston College, was available and there was also the facility for prisoners to record their own story CD for their children ('Storybook Dads'), and eight prisoners had used this facility in 2016.
- 4.55** Where appropriate, ROTL was used effectively to support family ties and to help to prepare both the prisoner and his family for eventual return home.

Recommendation

- 4.56 Prisoners without children should be able to access family days, to promote their contact with other family members.**

Attitudes, thinking and behaviour

- 4.57** As an open prison, it was appropriate that the establishment did not provide accredited offending behaviour programmes. However, there had not been a needs analysis to identify the type and range of other types of offending behaviour work required.
- 4.58** We saw a few examples of excellent work taking place between some offender supervisors and prisoners – for example, assessing and following up on behaviour and feelings diaries or individual work on violence and sexual offending. However, this was limited or absent in too many cases.
- 4.59** The small team of regional psychologists provided good support to the OMU, including reports for the parole board, consolidation work following an accredited programme completed earlier in the sentence, and some individual sessions for prisoners with learning difficulties. The substance misuse team also provided some useful support, including relapse prevention (see also paragraph 4.43).

Recommendation

- 4.60** A needs analysis should evidence the type and range of interventions required which are aimed at reducing the risk of reoffending.

Additional resettlement services

- 4.61** The CRC was not yet providing support to victims of domestic violence and sex workers, but help, advice and counselling were available through a few community-based agencies that were available as needed.
- 4.62** Support for veterans was excellent, including well-advertised monthly meetings and regular access to relevant support agencies such as SSAFA and The British Legion. There had been some positive outcomes for prisoners accessing help from these agencies, such as grants for clothing or educational courses.

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 recommendation

To NOMS

- 5.1 Prisoners should not have their release delayed by the lack of approved premises. (S51)

Main recommendations

To the governor

- 5.2 All prisoners in peer worker and mentoring roles should be trained and have regular supervision from staff to help to clarify and reinforce the limits of their demanding roles. (S49)
- 5.3 The number of high-quality work-related release on temporary licence (ROTL) placements should be increased and prisoners' should have timely access to ROTL, to enable them to progress. (S50)

Recommendations

Early days in custody

- 5.4 Prisoner orderlies should not be involved in processing the property of new arrivals. (1.9)
- 5.5 All new arrivals should have a private interview with an officer on their first night to explore feelings of self-harm or suicide. (1.10)
- 5.6 New arrivals should be offered food and drink in reception. (1.11)

Bullying and violence reduction

- 5.7 Regular monitoring of the offence demographics of the population and their access to work placements and location within the prison should be undertaken. The results should be widely publicised to help to address the negative perceptions held by some prisoners. (1.18)

Self-harm and suicide

- 5.8 Operational staff should carry anti-ligature knives at all times. (1.23)

Substance misuse

- 5.9 Sufficient staff should be available to deliver substance misuse groups regularly. (1.49)

Residential units

- 5.10** Washrooms should be refurbished where necessary, and showers should be regularly deep cleaned to remove mould. (2.5)

Staff-prisoner relationships

- 5.11** Arrangements should be made to ensure that there is regular external community involvement and scrutiny of the work of the diversity and race equality action team, including discrimination incident report forms. (2.14, repeated recommendation 2.29)

Equality and diversity

- 5.12** The poor perceptions of safety by prisoners with a disability should be explored and action taken to improve them. (2.22)
- 5.13** Unit-based care plans should be available for all prisoners with complex needs. (2.23)
- 5.14** Prisoners with limited mobility and complex health needs should be able to contact staff in an emergency. (2.24)

Complaints

- 5.15** Confidential complaints should be stored centrally and responses should be quality assured. (2.31)

Health services

- 5.16** Prisoners should receive all primary care services within community-equivalent waiting times and be prioritised based on clinical need. (2.50)
- 5.17** Prisoners with complex health and social care needs should have recorded, regularly reviewed care plans. (2.51)
- 5.18** Stock medicines should be date-checked and their use should be recorded and audited. (2.62)
- 5.19** Prisoners should be able to access basic medications easily and safely, to allow them to self-care as they would in the community. (2.63)
- 5.20** Prisoners requiring routine dental assessments should be seen within six weeks. (2.66)
- 5.21** Prison staff should have regular mental health awareness training. (2.72)
- 5.22** Prisoners should have access to attention-deficit hyperactivity disorder and autism spectrum disorder services. (2.73)

Catering

- 5.23** The reasons for the apparent dissatisfaction of black and minority ethnic prisoners with the food should be explored. (2.79, repeated recommendation 2.112)

- 5.24** Self-catering facilities should be improved, so that prisoners can develop some essential independent living skills needed for their release from prison. (2.80)

Learning and skills and work activities

- 5.25** The prison's observations of teaching, training and learning in workshops should be appropriately evaluative and developmental for prison workshop staff. (3.7)
- 5.26** The prison should develop and implement discrete self-employment and business-related courses and further expand the vocational training provision. (3.14)
- 5.27** Prisoners' progress and achievement of skills in the workplace should be better recorded. (3.21)
- 5.28** All prisoners should wear the required protective equipment during work sessions. (3.25)
- 5.29** Attainment in level 1 mathematics should be improved. (3.28)

Strategic management of resettlement

- 5.30** The resettlement needs analysis should be more comprehensive and the reducing reoffending strategy should place offender management at the forefront of the work. (4.5)

Offender management and planning

- 5.31** Offender supervisors should have regular and meaningful contact with all prisoners on their caseload, in order to reinforce skills learnt, motivate them and keep them engaged in progression. (4.13)
- 5.32** Reviewed multi-agency public protection arrangements (MAPPA) management levels should be confirmed before starting ROTL, particularly for overnight releases. (4.19)

Reintegration planning

- 5.33** Links and information exchange between the community rehabilitation company and the offender management unit should be improved, to provide better awareness of risk issues and progress made. (4.30)
- 5.34** The number of places on the independent living skills programme should be increased to meet demand. (4.31)
- 5.35** The number of prisoners released into suitable and sustainable accommodation should be reliably collated and used to evaluate the effectiveness of the provision. (4.34)
- 5.36** The number of prisoners released into employment, education or training should be reliably collated and used to evaluate the effectiveness of the provision. (4.39)
- 5.37** Links with employers, training providers and voluntary sector organisations should be improved, to extend employment and training opportunities for prisoners on release. (4.40)
- 5.38** Prisoners without children should be able to access family days, to promote their contact with other family members. (4.56)

5.39 A needs analysis should evidence the type and range of interventions required which are aimed at reducing the risk of reoffending. (4.60)

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Paul Rowlands	Inspector
Jonathan Tickner	Inspector
Sharon Shalev	Inspector
Ian MacFadyen	Inspector
Alissa Redmond	Researcher
Patricia Taflan	Researcher
Natalie-Anne Hall	Researcher
Sigrid Engelen	Substance misuse inspector
Majella Pearce	Health services inspector
Barry Cohen	Pharmacist
Jan Fooks-Bale	Care Quality Commission inspector
Caroline Williams	Care Quality Commission inspector
Nick Crombie	Ofsted inspector
Bob Cowdrey	Ofsted inspector
Sheena Maberly	Ofsted inspector
Paddy Doyle	Offender management inspector
Iolo Madoc Jones	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2012, reception and first night arrangements were good. The induction programme was comprehensive. Most prisoners reported feeling safe and there were adequate systems in place to manage bullying. The few assessment, care in custody and teamwork (ACCT) documents opened were well managed. A safeguarding policy had been developed but was not yet embedded. Security was mainly proportionate, and strip-searching arrangements were appropriate. There were some unnecessary restrictions. The transfer process back to closed conditions needed greater governance. The positive mandatory drug testing (MDT) rate was low. Most prisoners were on the enhanced incentive and earned privileges (IEP) level. Adjudications were adequately managed and use of force was rare. Support for prisoners with substance misuse issues was good. Outcomes for prisoners were good against this healthy prison test.

Recommendations

Prisoners should be given sufficient notice of transfer along with accurate information about the prison before they are transferred. (1.5)

Partially achieved

All prisoners new to the prison should have a private interview with a member of staff from their first night unit to reassure them about any concerns they might have about moving to an open prison. (1.20)

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. (1.41)

Partially achieved

Individual care plans should be developed for those prisoners identified as being at risk of harm or neglect. (1.42)

Achieved

Efforts should be made to collate information about the reasons prisoners abscond once they are returned to custody. (1.51)

Achieved

A transparent, multidisciplinary process should inform all decisions to transfer all prisoners to closed conditions. All new arrivals should be informed of this process and the circumstances under which they will be transferred to closed conditions. (1.52)

Not achieved

The facilities' list should at the very least be comparable to those found in prisons in closed estates. (1.57)

Achieved

A review of the need for the IDTS programme should be undertaken. (1.75)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2012, most rooms were single occupancy, but the small number of dormitories provided a less positive environment. Residential units and outside areas were very clean, but a few recess areas needed refurbishment. Staff-prisoner interactions were respectful and friendly. Officers congregated in the wing offices and should have been more visible, but most prisoners in our survey said that there was a member of staff they could approach. Governance arrangements in place did not reassure us that reports in our survey and by some black and minority ethnic prisoners of unequal outcomes were being adequately addressed. Complaints relating to diversity needed more robust investigation and attention. Support for foreign national and gay prisoners needed to be improved but the significant number of older and disabled prisoners were generally well supported. Complaints were well managed. Legal services were adequate to meet the demand. Health services were good, but dental waiting times were too long and medicines management processes poor. Prisoners were generally positive about the food. The shop was well run but prices were too high. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

