

Report on an announced inspection of

HMP Guys Marsh

by HM Chief Inspector of Prisons

5–9 December 2016

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Glossary of terms

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

Introduction

Guys Marsh is a category C training and resettlement prison located in rural Dorset, holding a mixed population of approximately 550 convicted adult male prisoners. The full range of sentences was represented but with a preponderance of longer-term individuals including nearly 100 serving in excess of 10 years or indeterminate sentences. The majority of men held come from across the South West and in particular from population centres such as Bristol.

We last inspected Guys Marsh in November 2014 when we described a prison in crisis where managers and staff had all but lost control. A new governor had been appointed since then but we decided upon an early return to the prison in order to follow up on our previous findings and recommendations and gain some assurance that progress was being made. As is my practice in such circumstances, I gave the National Offender Management Service (NOMS) and the prison six months' notice of my intentions, doing so in the hope that their awareness of our impending visit would encourage improvement.

Our findings at this inspection, however, were very disappointing. Less than one-third of our previous recommendations had been achieved. Guys Marsh had many challenges, something we fully acknowledged and recognised. The prison is in a relatively remote location and a long way from the home areas and support networks of many of the prisoners it holds. Staff resources were stretched, which was something that had been recognised by NOMS and was being addressed. Many of those held were serious, challenging and in some cases organised offenders. All this said, far too little had been done far too late to address the serious concerns we raised in our previous report. It was striking how few of our recommendations had been addressed and in some respects the prison had got worse.

Guys Marsh remained unsafe. A quarter of prisoners told us in our survey that they felt unsafe at the time of the inspection and about half had felt unsafe at some point during their stay. Levels of violence were high and rising, with the number of assaults on staff, for example, having tripled since we last inspected. Too much of the violence was serious and many prisoners were either seeking sanctuary or self-isolating for their own protection. Interventions by the prison to help reduce violence were insufficient.

Much of the violence was, in our view, directly linked to issues of debt amongst prisoners and the widespread availability of illegal drugs. Some 74% of prisoners told us they thought illegal drugs were easily available and nearly a quarter indicated they had acquired a drug problem at the prison. Mandatory testing data suggested usage of detectable drugs was high and this did not account for the similar prevalence of new psychoactive substances (NPS). The prison was not yet fully sighted on the full extent of the issue or responding effectively.

A better understanding of the problems of violence and drugs, as well as the need for clear strategies and initiatives to reduce their influence, were priorities for the prison and the subject of two of our main recommendations for the prison.

Since we last inspected, three prisoners had taken their own lives at the prison. Levels of self-harm generally had not risen but remained higher than at similar prisons. Support offered to those experiencing crisis was variable and it was concerning that the prison's response to the recommendations made by the Prisons and Probation Ombudsman (PPO), who investigated the recent deaths, lacked rigour.

Many communal areas and much of the accommodation remained in a poor condition. Facilities and cells were dirty, furniture was broken or missing and too many cells had missing window panes. Prisoners expressed frustration at their lack of access to basic amenities such as bedding, kit and

cleaning materials. The prison, in response, blamed much of the problem upon their maintenance contractor.

Most prisoners told us that they felt respected by staff and we observed friendly if somewhat superficial engagement. Staff, however, too often failed to challenge poor behaviour. They had, in our view, low expectations of prisoners and presided over a permissive culture that did not establish clear boundaries and discipline. An improved environment and a more confident and capable staff culture were essential if this prison was to improve and consequently we also highlighted these priorities as main recommendations.

Our findings indicated that time out of cell was reasonable for most, although our checks found about 20% of prisoners locked in cell during the working day. The management of learning and skills was improving, but too slowly. While there were now sufficient places to employ all, at any one time about 30% of prisoners were not engaged. Those who did engage in work or learning seemed motivated and on many courses achieved well, although less so in English and maths. The expectation that all prisoners engage fully in learning and work was another priority we identified.

Support for resettlement remained poor. Shortages of staff undermined offender management processes, despite a relatively high-risk population, and about half of all prisoners did not have a current offender assessment system (OASys) assessment. Too many prisoners felt unsupported in their efforts to progress through their sentence and had limited contact with their supervisor. Public protection work required improvement but resettlement work was generally adequate. A better assessment of prisoner need as well as meaningful data or analysis was needed to provide a better sense of the effectiveness of what was being offered.

This inspection found failings in almost every area of the prison we looked at. We were advised that NOMS had recognised some of the strategic problems the prison faced, particularly in relation to staffing numbers, with the promise of new resources a cause for some hope and renewed optimism. Any progress from the very low base we identified in 2015 had been very recent and was not well embedded. Some very careful thought needed to be given to how to move the prison forward. Improvement had to be based on a careful analysis and understanding of what was actually happening in the prison; an achievable plan which identified clear priorities and determined leadership focused on delivery were needed. This report provides an analysis and recommendations which we hope will assist in that process.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

January 2017

Fact page

Task of the establishment

HMP Guys Marsh is a category C training and resettlement prison for male adults. The resettlement catchment area encompasses Bristol, Wiltshire, Somerset and Gloucestershire.

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

Public

Region/Department

South West

Number held

543

Certified normal accommodation

518

Operational capacity

557

Date of last full inspection

10–21 November 2014

Brief history

Opened in 1960 as a borstal, HMP Guys Marsh became a young offender's institution in 1984. In 1992, it started also to accommodate adults. In 2008, the young offenders were moved out and the establishment became an adult male category C prison, holding both determinate- and indeterminate-sentenced men.

Short description of residential units

- Anglia wing is a general wing and holds up to 79 prisoners.
- Cambria wing holds up to 66 prisoners, and is set up as part of a progressive system for those who self-isolate, with safe association and exercise, and places in workshop 10 for those who cannot work in the general population. It also holds the majority of the prison's life-sentenced population.
- Dorset wing is a general wing and holds 66 prisoners.
- Fontmell and Jubilee wings are enhanced wings, holding 40 prisoners each.
- Gwent wing is the induction wing and holds 80 prisoners.
- Mercia wing holds 76 prisoners and has a non-smoking spur.
- Saxon wing is the integrated substance misuse service wing, providing 60 spaces to those engaging with drug treatment services.
- Wessex wing holds 66 prisoners, including those on the Kainos programme.
- Tarrant is the segregation unit, with 12 standard cells and two special accommodation cells.

Name of governor/director

Paul Millett

Escort contractor

GEOAmey

Health service provider

Health service provider: Dorset Healthcare University Foundation Trust

Substance misuse provider: EDP Drug and Alcohol Services

Learning and skills providers

Weston College

Independent Monitoring Board chair

Janet Livsey

Community rehabilitation company (CRC)

Bristol, Gloucestershire, Somerset and Wiltshire CRC, operated by Working Links, commissioned Catch 22 to deliver resettlement services in the prison.

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 was welcoming, but there was too little focus on the safety and vulnerability of new arrivals. Too many prisoners felt unsafe. Levels of violence were high, had increased since the previous inspection and were mostly driven by drugs and debt. Arrangements to support prisoners at risk of self-harm were not sufficiently robust. Drugs were readily available and many prisoners had developed a drug problem while at the prison. Spice use was widespread and particularly problematic. Not enough was being done to reduce drug supply and make the prison safer. The managerial oversight of force was inadequate. The use of segregation was high. Support for prisoners with substance misuse issues had improved and was reasonably good. **Outcomes for prisoners were poor against this healthy prison test.***

S2 *At the last inspection in November 2014 we found that outcomes for prisoners in HMP Guys Marsh were poor against this healthy prison test. We made 20 recommendations in the area of safety. At this follow-up inspection, we found that nine of the recommendations had been achieved, three had been partially achieved and eight had not been achieved.*

S3 The reception area was clean and spacious, and staff were welcoming. New arrivals were seen by an induction orderly, who provided useful information about the prison. A Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) was available, but staff did not meet new arrivals in private to discuss and identify risk and vulnerability issues. Most new prisoners went to the dedicated induction unit, where there were enhanced checks on their safety during their first night. However, there was no other support on their first night and cells were not always fully equipped. Fewer prisoners than at the time of the previous inspection said that they had felt safe on their first night.

S4 The induction programme was comprehensive and started on the day after arrival. It was completed within a week and prisoners could access activities swiftly.

S5 Over a quarter of prisoners in our survey said that they currently felt unsafe, and over half that they had felt unsafe at the prison at some time, both of which figures were far higher than at similar prisons. Levels of violence had risen year on year, and were directly related to drugs and debt. Not all violent incidents were reported or investigated. The number of reported assaults on prisoners had increased by two-thirds, and on staff had tripled, and both were far higher than at similar prisons. Too many of these had been serious. Despite these levels of violence, too little had been done to make the prison safer. Some initiatives showed promise but were not yet embedded, and there was no current action plan.

S6 The management of victims and perpetrators was weak. One of the wings (Cambria) was a permanent sanctuary for prisoners fearing for their own safety. Some prisoners were self-isolating on other wings, sometimes for many months, with a limited regime, with less than an hour a day unlocked and no reintegration planning. Despite the excessively high levels of violence and bullying, at the time of the inspection only two prisoners were being monitored as perpetrators under the violence management model.

S7 Levels of self-harm were higher than at similar establishments but similar to those at the time of the previous inspection. Safer custody meetings analysed a range of information about self-harm but had not adequately quantified the link with debt and drug use. The complex needs meeting provided a good opportunity to discuss and provide support for prisoners with

acute needs. The quality of assessment, care in custody and teamwork (ACCT) case planning and management for prisoners at risk of suicide or self-harm was good in some cases but poor in too many. We found good assessments in all cases but important concerns were often not included in care maps, and in many cases there was insufficient evidence of meaningful interaction. Serious incidents of self-harm, including a recent ligature use, had not been investigated to identify lessons learned. Since the previous inspection, there had been three self-inflicted deaths at the prison. Action plans in response to Prisons and Probation Ombudsman recommendations were in place but we were not confident that they had all been implemented effectively.

- S8 There had been substantial delays in processing security information and intelligence throughout the year, which had inevitably undermined efforts to address instability in the prison.
- S9 There was limited analysis of information. The prison was sighted on the major issues of drugs, gangs and violence but did not have a strategic approach and failed to establish the extent of the security threats or whether the measures taken were having an impact. Measures proposed to improve the physical security of the prison, such as zonal fencing and closed-circuit television on the wings, had not been implemented.
- S10 Drugs were readily available and almost three-quarters of the population said that they were easy to get, which was substantially higher than at similar prisons. Almost one in four prisoners said that they had developed a problem with drugs while at the prison.
- S11 Random mandatory drug testing positive rates and the number of drug finds were high, and the use of 'spice' – one of the new psychoactive substances (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects) – was widespread and problematic, contributing to violence, health emergencies and self-harm. The full scale and nature of drug availability were not fully understood by the prison. Some useful actions had been taken recently to reduce supply but there was no strategic approach to coordinate action and measure progress.
- S12 In spite of a main recommendation in the previous inspection report, the managerial oversight of use of force was inadequate. We were not confident that every use of force was recorded. Much of the paperwork was missing, so we could not be confident that the use of force was always justified. Planned interventions had not been filmed for almost three months, and the footage we viewed of older incidents was incomplete. Baton use was high, yet few of these incidents had been investigated. The recorded use of special accommodation was also high and we were not satisfied that all incidents had been recorded. Some records were missing, while others did not provide a full account.
- S13 Use of segregation was higher than at similar prisons, although the average length of stay had decreased. Fewer segregated prisoners than at the time of the previous inspection were transferred out and few were officially held for their own protection. However, some prisoners who were segregated for poor behaviour refused to return to normal location because of debt and the availability of drugs. Although a disturbance had closed the unit earlier in the year, it was currently safe and largely well managed. Staff–prisoner relationships on the unit were good. Prisoners had reintegration plans, and segregation reviews were timely and fair.
- S14 The therapeutic atmosphere on the Saxon drug treatment wing had improved, although far more prisoners on Saxon than on other wings complained of victimisation both by staff and prisoners. The psychosocial service had improved and there was a wide range of

interventions. Clinical care, including the supervision of controlled drug administration, was good.

Respect

*S15 Most residential units and cells were dirty and poorly maintained. Prisoners were frustrated by the poor living conditions and their struggle to get things done. Too often, staff failed to challenge poor behaviour or set effective boundaries. Equality provision had recently improved but the needs of prisoners with protected characteristics were often not met or monitored effectively. Faith provision was reasonable. Responses to prisoner complaints were good but not always timely. Health services were very good. The quality of the food provided was reasonably good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S16 At the last inspection in November 2014 we found that outcomes for prisoners in HMP Guys Marsh were reasonably good against this healthy prison test. We made 28 recommendations in the area of respect.² At this follow-up inspection we found that eight of the recommendations had been achieved, one had been partially achieved and 19 had not been achieved.

S17 Most residential wings were very dirty. Communal areas and cells were poorly maintained. Some cells lacked heating and many shower blocks were decrepit and lacked a regular hot water supply. Cells had broken furniture, broken or missing window panes and inadequate toilet screening. Some of this was due to the poor delivery of the national facilities management contracts. Many prisoners were frustrated by not being able to access basic items such as sufficient clothing, bedding, towels and cleaning materials, and they struggled to access their property. The applications process was ineffective, with no oversight of delays.

S18 In our survey, most prisoners, although fewer than at the time of the previous inspection, said that staff treated them respectfully, and we saw mostly friendly staff–prisoner interactions. However, supervision across the prison was inadequate and we routinely observed staff not challenging poor behaviour and not setting effective boundaries on behaviour. This had created a permissive culture, with low expectations of prisoners and the normalisation of poor behaviour.

S19 Strategic equality frameworks were in place, but there had been little focus on the equality agenda until recently. Despite good work by the newly appointed equality officer, outcomes for prisoners with protected characteristics were not consistently positive. Detailed equality data were collated but they were often significantly out of date and not analysed adequately. Discrimination incident report forms were investigated well but were not sufficiently timely; one had taken almost five months to complete. Although there were a number of consultation forums for some of the protected characteristic groups, there was little evidence that they informed and improved practice. Equality peer mentors were helpful; those we met were knowledgeable and well used by other prisoners.

S20 Few prisoners were from a black and minority ethnic background. In our survey, they mostly reported similarly to white prisoners, with the significant exceptions of victimisation by staff and feelings of safety. This had been the position at the time of the previous inspection and had not been addressed.

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.

- S21 Foreign national prisoners had no access to independent immigration advice.
- S22 There was good identification of new arrivals with disabilities, and most needs were met, but there were no paid carer roles and some personal emergency evacuation plans were out of date. There was some provision for older prisoners, including a day centre, but only limited consultation had been undertaken with younger prisoners about their needs.
- S23 Gay, bisexual and transgender prisoners were not sufficiently well identified or supported.
- S24 Provision for religious activities was reasonable, with an active chaplaincy meeting the needs of most faiths.
- S25 The responses to prisoner complaints that we inspected were some of the best we have seen, but many were not responded to on time. There was good, detailed monthly analysis of complaints, but little evidence that this informed practice.
- S26 Health services were very good overall, but were stretched by the emergency responses to incidents involving the use of spice. Reception screening was comprehensive, with good attention to key indicators of mental ill health and substance misuse. The range and access to primary care services were good and prisoners were able to see a nurse or GP quickly. The administration of medicines was poorly supervised and at times unsafe; there was little challenge to poor prisoner behaviour by prison staff, creating opportunities for both diversion and violence. Long-term conditions were well managed and there was an excellent prisoner-centred approach to health promotion. Access to dental treatment was poor overall, although there was suitable care for urgent cases. Mental health services were good, with appropriate waits for assessment and good attention to the management of risk. Prisoners waited too long for transfer to mental health beds.
- S27 The food we tasted was good but servery areas on some wings were very dirty and unhygienic, and wing microwaves were filthy. The management of meal queues on some wings was poor. We observed queue jumping and extra food being given to particular prisoners, without challenge by staff.

Purposeful activity

- S28 *The amount of time out of cell was reasonable for most, but prisoners were locked up too early for the night. The management of learning and skills was improving but the pace of improvements was slow. There were sufficient activities for all prisoners to be engaged but too many chose not to do so. The substantial numbers of learners with entry-level skills in mathematics and/or English were not supported to improve. The quality of teaching and learning required improvement. Peer mentors were used well. Prisoners achieved well, except on some English and mathematics courses. Library and PE facilities were good but usage had reduced, primarily because of staff shortages. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S29 *At the last inspection in November 2014 we found that outcomes for prisoners in HMP Guys Marsh were poor against this healthy prison test. We made 17 recommendations in the area of purposeful activity. At this follow-up inspection, we found that six of the recommendations had been achieved and 11 had not been achieved.*
- S30 As a result of staff shortages, a limited regime was in place. Prisoners in full-time activities had a reasonable amount of time unlocked, at around nine hours, but most prisoners were locked up too early for the night, at around 6pm.

- S31 In our spot checks, we found around one in five prisoners locked up during the working day, which, although a lot better than at the time of the previous inspection, was still too many for a training prison. Outdoor exercise periods were also too short, at 30 minutes a day.
- S32 Learning, skills and work were accorded sufficient priority by senior leaders. Leadership and strategic direction within learning and skills were improving. The team had mitigated the negative impacts of a long period of significant change in staffing but, nevertheless, this had slowed improvement of the provision. Managers had accurately identified most aspects of the provision which needed improving. Some positive impacts were evident but much was at an early stage. The number of activity places had increased and was broadly sufficient but teaching staff shortages had reduced the number of classes actually available. Too many prisoners, around 30%, did not routinely attend education, learning or work. The education provision did not meet the needs of the substantial number of prisoners with entry-level skills in English and/or mathematics. The range of education and training provision for longer-term prisoners was inadequate.
- S33 The quality of teaching and learning required improvement overall. Most prisoners were well motivated, positive and engaged well in their learning. Peer mentors were effective; their support in education and training sessions was well planned and prisoners valued their input. English and mathematics were not routinely embedded in all vocational training sessions or workshops. There was no outreach education provision and no designated specialist in-classroom or discrete support for prisoners with specific learning difficulties.
- S34 Prisoners' behaviour in all of the sessions we observed was good and they benefited from a wide range of activities that improved their confidence, self-esteem, communications skills and motivation. They demonstrated a strong work ethic in industrial workshops but much less so in wing work, where work was undemanding and failed to keep prisoners fully occupied. The substantial numbers of prisoners with entry-level skills in mathematics and/or English were not supported to improve their skills and consequently most left the prison with the same low-level skills in English and mathematics as when they entered. Attendance across all areas over the year had been low.
- S35 Success rates were high or very high on most vocational and personal development courses but pass rates in functional English and mathematics courses at levels 1 and 2 were low. The standards of work in classroom and vocational sessions were mostly good. Prisoners gained useful industry skills but there was no recognition or recording of prisoners' wider skills development.
- S36 The library was a good and well-resourced facility but was under-used by prisoners because access was difficult. The number of prisoners using the library had declined since the previous inspection.
- S37 PE facilities were mostly good but less than half of the population used them. The cross-deployment of PE staff to operational duties had reduced during the week but curtailed activities at weekends. Accredited qualifications had been reinstated but the number of prisoners involved was small.

Resettlement

S38 *Offender management was poor and adversely affected by the cross-deployment of offender supervisors and a backlog of offender assessment system (OASys) assessments and sentence plans. Around half of the population was without an up-to-date OASys assessment and this directly affected their ability to progress. Meaningful contact between offender supervisors and prisoners, even in high-risk cases, was limited. Public protection measures were not sufficiently robust. Reintegration planning and practical help to support prisoners on release were reasonably good, although more needed to be done to assist prisoners in finding work or training on release. Offending behaviour interventions were not based on a meaningful assessment of need. **Outcomes for prisoners were poor against this healthy prison test.***

S39 *At the last inspection in November 2014 we found that outcomes for prisoners in HMP Guys Marsh were poor against this healthy prison test. We made 20 recommendations in the area of resettlement. At this follow-up inspection, we found that five of the recommendations had been achieved, two had been partially achieved, 11 had not been achieved and two were no longer relevant.*

S40 There was a resettlement strategy in place but it was not based on a comprehensive needs analysis and did not place offender management at the centre of the work. There was no comprehensive action plan against which to monitor progress.

S41 Despite holding a fairly high-risk population, offender management was poor. The amount of offender supervisor cross-deployment had reduced over the previous few months but still undermined the effective delivery of offender management. The number of prisoners without a current offender assessment system (OASys) assessment was very high, at around half the population, and this directly impeded their progression.

S42 Most prisoners knew that they had an offender supervisor but far too many felt unsupported and frustrated. Even for prisoners presenting a high risk of harm or serving indeterminate sentences, we found little evidence of meaningful contact with offender supervisors and an inadequate focus on progression.

S43 Too many prisoners were released late on home detention curfew but mainly owing to issues beyond the prison's control.

S44 The initial screening and application of public protection restrictions were adequate. The effectiveness of the interdepartmental risk management team was undermined by an inadequate referral process and poor attendance. Too many multi-agency public protection arrangements (MAPPA) levels were not confirmed before release, which potentially limited the prison's involvement in multi-agency risk planning for release.

S45 Recategorisation reviews were completed on time. However, some assessments for recategorisation to category D had been undertaken without a completed OASys assessment.

S46 About 40 prisoners were released from the establishment each month, some having spent a very short time there. The community rehabilitation company (CRC) provider, Catch 22, provided reasonably good support, including a review of the resettlement plan before release. However, the accommodation and employment/ training outcomes for prisoners on release were not monitored, to establish the effectiveness of the provision.

- S47 A range of support was provided for prisoners seeking accommodation on release and for immediate accommodation problems, such as sustaining a tenancy and rent arrears. However, too many prisoners were released without sustainable accommodation.
- S48 Support for prisoners needing help with employment, training or education on release required improvement. Not all prisoners were seen and assessed by the National Careers Service on arrival and assessments did not always take account of prisoners' functional skills needs. Pre-release courses were infrequent and prisoners received little help with CV writing or job search, although some productive relationships with employers were developing.
- S49 Health discharge arrangements were sound. Effective links were made with community mental health teams for prisoners with complex mental health problems. The substance misuse family worker and resettlement workers worked effectively in coordinating release plans in liaison with the CRC.
- S50 Prisoners with debt problems had access to a wide range of help. They could open bank accounts, and a substantial number had been opened in the previous 12 months.
- S51 The facilities in the visitors centre were limited but the visits hall environment was being improved gradually. Family days were well attended and Storybook Dads (in which prisoners record stories for their children) well used, and both were highly valued by prisoners. A Family Relationship course was being delivered, but little family support work was provided.
- S52 There was no comprehensive needs analysis to evidence the type and amount of offending behaviour interventions required. There were long waiting lists for the two accredited programmes and too many prisoners were denied access owing to the lack of OASys information about their likelihood of reoffending. Two additional offending behaviour modules were delivered by the education department and received positive feedback.

Main concerns and recommendations

- S53 Concern: Too many prisoners, and far more than at similar prisons, reported feeling unsafe and victimised by other prisoners. Levels of violence were very high. Not enough was being done to understand the nature and causes of violence. There was no violence reduction action plan and little action was taken to make the prison safer, challenge perpetrators or support victims.

Recommendation: All violent incidents should be analysed, to understand the causes and identify patterns and trends. Coordinated action should be taken to make the prison safer. Perpetrators should be identified and challenged, and victims should be supported.

- S54 Concern: Almost three-quarters of prisoners said that drugs were easily available at the prison and one in four said that they had developed a drug problem while being there. Spice use was particularly widespread and problematic. The prison was not monitoring the full extent of the problem and was not doing enough to reduce availability.

Recommendation: The full extent of drug availability should be monitored, and a strategy and action plan put in place to reduce drug supply.

S55 Concern: Living conditions for many prisoners were poor. Most communal areas and cells were poorly maintained. Some cells lacked heating. Many showers areas were decrepit and lacked a hot water supply. Some cells had broken or missing window panes and inadequate toilet screening. Many of these failings were as a result of a poorly performing national facilities management contract.

Recommendation: Living conditions should be improved. Cells and communal areas should be maintained to an acceptable and decent standard. The showers should be fully refurbished and have an adequate hot water supply. Heating should be reliable.

S56 Concern: Staff did not always challenge prisoners' poor behaviour or set effective boundaries on behaviour. This created a permissive culture with low expectations of prisoners and where poor behaviour was normalised.

Recommendation: The culture of the prison should be improved through the exploration of staff confidence, training and leadership. Consistent and confident staff-prisoner relationships should be embedded which set clear expectations on behaviour and provide a model for positive citizenship.

S57 Concern: Despite having sufficient activity places for the population, too many prisoners (around 30% at any one time) chose not to engage in learning, skills and work activities. Wing-based work was undemanding and failed to keep prisoners fully occupied.

Recommendation: All prisoners should be encouraged and expected to engage in learning and work, and all work areas should provide suitable work which encourages a strong work ethic.