Strategic management and governance of equality and diversity should be improved so that the prison can meet its obligations in the Equality Act 2010 and unequal outcomes addressed. (HP59)

Partially achieved

Recommendations

Dormitories should afford some privacy and be equipped so that each prisoner has a bed, chair, lockable cabinet, adequate storage for personal belongings and the use of a table. (2.11)

Achieved

Ablution areas on A and B wings should be deep cleaned and refurbished where necessary. (2.12)

Partially achieved

Prisoners should be able to access their stored property on request. (2.13)

Achieved

Wing staff should pro-actively engage with prisoners and should not congregate in wing offices. (2.22)

Achieved

Management checks of personal officer reports should ensure that entries are balanced and detailed and indicate interaction. (2.23)

Achieved

Arrangements should be made to ensure that there is regular external community involvement and scrutiny of the work of the DREAT including DIRFS. (2.29)

Not achieved (recommendation repeated, 2.14)

There should be consultation and support arrangements for each strand of equality. These should aim to identify areas of concern, initiate debate and action planning, seek authority from the DREAT and communicate back to prisoners. (2.30)

Achieved

Formal care planning for prisoners with disabilities should be introduced. (2.43)

Not achieved

The prison should seek to understand the reasons for prisoners' anxieties about submitting complaints, and implement strategies to further improve confidence in the system. (2.55)

Achieved

The roles and responsibilities carried out by health care support workers should be reviewed to ensure the appropriate and safe delegation of clinical responsibilities. (2.71)

Achieved

Medicines management should be strengthened to ensure appropriate policies are implemented, with linked staff training and safe effective stock management and storage. (2.90)

Partially achieved

Pharmacy-led clinics and medicines use reviews should be introduced to inform and educate prisoners and support resettlement. (2.91)

Achieved

The dental waiting lists should be reviewed and waiting times reduced to reflect NHS waiting times in the community. (2.99)

Not achieved

The reasons for the apparent dissatisfaction of black and minority ethnic prisoners with the food should be explored. (2.112)

Not achieved (recommendation repeated, 2.79)

Long-term prisoners should have facilities to allow them the opportunity to develop or retain cooking skills. (2.113)

Not achieved

All prisoners, including new arrivals, should have weekly access to the prison shop. (2.119)

Not achieved

Purposeful activity

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

At the last inspection, in 2012, time out of cell was good. A more strategic approach to learning and skills was needed but there were sufficient activity places. Almost all prisoners were engaged in meaningful and good quality activities and a large number were working outside the prison. Prisoners were quickly allocated a work place, but expectations needed to be better managed. Opportunities to provide a vocational qualification needed to be better realised. The quality of education provision was good; the library was very good. The gym provided a good service, but was restricted by the lack of a sports hall. On the basis of this full inspection, we considered that outcomes for prisoners were good against this healthy prison test. Outcomes for prisoners were good against this healthy prison test.

Recommendations

The prison should plan an overall strategy for the development of the learning, skills and work provision that is well informed and consultative and maximises theoretical and practical learning opportunities in all areas. (3.10)

Achieved

The prison should improve the use and analysis of data to better inform managerial decisions on learners' participation, progress and achievement. (3.11)

Achieved

The prison should improve communications with newly arrived prisoners with regards to how work spaces will be allocated to them. (3.19)

Achieved

The prison should increase the range of construction trade training at levels 1 and 2 and vocational courses to meet the needs and interests of prisoners. (3.23)

Partially achieved

The prison should repair the roof of the carpentry workshop as a matter of priority to ensure that the carpentry workshop meets industry standards. (3.24)

Partially achieved

The prison should further embed discrete literacy and numeracy skills development in vocational training and work. (3.25)

Achieved

The prison should improve the success rates for learners undertaking numeracy qualifications at levels 1 and 2. (3.29)

Partially achieved

The prison should increase the number of full NVQ awards achieved by learners that are most valued by employers to improve prisoners' employability options. (3.30)

Achieved

The prison should increase the amount of accredited qualifications achieved by prisoners. (3.41)

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 resettlement strategy did not reflect all the work being done or take into account the populations held. A limited needs analysis had been completed. There was not a sufficiently 'whole prison' approach to resettlement work. The accommodation and finance and debt needs of all prisoners were assessed when they arrived, and this was repeated before their release. There was no custody planning for short-term prisoners. Offender management arrangements were good, and most eligible prisoners had a sentence plan. Many prisoners were unhappy with the way release on temporary licence (ROTL) was managed, but we considered arrangements to be robust. Public protection arrangements were adequate, and the Sentinel project was an excellent initiative. Provision around the various reducing reoffending pathways was generally good, and visits provided a positive experience. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

There should be a comprehensive resettlement strategy based on a thorough needs analysis of all categories of prisoner drawn from a variety of sources. (HP60)

Not achieved

Recommendations

All prison staff should be clear about their responsibilities to support the resettlement process.

(4.13)

Achieved

Minimum contact levels between offender supervisors and prisoners should be agreed and details made available to prisoners. (4.34)

Not achieved

Sentence plan review boards should receive contributions from and be attended by other staff involved with the prisoner. (4.35)

Not achieved

Risk management plans should robustly address the risk of harm to others in the community as well as in custody. (4.48)

Achieved

The IRMT should discuss all high risk MAPPA prisoners six months before their release, ensuring that, when necessary, MAPPA pre-release and supervision plan review boards are organised and OASys reviewed. (4.49)

Achieved

All prisoners serving sentences of less than 12 months should have a sentence plan overseen by a named member of staff. (4.61)

No longer relevant

Peer advice workers should have access to email and internet. (4.62)

Not achieved

Targets should be set to meet the needs identified by prisoners relating to contact with family and friends. (4.84)

Not achieved

A qualified family support worker should be employed. (4.85)

Not achieved

Prisoners should be able to wear their own choice of clothing in the visits room. (4.86)

Achieved

A properly equipped visitors centre should be provided. (4.87)

Not achieved

Interventions to address domestic violence should be introduced. (4.93)

Not achieved

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: Agincare UK LTD– Nutfield Extra Care Scheme - HSCA

Location: HMP Leyhill

Location ID: 1-357182168

Regulated activities: Personal care

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 9: Person Centred-care

We found the provider did not have established systems in place to ensure compliance with requirements of the regulation. Client centred records were not consistently completed, nor reviewed by the management team to ensure that clients' needs were met. This constituted a breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

How the regulation was not being met:

Agincare records were not completed adequately to ensure prisoners' assessed needs and preferences were met. They did not include relevant assessments of mental capacity, risks, consent to care, and other general information that gave instruction on the care to be delivered.

Despite requests to do so, carers did not share important information about their clients with healthcare or prison staff, to ensure that clients were properly supported. We were particularly concerned that a prisoner's wishes in relation to whether or not he wanted to be resuscitated in a medical emergency were recorded in the Agincare record, but not communicated to other staff responsible for providing emergency care and treatment.

Appendix IV: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced		488	97.4
Recall		13	2.6
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
Total		499	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced			
Less than six months			
six months to less than 12 months		1	0.2
12 months to less than 2 years		4	0.8
2 years to less than 4 years		28	5.6
4 years to less than 10 years		112	22.4
10 years and over (not life)		46	9.2
ISPP (indeterminate sentence for public protection)		153	30.7
Life		155	31.1
Total		499	100

Age	Number of prisoners	%
Please state minimum age here:	24	
Under 21 years		
21 years to 29 years	51	10.2
30 years to 39 years	91	18.2
40 years to 49 years	123	24.6
50 years to 59 years	132	26.5
60 years to 69 years	67	13.4
70 plus years	35	7.0
Please state maximum age here:	86	
Total	499	100

Nationality	18–20-year-olds	21 and over	%
British		485	97.2
Foreign nationals		14	2.8
Total		499	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced			
Uncategorised sentenced			
Category A			
Category B			
Category C		2	0.4
Category D		497	99.6
Other			
Total		499	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British		401	80.4
Irish		11	2.2
Gypsy/Irish Traveller		4	0.8
Other white		14	2.8
Mixed			
White and black Caribbean		6	1.2
White and black African			
White and Asian			
Other mixed		3	0.6
Asian or Asian British			
Indian		7	1.4
Pakistani		7	1.4
Bangladeshi		1	0.2
Chinese		1	0.2
Other Asian		2	0.4
Black or black British			
Caribbean		25	5.0
African		5	1.0
Other black		5	1.0
Other ethnic group			
Arab		1	0.2
Other ethnic group		1	0.2
Not stated		5	1.0
Total		499	100

Religion	18–20-year-olds	21 and over	%
Baptist		2	0.4
Church of England		151	30.3
Roman Catholic		60	12.0
Other Christian denominations		53	10.6
Muslim		32	6.4
Sikh		5	1.0
Hindu		2	0.4
Buddhist		41	8.2
Jewish		2	0.4
Other		26	5.2
No religion		125	25.1
Total		499	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)			
Total			

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month			24	4.8
1 month to 3 months			64	12.8
3 months to six months			96	19.2
six months to 1 year			118	23.6
1 year to 2 years			138	27.7
2 years to 4 years			50	10.0
4 years or more			9	1.8
Total			499	100

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month				
1 month to 3 months				
3 months to six months				
six months to 1 year				
1 year to 2 years				
2 years to 4 years				
4 years or more				
Total				

Main offence	18–20-year-olds	21 and over	%
Violence against the person		122	24.9
Sexual offences		275	56.2
Burglary		11	2.2
Robbery		13	2.7
Theft and handling		4	0.8
Fraud and forgery		15	3.1
Drugs offences		30	6.1
Other offences		18	3.7
Civil offences			
Offence not recorded /holding warrant		1	0.3
Total		489	100

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 5 September 2016, the prisoner population at HMP Leyhill was 505. Using the method described above, questionnaires were distributed to a sample of 216 prisoners.