S58 Concern: Far too many prisoners did not have a current OASys assessment or sentence plan. Most had little contact with offender supervisors, which led to a lack of focus on reducing the risk of harm, motivating them to progress and developing high-quality risk management plans for release.

Recommendation: All prisoners' risks and needs should be assessed and managed. Offender supervisors should have meaningful engagement with prisoners and focus on reducing risk, promoting progression and contributing to multi-agency release planning.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 The vans we inspected were clean and prisoners had been provided with food and drinks during their journey.
- I.2 In our survey, only 76% of respondents said that all their property had arrived with them. We were told that the reasons for this lay with the sending establishments and the escort provider.

Recommendation

- I.3 **All prisoners' property should arrive with them at the prison.**

Early days in custody

Expected outcomes:

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

- I.4 The reception area was spacious and staff were welcoming and patient. Conditions had improved and holding rooms were clean, with informative notices on display. In our survey, 83% of prisoners said that they had been treated well in reception, which was better than at similar establishments (75%).
- I.5 New arrivals were offered reception packs (grocery packs which usually contains basic food and drink items such as tea, milk, sugar, and tobacco or sweets) and PIN telephone credit, and could make telephone calls from reception to inform their family or friends of their whereabouts.
- I.6 An induction orderly prisoner saw new arrivals, provided them with written information about the prison and gathered some basic information. He was well organised and helpful but his work was not sufficiently closely supervised and we had concerns about confidentiality. A Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) attended reception daily to speak to new prisoners.
- I.7 Staff did not routinely speak to new arrivals in private. They told us that they would make arrangements to talk speak to new prisoners in private if they had concerns but they did not routinely discuss or identify risk and vulnerabilities, or offer new arrivals an opportunity to share their safety issues.
- I.8 New arrivals were not kept for long in reception, and 60% of respondents to our survey said that they had been there for less than two hours. Most prisoners, except for those with specific needs, went to the dedicated induction unit. The location of this had changed since

the previous inspection and it was no longer used routinely to accommodate those moving from the segregation unit or seeking refuge. The provision of first night accommodation was not well organised and we saw prisoners waiting on the unit for a cell to be identified for them. First night cells were not always fully equipped owing to a shortage of kettles, televisions and bedding. In our survey, fewer prisoners than at comparator establishments and than at the time of the previous inspection said that they had felt safe on their first night.

- I.9** Although there was no specific additional support for new prisoners on the induction unit from staff or prisoner orderlies, night staff provided some additional checks.
- I.10** The induction programme was comprehensive and started on the day after arrival, with an informative presentation by the induction orderly and representatives from an appropriate range of departments. Education and gym inductions were completed within a week and prisoners were allocated swiftly to activities.

Recommendations

- I.11 Initial welfare checks of all new arrivals should be carried out by trained staff in private.** (Repeated recommendation I.8)
- I.12 Insiders should be properly supervised by prison staff in reception and on the first night unit.** (Repeated recommendation I.9)
- I.13 First night cells for new arrivals should be identified before their arrival on the unit and contain all basic items such as a kettle, television and adequate bedding.**

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.14** In our survey, over a quarter of prisoners said that they currently felt unsafe, which was far more than at similar prisons. Over half said that they had felt unsafe at the prison at some time, which, again, was far worse than at similar prisons and than at the time of the previous inspection.
- I.15** Levels of violence had risen year on year since the previous inspection, with the main causes being drugs and debt. The number of reported assaults on prisoners had increased from 53 in the six months before the previous inspection to 87 in the same period before the current one, and assaults on staff had increased from 17 to 59. Overall, the number of assaults had doubled since the previous inspection and was far higher than we find in similar prisons. A concerning number of these (11%) had been serious. The number of fights had doubled, from 20 to 41. Not all violent incidents had been reported or investigated, although a weekly meeting had been introduced to improve this (see main recommendation S53).
- I.16** In spite of these levels of violence, too little had been done to make the prison safer. Some recent initiatives showed promise but were not yet embedded. There was no current action plan which reflected the priorities of the new safer custody team. The local violence reduction strategy did not address the causes of violence identified at the previous inspection. There was too little liaison between the safer custody department and the

security team, even though much of the violence had been linked to the supply and use of drugs (see main recommendation S53).

- I.17 The management of victims and perpetrators was weak. In spite of the high levels of violence and bullying, at the time of the inspection only two perpetrators were being monitored under the violence management model. This model had failed to embed when originally launched earlier in 2016 and was being restarted by new managers, although they had not been trained to use it. There were no victim support plans (see main recommendation S53).
- I.18 One of the wings (Cambria) was a permanent sanctuary for prisoners under threat and fearing for their own safety. About 20% of the population of this wing had isolated themselves because of drugs, debt and associated bullying. The wing was calm and prisoners we spoke to felt safe within its confines, but there was a waiting list to move there.
- I.19 During the inspection, seven prisoners were self-isolating on other wings, in some cases for several weeks or months; one prisoner had been isolated for nine months. Although these prisoners were offered a daily regime on Cambria wing, few were willing to walk there across the prison grounds to access this. They therefore had a very limited regime, with less than an hour a day unlocked (see also section on time out of cell). There was no reintegration planning for these prisoners and local procedures were not being followed. Although a weekly complex offenders meeting (see also paragraph 1.26) discussed self-isolators, there was no analysis of the number of prisoners involved and average length of self-isolation in order to identify and understand trends.

Recommendation

- I.20 **Self-isolating prisoners should be monitored, to understand the extent and nature of the problem, and this analysis should inform the local strategy to help these prisoners, including reintegration planning.**

Self-harm and suicide prevention

Expected outcomes:

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

- I.21 There had been three self-inflicted deaths at the prison since the previous inspection.
- I.22 There had been 117 self-harm incidents in the previous six months, which was similar to the level we found at the time of the previous inspection but more than we have found in similar establishments. However, the number of prisoners self-harming had fallen since the previous inspection, from 75 to 54, which suggested that more prisoners self-harmed multiple times.
- I.23 The quarterly suicide and self-harm prevention meeting had been replaced with monthly safer custody meetings, which also covered violence reduction, but attendance had been limited. Information about the type and location of self-harm incidents was provided but there was insufficient analysis of incidents to provide helpful information, such as the link between self-harming and drug use or debt.
- I.24 In the previous six months, 176 assessment, care in custody and teamwork (ACCT) case management documents had been opened, which was more than at similar establishments

and than at the time of the previous inspection. The quality of care provided, as reflected in the documentation we reviewed, was too variable. Although assessments were comprehensive and clear, the factors identified were not always included in the care plan, especially where prisoners continued to use drugs and be subject to debt. Although some ACCT management dealt with these issues robustly by engaging prisoners with substance misuse services and putting debt reduction plans in place, too many normalised these issues and paid them little attention. In most cases, there was insufficient meaningful staff interaction with prisoners, and attendance at case reviews was poor.

- I.25** Serious incidents, including a recent ligature use, had not been investigated to identify lessons learnt. Although action plans in response to Prisons and Probation Ombudsman reports into deaths in custody had been developed and were kept under review, some of the recommendations (for example, improving ACCT procedures and reducing violence and victimisation) had not been implemented effectively.
- I.26** There was a weekly meeting to discuss prisoners with complex needs (see also paragraph I.19), including those most at risk of self-harm. This was well attended and effective in identifying and monitoring action to keep prisoners safe. All prisoners subject to ACCT procedures were discussed there, as well as others who could be vulnerable. Helpful actions were agreed but we did not find them recorded in ACCT documentation.
- I.27** In our survey, only 40% of prisoners said that they could speak to a Listener when they wanted to, which was far worse than elsewhere and than at the time of the previous inspection. Listeners told us that access was hindered by the restricted regime and staffing levels.

Recommendations

- I.28** Incidents of self-harm and trends over time should be analysed fully, to identify the major causes and take action to address them.
- I.29** Assessment, care in custody and teamwork (ACCT) management, planning and recording should be of a consistent quality, so that all concerns about prisoners are addressed effectively.
- I.30** All serious acts of self-harm which could have resulted in the loss of life should be investigated, with lessons learned identified and shared to improve practice.
- I.31** Action plans developed from Prisons and Probation Ombudsman death in custody investigations should be closely monitored and reviewed, to ensure that recommended actions are embedded in practice.

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.32** There was a comprehensive safeguarding policy which covered how staff should raise concerns internally and the process for referrals to social services. Internally, the weekly complex needs meeting (see also paragraph I.26) was an effective way of identifying and planning for the needs of prisoners at risk, with the involvement of an appropriate range of prison departments.
- I.33** Links with the local safeguarding board were strong, through the governor's membership of the board and the safeguarding adults subgroup.

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.34** The number of intelligence reports submitted to the security department in the previous six months had doubled since the time of the previous inspection and was much higher than we find in similar prisons. The volume had overwhelmed the security department, resulting in long delays in processing them. Although the backlog had been addressed shortly before the inspection, these delays had undermined efforts to address the instability in the prison.
- I.35** The prison was sighted on the major issues of drugs, gangs and violence, but their understanding was limited and their approach was unsophisticated. They had recently taken a number of proactive measures to disrupt the supply of drugs and mobile phones. However, the analysis of drug- and security-related information was much too limited. There was no measurement of progress over time, to understand whether any actions were having an impact or making the prison safer. Data were not analysed to establish the extent of drug availability, or other security threats, or to develop a strategic approach. Similarly, although security staff knew where gang members were operating and had taken some measures to monitor and tackle their activities, this work was underdeveloped.
- I.36** The physical security of the prison was compromised by the original perimeter design, which made it difficult to stop drugs being thrown over. Measures proposed to improve this, such as zonal fencing and closed-circuit television on the wings, had not been implemented because of a lack of funding.
- I.37** Liaison arrangements with the local police had improved, with a focus on ensuring that serious assaults by prisoners resulted in a prosecution. The numbers of banned visitors and prisoners subject to closed visits were proportionate.

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).

- I.38** In our survey, 74% of prisoners said that it was easy to get drugs at the prison, which was substantially worse than the comparator (43%) and than at the time of the previous inspection (63%). Almost one in four (24%) prisoners said that they had developed a problem with drugs while at the establishment, which was of great concern, and more than double the comparator of 10%. Twice as many as at comparator prisons said that it was easy to obtain alcohol (49% versus 24%) (see main recommendation S54).
- I.39** The random mandatory drug testing positive rate for the previous six months was 11.7% and for the year to date was 15.6%, which was very high. The number of drug tests on prisoners suspected of taking drugs was very low – only 10% of the tests requested were completed. (see main recommendation S54).
- I.40** The use of 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) was widespread and problematic, contributing to violence, health emergencies and self-harm. Some data on the use of these agents were gathered by various departments but not collated to provide an overall picture. The full scale and nature of drug availability were not fully understood (see main recommendation S54).
- I.41** The prison's approach to supply reduction had yielded some good finds, and relationships with local residents at the prison's perimeter had improved, but there was no strategic approach to coordinate action and measure progress. A recent two-day amnesty had yielded a small quantity of NPS and larger quantities of prescription drugs, weapons and other banned items.

Recommendations

- I.42 Security-related data analysis should consider trends and measure whether actions are having an impact over time.**
- I.43 The mandatory drug testing programme should be sufficiently resourced to ensure a robust suspicion testing programme.** (Repeated recommendation I.34)

Incentives and earned privileges

Expected outcomes:

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

- I.44** In our survey, fewer prisoners than at similar prisons said that the scheme encouraged them to change their behaviour and far fewer than at similar prisons and than at the time of the previous inspection said that they had been treated fairly under the scheme.
- I.45** The main benefit of achieving enhanced status was obtaining a place on one of the enhanced wings. Conditions on these wings were better than elsewhere; they were better maintained and clean, and prisoners had more access to self-catering facilities and more time unlocked. Prisoners we spoke to on these wings were positive about their experience.
- I.46** There were few prisoners (around 4%) on the basic level of the scheme – fewer than we normally see at category C prisons, which was a surprise, given the relatively high levels of poor behaviour. In the few cases where prisoners were demoted to basic, incidents of poor

behaviour were recorded and investigated adequately. However, we saw poor behaviour, which could and often should have been addressed through the IEP warning system, go unchallenged (see paragraph 2.10 and main recommendation S55).

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.47** The number of adjudications had increased considerably, with 1,314 opened in the previous six months, compared with 716 in the six months before the previous inspection. This increase reflected the higher numbers of violent and drug-related incidents (see paragraph I.15). Many were opened for assaults, fighting, possession of prohibited items such as mobile phones, or the visible effects of NPS.
- I.48** The records we reviewed showed that adjudications had been carried out appropriately, with demonstrable exploration of the charge before a finding of guilt. The number of adjudications proven or dismissed was recorded, but 590 (44%) in the previous six months had not been completed. The number not progressed owing to poor administration was not monitored.
- I.49** The governor quality assured adjudication records and reported trends at the adjudication tariff meeting. This meeting aimed to address appropriate issues of concern, ensuring that tariffs for similar offences were equitable and that there was standardisation of incidents referred to the police and independent adjudicator. However, there had been only one meeting in 2016 to date, which was insufficient to ensure the continued oversight and management of adjudications.

The use of force

- I.50** In spite of a main recommendation in the previous inspection report, the managerial oversight of use of force was inadequate. Shortly before the inspection, staff had begun to compile a log but numerous incidents were missing from this. We were therefore not confident that every use of force was recorded. Of the incidents that had been logged, much of the paperwork was missing, so we could not be satisfied that the use of force had always been justified.
- I.51** Planned interventions were not filmed routinely, and there had been no filming at all for almost three months. Footage of older incidents was not reviewed by managers. The recordings we viewed were incomplete, lacking clear identification of the staff involved, and sometimes a resolution.
- I.52** Batons had been used six times in the previous six months, which was higher than at similar prisons and than at the time of the previous inspection. However, not all of these incidents had been investigated.
- I.53** Ten uses of special accommodation had been recorded since June 2016, which was high. The log went back no further. Of the 10 recorded uses, some of the full records were missing

and others did not provide a full account, ending abruptly without explanation or a full justification for the measures used.

Recommendation

- I.54 Incidents involving the use of force should be reduced, and its governance and accountability, including documentation, should be improved, including uses of special accommodation, planned interventions and batons.** (Repeated recommendation S39)

Segregation

- I.55** There had been 107 uses of segregation in the previous six months, up from 98 in the same period before the previous inspection. This was higher than we typically see at similar prisons, although the average length of stay had decreased from 20 to 11 days. Fewer segregated prisoners than at the time of the previous inspection were transferred out from the segregation unit to other prisons.
- I.56** Few prisoners were officially held on the unit for their own protection, although some prisoners who were segregated for poor behaviour refused to return to normal location because of debt and the availability of drugs. However, Cambria wing's change of role to housing wing isolators meant that the segregation unit was less likely to become a sanctuary for men who felt unsafe in the main prison. There was good monitoring of segregation by a committee, which met quarterly.
- I.57** Although a significant disturbance had closed the unit earlier in the year, it was currently safe and largely well managed.
- I.58** Unlocking arrangements on the unit were proportionate, and appropriately risk-assessed prisoners could exercise together. The exercise yard was bare but new seating had recently been installed. Prisoners collected their meals from a small servery on the unit, and they had access to a wide selection of books. We saw good staff–prisoner relationships on the unit, although officers had not received any specific training to work with segregated prisoners.
- I.59** Prisoners had reintegration plans, and segregation reviews were well organised, timely and fair. However, we saw no evidence of additional care planning for men held on the unit for longer than a month.

Recommendation

- I.60 Prisoners segregated for longer than four weeks should have additional care planning, to promote their continued well-being.**

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.61** Clinical services were delivered by Dorset Healthcare University Foundation Trust (DHUFT), and psychosocial services by the Exeter Drugs Project (EDP). The integrated team worked locally as the 'integrated substance misuse service' (ISMS).
- I.62** The ISMS psychosocial service had improved. A total of 151 prisoners (28% of the population) were on the psychosocial caseload, with access to a team of skilled and experienced workers for one-to-one sessions and a wide range of group-work interventions. These included 'First Steps' (a programme examining steps 1 to 3 of the 12 steps of Alcoholics Anonymous (AA) and Narcotics Anonymous); two alcohol programmes separately addressing violence and dependency; and a recovery-based programme addressing the wider aspects of addiction. Self-Management and Recovery Training (SMART) and AA mutual aid groups were also available across the prison.
- I.63** The therapeutic atmosphere on the Saxon drug treatment wing had improved, as had discipline staff selection and continuity. Three peer mentors also made a positive contribution to the wing. However, the wing was dirty (see recommendation 2.7) and in our survey far more prisoners on Saxon than on other wings reported victimisation both by staff (44% versus 24%) and prisoners (53% versus 32%). The ISMS and the prison were working well together to progress an action plan for future improvements on Saxon wing.
- I.64** A total of 56 prisoners (10% of the population) were on opiate substitution treatment. Of these, 38 were on maintenance doses. This was relatively high for a category C establishment, but the range of factors that influenced maintenance prescribing decisions was appropriate. These factors included very short stays at the prison, enduring mental health issues and concurrent treatment for blood-borne viruses.
- I.65** Prisoners received clinical reviews more frequently than the national guidelines, which many appreciated. There was good supervision of controlled drug administration on this wing.
- I.66** A leaflet explaining the ISMS policy and pathway for secondary detoxification (that is, detoxification from an opiate drug dependency developed in prison) had been made available. However, some prisoners and staff we spoke to were not aware of its existence or contents.

Recommendation

- I.67** **Copies of the secondary detoxification policy and pathway leaflet should be made readily available to all prisoners and discipline staff.**

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 outside areas of the prison were well maintained and pleasant, and prisoners had access to them when on movements or on exercise.
- 2.2 However, many issues reported at the previous inspection had not improved. The quality of the wing accommodation remained extremely variable. Jubilee and Fontmell wings, the enhanced wings, were well maintained, clean and had communal cooking facilities and in-cell showers. Cambria wing was also well maintained. The communal areas on the other wings were very dirty and some were in a poor state of repair. One staff office had numerous broken observation windows looking onto the wing. Many cells on the main wings were also dirty and many had broken furniture and window panes. Some cells had no heating, as the heating system kept breaking down, and prisoners complained about being cold. There was inadequate privacy screening in double cells, so some prisoners used bed sheets to screen off the toilet area (see main recommendation S55).
- 2.3 In our survey, far fewer prisoners than at comparator prisons and than at the time of the previous inspection said that they had daily access to showers (78% versus 91% and 91%, respectively). Many shower blocks were decrepit, and some showers were either not working or lacked a regular hot water supply (see main recommendation S55).
- 2.4 Prisoners and staff had complained about maintenance issues for some time and the prison was persistent in reporting faults, but was frustrated by the poor delivery by the national contractor (see main recommendation S55).
- 2.5 During the inspection, many prisoners were frustrated by the lack of access to basic items, and in our survey far fewer than at similar prisons and than at the time of the previous inspection said that they had sufficient access to clean sheets, clean clothes and cell cleaning materials. All residential wings had laundry facilities but prisoners told us about, and we observed, broken equipment. On some wings, we saw sufficient stocks of clean prison clothing but on others the stockrooms were bare. Prisoners' access to their own stored clothes was difficult, compounded by a poorly managed applications system.
- 2.6 In our survey, far fewer prisoners than elsewhere and than at the time of the previous inspection said that applications were dealt with quickly. The process was ineffective and there was no tracking, monitoring or quality assurance, to ensure prompt responses and avoid delays.

Recommendations

- 2.7** The cleanliness of communal areas and cells should be improved and kept to a high standard, and prisoners should have good access to all basic items, such as clean bedding, clothes and cell cleaning materials.
- 2.8** The applications process should be improved, to ensure that it is effective and that prisoners receive timely responses.

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.

- 2.9** In our survey, most prisoners (78%), although fewer than at the time of the previous inspection (85%), said that staff treated them respectfully. Staff knew the prisoners in their care and we saw mainly friendly interactions during association, and saw staff proactively trying to resolve practical issues for prisoners. In our survey, far fewer prisoners than at other category C prisons and than at the time of the previous inspection said that they had a personal officer (55% versus 63% and 75%, respectively). We noted variable levels of personal officer entries on prisoner files; personal officers who were engaged made good, meaningful entries, while others made few entries. There was insufficient quality assurance and management oversight.
- 2.10** The supervision of many prisoners was inadequate. For example, prisoners walked around in their dressing gowns or just shorts, smoked outside of their cell, pushed ahead and received extra food in dinner queues, and displayed intimidatory behaviour in medicine queues (see also paragraph 2.59) without being challenged by some staff (see recommendation 2.62). This lack of challenge meant that effective boundaries were not set, and promoted a permissive culture in which prisoners were able to break or undermine social and prison rules, creating low expectations of prisoners and normalising poor or antisocial behaviour (see main recommendation S56).
- 2.11** There was a prisoner council, with evidence of regular meetings, representation from all wings and follow-up of actions where possible.

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic⁴ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

Strategic management

- 2.12** There had been little focus on the equality agenda until recently. The full-time designated equality officer had been in post for only around two months, and before that the role had been vacant for six months. Although there were a number of consultation forums for some of the protected characteristic groups, there was little evidence that they informed and improved practice. As a result, despite the recent good work by the equality officer, outcomes for prisoners with protected characteristics were not consistently positive.
- 2.13** There was a reasonable and newly revised equality policy, which addressed all protected characteristics. The equality action team meeting, chaired by the deputy governor, met monthly, and every quarter there was a data monitoring meeting looking at detailed equality statistics. However, the data were drawn from the National Offender Management Service hub, which was significantly out of date, and analysis was not robust enough; consequently, any trends evident in the statistics were not necessarily current, and outcomes were not sufficiently investigated to inform practice.
- 2.14** A total of 19 discrimination incident report forms had been submitted in the year to date. Those we looked at had been investigated well but most had not been sufficiently timely, including one which had taken almost five months to complete.
- 2.15** There were five prisoner equality peer mentors. They had received peer mentor training but no other formal training. However, the mentors we met were knowledgeable, helpful and well used by other prisoners. They attended induction and were responsible for helping prisoners to complete a diversity screening on arrival, to identify protected characteristics. However, some of the questions asked were sensitive and not suitable to be shared with other prisoners (see also paragraph 1.6 and recommendation 1.12)

Recommendations

- 2.16 The prison should carry out regular consultation with prisoners from minority groups and address the issues raised.**
- 2.17 Equality monitoring data should be analysed and investigated robustly. Findings should be used directly to inform practice.**
- 2.18 All discrimination incidents reported should be investigated promptly.**

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

Protected characteristics

- 2.19** Around 16% of the population were from a black and minority ethnic background. In our survey, they mostly reported similarly to white prisoners. However, many more reported victimisation by staff (46% versus 23%) and that they currently felt unsafe (46% versus 22%). This had been the position at the time of the previous inspection and had not been addressed.
- 2.20** Around 5% of the population were Gypsy, Romany or Travellers, A prisoner equality representative, who was himself a Traveller, had consulted with this group, but as yet this had not informed practice.
- 2.21** There were 37 foreign national prisoners at the establishment and one man who had been detained solely under immigration powers. Home Office Immigration Enforcement staff attended the establishment monthly and prisoners could apply to see them. There was no access to independent immigration advice. If they did not receive visits, foreign national prisoners were given five minutes of telephone credit each month, to enable them to contact family or friends. Professional telephone interpreting services had been used only twice in the year to date; however, in our survey 99% of respondents said that they understood spoken English, so there was little evidenced need for them.
- 2.22** There was good identification of new arrivals with disabilities; in our survey, 28% of respondents self-declared a disability, which was generally in line with prison-held records. Those with limited mobility had personal emergency evacuation plans, although they were not all up to date and some night staff were unaware of them. There were no paid carer roles and it usually fell to a prisoner's cell mate or friend to provide assistance, although prisoners we spoke to who had required additional equipment or adaptations said that the process of securing them had been reasonably straightforward. However, in our survey these prisoners reported more negatively than others across a range of issues; for example, almost twice as many said that they currently felt unsafe, and around half that they had been victimised by other prisoners. The prison was not sighted on the reasons for this.
- 2.23** There were 63 prisoners over the age of 50, seven of whom were over 70. RECOOP (Resettlement and Care for Older ex-Offenders and Prisoners) attended the prison weekly to run a day centre for older prisoners. A second organisation (Restore) provided some support to older prisoners with resettlement needs. Limited consultation had been undertaken with younger prisoners regarding their needs, despite some of these prisoners requesting it.
- 2.24** Gay, bisexual and transgender prisoners were not sufficiently well identified or supported. In our survey, 2% of respondents said that they were gay or bisexual, equating to around 11 prisoners. However, prison staff were aware of only one gay man. No forums were held for this group, although some links had been developed with community support organisations. No transgender prisoners had been held recently.