We received a total of 189 completed questionnaires, a response rate of 88%. This included four questionnaires completed via interview. Five respondents refused to complete a questionnaire and twenty-two questionnaires were not returned.

⁹ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

Wing/Unit	Number of completed survey returns
A	80
B	69
C	40

Presentation of survey results and analyses

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

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 Leyhill in 2016 compared with responses from prisoners surveyed in all other open prisons. This comparator is based on all responses from prisoner surveys carried out in 15 open prisons since April 2013.
- The current survey responses from HMP Leyhill in 2016 compared with the responses of prisoners surveyed at HMP Leyhill 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 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 responses of prisoners who considered themselves to be a veteran and those who did not.

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 0.01 which means that there is only a 1% likelihood that the difference is due to chance.

Survey summary

Section I: About You

Q1.1	What wing or houseblock are you currently living on? See shortened methodology	
Q1.2	How old are you?	
	<i>Under 21</i>	0 (0%)
	<i>21 - 29</i>	21 (11%)
	<i>30 - 39</i>	35 (19%)
	<i>40 - 49</i>	49 (26%)
	<i>50 - 59</i>	48 (26%)
	<i>60 - 69</i>	23 (12%)
	<i>70 and over</i>	12 (6%)
Q1.3	Are you on recall?	
	<i>Yes</i>	11 (6%)
	<i>No</i>	167 (94%)
Q1.4	How long is your sentence?	
	<i>Less than 6 months</i>	1 (1%)
	<i>6 months to less than 1 year</i>	1 (1%)
	<i>1 year to less than 2 years</i>	4 (2%)
	<i>2 years to less than 4 years</i>	15 (8%)
	<i>4 years to less than 10 years</i>	42 (23%)
	<i>10 years or more</i>	20 (11%)
	<i>IPP (indeterminate sentence for public protection)</i>	56 (30%)
	<i>Life</i>	47 (25%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	<i>Yes</i>	5 (3%)
	<i>No</i>	184 (97%)
Q1.6	Do you understand spoken English?	
	<i>Yes</i>	187 (100%)
	<i>No</i>	0 (0%)
Q1.7	Do you understand written English?	
	<i>Yes</i>	187 (99%)
	<i>No</i>	1 (1%)

Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	152 (81%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	8 (4%)	<i>Asian or Asian British - other</i> 0 (0%)
	<i>White - other</i>	5 (3%)	<i>Mixed race - white and black Caribbean</i> 5 (3%)
	<i>Black or black British - Caribbean</i>	6 (3%)	<i>Mixed race - white and black African</i> 0 (0%)
	<i>Black or black British - African</i>	0 (0%)	<i>Mixed race - white and Asian</i> 0 (0%)
	<i>Black or black British - other</i>	0 (0%)	<i>Mixed race - other</i> 1 (1%)
	<i>Asian or Asian British - Indian</i>	3 (2%)	<i>Arab</i> 0 (0%)
	<i>Asian or Asian British - Pakistani</i>	5 (3%)	<i>Other ethnic group</i> 2 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	1 (1%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	<i>Yes</i>		2 (1%)
	<i>No</i>		182 (99%)
Q1.10	What is your religion?		
	<i>None</i>	49 (27%)	<i>Hindu</i> 1 (1%)
	<i>Church of England</i>	60 (33%)	<i>Jewish</i> 0 (0%)
	<i>Catholic</i>	29 (16%)	<i>Muslim</i> 7 (4%)
	<i>Protestant</i>	1 (1%)	<i>Sikh</i> 2 (1%)
	<i>Other Christian denomination</i>	7 (4%)	<i>Other</i> 8 (4%)
	<i>Buddhist</i>	17 (9%)	
Q1.11	How would you describe your sexual orientation?		
	<i>Heterosexual/ Straight</i>		167 (90%)
	<i>Homosexual/Gay</i>		8 (4%)
	<i>Bisexual</i>		10 (5%)
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>		43 (23%)
	<i>No</i>		144 (77%)
Q1.13	Are you a veteran (ex- armed services)?		
	<i>Yes</i>		22 (12%)
	<i>No</i>		166 (88%)
Q1.14	Is this your first time in prison?		
	<i>Yes</i>		95 (51%)
	<i>No</i>		93 (49%)
Q1.15	Do you have children under the age of 18?		
	<i>Yes</i>		54 (29%)
	<i>No</i>		132 (71%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?	
	<i>Less than 2 hours</i>	80 (43%)
	<i>2 hours or longer</i>	101 (54%)
	<i>Don't remember</i>	6 (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>	80 (43%)
	Yes	94 (51%)
	No	9 (5%)
	Don't remember	3 (2%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	80 (43%)
	Yes	11 (6%)
	No	93 (50%)
	Don't remember	2 (1%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	131 (70%)
	No	40 (22%)
	Don't remember	15 (8%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	161 (86%)
	No	21 (11%)
	Don't remember	5 (3%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well	82 (44%)
	Well	79 (42%)
	Neither	20 (11%)
	Badly	4 (2%)
	Very badly	0 (0%)
	Don't remember	1 (1%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	Yes, someone told me	127 (68%)
	Yes, I received written information	53 (28%)
	No, I was not told anything	17 (9%)
	Don't remember	1 (1%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	162 (88%)
	No	22 (12%)
	Don't remember	0 (0%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	Less than 2 hours	170 (91%)
	2 hours or longer	10 (5%)
	Don't remember	7 (4%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	157 (84%)
	No	19 (10%)
	Don't remember	10 (5%)

Q3.3	Overall, how were you treated in reception?		
	<i>Very well</i>		93 (50%)
	<i>Well</i>		70 (38%)
	<i>Neither</i>		15 (8%)
	<i>Badly</i>		8 (4%)
	<i>Very badly</i>		0 (0%)
	<i>Don't remember</i>		0 (0%)
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>	23 (12%)	<i>Physical health</i> 16 (9%)
	<i>Housing problems</i>	14 (8%)	<i>Mental health</i> 22 (12%)
	<i>Contacting employers</i>	2 (1%)	<i>Needing protection from other prisoners</i> 1 (1%)
	<i>Contacting family</i>	16 (9%)	<i>Getting phone numbers</i> 24 (13%)
	<i>Childcare</i>	0 (0%)	<i>Other</i> 7 (4%)
	<i>Money worries</i>	8 (4%)	<i>Did not have any problems</i> 107 (58%)
	<i>Feeling depressed or suicidal</i>	10 (5%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	<i>Yes</i>		42 (23%)
	<i>No</i>		32 (18%)
	<i>Did not have any problems</i>		107 (59%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	<i>Tobacco</i>		100 (54%)
	<i>A shower</i>		62 (33%)
	<i>A free telephone call</i>		39 (21%)
	<i>Something to eat</i>		76 (41%)
	<i>PIN phone credit</i>		62 (33%)
	<i>Toiletries/ basic items</i>		82 (44%)
	<i>Did not receive anything</i>		40 (22%)
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>		126 (68%)
	<i>Someone from health services</i>		133 (72%)
	<i>A Listener/Samaritans</i>		108 (59%)
	<i>Prison shop/ canteen</i>		58 (32%)
	<i>Did not have access to any of these</i>		28 (15%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)		
	<i>What was going to happen to you</i>		128 (72%)
	<i>What support was available for people feeling depressed or suicidal</i>		102 (57%)
	<i>How to make routine requests (applications)</i>		104 (58%)
	<i>Your entitlement to visits</i>		98 (55%)
	<i>Health services</i>		120 (67%)
	<i>Chaplaincy</i>		116 (65%)
	<i>Not offered any information</i>		28 (16%)
Q3.9	Did you feel safe on your first night here?		
	<i>Yes</i>		161 (87%)
	<i>No</i>		21 (11%)
	<i>Don't remember</i>		3 (2%)

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	6 (3%)
	<i>Within the first week</i>	173 (94%)
	<i>More than a week</i>	4 (2%)
	<i>Don't remember</i>	2 (1%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	6 (3%)
	<i>Yes</i>	139 (75%)
	<i>No</i>	36 (19%)
	<i>Don't remember</i>	4 (2%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	10 (5%)
	<i>Within the first week</i>	129 (69%)
	<i>More than a week</i>	32 (17%)
	<i>Don't remember</i>	15 (8%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i> N/A
	<i>Communicate with your solicitor or legal representative?</i>	66 (36%)	50 (27%)	19 (10%)	10 (5%)	3 (2%) 37 (20%)
	<i>Attend legal visits?</i>	58 (36%)	32 (20%)	14 (9%)	3 (2%)	2 (1%) 53 (33%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?					
	<i>Not had any letters</i>					47 (25%)
	<i>Yes</i>					35 (19%)
	<i>No</i>					103 (56%)
Q4.3	Can you get legal books in the library?					
	<i>Yes</i>					96 (52%)
	<i>No</i>					3 (2%)
	<i>Don't know</i>					85 (46%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	<i>Are you normally able to have a shower every day?</i>	182 (98%)	2 (1%)	1 (1%)		
	<i>Do you normally receive clean sheets every week?</i>	176 (95%)	7 (4%)	3 (2%)		
	<i>Do you normally get cell cleaning materials every week?</i>	154 (84%)	27 (15%)	3 (2%)		
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	144 (79%)	38 (21%)	1 (1%)		
	<i>If you need to, can you normally get your stored property?</i>	74 (41%)	33 (18%)	75 (41%)		
Q4.5	What is the food like here?					
	<i>Very good</i>					48 (26%)
	<i>Good</i>					89 (47%)
	<i>Neither</i>					31 (16%)
	<i>Bad</i>					15 (8%)
	<i>Very bad</i>					5 (3%)

Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	
	<i>Have not bought anything yet/ don't know</i>	3 (2%)
	Yes	121 (65%)
	No	61 (33%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	156 (84%)
	No	4 (2%)
	<i>Don't know</i>	26 (14%)
Q4.8	Are your religious beliefs respected?	
	Yes	112 (60%)
	No	11 (6%)
	<i>Don't know/ N/A</i>	63 (34%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	127 (68%)
	No	5 (3%)
	<i>Don't know/ N/A</i>	54 (29%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	57 (31%)
	Very easy	68 (38%)
	Easy	30 (17%)
	Neither	5 (3%)
	Difficult	2 (1%)
	Very difficult	0 (0%)
	<i>Don't know</i>	19 (10%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?	
	Yes	169 (90%)
	No	12 (6%)
	<i>Don't know</i>	6 (3%)
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 <i>applications</i> dealt with fairly?	18 (10%) 130 (70%) 37 (20%)
	Are <i>applications</i> dealt with quickly (within seven days)?	18 (11%) 108 (64%) 44 (26%)
Q5.3	Is it easy to make a complaint?	
	Yes	106 (58%)
	No	19 (10%)
	<i>Don't know</i>	57 (31%)
Q5.4	Please answer the following questions about complaints. (If you have not made a complaint please tick the 'not made one' option.)	
		Not made one Yes No
	Are <i>complaints</i> dealt with fairly?	111 (60%) 36 (20%) 37 (20%)
	Are <i>complaints</i> dealt with quickly (within seven days)?	111 (63%) 25 (14%) 40 (23%)

Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	14 (9%)
	No	148 (91%)
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>	34 (19%)
	Very easy	33 (18%)
	Easy	55 (30%)
	Neither	53 (29%)
	Difficult	5 (3%)
	Very difficult	2 (1%)

Section 6: Relationships with staff

Q6.1	Do most staff treat you with respect?	
	Yes	163 (88%)
	No	22 (12%)
Q6.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	157 (86%)
	No	25 (14%)
Q6.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	67 (36%)
	No	118 (64%)
Q6.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	13 (7%)
	Never	43 (24%)
	Rarely	51 (28%)
	Some of the time	38 (21%)
	Most of the time	20 (11%)
	All of the time	17 (9%)
Q6.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	24 (13%)
	<i>In the first week</i>	73 (39%)
	<i>More than a week</i>	80 (43%)
	<i>Don't remember</i>	8 (4%)
Q6.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	24 (13%)
	Very helpful	60 (33%)
	Helpful	62 (34%)
	Neither	24 (13%)
	Not very helpful	8 (4%)
	Not at all helpful	5 (3%)

Section 7: Safety

Q7.1	Have you ever felt unsafe here?	
	Yes	47 (25%)
	No	139 (75%)

Q7.2	Do you feel unsafe now?		
	Yes		14 (8%)
	No		166 (92%)
Q7.3	In which areas have you felt unsafe? (Please tick all that apply to you.)		
	Never felt unsafe	139 (78%)	At meal times 15 (8%)
	Everywhere	10 (6%)	At health services 0 (0%)
	Association areas	12 (7%)	Visits area 2 (1%)
	Reception area	1 (1%)	In wing showers 12 (7%)
	At the gym	7 (4%)	In gym showers 1 (1%)
	In an exercise yard	4 (2%)	In corridors/stairwells 11 (6%)
	At work	7 (4%)	On your landing/wing 21 (12%)
	During movement	8 (4%)	In your cell 11 (6%)
	At education	4 (2%)	At religious services 1 (1%)
Q7.4	Have you been victimised by other prisoners here?		
	Yes		45 (24%)
	No		142 (76%)
Q7.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)		
	Insulting remarks (about you or your family or friends)		16 (9%)
	Physical abuse (being hit, kicked or assaulted)		3 (2%)
	Sexual abuse		2 (1%)
	Feeling threatened or intimidated		29 (15%)
	Having your canteen/property taken		1 (1%)
	Medication		2 (1%)
	Debt		0 (0%)
	Drugs		1 (1%)
	Your race or ethnic origin		4 (2%)
	Your religion/religious beliefs		4 (2%)
	Your nationality		3 (2%)
	Your from a different part of the country than others		3 (2%)
	You are from a traveller community		1 (1%)
	Your sexual orientation		5 (3%)
	Your age		4 (2%)
	You have a disability		3 (2%)
	You were new here		6 (3%)
	Your offence/ crime		16 (9%)
	Gang related issues		1 (1%)
Q7.6	Have you been victimised by staff here?		
	Yes		22 (12%)
	No		163 (88%)

Q7.7 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>	2 (1%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	1 (1%)
<i>Sexual abuse</i>	0 (0%)
<i>Feeling threatened or intimidated</i>	8 (4%)
<i>Medication</i>	2 (1%)
<i>Debt</i>	0 (0%)
<i>Drugs</i>	0 (0%)
<i>Your race or ethnic origin</i>	2 (1%)
<i>Your religion/religious beliefs</i>	1 (1%)
<i>Your nationality</i>	1 (1%)
<i>Your from a different part of the country than others</i>	1 (1%)
<i>You are from a traveller community</i>	1 (1%)
<i>Your sexual orientation</i>	0 (0%)
<i>Your age</i>	1 (1%)
<i>You have a disability</i>	3 (2%)
<i>You were new here</i>	3 (2%)
<i>Your offence/ crime</i>	4 (2%)
<i>Gang related issues</i>	0 (0%)

Q7.8 If you have been victimised by prisoners or staff, did you report it?

<i>Not been victimised</i>	129 (75%)
<i>Yes</i>	28 (16%)
<i>No</i>	15 (9%)

Section 8: Health services**Q8.1 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	18 (10%)	22 (12%)	48 (26%)	21 (12%)	51 (28%)	22 (12%)
The nurse	17 (9%)	48 (26%)	69 (38%)	20 (11%)	22 (12%)	7 (4%)
The dentist	40 (22%)	10 (6%)	20 (11%)	7 (4%)	47 (26%)	54 (30%)

Q8.2 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	20 (11%)	59 (32%)	53 (29%)	25 (14%)	17 (9%)	9 (5%)
The nurse	8 (4%)	78 (43%)	53 (29%)	24 (13%)	13 (7%)	6 (3%)
The dentist	61 (35%)	31 (18%)	25 (14%)	27 (15%)	19 (11%)	13 (7%)

Q8.3 What do you think of the overall quality of the health services here?

<i>Not been</i>	5 (3%)
<i>Very good</i>	50 (28%)
<i>Good</i>	57 (32%)
<i>Neither</i>	37 (21%)
<i>Bad</i>	15 (8%)
<i>Very bad</i>	15 (8%)

Q8.4 Are you currently taking medication?

<i>Yes</i>	109 (58%)
<i>No</i>	78 (42%)

Q8.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?	
	<i>Not taking medication</i>	78 (42%)
	<i>Yes, all my meds</i>	103 (55%)
	<i>Yes, some of my meds</i>	6 (3%)
	<i>No</i>	0 (0%)
Q8.6	Do you have any emotional or mental health problems?	
	<i>Yes</i>	40 (22%)
	<i>No</i>	145 (78%)
Q8.7	Are you being helped/ supported by anyone in this prison (e.g. psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?	
	<i>Do not have any emotional or mental health problems</i>	145 (78%)
	<i>Yes</i>	30 (16%)
	<i>No</i>	11 (6%)

Section 9: Drugs and alcohol

Q9.1	Did you have a problem with drugs when you came into this prison?	
	<i>Yes</i>	24 (13%)
	<i>No</i>	160 (87%)
Q9.2	Did you have a problem with alcohol when you came into this prison?	
	<i>Yes</i>	35 (19%)
	<i>No</i>	151 (81%)
Q9.3	Is it easy or difficult to get illegal drugs in this prison?	
	<i>Very easy</i>	42 (23%)
	<i>Easy</i>	23 (13%)
	<i>Neither</i>	4 (2%)
	<i>Difficult</i>	1 (1%)
	<i>Very difficult</i>	4 (2%)
	<i>Don't know</i>	109 (60%)
Q9.4	Is it easy or difficult to get alcohol in this prison?	
	<i>Very easy</i>	13 (7%)
	<i>Easy</i>	14 (8%)
	<i>Neither</i>	10 (5%)
	<i>Difficult</i>	5 (3%)
	<i>Very difficult</i>	6 (3%)
	<i>Don't know</i>	135 (74%)
Q9.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	<i>Yes</i>	3 (2%)
	<i>No</i>	181 (98%)
Q9.6	Have you developed a problem with diverted medication since you have been in this prison?	
	<i>Yes</i>	1 (1%)
	<i>No</i>	180 (99%)
Q9.7	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>	152 (87%)
	<i>Yes</i>	21 (12%)
	<i>No</i>	2 (1%)