Recommendations

- 2.25** **The prison should consult with prisoners from black and minority ethnic groups to understand and address perceptions of victimisation and negative perceptions about staff.** (Repeated recommendation 2.31)
- 2.26** **Personal emergency evacuation plans should be reviewed regularly and kept up to date, and all wing staff should be familiar with them.**

- 2.27 A paid carer scheme to assist prisoners with disabilities should be developed and implemented.**

Faith and religious activity

Expected outcomes:

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

- 2.28** An active chaplaincy was able to meet the needs of most faiths, with the exception of the small number of Buddhist prisoners, for whom there was no chaplain, despite efforts to recruit one. In our survey, fewer prisoners than at the time of the previous inspection said that their religious beliefs were respected, and just over half said that they could speak to a leader of their faith if they wanted to. However, we found that provision for religious activities was good.
- 2.29** Chaplaincy staff saw all new arrivals, and also visited men on the segregation unit daily. The chapel and multi-faith room were well equipped, with facilities and resources for all faiths. There were sufficient ablution facilities for the approximately 20–30 Muslim prisoners attending prayers. The chaplaincy facilitated a variety of well-advertised religious services and groups, as well as actively promoting religious festivals, including Eid, Diwali and Christmas celebrations, to which the Mayor and other dignitaries were invited.
- 2.30** Chaplains attended a range of meetings, including assessment, care in custody and teamwork (ACCT) reviews, and provided support for those who had experienced bereavement. One chaplain was a family liaison officer. The department had links with external faith organisations in the local area.

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.

- 2.31** In the year to date, 1,145 complaints had been submitted. Property was the biggest issue and consistently accounted for around 25% of complaints each month. Good monthly analysis was undertaken by issue, location, age and ethnicity, and was discussed at the senior management team meeting, but there was little evidence that the analysis then informed practice.
- 2.32** The responses we looked at were some of the best we have seen; they were polite and generally addressed the issue raised. However, not all were sufficiently timely, and this was reflected in our survey, where fewer prisoners than at comparator prisons and than at the time of the previous inspection said that complaints were dealt with quickly. Ten per cent of complaints responses were quality assured by a manager, and feedback was provided.

Recommendation

- 2.33 Analysis of complaints should be used to inform and amend practice, including improving the timeliness of responses.**

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.

- 2.34** There were no trained legal services officers. Prisoners could ask for the Community Legal Advice helpline to be added to their PIN telephone numbers but there was no independent immigration advice.
- 2.35** In our survey, fewer prisoners than at comparator establishments and than at the time of the previous inspection said that it was easy to communicate with their solicitor. However, legal visits took place in the main visits hall at designated sessions, and prisoners we spoke to reported no concerns in accessing them. Prisoners could get access to an 'Access to Justice' laptop computer (to allow them to exercise their legal rights and pursue cases), and during the inspection we saw a prisoner being issued with one.

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.

- 2.36** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁵ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.

Governance arrangements

- 2.37** The CQC found no breaches of the relevant regulations.
- 2.38** Dorset Healthcare University Foundation Trust (DHUFT) provided all primary and mental health services, and partnership board arrangements were effective. A comprehensive health needs assessment had been completed in April 2016 and informed service provision.
- 2.39** The dedicated and enthusiastic health services team offered a broad range of skills and experience. The contract had recently been retendered, with a new provider scheduled for April 2017.
- 2.40** Clinical areas were generally clean and infection control audits showed compliance and action when needed.
- 2.41** Mechanisms for prisoner feedback were effective, including a prisoner health forum, a biannual patient satisfaction survey and wing noticeboards, and information about clinic waiting times was displayed prominently in the health centre.

⁵ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.42** A suitable range of prison-specific policies was available and included safeguarding, communicable disease outbreak, policy guidance on resuscitation and palliative care. Information sharing and equity of access were suitably patient focused, and professional telephone interpreting services used where appropriate.
- 2.43** There was appropriate management of risk, with suitable reporting and learning from incidents. The management and clinical supervision of health services staff was well organised, with visible leadership, and staff training and development reflected service needs.
- 2.44** Nurse-led clinics were well established and included weight management, phlebotomy and wound care. There was good access to screening, immunisation and treatment for blood-borne viruses but waiting times for sexual health services were too long.
- 2.45** Care of older prisoners had improved and was good. The identification and care of those with disabilities were reasonable.
- 2.46** Health promotion was very good, with excellent use of an associate practitioner to link directly with prisoners on the wings and a wide range of patient-focused literature. Smoking cessation clinics were held when needed. A problem with the management of confidential health care complaints was resolved during the inspection.
- 2.47** Effective emergency arrangements included good use of a paramedic to reduce the need for hospital assessment for prisoners suspected of taking 'spice' (an NPS). However, the high volume of these incidents placed significant pressure on health service provision (see also section on security).
- 2.48** Emergency equipment was located in the health centre and checked appropriately, alongside prison defibrillators kept in the gym and the communications room. Too few prison staff were trained in basic life support and the use of the automated external defibrillator.

Recommendation

- 2.49** **Access to sexual health services should be improved, to ensure that prisoners are treated promptly.**

Good practice

- 2.50** *A strategic and planned approach to health promotion, supported by a dedicated associate practitioner role, enabled prisoners to understand and take preventive action to improve their own health status.*

Delivery of care (physical health)

- 2.51** In our survey, the numbers of prisoners who said that the quality of the health services provided by the GP and the nurse were good, and that it was easy to see a GP or nurse, were in line with those at comparator prisons. Overall waiting times were short, with especially prompt access to the GP and physiotherapy. Most prisoners we spoke to said that they received good care.
- 2.52** On arrival, a comprehensive health screening was completed for all prisoners, with good attention to mental health and substance misuse needs. Previous medical history was sought routinely from community GPs.

- 2.53** Primary care services reflected population needs, including regular health checks for the over-50s, and all prisoners were offered a health check. A physiotherapist worked in partnership with gym staff to support a focus on musculoskeletal rehabilitation and effective pain management.
- 2.54** We observed excellent evidence-based and thoughtful clinical care by GPs and nurses in the face of some very poor and intimidatory behaviour by some prisoners (see also paragraph 2.10). Clinical records were contemporaneous and appropriately detailed.
- 2.55** The care of prisoners with long-term conditions was excellent, with systematic follow-up; specialised clinical record templates linked to National Institute for Health and Care Excellence (NICE) guidelines and informed comprehensive care plans. Prisoners were actively involved in their care plans and these were often shared with wing staff to support prisoner safety.
- 2.56** Too many hospital appointments were cancelled or rescheduled as a result of limited escorting staff for planned appointments, alongside increased levels of injuries from violent incidents.

Recommendation

- 2.57** **The escort arrangements for external hospital appointments should avoid unnecessary cancellations.** (Repeated recommendation 2.64)

Good practice

- 2.58** *Locating and linking the physiotherapy service with the gym supported a health promotion approach.*

Pharmacy

- 2.59** In our survey, more prisoners than at similar prisons said that they had developed a problem with diverted medication (12% versus 7%). There was consistent lack of officer supervision at the hatches, as well as an absence of challenge by officers of poor behaviour in the medicine queue and waiting area, creating opportunities for both diversion and violence (see also paragraph 2.10).
- 2.60** Medicines management was also compromised by some poor stock management. In the pharmacy room, we found unlabelled blister packs with patient-named medicines. We noted one date-expired item on Saxon wing, one controlled drug container with no batch or expiry date, and emergency adrenaline inappropriately stored in a hand-labelled pot.
- 2.61** Prescribing was sound, and appropriate prescribing and administration using SystemOne (the electronic clinical record) was well established. Approximately three-quarters of prisoners were able to keep prescribed medicines in their cells, on the basis of a risk assessment, but there were no lockable cabinets in cells. Prisoners signed compacts, and health and prison staff carried out regular spot checks to provide compliance assurance and safekeeping.

Recommendations

- 2.62** All medication should be administered with sufficient officer supervision and privacy, and prisoners should be challenged about their behaviour around the hatches, to prevent diversion and violent incidents and ensure confidentiality.
- 2.63** Medicines should be stored and administered in line with professional standards underpinned by in-date protocols. (Repeated recommendation 2.71)
- 2.64** All prisoners should have lockable cabinets in which to store their prescribed medicines.

Dentistry

- 2.65** Overall governance was effective, with suitable infection control practices and policies. While there was no separate decontamination room in line with 'best practice', the suite complied with infection control standards, with suitable disposal of waste materials.
- 2.66** The range of dental treatments was equivalent to that in the community. However, prisoners waited up to 18 weeks for routine dental assessment and treatment. We were satisfied that the appointment of a new dentist and additional sessions scheduled for January 2017 would address this.
- 2.67** Urgent referrals were triaged by dental and nursing staff, with good attention to acute pain and infection by the GP and nursing staff.

Recommendation

- 2.68** Waiting times for the dentist should not exceed clinically acceptable waiting times in the community.

Delivery of care (mental health)

- 2.69** A community-equivalent stepped care model (NICE guidance) was used effectively to enable suitable needs-based assessments and interventions to take place.
- 2.70** A multidisciplinary team comprised psychiatry, occupational therapy, nursing psychology and social work, and a support worker role. There was an effective team triage approach to ensure that prisoners were seen by the most clinically appropriate practitioner.
- 2.71** Despite some vacant posts, the team was maintaining suitable referral response times, with a maximum of two weeks for routine primary care needs and a maximum of three weeks for prisoners with secondary care needs. Urgent referrals were seen within 24–48 hours. Out of hours, there was provision for referral to an on-call psychiatrist, although this had rarely been needed.
- 2.72** There was a community-equivalent risk-based approach to prisoners with an acute dual diagnosis (those with co-existing mental health and substance misuse problems) and/or complex personality disorder diagnoses.
- 2.73** We observed high-quality consultations, where clinicians were engaged and thoughtful in their therapeutic work with prisoners. There was excellent attention to the risks and

complex needs of a prisoner with a significant learning disability, including a detailed supportive plan to inform his care by wing staff.

- 2.74** There was a range of interventions to manage anxiety and low mood, including emotional well-being, sleep hygiene and cognitive behavioural therapy, alongside systematic monitoring of antidepressants and antipsychotic agents. Prisoners with complex severe and enduring mental health needs were identified and supported appropriately; effective links were made with other prison departments, external agencies and community clinicians.
- 2.75** Transfers to hospital for prisoners with acute needs were too often delayed, and for too long, with average delays ranging between 30 and 50 days.
- 2.76** Mental health awareness training had been offered to prison staff but with limited uptake, and too few prisoner-facing staff had completed training.

Recommendation

- 2.77 Patients requiring mental health inpatient care should be transferred without delay.** (Repeated recommendation 2.82)

Good practice

- 2.78** *The sharing of detailed supportive care plans with wing staff for prisoners with specific care and vulnerability needs supported their mental well-being and safety in prison.*

Social care

- 2.79** There was early evidence of positive links to social care support within the local authority; some referrals had been made but no prisoners had been assessed as eligible.

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.

- 2.80** Mealtimes were reasonable, with lunch served at noon and the evening meal at 5pm, although breakfast packs were issued on the night before consumption.
- 2.81** The management of meal queues on some wings was poor; we observed queue jumping and extra food being given to particular prisoners, without challenge by staff (see paragraph 2.10 and main recommendation S56). There was an opportunity to dine with others on each wing, although seating was limited.
- 2.82** In our survey, 34% of prisoners said that the food was good or very good, which was in line with other prisons but better than at the time of the previous inspection. The food we tasted was good. However, some servery areas were extremely dirty and unhygienic, with food waste on the surfaces and floor, full bins and trays of food left out overnight. There were communal toasters and microwaves but some were filthy.

2.83 There was good consultation with prisoners about the food provided.

Recommendation

2.84 All servery areas and equipment, including communal microwaves and toasters, should be kept clean and hygienic.

Purchases

Expected outcomes:

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

- 2.85** We saw shop items being distributed in an orderly manner. Enhanced prisoners on Jubilee and Fontmell wings had access to refrigerators, so could order chilled goods.
- 2.86** New arrivals potentially waited for 12 days for their first order if they arrived on the day that order sheets were issued, but they could buy emergency reception packs (grocery packs which usually contains basic food and drink items such as tea, milk, sugar, and tobacco or sweets; see also paragraph 1.5) in the meantime.
- 2.87** There was a quarterly consultation process to review and amend the prison shop list. This had been coordinated for some time by an enthusiastic wing representative. However, nervous about the frustration he would face from other prisoners regarding the imminent smoking ban, he had resigned from the role, although there were interim consultation arrangements in place.
- 2.88** Prisoners were able to order from a wide range of catalogues, and up-to-date copies of the main ones were available on the wings. There was a 50 pence administration fee for placing an order.

Recommendation

2.89 Prisoners should not be charged a processing fee on catalogue orders. (Repeated recommendation 2.93)

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.⁶

- 3.1** A restricted regime was in place owing to staff shortages, which meant that there was no extended evening association and prisoners were locked up too early for the night, at around 6pm. The amount of time unlocked for those in full-time activity was reasonable, at nine hours, but for those who were unemployed it was only three hours 30 minutes.
- 3.2** Outdoor exercise was provided in the garden areas and, for Cambria wing, in a yard equipped with seating and plantings. Sessions were too short, at 30 minutes.
- 3.3** The regime generally ran to time and was predictable. In our spot checks, we found 18% of prisoners locked up during the working day, which was better than at the time of the previous inspection (34%), but still too many for a training prison.

Recommendation

- 3.4 Prisoners should have access to evening association on weekdays, so that they can maintain family and social ties.**

⁶ Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

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.

3.5 *Ofsted⁷ made the following assessments about the learning and skills and work provision:*

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

Management of learning and skills and work

- 3.6** Senior prison leaders had given learning, skills and work provision a much higher priority since the previous inspection, and as a result managers felt supported and encouraged to work hard at improving it. The prison leadership and management team for learning, skills and work was increasingly working closely and productively with its partners and was focused on improving the quality of the education provision. The prison team had managed and mitigated well many of the negative impacts of a long period of significant change and turbulence in staffing and organisation since the previous inspection. Nevertheless, the pace of improvement had been too slow. Weston College, the education and vocational training provider, had also undergone several changes in managerial and teaching staff in the same period. The education and vocational provision by Weston College required improvement.
- 3.7** The prison team had a clear strategic vision to improve the quality of provision and was putting this into practice. The team recognised that the provision required improvement and that there was some way to go before the provision became good. They recognised that, culturally, significant change was needed to ensure that all wing prison staff fully valued and supported prisoners' involvement and attendance in learning and skills development (see paragraph 3.16 and main recommendation S56).
- 3.8** A number of partnership-based working groups had been created to drive improvement. One group prioritised improving prisoners' attendance at, and engagement in, learning and skills activities. Another was designed to ensure that the allocations process to learning, skills and work was fair and reflected each prisoner's skills and aspirations. All improvement groups were recently established but most demonstrated some encouraging, if early-stage, positive impacts.

⁷ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.9** The prison team had used an evaluative but only partially accurate self-assessment process to identify the aspects of the provision which needed improving. Weston College's self-assessment process was less evaluative and was not accurate. Neither self-assessment paid sufficient attention to two key weaknesses: improving learners' historic and current low achievement in functional skills in English and/or mathematics, and ensuring that the provision met the needs of the substantial number of prisoners with entry-level English and mathematics skills.
- 3.10** The prison's quality improvement group (QIG) met regularly but attendance had been low. A new operating structure and membership group for the QIG had been implemented, but it had yet to have an impact.
- 3.11** Weston College did not gather or use the learner voice well to ensure that learners' and other prisoners' positive and negative views on the quality and relevance of the provision were gathered and acted on.

Recommendations

- 3.12** **The self-assessment should identify strengths and all weaknesses in the provision.**
- 3.13** **All wing staff should support and encourage prisoners to develop their learning and skills.**
- 3.14** **Learners' historic and current low achievement in English and/or mathematics functional skills should be raised considerably.**
- 3.15** **The provision of activities should include strategies and options which meet the needs of prisoners with entry-level English and mathematics skills.**

Provision of activities

- 3.16** The number of activity places had increased and closely matched the total number of prisoners, but at the time of the inspection around 30% of prisoners did not attend education, learning or work, choosing to stay on the wings. Thirty-six prisoners were classed by the prison as unemployed, almost all because they refused to engage in purposeful activity. Over the previous year, the number of prisoners engaging in learning and skills had been low (see main recommendation S57).
- 3.17** The prison offered more learning and skills courses leading to qualifications, including barbering, catering, cleaning, horticulture and fork-lift truck training, than at the time of the previous inspection; further new courses and work activities were due to start in 2017. Sixty prisoners were following distance learning courses but only one was working at degree level.
- 3.18** The industrial workshops provided prisoners with a range of tasks, including packing, recycling and assembling camouflage netting. The work was generally popular and gave prisoners useful opportunities to complete work to a commercial standard and meet time-based targets for completion. Courses in customer service and performing manufacturing operations were provided in work environments by a subcontractor, but the number of learners and completers in these areas was low (see main recommendation S57).
- 3.19** Teaching staff shortages reduced the number of classes that prisoners could actually attend. There was scarcely any provision for the large number of prisoners with entry-level English and mathematics skills, and none for prisoners whose first language was not English and the

large minority of longer-term prisoners. Courses on business skills and self-employment were not offered routinely.

Recommendations

- 3.20** **Appropriate learning and skills provision for non-English speakers and for longer-term prisoners should be developed and implemented.**
- 3.21** **Business development and self-employment courses which reflect the skills and knowledge that prisoners will need on release should be delivered routinely.**

Quality of provision

- 3.22** The quality of teaching and learning in education and training sessions required improvement overall. Learners were well motivated, positive and engaged in their learning in almost all the education and training sessions we observed. The standards of work achieved by most learners in classroom sessions met the standards required for the level and type of programme being taught. The quality of learners' work in vocational training workshops was good.
- 3.23** Teachers' management of prisoners' behaviour in classrooms was strong, and learners were respectful and cooperative. Most teachers used a wide range of teaching and learning strategies to maintain learners' involvement and interest, including discussion groups, role play and individual presentations. Not all teachers used interactive learning technologies well enough.
- 3.24** Learners made particularly good progress in the course of behavioural improvement sessions, such as the 'Becoming Victim Aware' and 'Stop the Violent Act' courses.
- 3.25** The quality of coaching and learning in the vocational workshops was mostly good. Courses were well planned and assessment procedures were thorough. Most instructors used individual learning plans effectively. Their verbal feedback to learners during sessions was constructive, but more cursory on their written work. Instructors managed learners' behaviour well; the mutual respect evident between prisoners and instructors supported some good examples of effective collaborative working and sharing of ideas.
- 3.26** Peer mentors provided effective and well-planned support to learners and tutors during education and vocational sessions, and learners valued their input.
- 3.27** Teachers did not stretch or challenge the more able learners in functional skills programmes and not all teachers used the recently reintroduced personal development folders well enough to record prisoners' progress towards learning goals or to record set targets for improvement.
- 3.28** Outreach provision was no longer available on the wings or in workshops or for vulnerable or self-isolating prisoners. There was no diagnostic or specialist support to identify and support prisoners with a specific learning difficulty or disability (SpLDD) or those with either little or no experience of formal learning. Teaching and training staff had not been trained, or developed the skills or knowledge, to provide effective support SpLDD in the classroom.
- 3.29** Sanctions under the incentive and earned privileges scheme were applied inappropriately to learners who refused to attend the learning to which they had been allocated because they could not participate – for example, because of their dyslexia or illiteracy.

- 3.30** The initial assessment of prisoners' English and mathematics skills during their induction to education classes produced results that were often inaccurate, and prisoners were too often placed on the wrong level of programme. During induction, some prisoners were encouraged to sign up for courses which were not running.

Recommendations

- 3.31** The more able learners in functional skills classes should be given work that helps them to achieve their full potential.
- 3.32** Outreach provision for prisoners should be reinstated and further developed.
- 3.33** All prisoners with a specific learning difficulty or disability should be identified and supported so they can make progress in their skills and learning.
- 3.34** The initial assessment of prisoners' functional skills should be accurate, so that learners are placed on the right level and type of programme.

Personal development and behaviour

- 3.35** Learners' behaviour in all the classroom and workshop training sessions we observed was good.
- 3.36** Prisoners were able to benefit from a diverse range of initiatives that improved their confidence, self-esteem, communication skills and motivation; these included peer mentoring, events celebrating achievements, catering for family days, recognition for volunteering roles and the impact of behavioural improvement courses. Many of these initiatives had been introduced in the previous six months and involved a small number of prisoners.
- 3.37** Most prisoners could describe the value of the skills they were gaining in vocational training sessions and how these might support them in gaining employment. They demonstrated a strong work ethic in industrial workshops, but most work on the accommodation wings was sporadic and undemanding, and failed to keep prisoners fully occupied (see main recommendation S57). Work activities provided prisoners with few opportunities for progression. There was still no formal recognition or recording of prisoners' wider skills development in industrial workshops.
- 3.38** Too many functional skills learners did not complete their courses or achieve their qualifications. Most learners with entry-level skills in mathematics and/or English, and English for speakers of other languages, were not supported to improve their skills, so left the prison with the same low level of skills as when they entered (see recommendation 3.15).
- 3.39** Most functional skills learners in English and mathematics at level 2 did not value, or plan to apply, their learning. We interviewed many prisoners who had been told at induction, incorrectly, that achieving level 2 was a mandatory requirement of the prison in order to be allowed to work or learn a skill. Consequently, as learners, they regarded their attendance at, and any achievement from, these higher-level programmes as personally irrelevant and merely a means to gain access to work or other activities (see main recommendation S57).
- 3.40** Learners' average attendance over the year at learning and skills sessions was low, at 74%. The number of prisoners with authorised absences from sessions which curtailed their attendance was high. The prison had a clear action plan to resolve these concerns, but it was at an early stage of implementation (see main recommendation S57).

Recommendation

- 3.41 All staff in learning, skills and work should be provided with unambiguous guidance about the functional skill levels that prisoners are expected to work towards or achieve, and why, in order to encourage prisoners to value and participate fully in their learning.**

Education and vocational achievements

- 3.42** Learners' achievement of qualifications was high or very high on most vocational and personal development courses; around a third of all courses in 2015/16 had been very short courses lasting either a day or a few days.
- 3.43** Most learners generally made some progress in their studies. The standards of their written work were in line with expectations for their English courses, good on the Becoming Victim Aware course and also good on vocational courses. Most of them developed good standards of work in vocational settings, notably in brickwork, and painting and decorating.
- 3.44** English and mathematics were not routinely embedded in all vocational training sessions or workshops. Pass rates were low on functional English and mathematics courses at levels 1 and 2, which represented most of the substantial programme of functional skills courses offered. Only around half of all learners starting a functional skills programme in English or mathematics at levels 1 and 2 achieved their qualification. Learners' low success rates had not improved since the previous inspection, and improving them had not been prioritised by either Weston College or the prison. Prison data for the current academic year indicated a mixed picture of learners' achievement rates in functional skills at levels 1 and 2; it was not possible to determine conclusively if any sustained improvement had taken place (see recommendation 3.14).

Library

- 3.45** The library, run by Dorset County Council, was a good, spacious and well-resourced facility but was under-used by prisoners because it was difficult to gain access to it from the wings. Opening hours had been extended and the library was now open on Saturday afternoons. New access arrangements were being introduced shortly after the inspection.
- 3.46** Staffing levels were good, and included a team of qualified orderlies. The library stock included a wide range of fiction and non-fiction, easy readers, large print and audio books, along with reference sources, legal material and Prison Service Instructions. The Turning Pages programme, supported by the Shannon Trust, under which prisoners who can read teach those who cannot, was not in operation at the time of the inspection.
- 3.47** Library staff had started to collect and analyse data on loans and library visits. These data showed that the number of prisoners using the library and the level of loans had declined since the previous inspection. Dorset County Council had given the prison notice that it would be withdrawing its service at the start of 2017.

Recommendation

- 3.48 Access arrangements to the library should be effective and the number of prisoners using the facility should be increased.**

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.

- 3.49** PE was managed appropriately. Facilities were of good quality, including a well-equipped weights room and separate cardiovascular suite, spacious sports hall, all-weather outside pitch and a large classroom. Changing rooms and showers were extremely clean.
- 3.50** Manual handling courses and first-aid courses were provided as part of the gym induction. Prison orderlies provided good support during recreational sessions and induction. The PE department had recently reinstated an accredited gym instructors' course and a football coaching award. These provided opportunities for prisoners to progress to higher-level awards and potential employment, but uptake was low.
- 3.51** Since the previous inspection, the cross-prison deployment of PE staff had been largely eliminated during the week but still took place at weekends, which curtailed activities. Most prisoners were allocated to at least two general PE sessions and one mixed sports session per week. The recreational PE timetable provided a wide variety of activities each week for those in safer custody and those who had been referred by the health care department. However, PE department data indicated that the proportion of prisoners using the PE facilities had declined from 60% at the time of the previous inspection to 40%. Our survey indicated that only 20% of prisoners used the gym three or more times a week.