Q9.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	<i>Did not / do not have an alcohol problem</i>	151 (82%)
	Yes	31 (17%)
	No	3 (2%)

Q9.9	Was the support or help you received, whilst in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	141 (80%)
	Yes	33 (19%)
	No	2 (1%)

Section 10: Activities

Q10.1	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	7 (4%)	66 (36%)	66 (36%)	23 (12%)	15 (8%)	8 (4%)
	Vocational or skills training	26 (14%)	55 (30%)	59 (33%)	19 (10%)	14 (8%)	8 (4%)
	Education (including basic skills)	18 (10%)	71 (40%)	64 (36%)	20 (11%)	3 (2%)	2 (1%)
	Offending behaviour programmes	96 (55%)	15 (9%)	23 (13%)	22 (13%)	6 (3%)	14 (8%)

Q10.2	Are you currently involved in the following? (Please tick all that apply to you.)	
	<i>Not involved in any of these</i>	19 (11%)
	Prison job	148 (82%)
	Vocational or skills training	30 (17%)
	Education (including basic skills)	34 (19%)
	Offending behaviour programmes	6 (3%)

Q10.3	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>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	13 (8%)	76 (46%)	56 (34%)	20 (12%)
	Vocational or skills training	29 (20%)	71 (48%)	33 (22%)	14 (10%)
	Education (including basic skills)	25 (18%)	60 (43%)	42 (30%)	11 (8%)
	Offending behaviour programmes	52 (41%)	43 (34%)	22 (17%)	9 (7%)

Q10.4	How often do you usually go to the library?	
	<i>Don't want to go</i>	2 (1%)
	Never	6 (3%)
	Less than once a week	43 (23%)
	About once a week	53 (29%)
	More than once a week	79 (43%)

Q10.5	Does the library have a wide enough range of materials to meet your needs?	
	<i>Don't use it</i>	13 (7%)
	Yes	148 (80%)
	No	23 (13%)

Q10.6	How many times do you usually go to the gym each week?	
	<i>Don't want to go</i>	57 (31%)
	<i>0</i>	48 (26%)
	<i>1 to 2</i>	19 (10%)
	<i>3 to 5</i>	38 (21%)
	<i>More than 5</i>	22 (12%)
Q10.7	How many times do you usually go outside for exercise each week?	
	<i>Don't want to go</i>	6 (3%)
	<i>0</i>	10 (5%)
	<i>1 to 2</i>	28 (15%)
	<i>3 to 5</i>	28 (15%)
	<i>More than 5</i>	110 (60%)
Q10.8	How many times do you usually have association each week?	
	<i>Don't want to go</i>	14 (8%)
	<i>0</i>	6 (3%)
	<i>1 to 2</i>	12 (7%)
	<i>3 to 5</i>	13 (7%)
	<i>More than 5</i>	137 (75%)
Q10.9	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>	7 (4%)
	<i>2 to less than 4 hours</i>	2 (1%)
	<i>4 to less than 6 hours</i>	10 (5%)
	<i>6 to less than 8 hours</i>	27 (15%)
	<i>8 to less than 10 hours</i>	30 (16%)
	<i>10 hours or more</i>	99 (54%)
	<i>Don't know</i>	7 (4%)

Section 11: Contact with family and friends

Q11.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	98 (54%)
	<i>No</i>	83 (46%)
Q11.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	27 (15%)
	<i>No</i>	158 (85%)
Q11.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	21 (11%)
	<i>No</i>	163 (89%)
Q11.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	39 (21%)
	<i>Very easy</i>	26 (14%)
	<i>Easy</i>	26 (14%)
	<i>Neither</i>	14 (8%)
	<i>Difficult</i>	37 (20%)
	<i>Very difficult</i>	41 (22%)
	<i>Don't know</i>	1 (1%)

Section 12: Preparation for release

Q12.1	Do you have a named offender manager (home probation officer) in the probation service?	
	Yes	177 (96%)
	No	8 (4%)
Q12.2	What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)	
	<i>Do not have an offender manager/ NA</i>	8 (4%)
	<i>No contact</i>	17 (9%)
	<i>Letter</i>	88 (49%)
	<i>Phone</i>	119 (66%)
	<i>Visit</i>	68 (38%)
Q12.3	Do you have a named offender supervisor in this prison?	
	Yes	174 (95%)
	No	9 (5%)
Q12.4	Do you have a sentence plan?	
	Yes	146 (82%)
	No	33 (18%)
Q12.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan</i>	33 (18%)
	<i>Very involved</i>	57 (31%)
	<i>Involved</i>	55 (30%)
	<i>Neither</i>	6 (3%)
	<i>Not very involved</i>	14 (8%)
	<i>Not at all involved</i>	16 (9%)
Q12.6	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</i>	33 (18%)
	<i>Nobody</i>	23 (13%)
	<i>Offender supervisor</i>	113 (63%)
	<i>Offender manager</i>	82 (46%)
	<i>Named/ personal officer</i>	39 (22%)
	<i>Staff from other departments</i>	31 (17%)
Q12.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan</i>	33 (18%)
	Yes	115 (64%)
	No	16 (9%)
	<i>Don't know</i>	17 (9%)
Q12.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan</i>	33 (18%)
	Yes	17 (9%)
	No	113 (63%)
	<i>Don't know</i>	16 (9%)

Q12.9	Are there plans for you to achieve any of your sentence plan targets in the community?		
	<i>Do not have a sentence plan</i>		33 (18%)
	Yes		90 (50%)
	No		31 (17%)
	<i>Don't know</i>		27 (15%)
Q12.10	Do you have a needs based custody plan?		
	Yes		13 (7%)
	No		85 (47%)
	<i>Don't know</i>		81 (45%)
Q12.11	Do you feel that any member of staff has helped you to prepare for your release?		
	Yes		71 (39%)
	No		111 (61%)
Q12.12	Do you know of anyone in this prison who can help you with the following on release?: (Please tick all that apply to you.)		
		<i>Do not need help</i>	<i>Yes</i> <i>No</i>
	Employment	49 (29%)	63 (38%) 55 (33%)
	Accommodation	42 (25%)	67 (39%) 61 (36%)
	Benefits	41 (24%)	84 (49%) 47 (27%)
	Finances	48 (30%)	55 (34%) 59 (36%)
	Education	57 (36%)	59 (38%) 41 (26%)
	Drugs and alcohol	71 (45%)	55 (35%) 31 (20%)
Q12.13	Have you been provided with information on the following?: (Please tick all that apply to you.)		
		<i>Yes</i>	<i>No</i>
	Resettlement day release	126 (68%)	59 (32%)
	Resettlement overnight release	117 (65%)	64 (35%)
Q12.14	Have you had access to the following?: (Please tick all that apply to you.)		
		<i>Yes</i>	<i>No</i>
	Resettlement day release	93 (51%)	89 (49%)
	Resettlement overnight release	64 (36%)	114 (64%)
	Special purpose leave	28 (18%)	127 (82%)
Q12.15	Please answer the following questions on your preparation for release?:		
		<i>Yes</i>	<i>No</i>
	Were you given up to date information about this prison before you came here	43 (23%)	140 (77%)
	Were you helped to prepare for open conditions before you came here (increased responsibility, freedom etc.)	50 (28%)	129 (72%)
	Do you feel you have been given a greater responsibility here than when you were in closed conditions	126 (70%)	54 (30%)
	Have you been on a preparation for release course	24 (14%)	153 (86%)
	Is this prison near your home area or intended release address	42 (24%)	134 (76%)
	Have you done anything, or has anything happened to you here that will make you less likely to offend in the future	98 (57%)	75 (43%)

Main comparator and comparator to last time



Prisoner survey responses HMP Leyhill 2016

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

Key to tables

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Percentages which are not highlighted show there is no significant difference					
Number of completed questionnaires returned		189	2,065	189	170
SECTION 1: General information					
1.2	Are you under 21 years of age?	0%	1%	0%	0%
1.3	Are you on recall?	6%	3%	6%	7%
1.4	Is your sentence less than 12 months?	1%	3%	1%	7%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	30%	11%	30%	11%
1.5	Are you a foreign national?	3%	2%	3%	5%
1.6	Do you understand spoken English?	100%	100%	100%	99%
1.7	Do you understand written English?	99%	99%	99%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	12%	28%	12%	21%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	1%	3%	1%	2%
1.1	Are you Muslim?	4%	14%	4%	6%
1.11	Are you homosexual/gay or bisexual?	10%	2%	10%	7%
1.12	Do you consider yourself to have a disability?	23%	11%	23%	20%
1.13	Are you a veteran (ex-armed services)?	12%	7%	12%	9%
1.14	Is this your first time in prison?	51%	52%	51%	55%
1.15	Do you have any children under the age of 18?	29%	54%	29%	47%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	54%	45%	54%	63%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	89%	82%	89%	78%
2.3	Were you offered a toilet break?	10%	10%	10%	16%
2.4	Was the van clean?	70%	65%	70%	78%
2.5	Did you feel safe?	86%	85%	86%	90%
2.6	Were you treated well/very well by the escort staff?	87%	78%	87%	87%
2.7	Before you arrived here were you told that you were coming here?	68%	79%	68%	77%
2.7	Before you arrived here did you receive any written information about coming here?	29%	14%	29%	19%
2.8	When you first arrived here did your property arrive at the same time as you?	88%	91%	88%	94%

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SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	91%	73%	91%	91%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	87%	85%	94%
3.3	Were you treated well/very well in reception?	88%	82%	88%	91%
When you first arrived:					
3.4	Did you have any problems?	42%	42%	42%	40%
3.4	Did you have any problems with loss of property?	12%	10%	12%	8%
3.4	Did you have any housing problems?	8%	8%	8%	7%
3.4	Did you have any problems contacting employers?	1%	2%	1%	1%
3.4	Did you have any problems contacting family?	9%	10%	9%	9%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	1%	0%	1%
3.4	Did you have any money worries?	4%	11%	4%	8%
3.4	Did you have any problems with feeling depressed or suicidal?	6%	4%	6%	3%
3.4	Did you have any physical health problems?	9%	8%	9%	8%
3.4	Did you have any mental health problems?	12%	5%	12%	7%
3.4	Did you have any problems with needing protection from other prisoners?	1%	1%	1%	3%
3.4	Did you have problems accessing phone numbers?	13%	12%	13%	3%
For those with problems:					
3.5	Did you receive any help/ support from staff in dealing with these problems?	57%	46%	57%	53%
When you first arrived here, were you offered any of the following:					
3.6	Tobacco?	54%	55%	54%	63%
3.6	A shower?	33%	36%	33%	42%
3.6	A free telephone call?	21%	42%	21%	46%
3.6	Something to eat?	41%	49%	41%	52%
3.6	PIN phone credit?	33%	57%	33%	52%
3.6	Toiletries/ basic items?	44%	40%	44%	49%

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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?	68%	57%	68%	66%
3.7	Someone from health services?	72%	73%	72%	81%
3.7	A Listener/Samaritans?	59%	40%	59%	48%
3.7	Prison shop/ canteen?	32%	30%	32%	26%
When you first arrived here were you offered information about any of the following:					
3.8	What was going to happen to you?	72%	68%	72%	72%
3.8	Support was available for people feeling depressed or suicidal?	57%	46%	57%	53%
3.8	How to make routine requests?	58%	55%	58%	67%
3.8	Your entitlement to visits?	55%	55%	55%	61%
3.8	Health services?	67%	64%	67%	72%
3.8	The chaplaincy?	65%	56%	65%	62%
3.9	Did you feel safe on your first night here?	87%	91%	87%	94%
3.10	Have you been on an induction course?	97%	95%	97%	98%
For those who have been on an induction course:					
3.11	Did the course cover everything you needed to know about the prison?	78%	71%	78%	82%
3.12	Did you receive an education (skills for life) assessment?	95%	87%	95%	90%
SECTION 4: Legal rights and respectful custody					
In terms of your legal rights, is it easy/very easy to:					
4.1	Communicate with your solicitor or legal representative?	63%	58%	63%	73%
4.1	Attend legal visits?	56%	46%	56%	59%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	19%	27%	19%	17%
4.3	Can you get legal books in the library?	52%	47%	52%	52%
For the wing/unit you are currently on:					
4.4	Are you normally able to have a shower every day?	98%	99%	98%	99%
4.4	Do you normally receive clean sheets every week?	95%	64%	95%	98%
4.4	Do you normally get cell cleaning materials every week?	84%	61%	84%	90%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	79%	78%	79%	84%
4.4	Can you normally get your stored property, if you need to?	41%	44%	41%	44%
4.5	Is the food in this prison good/very good?	73%	35%	73%	70%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	65%	51%	65%	58%
4.7	Are you able to speak to a Listener at any time, if you want to?	84%	59%	84%	81%
4.8	Are your religious beliefs respected?	60%	54%	60%	61%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	68%	66%	68%	77%
4.10	Is it easy/very easy to attend religious services?	54%	56%	54%	61%

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SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	90%	85%	90%	98%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	78%	69%	78%	90%
5.2	Do you feel applications are dealt with quickly (within seven days)?	71%	57%	71%	84%
5.3	Is it easy to make a complaint?	58%	52%	58%	58%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	49%	38%	49%	65%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	39%	40%	39%	71%
5.5	Have you ever been prevented from making a complaint when you wanted to?	9%	17%	9%	10%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	48%	36%	48%	36%
SECTION 6: Relationships with staff					
6.1	Do most staff, in this prison, treat you with respect?	88%	78%	88%	84%
6.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	86%	77%	86%	84%
6.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	36%	33%	36%	36%
6.4	Do staff normally speak to you most of the time/all of the time during association?	20%	20%	20%	18%
6.5	Do you have a personal officer?	87%	74%	87%	79%
	For those with a personal officer:				
6.6	Do you think your personal officer is helpful/very helpful?	77%	72%	77%	80%

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SECTION 7: Safety					
7.1	Have you ever felt unsafe here?	25%	19%	25%	17%
7.2	Do you feel unsafe now?	8%	7%	8%	3%
7.3	Have you been victimised by other prisoners here?	24%	14%	24%	19%
	Since you have been here, have other prisoners:				
7.5	Made insulting remarks about you, your family or friends?	9%	6%	9%	8%
7.5	Hit, kicked or assaulted you?	2%	1%	2%	1%
7.5	Sexually abused you?	1%	0%	1%	0%
7.5	Threatened or intimidated you?	15%	7%	15%	11%
7.5	Taken your canteen/property?	1%	2%	1%	1%
7.5	Victimised you because of medication?	1%	1%	1%	1%
7.5	Victimised you because of debt?	0%	1%	0%	1%
7.5	Victimised you because of drugs?	1%	1%	1%	2%
7.5	Victimised you because of your race or ethnic origin?	2%	2%	2%	1%
7.5	Victimised you because of your religion/religious beliefs?	2%	2%	2%	1%
7.5	Victimised you because of your nationality?	2%	1%	2%	1%
7.5	Victimised you because you were from a different part of the country?	2%	2%	2%	2%
7.5	Victimised you because you are from a traveller community?	1%	0%	1%	0%
7.5	Victimised you because of your sexual orientation?	3%	1%	3%	2%
7.5	Victimised you because of your age?	2%	1%	2%	2%
7.5	Victimised you because you have a disability?	2%	1%	2%	1%
7.5	Victimised you because you were new here?	3%	2%	3%	3%
7.5	Victimised you because of your offence/crime?	9%	2%	9%	8%
7.5	Victimised you because of gang related issues?	1%	1%	1%	0%

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SECTION 7: Safety continued					
7.6	Have you been victimised by staff here?	12%	22%	12%	14%
	Since you have been here, have staff:				
7.7	Made insulting remarks about you, your family or friends?	1%	7%	1%	5%
7.7	Hit, kicked or assaulted you?	1%	0%	1%	0%
7.7	Sexually abused you?	0%	0%	0%	0%
7.7	Threatened or intimidated you?	4%	9%	4%	6%
7.7	Victimised you because of medication?	1%	2%	1%	0%
7.7	Victimised you because of debt?	0%	0%	0%	0%
7.7	Victimised you because of drugs?	0%	1%	0%	0%
7.7	Victimised you because of your race or ethnic origin?	1%	3%	1%	1%
7.7	Victimised you because of your religion/religious beliefs?	1%	2%	1%	1%
7.7	Victimised you because of your nationality?	1%	1%	1%	2%
7.7	Victimised you because you were from a different part of the country?	1%	1%	1%	3%
7.7	Victimised you because you are from a traveller community?	1%	0%	1%	0%
7.7	Victimised you because of your sexual orientation?	0%	0%	0%	0%
7.7	Victimised you because of your age?	1%	1%	1%	1%
7.7	Victimised you because you have a disability?	2%	1%	2%	3%
7.7	Victimised you because you were new here?	2%	3%	2%	2%
7.7	Victimised you because of your offence/crime?	2%	2%	2%	3%
7.7	Victimised you because of gang related issues?	0%	1%	0%	0%
	For those who have been victimised by staff or other prisoners:				
7.8	Did you report any victimisation that you have experienced?	65%	22%	65%	41%

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SECTION 8: Health services					
8.1	Is it easy/very easy to see the doctor?	39%	52%	39%	59%
8.1	Is it easy/very easy to see the nurse?	64%	72%	64%	86%
8.1	Is it easy/very easy to see the dentist?	17%	27%	17%	24%
	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:				
8.2	The doctor?	69%	64%	69%	75%
8.2	The nurse?	75%	74%	75%	85%
8.2	The dentist?	49%	55%	49%	48%
8.3	The overall quality of health services?	62%	64%	62%	76%
8.4	Are you currently taking medication?	58%	44%	58%	53%
	For those currently taking medication:				
8.5	Are you allowed to keep possession of some or all of your medication in your own cell?	100%	98%	100%	100%
8.6	Do you have any emotional well being or mental health problems?	22%	14%	22%	16%
	For those who have problems:				
8.7	Are you being helped or supported by anyone in this prison?	73%	58%	73%	81%
SECTION 9: Drugs and alcohol					
9.1	Did you have a problem with drugs when you came into this prison?	13%	11%	13%	9%
9.2	Did you have a problem with alcohol when you came into this prison?	19%	10%	19%	9%
9.3	Is it easy/very easy to get illegal drugs in this prison?	36%	37%	36%	38%
9.4	Is it easy/very easy to get alcohol in this prison?	15%	21%	15%	25%
9.5	Have you developed a problem with drugs since you have been in this prison?	2%	2%	2%	3%
9.6	Have you developed a problem with diverted medication since you have been in this prison?	1%	2%	1%	1%
	For those with drug or alcohol problems:				
9.7	Have you received any support or help with your drug problem while in this prison?	92%	78%	92%	76%
9.8	Have you received any support or help with your alcohol problem while in this prison?	91%	82%	91%	79%
	For those who have received help or support with their drug or alcohol problem:				
9.9	Was the support helpful?	95%	89%	95%	100%