Recommendation

- 3.52** The reasons for low numbers of prisoners using the PE facilities should be explored and addressed.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

- 4.1 The resettlement strategy had been updated recently and covered all of the resettlement pathways. However, it was not based on a comprehensive needs analysis. For example, there was an over-reliance on prisoner survey results, rather than using more objective data such as offender assessment system (OASys) assessments, and little analysis of the needs of the different types of prisoners held at the establishment. The strategy did not adequately promote the role of offender management or place it at the centre of the risk management and resettlement work.
- 4.2 A monthly meeting of pathway providers gave some opportunity to provide updates and track performance targets, and attendance had improved recently. However, there was no comprehensive action plan, so it was difficult to see how progress was monitored by this meeting.
- 4.3 The profile of offender management across the prison was underdeveloped and there was too little information exchange, with some functions working largely in isolation of each other.
- 4.4 Release on temporary licence (ROTL) was used appropriately for one prisoner to work in the external prison grounds, and there were plans to locate a couple of prisoners in the café just outside of the prison.

Recommendations

- 4.5 **Offender management and resettlement should be fully informed by a comprehensive and robust analysis of needs, including evidence gathered from offender assessment system (OASys) assessments and evidence of the specific needs of different types of prisoners.**
- 4.6 **Offender management should be at the centre of the work with prisoners, and information exchange between wider prison staff and offender supervisors should be improved.**

Offender management and planning

Expected outcomes:

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

- 4.7** The establishment held a large proportion of prisoners who presented a high risk of harm to others or were managed under multi-agency public protection arrangements (MAPPA), and over half of the population were serving four or more years in custody.
- 4.8** The case administrative team was strong and provided good support to the offender supervisors. However, we found too few improvements in offender management since the previous inspection, and outcomes for prisoners remained poor.
- 4.9** Uniformed offender supervisors no longer had a dual role as operational staff on the wings and were supposed to be based full time in the offender management unit (OMU). However, in practice, this was not happening and cross-deployment to cover shortages of operational staff remained a significant issue. Despite a reduction in the amount of cross-deployment over recent months, the uniformed offender supervisors we spoke to said that this was still high and made it difficult for them to manage their caseloads effectively.
- 4.10** Caseloads both for uniformed offender supervisors and probation staff were very high and they were given no guidance about how to prioritise their work.
- 4.11** About half of prisoners did not have an up-to-date OASys. Some lacked an initial assessment and plan but most had not been reviewed following significant changes, such as a recall to custody, which was poor (see main recommendation S58).
- 4.12** The lack of OASys assessments and sentence plans directly impeded prisoners' progression, such as access to interventions, and affected their motivation to change and their level of engagement. The quality of many sentence plans was inadequate, being out of date or not including clear objectives for interventions available at the prison. Too many risk management plans were also poor, as they were out of date and failed to cover the risk of harm posed in and out of custody (see main recommendation S58).
- 4.13** Most prisoners knew that they had an offender supervisor but most felt disengaged with their progression, and many we spoke to were very negative about offender management. Prisoners, including those presenting a high risk of harm to others and indeterminate-sentenced prisoners, complained to us that they had repeatedly requested meetings with their offender supervisor and received little or no response. In our survey, almost half of respondents said that no one was helping them to achieve their targets (see main recommendation S58).
- 4.14** In-house home detention curfew (HDC) processes were well managed. About half of all applications had been approved in the previous six months. Approval was undertaken appropriately by a manager, and if the decision was borderline the prisoner was invited to attend the board.
- 4.15** Some prisoners were released after their HDC eligibility date but this was mainly because of issues beyond the control of the prison – for example, delays in receiving reports from community-based offender managers and prisoners arriving at the establishment with only a few weeks remaining before their eligibility date.

Public protection

- 4.16 Initial screening on arrival to identify risks, and the application of public protection restrictions were adequate. Mail and telephone monitoring was used appropriately and removed once risks were sufficiently reduced.
- 4.17 Interdepartmental risk management team meetings were held monthly to review prisoners who had been confirmed as MAPPA levels 2 and 3, and others who were exhibiting concerning behaviour. Offender supervisors attended these meetings but wider attendance was poor. We found examples of high risk of harm cases not being referred for discussion, despite those prisoners displaying some disturbing behaviour.
- 4.18 Information exchange between the OMU and the offender manager in the community was poor, which potentially left the offender manager unsighted on the increased risks or ongoing offence-related behaviour.
- 4.19 Too many MAPPA levels had not been confirmed well enough ahead of release, which potentially limited the prison's involvement in multi-agency risk planning. Of the 15 MAPPA cases due for release in the next three months, seven did not have a clear management level confirmed. The prison did not do enough to escalate this problem in order to determine the appropriate MAPPA management level and contribute to release plans.

Recommendations

- 4.20 **All relevant cases should be referred to the interdepartmental risk management team in the few months before release, and comprehensive risk management plans should be developed and reviewed each month to monitor the progress made.**
- 4.21 **The management of multi-agency public protection arrangements (MAPPA) should be robust, and all relevant prisoners should be correctly identified, have their MAPPA level set in good time, and have robust release plans and arrangements in place.** (Repeated recommendation 4.27)

Categorisation

- 4.22 There was good oversight of the timeliness of recategorisation reviews. However, we found that some assessments for recategorisation to category D had been completed without an OASys assessment or a face-to-face meeting between the offender supervisor and the prisoner.
- 4.23 At the time of the inspection, 31 category D prisoners were held at the establishment. Some of these were indeterminate-sentenced prisoners (ISPs) who had been returned to closed conditions. Most others were moved on fairly quickly but some moves were delayed owing to a lack of places at open prisons. However, good effort was put into securing places for these prisoners and for those needing to transfer to another category C establishment.

Recommendation

- 4.24 **All recategorisation reviews should be informed by an up-to-date OASys assessment.**

Indeterminate sentence prisoners

- 4.25** The establishment held 72 ISPs at the time of the inspection. There was no specific provision for them, and in some cases the level of contact with offender supervisors was inadequate. Many of the prisoners serving indeterminate sentences for public protection were considerably over tariff and some had been at the prison for over three years with too little attention given to their engagement and progression. Not all ISPs had an up-to-date OASys assessment and sentence plan, which further limited their sense of engagement (see main recommendation S58).

Reintegration planning

Expected outcomes:

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

- 4.26** The establishment was a resettlement prison for a large geographical area in the South-West (contract package area (CPA) 13). About 40 prisoners were released each month, some of whom had spent a very short time at the prison.
- 4.27** Over the previous six months, a small number of prisoners had been released to another CPA, which meant that they had not been in the correct resettlement prison for the last few weeks of their sentence. This could potentially have hindered effective resettlement, as services in other CPAs may not have been as well known to the community rehabilitation company (CRC).
- 4.28** Bristol, Gloucestershire, Somerset and Wiltshire CRC, operated by Working Links, commissioned Catch 22 to deliver resettlement services in the prison. They provided reasonably good support and reviewed each prisoner's resettlement plan before release. The review of the plan had been undertaken slightly late over the previous couple of months, owing to staff shortages, but the quality of the plans was reasonably good and there was evidence of referrals being made as needed. A prisoner orderly provided good support, including information during induction and ongoing support as needed.
- 4.29** There was little monitoring of outcomes following release, to evidence the effectiveness of the resettlement services. For example, the numbers of prisoners released into and maintaining employment, training and education, and accommodation were not available.
- 4.30** At the time of the inspection, there were 145 prisoners in the last 12 weeks of their custodial sentence but there was too little joint working between the OMU and CRC in these cases, and some potential duplication of planning. Information exchange between the CRC and the community-based offender manager was reasonably good.
- 4.31** Delivery of the Making a Change resettlement programme (a modular programme aimed at developing skills for resettlement and basic problem-solving) had largely stopped over the previous couple of months because of CRC staff shortages but this was due to resume in the near future.

Recommendation

- 4.32** Resettlement outcomes in relation to accommodation, and employment, training and education following release should be gathered and analysed to evidence the effectiveness of the resettlement services.

Accommodation

- 4.33** A good range of accommodation support was provided by Catch 22 on behalf of the CRC, and in our survey more prisoners who needed this support than at comparator establishments knew where to go for help (47% versus 36%).
- 4.34** In the previous three months, 117 prisoners had been released, 44 of whom had not had a release address on arrival at the establishment. Catch 22 had helped to identify accommodation for 23 of these.
- 4.35** Prisoners arriving with existing housing problems, such as rent arrears or sustaining tenancies, were provided with help and advice, including setting up repayment plans.
- 4.36** Help provided before release included checking priority needs, referrals to local authorities and liaising with families and friends. Referrals were also made to specialist providers for prisoners with specific needs.
- 4.37** There was no reliable monitoring of the numbers of prisoners released homeless or with only very temporary accommodation (see also paragraph 4.29 and recommendation 4.32).

Education, training and employment

- 4.38** The quality of the National Careers Service (NCS), provided by the CfBT Education Trust, required improvement. Some of the stand-alone aspects of its service were good but they were not integrated well enough with provision from other agencies in the prison. Some productive links with employers to support resettlement were developing, but were at an early stage. Staff shortages had restricted the range of courses offered to prisoners nearing release. Prisoners received little help with CV writing or job searches.
- 4.39** NCS staff were flexible about when and where they interviewed prisoners to produce a skills action plan but they were unable to meet all prisoners before they were allocated to work or learning. Not all prisoners were allocated to the correct course or activity to meet individual needs. The practical value of improving poor functional skills in English and mathematics was not promoted well enough during the initial interviews. The virtual campus (internet access for prisoners to community education, training and employment opportunities) had been beset by technical malfunctions over the year but was working at the time of the inspection. NCS staff had recently undertaken training on this, and there were plans to deliver group workshops for prisoners in January 2017.

Recommendations

- 4.40** All prisoners should be interviewed and skills action plans, addressing employment and training needs for release, produced before they are allocated to learning, skills or work.
- 4.41** Prisoners should be supported in CV writing, job search and securing employment or training on release.

Health care

- 4.42** Health care discharge arrangements were good. All prisoners were seen by a nurse two weeks before leaving the prison and given a minimum of seven days' supply of prescribed medicines. They were also given a comprehensive information pack, which included condoms.
- 4.43** Effective links were made with community mental health teams for prisoners with complex mental health problems.

Drugs and alcohol

- 4.44** The integrated substance misuse service (ISMS) team developed release plans and, where possible, arranged post-release support for prisoners in recovery. There were good links with community service providers across the South-West, and especially with the ISMS's own community-based projects (EDP Drug and Alcohol Services).
- 4.45** Where possible, supported housing was arranged by the ISMS family worker and resettlement worker. They worked effectively in coordinating release plans, in liaison with the CRC (delivered by Catch 22), for more general training and accommodation needs.

Finance, benefit and debt

- 4.46** Catch 22 provided a comprehensive service on behalf of the CRC to help prisoners to deal with outstanding debts. Support included template letters to terminate current contracts, setting up repayment plans, credit checks and dealing with outstanding court fines.
- 4.47** In the previous 12 months, 180 bank accounts had been opened.
- 4.48** A recent project had been set up to provide advice to prisoners on how to manage their money in prison, with an emphasis on avoiding debt and associated bullying. This seemed to be a promising initiative.

Children, families and contact with the outside world

- 4.49** The facilities in the visitors centre were limited. These included lockers, toilets and a small amount of play equipment. Hot drinks were available on a Friday and Saturday, provided by Friends of Guys Marsh, who also provided subsidised transport from the local train station on Saturdays. The visitor centre closed before the end of visits, so visitors had no-one with whom to raise any concerns that had arisen during a session.

- 4.50** The visits booking system was accessible both online and by telephone. Several prisoners we spoke to reported delays in visits start times, and early finishes, reducing the amount of time that they were able to spend with their families. The chaplaincy ran a volunteer prison visitor scheme, with eight trained volunteers at the time of the inspection.
- 4.51** The visits hall was large enough to meet need, but the fixed plastic seating was uncomfortable and not suitable for children. The small play area in the hall was open for each visit, and on some days was staffed by a Barnardo's play worker. A refreshments bar, staffed by prisoners, was open. A visits hall painting programme was under way and noticeboards had been filled with pictures and relevant information which brightened the environment. Prisoners were no longer required to wear bibs during visits, but to assist with identification male visitors wore a wristband. Closed visits booths were insufficiently private and poorly maintained.
- 4.52** Eight family days had been held over the previous year. These had places for only 15 prisoners per event, and were always oversubscribed, but were well received by prisoners. There was limited family support work. Barnardo's assisted with the design and delivery of the family day activities, and prisoner preparation for the day. However, there were no other dedicated family support staff. A Family Relationship course had been delivered since January 2016 and 31 prisoners had completed it. Storybook Dads (in which prisoners record stories for their children) was also delivered; 174 prisoners had taken part in the current year, and those we spoke to valued this provision.