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SECTION 10: Activities					
	Is it very easy/ easy to get into the following activities:				
10.1	A prison job?	71%	75%	71%	87%
10.1	Vocational or skills training?	63%	59%	63%	61%
10.1	Education (including basic skills)?	76%	72%	76%	75%
10.1	Offending Behaviour Programmes?	22%	35%	22%	30%
	Are you currently involved in any of the following activities:				
10.2	A prison job?	82%	70%	82%	80%
10.2	Vocational or skills training?	17%	18%	17%	20%
10.2	Education (including basic skills)?	19%	22%	19%	29%
10.2	Offending Behaviour Programmes?	3%	5%	3%	4%
10.3	Have you had a job while in this prison?	92%	94%	92%	96%
	For those who have had a prison job while in this prison:				
10.3	Do you feel the job will help you on release?	50%	44%	50%	46%
10.3	Have you been involved in vocational or skills training while in this prison?	80%	82%	80%	80%
	For those who have had vocational or skills training while in this prison:				
10.3	Do you feel the vocational or skills training will help you on release?	60%	64%	60%	60%
10.3	Have you been involved in education while in this prison?	82%	85%	82%	89%
	For those who have been involved in education while in this prison:				
10.3	Do you feel the education will help you on release?	53%	62%	53%	66%
11.3	Have you been involved in offending behaviour programmes while in this prison?	59%	71%	59%	67%
	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?	58%	48%	58%	57%
10.4	Do you go to the library at least once a week?	72%	54%	72%	57%
10.5	Does the library have a wide enough range of materials to meet your needs?	80%	60%	80%	83%
10.6	Do you go to the gym three or more times a week?	33%	53%	33%	36%
10.7	Do you go outside for exercise three or more times a week?	76%	76%	76%	84%
10.8	Do you go on association more than five times each week?	75%	78%	75%	80%
10.9	Do you spend ten or more hours out of your cell on a weekday?	54%	57%	54%	57%
SECTION 11: Friends and family					
11.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	54%	56%	54%	40%
11.2	Have you had any problems with sending or receiving mail?	15%	21%	15%	15%
11.3	Have you had any problems getting access to the telephones?	11%	12%	11%	8%
11.4	Is it easy/ very easy for your friends and family to get here?	28%	42%	28%	24%

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Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
SECTION 12: Preparation for release					
12.1	Do you have a named offender manager (home probation officer) in the probation service?	96%	94%	96%	93%
For those who have an offender manager what type of contact have you had:					
12.2	No contact?	10%	17%	10%	12%
12.2	Contact by letter?	51%	37%	51%	60%
12.2	Contact by phone?	70%	57%	70%	59%
12.2	Contact by visit?	40%	39%	40%	35%
12.3	Do you have a named offender supervisor in this prison?	95%	91%	95%	90%
12.4	Do you have a sentence plan?	82%	82%	82%	71%
For those with a sentence plan:					
12.5	Were you involved/very involved in the development of your plan?	76%	74%	76%	68%
Who is working with you to achieve your sentence plan targets:					
12.6	Nobody?	16%	29%	16%	24%
12.6	Offender supervisor?	77%	57%	77%	65%
12.6	Offender manager?	56%	39%	56%	46%
12.6	Named/ personal officer?	27%	19%	27%	24%
12.6	Staff from other departments?	21%	19%	21%	23%
For those with a sentence plan:					
12.7	Can you achieve any of your sentence plan targets in this prison?	78%	77%	78%	67%
12.8	Are there plans for you to achieve any of your targets in another prison?	12%	12%	12%	6%
12.9	Are there plans for you to achieve any of your targets in the community?	61%	47%	61%	58%
12.10	Do you have a needs based custody plan?	7%	7%	7%	8%
12.11	Do you feel that any member of staff has helped you to prepare for release?	39%	36%	39%	29%
For those that need help do you know of anyone in this prison who can help you on release with the following:					
12.12	Employment?	53%	55%	53%	51%
12.12	Accommodation?	52%	50%	52%	44%
12.12	Benefits?	64%	49%	64%	57%
12.12	Finances?	48%	42%	48%	47%
12.12	Education?	59%	55%	59%	55%
12.12	Drugs and alcohol?	64%	58%	64%	63%
Have you been provided with information on the following:					
12.13	Resettlement day release?	68%	76%	68%	69%
12.13	Resettlement overnight release?	65%	73%	65%	68%
Have you had access to the following:					
12.14	Resettlement day release?	51%	64%	51%	52%
12.14	Resettlement overnight release?	36%	50%	36%	45%
12.14	Special purpose leave?	18%	33%	18%	17%
Please answer the following about your preparation for release:					
12.15	Were you given up to date information about this prison before you came here?	24%	28%	24%	23%
12.15	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	28%	30%	28%	26%
12.15	Do you feel you have been given greater responsibility here than when you were in closed conditions?	70%	79%	70%	83%

Main comparator and comparator to last time

Key to tables

		HMP Leyhill 2016	Open prisons comparator	HMP Leyhill 2016	HMP Leyhill 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				
12.15	Have you been on a preparation for release course?	14%	19%	14%	23%
12.15	Is this prison near your home area or your intended release address?	24%	51%	24%	25%
12.15	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	57%	63%	57%	54%

Diversity analysis



Key Question Responses (ethnicity) HMP Leyhill 2016

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

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	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		23	165
1.5	Are you a foreign national?	0%	3%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	1%
1.1	Are you Muslim?	30%	1%
1.12	Do you consider yourself to have a disability?	5%	26%
1.13	Are you a veteran (ex-armed services)?	0%	13%
1.14	Is this your first time in prison?	34%	53%
2.6	Were you treated well/very well by the escort staff?	92%	86%
2.7	Before you arrived here were you told that you were coming here?	61%	69%
3.2	When you were searched in reception, was this carried out in a respectful way?	82%	85%
3.3	Were you treated well/very well in reception?	86%	88%
3.4	Did you have any problems when you first arrived?	53%	41%
3.7	Did you have access to someone from health care when you first arrived here?	61%	74%
3.9	Did you feel safe on your first night here?	74%	89%
3.10	Have you been on an induction course?	95%	97%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	46%	65%
4.4	Are you normally able to have a shower every day?	100%	98%
4.5	Is the food in this prison good/very good?	48%	76%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	48%	68%
4.7	Are you able to speak to a Listener at any time, if you want to?	79%	85%
4.8	Do you feel your religious beliefs are respected?	61%	60%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	82%	66%
5.1	Is it easy to make an application?	79%	92%
5.3	Is it easy to make a complaint?	46%	60%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
6.1	Do most staff, in this prison, treat you with respect?	79%	90%
6.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	78%	88%
6.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	18%	21%
6.4	Do you have a personal officer?	87%	87%
7.1	Have you ever felt unsafe here?	34%	24%
7.2	Do you feel unsafe now?	14%	7%
7.3	Have you been victimised by other prisoners?	26%	24%
7.5	Have you ever felt threatened or intimidated by other prisoners here?	8%	17%
7.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	2%
7.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	2%
7.5	Have you been victimised because of your nationality? (By prisoners)	5%	1%
7.5	Have you been victimised because you have a disability? (By prisoners)	0%	2%
7.6	Have you been victimised by a member of staff?	21%	11%
7.7	Have you ever felt threatened or intimidated by staff here?	8%	4%
7.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	1%
7.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
7.7	Have you been victimised because of your nationality? (By staff)	0%	1%
7.7	Have you been victimised because you have a disability? (By staff)	0%	2%
8.1	Is it easy/very easy to see the doctor?	20%	41%
8.1	Is it easy/ very easy to see the nurse?	29%	68%
8.4	Are you currently taking medication?	44%	60%
8.6	Do you feel you have any emotional well being/mental health issues?	21%	21%
9.3	Is it easy/very easy to get illegal drugs in this prison?	26%	37%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
10.2	Are you currently working in the prison?	77%	83%
10.2	Are you currently undertaking vocational or skills training?	23%	16%
10.2	Are you currently in education (including basic skills)?	14%	20%
10.2	Are you currently taking part in an offending behaviour programme?	0%	4%
10.4	Do you go to the library at least once a week?	81%	71%
10.6	Do you go to the gym three or more times a week?	57%	29%
10.7	Do you go outside for exercise three or more times a week?	61%	78%
10.8	On average, do you go on association more than five times each week?	57%	78%
10.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	48%	55%
11.2	Have you had any problems sending or receiving mail?	21%	14%
11.3	Have you had any problems getting access to the telephones?	18%	11%
	Have you been provided with information on the following:		
12.12	Resettlement day release?	61%	69%
12.12	Resettlement overnight release?	60%	65%
	Have you had access to the following:		
12.13	Resettlement day release?	48%	52%
12.13	Resettlement overnight release?	32%	37%
12.13	Special purpose leave?	16%	19%
	Please answer the following about your preparation for release:		
12.14	Were you given up to date information about this prison before you came here?	20%	24%
12.14	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	25%	28%
12.14	Do you feel you have been given greater responsibility here than when you were in closed conditions?	50%	72%
12.14	Have you been on a preparation for release course?	0%	15%
12.14	Is this prison near your home area or your intended release address?	37%	22%

Diversity analysis



Key Question Responses (disability, age - over 50) HMP Leyhill 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

		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		43	144	83	105
1.5	Are you a foreign national?	7%	1%	4%	2%
1.6	Do you understand spoken English?	100%	100%	100%	100%
1.7	Do you understand written English?	97%	100%	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.)	3%	15%	6%	16%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	0%	0%	2%
1.1	Are you Muslim?	3%	4%	1%	6%
1.12	Do you consider yourself to have a disability?			29%	19%
1.13	Are you a veteran (ex-armed services)?	18%	10%	18%	7%
1.14	Is this your first time in prison?	40%	54%	46%	55%
2.6	Were you treated well/very well by the escort staff?	83%	88%	89%	85%
2.7	Before you arrived here were you told that you were coming here?	71%	68%	69%	69%
3.2	When you were searched in reception, was this carried out in a respectful way?	80%	86%	88%	82%
3.3	Were you treated well/very well in reception?	85%	88%	95%	82%
3.4	Did you have any problems when you first arrived?	61%	36%	36%	47%
3.7	Did you have access to someone from health care when you first arrived here?	76%	72%	77%	69%
3.9	Did you feel safe on your first night here?	80%	90%	94%	81%
3.10	Have you been on an induction course?	97%	97%	96%	97%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	81%	57%	66%	60%
4.4	Are you normally able to have a shower every day?	97%	99%	99%	98%
4.5	Is the food in this prison good/very good?	68%	75%	81%	66%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	63%	66%	79%	55%
4.7	Are you able to speak to a Listener at any time, if you want to?	82%	85%	84%	84%
4.8	Do you feel your religious beliefs are respected?	76%	56%	70%	52%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	81%	65%	76%	64%
5.1	Is it easy to make an application?	90%	91%	93%	90%
5.3	Is it easy to make a complaint?	69%	55%	59%	58%

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				
6.1	Do most staff, in this prison, treat you with respect?	97%	86%	95%	83%
6.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	81%	88%	89%	84%
6.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	30%	18%	28%	15%
6.4	Do you have a personal officer?	90%	86%	86%	87%
7.1	Have you ever felt unsafe here?	35%	22%	17%	32%
7.2	Do you feel unsafe now?	8%	7%	5%	10%
7.3	Have you been victimised by other prisoners?	42%	18%	18%	29%
7.5	Have you ever felt threatened or intimidated by other prisoners here?	25%	13%	12%	18%
7.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	7%	1%	2%	2%
7.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	1%	2%	2%
7.5	Have you been victimised because of your nationality? (By prisoners)	4%	1%	2%	1%
7.5	Have you been victimised because of your age? (By prisoners)	4%	1%	4%	1%
7.5	Have you been victimised because you have a disability? (By prisoners)	7%	0%	1%	2%
7.6	Have you been victimised by a member of staff?	19%	9%	10%	14%
7.7	Have you ever felt threatened or intimidated by staff here?	7%	4%	1%	7%
7.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	1%	1%	1%
7.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%	0%	1%
7.7	Have you been victimised because of your nationality? (By staff)	3%	0%	0%	1%
7.7	Have you been victimised because of your age? (By staff)	0%	0%	0%	1%
7.7	Have you been victimised because you have a disability? (By staff)	5%	1%	2%	1%
8.1	Is it easy/very easy to see the doctor?	41%	37%	48%	30%
8.1	Is it easy/ very easy to see the nurse?	76%	61%	72%	57%
9.4	Are you currently taking medication?	84%	50%	74%	45%
8.6	Do you feel you have any emotional well being/mental health issues?	46%	14%	17%	25%
9.3	Is it easy/very easy to get illegal drugs in this prison?	50%	32%	24%	45%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability		Prisoners aged 50 and over
	Any percentage highlighted in blue is significantly worse				Prisoners under the age of 50
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
10.2	Are you currently working in the prison?	76%	84%	76%	87%
10.2	Are you currently undertaking vocational or skills training?	19%	16%	12%	21%
10.2	Are you currently in education (including basic skills)?	25%	17%	17%	21%
10.2	Are you currently taking part in an offending behaviour programme?	10%	1%	2%	4%
10.4	Do you go to the library at least once a week?	81%	70%	72%	73%
10.6	Do you go to the gym three or more times a week?	19%	37%	19%	42%
10.7	Do you go outside for exercise three or more times a week?	72%	77%	79%	73%
10.8	On average, do you go on association more than five times each week?	88%	72%	76%	74%
10.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	64%	52%	47%	60%
11.2	Have you had any problems sending or receiving mail?	12%	15%	10%	19%
11.3	Have you had any problems getting access to the telephones?	14%	10%	10%	13%
	Have you been provided with information on the following:				
12.12	Resettlement day release?	67%	68%	67%	69%
12.12	Resettlement overnight release?	61%	66%	61%	67%
	Have you had access to the following:				
12.13	Resettlement day release?	55%	50%	46%	54%
12.13	Resettlement overnight release?	34%	37%	33%	38%
12.13	Special purpose leave?	32%	14%	19%	17%
	Please answer the following about your preparation for release:				
12.14	Were you given up to date information about this prison before you came here?	19%	24%	28%	20%
12.14	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	15%	32%	28%	28%
12.14	Do you feel you have been given greater responsibility here than when you were in closed conditions?	85%	66%	71%	69%
12.14	Have you been on a preparation for release course?	13%	14%	17%	11%
12.14	Is this prison near your home area or your intended release address?	26%	23%	22%	26%

Diversity Analysis



Key question responses (veterans) HMP Leyhill 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

		Consider themselves to be a veteran	Do not consider themselves to be a veteran
	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		22	166
1.5	Are you a foreign national?	5%	3%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	0%	14%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	1%
1.1	Are you Muslim?	0%	5%
1.12	Do you consider yourself to have a disability?	36%	21%
1.14	Is this your first time in prison?	78%	47%
2.6	Were you treated well/very well by the escort staff?	86%	87%
2.7	Before you arrived here were you told that you were coming here?	50%	71%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	85%
3.3	Were you treated well/very well in reception?	91%	87%
3.4	Did you have any problems when you first arrived?	36%	43%
3.7	Did you have access to someone from health care when you first arrived here?	76%	72%
3.9	Did you feel safe on your first night here?	91%	86%
3.10	Have you been on an induction course?	100%	96%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	68%	62%
4.4	Are you normally able to have a shower every day?	100%	98%
4.5	Is the food in this prison good/very good?	86%	71%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	71%	64%
4.7	Are you able to speak to a Listener at any time, if you want to?	91%	83%
4.8	Do you feel your religious beliefs are respected?	95%	55%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	91%	65%
5.1	Is it easy to make an application?	95%	90%
5.3	Is it easy to make a complaint?	46%	60%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be a veteran	Do not consider themselves to be a veteran
	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		
6.1	Do most staff, in this prison, treat you with respect?	86%	88%
6.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	86%	86%
6.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	29%	19%
6.4	Do you have a personal officer?	81%	88%
7.1	Have you ever felt unsafe here?	32%	25%
7.2	Do you feel unsafe now?	14%	7%
7.3	Have you been victimised by other prisoners?	46%	21%
7.5	Have you ever felt threatened or intimidated by other prisoners here?	22%	15%
7.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	5%	2%
7.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	2%
7.5	Have you been victimised because of your nationality? (By prisoners)	5%	1%
7.5	Have you been victimised because of your age? (By Prisoners)	5%	2%
7.5	Have you been victimised because you have a disability? (By prisoners)	5%	1%
7.6	Have you been victimised by a member of staff?	5%	13%
7.7	Have you ever felt threatened or intimidated by staff here?	0%	5%
7.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	1%
7.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
7.7	Have you been victimised because of your nationality? (By staff)	0%	1%
7.7	Have you been victimised because of your age? (By staff)	0%	1%
7.7	Have you been victimised because you have a disability? (By staff)	0%	2%
8.1	Is it easy/very easy to see the doctor?	54%	36%
8.1	Is it easy/ very easy to see the nurse?	86%	61%
9.4	Are you currently taking medication?	73%	56%
8.6	Do you feel you have any emotional well being/mental health issues?	34%	20%
9.3	Is it easy/very easy to get illegal drugs in this prison?	48%	34%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be a veteran	Do not consider themselves to be a veteran
	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		
10.2	Are you currently working in the prison?	81%	82%
10.2	Are you currently undertaking vocational or skills training?	19%	17%
10.2	Are you currently in education (including basic skills)?	32%	17%
10.2	Are you currently taking part in an offending behaviour programme?	5%	3%
10.4	Do you go to the library at least once a week?	77%	71%
10.6	do you go to the gym three or more times a week?	27%	34%
10.7	Do you go outside for exercise three or more times a week?	86%	75%
10.8	On average, do you go on association more than five times each week?	86%	74%
10.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	66%	53%
11.2	Have you had any problems sending or receiving mail?	5%	16%
11.3	Have you had any problems getting access to the telephones?	19%	11%
	Have you been provided with information on the following:		
12.12	Resettlement day release?	73%	67%
12.12	Resettlement overnight release?	73%	63%
	Have you had access to the following:		
12.13	Resettlement day release?	40%	53%
12.13	Resettlement overnight release?	35%	36%
12.13	Special purpose leave?	36%	16%
	Please answer the following about your preparation for release:		
12.14	Were you given up to date information about this prison before you came here?	48%	21%
12.14	Were you helped to prepare for open conditions before you came here (increased responsibility etc)?	34%	27%
12.14	Do you feel you have been given greater responsibility here than when you were in closed conditions?	63%	71%
12.14	Have you been on a preparation for release course?	20%	13%
12.14	Is this prison near your home area or your intended release address?	20%	25%