Recommendations

- 4.53** **The facilities in the visitors' centre should be improved and it should be staffed before and after visiting times.** (Repeated recommendation 4.53)
- 4.54** **Family support provision should be increased, to meet the demands of the population, and should include more family day spaces.**

Attitudes, thinking and behaviour

- 4.55** There was no comprehensive needs analysis to evidence the type and amount of offending behaviour interventions required. It was difficult to use OASys assessments to evidence this need, as about half of all eligible prisoners did not have one (see section on offender management and planning).
- 4.56** Two accredited programmes (the thinking skills programme and Resolve) were available but only 60 places a year were provided, and waiting lists were long. In addition, too many prisoners were unable to access a place owing to the lack of OASys information about their likelihood of reoffending, and some were subsequently released without being assessed.
- 4.57** Two additional offending behaviour modules (Becoming Victim Aware and Stop the Violent Act) were delivered by the education department. Completion rates were good and feedback was positive. The Challenge to Change Programme, delivered by Kainos, struggled to identify enough suitable prisoners to attend, and completion rates were low.

Recommendation

- 4.58** **A comprehensive needs analysis should inform the type and number of offending behaviour interventions delivered.**

Additional resettlement services

- 4.59** Veterans received a good level of support. The support officer worked hard to provide access to a range of agencies, including the Soldiers, Sailors, Airmen and Families Association (SSAFA). A new pilot project, delivered by a charity organisation in the community, looked promising and was helping a small number of prisoners to develop their self-confidence and problem-solving skills, alongside promoting access to education, training and employment opportunities on release.

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** Living conditions should be improved. Cells and communal areas should be maintained to an acceptable and decent standard. The showers should be fully refurbished and have an adequate hot water supply. Heating should be reliable. (S55)

Main recommendations

To the governor

- 5.2** All violent incidents should be analysed, to understand the causes and identify patterns and trends. Coordinated action should be taken to make the prison safer. Perpetrators should be identified and challenged, and victims should be supported. (S53)
- 5.3** The full extent of drug availability should be monitored, and a strategy and action plan put in place to reduce drug supply. (S54)
- 5.4** The culture of the prison should be improved through the exploration of staff confidence, training and leadership. Consistent and confident staff–prisoner relationships should be embedded which set clear expectations on behaviour and provide a model for positive citizenship. (S56)
- 5.5** All prisoners should be encouraged and expected to engage in learning and work, and all work areas should provide suitable work which encourages a strong work ethic. (S57)
- 5.6** All prisoners' risks and needs should be assessed and managed. Offender supervisors should have meaningful engagement with prisoners and focus on reducing risk, promoting progression and contributing to multi-agency release planning. (S58)

Recommendation

To NOMS

Courts, escort and transfers

- 5.7** All prisoners' property should arrive with them at the prison. (1.3)

Recommendations

To the governor

Early days in custody

- 5.8** Initial welfare checks of all new arrivals should be carried out by trained staff in private. (1.11, repeated recommendation 1.8)

- 5.9** Insiders should be properly supervised by prison staff in reception and on the first night unit. (1.12, repeated recommendation 1.9)
- 5.10** First night cells for new arrivals should be identified before their arrival on the unit and contain all basic items such as a kettle, television and adequate bedding. (1.13)

Bullying and violence reduction

- 5.11** Self-isolating prisoners should be monitored, to understand the extent and nature of the problem, and this analysis should inform the local strategy to help these prisoners, including reintegration planning. (1.20)

Self-harm and suicide

- 5.12** Incidents of self-harm and trends over time should be analysed fully, to identify the major causes and take action to address them. (1.28)
- 5.13** Assessment, care in custody and teamwork (ACCT) management, planning and recording should be of a consistent quality, so that all concerns about prisoners are addressed effectively. (1.29)
- 5.14** All serious acts of self-harm which could have resulted in the loss of life should be investigated, with lessons learned identified and shared to improve practice. (1.30)
- 5.15** Action plans developed from Prisons and Probation Ombudsman death in custody investigations should be closely monitored and reviewed, to ensure that recommended actions are embedded in practice. (1.31)

Security

- 5.16** Security-related data analysis should consider trends and measure whether actions are having an impact over time. (1.42)
- 5.17** The mandatory drug testing programme should be sufficiently resourced to ensure a robust suspicion testing programme. (1.43, repeated recommendation 1.34)

Discipline

- 5.18** Incidents involving the use of force should be reduced, and its governance and accountability, including documentation, should be improved, including uses of special accommodation, planned interventions and batons. (1.54, repeated recommendation S39)
- 5.19** Prisoners segregated for longer than four weeks should have additional care planning, to promote their continued well-being. (1.60)

Substance misuse

- 5.20** Copies of the secondary detoxification policy and pathway leaflet should be made readily available to all prisoners and discipline staff. (1.67)

Residential units

- 5.21** The cleanliness of communal areas and cells should be improved and kept to a high standard, and prisoners should have good access to all basic items, such as clean bedding, clothes and cell cleaning materials. (2.7)
- 5.22** The applications process should be improved, to ensure that it is effective and that prisoners receive timely responses. (2.8)

Equality and diversity

- 5.23** The prison should carry out regular consultation with prisoners from minority groups and address the issues raised. (2.16)
- 5.24** Equality monitoring data should be analysed and investigated robustly. Findings should be used directly to inform practice. (2.17)
- 5.25** All discrimination incidents reported should be investigated promptly. (2.18)
- 5.26** The prison should consult with prisoners from black and minority ethnic groups to understand and address perceptions of victimisation and negative perceptions about staff. (2.25, repeated recommendation 2.31)
- 5.27** Personal emergency evacuation plans should be reviewed regularly and kept up to date, and all wing staff should be familiar with them. (2.26)
- 5.28** A paid carer scheme to assist prisoners with disabilities should be developed and implemented. (2.27)

Complaints

- 5.29** Analysis of complaints should be used to inform and amend practice, including improving the timeliness of responses. (2.33)

Health services

- 5.30** Access to sexual health services should be improved, to ensure that prisoners are treated promptly. (2.49)
- 5.31** The escort arrangements for external hospital appointments should avoid unnecessary cancellations. (2.57, repeated recommendation 2.64)
- 5.32** All medication should be administered with sufficient officer supervision and privacy, and prisoners should be challenged about their behaviour around the hatches, to prevent diversion and violent incidents and ensure confidentiality. (2.62)
- 5.33** Medicines should be stored and administered in line with professional standards underpinned by in-date protocols. (2.63, repeated recommendation 2.71)
- 5.34** All prisoners should have lockable cabinets in which to store their prescribed medicines. (2.64)
- 5.35** Waiting times for the dentist should not exceed clinically acceptable waiting times in the community. (2.68)

- 5.36** Patients requiring mental health inpatient care should be transferred without delay. (2.77, repeated recommendation 2.82)

Catering

- 5.37** All servery areas and equipment, including communal microwaves and toasters, should be kept clean and hygienic. (2.84)

Purchases

- 5.38** Prisoners should not be charged a processing fee on catalogue orders. (2.89, repeated recommendation 2.93)

Time out of cell

- 5.39** Prisoners should have access to evening association on weekdays, so that they can maintain family and social ties. (3.4)

Learning and skills and work activities

- 5.40** The self-assessment should identify strengths and all weaknesses in the provision. (3.12)
- 5.41** All wing staff should support and encourage prisoners to develop their learning and skills. (3.13)
- 5.42** Learners' historic and current low achievement in English and/or mathematics functional skills should be raised considerably. (3.14)
- 5.43** The provision of activities should include strategies and options which meet the needs of prisoners with entry-level English and mathematics skills. (3.15)
- 5.44** Appropriate learning and skills provision for non-English speakers and for longer-term prisoners should be developed and implemented. (3.20)
- 5.45** Business development and self-employment courses which reflect the skills and knowledge that prisoners will need on release should be delivered routinely. (3.21)
- 5.46** The more able learners in functional skills classes should be given work that helps them to achieve their full potential. (3.31)
- 5.47** Outreach provision for prisoners should be reinstated and further developed. (3.32)
- 5.48** All prisoners with a specific learning difficulty or disability should be identified and supported so they can make progress in their skills and learning. (3.33)
- 5.49** The initial assessment of prisoners' functional skills should be accurate, so that learners are placed on the right level and type of programme. (3.34)
- 5.50** All staff in learning, skills and work should be provided with unambiguous guidance about the functional skill levels that prisoners are expected to work towards or achieve, and why, in order to encourage prisoners to value and participate fully in their learning. (3.41)
- 5.51** Access arrangements to the library should be effective and the number of prisoners using the facility should be increased. (3.48)

Physical education and healthy living

- 5.52** The reasons for low numbers of prisoners using the PE facilities should be explored and addressed. (3.52)

Strategic management of resettlement

- 5.53** Offender management and resettlement should be fully informed by a comprehensive and robust analysis of needs, including evidence gathered from offender assessment system (OASys) assessments and evidence of the specific needs of different types of prisoners. (4.5)
- 5.54** Offender management should be at the centre of the work with prisoners, and information exchange between wider prison staff and offender supervisors should be improved. (4.6)

Offender management and planning

- 5.55** All relevant cases should be referred to the interdepartmental risk management team in the few months before release, and comprehensive risk management plans should be developed and reviewed each month to monitor the progress made. (4.20)
- 5.56** The management of multi-agency public protection arrangements (MAPPA) should be robust, and all relevant prisoners should be correctly identified, have their MAPPA level set in good time, and have robust release plans and arrangements in place. (4.21, repeated recommendation 4.27)
- 5.57** All recategorisation reviews should be informed by an up-to-date OASys assessment. (4.24)

Reintegration planning

- 5.58** Resettlement outcomes in relation to accommodation, and employment, training and education following release should be gathered and analysed to evidence the effectiveness of the resettlement services. (4.32)
- 5.59** All prisoners should be interviewed and skills action plans, addressing employment and training needs for release, produced before they are allocated to learning, skills or work. (4.40)
- 5.60** Prisoners should be supported in CV writing, job search and securing employment or training on release. (4.41)
- 5.61** The facilities in the visitors' centre should be improved and it should be staffed before and after visiting times. (4.53, repeated recommendation 4.53)
- 5.62** Family support provision should be increased, to meet the demands of the population, and should include more family day spaces. (4.54)
- 5.63** A comprehensive needs analysis should inform the type and number of offending behaviour interventions delivered. (4.58)

Examples of good practice

Health services

- 5.64** A strategic and planned approach to health promotion, supported by a dedicated associate practitioner role, enabled prisoners to understand and take preventive action to improve their own health status. (2.50)
- 5.65** Locating and linking the physiotherapy service with the gym supported a health promotion approach. (2.58)
- 5.66** The sharing of detailed supportive care plans with wing staff for prisoners with specific care and vulnerability needs supported their mental well-being and safety in prison. (2.78)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Alison Perry	Team leader
Andrew Rooke	Inspector
Sandra Fieldhouse	Inspector
Jonathan Tickner	Inspector
Maneer Afsar	Inspector
Beverly Alden	Inspector
Patricia Taflan	Researcher
Catherine Shaw	Researcher
Ellis Cowling	Researcher
Emma Seymour	Researcher
Paul Roberts	Substance misuse inspector
Nicola Rabjohns	Health services inspector
Barry Cohen	Pharmacist
Gary Turney	Care Quality Commission inspector
Cat Reeves	Care Quality Commission inspector
Nick Crombie	Ofsted inspector
Bob Cowdrey	Ofsted inspector
Diane Kopit	Ofsted inspector
Caroline Nicklin	Offender management inspector
Tracy Green	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 2014, prisoners had reasonable journeys to the prison and reception procedures were appropriate but some first night cells were poor. Prisoners felt unsafe at the prison, especially on the Saxon wing, and violence against prisoners and staff was very high for the type of prison. Although the prison was sighted on the issues behind this violence it lacked a strategy to resolve them. The management of prisoners at risk of self-harm was mostly good. The levels of violence, drug availability and organised crime seriously affected safety in the prison. The use of all disciplinary measures was relatively high and quality assurance was inadequate. The substance misuse team was developing but the designated drug treatment unit, Saxon, was struggling to provide an appropriate environment. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

Regional and national managers should work with the prison's managers to implement a comprehensive strategy to reduce levels of violence and bring stability back to the prison. This should include:

1. intensive and urgent action, in conjunction with other criminal justice agencies, to reduce the supply of drugs into the prison, and national action to ensure effective testing methods and legal penalties are developed to deter and prevent their supply;
2. a review of the prison's own violence reduction strategy with clear and consistent action in the prison to discourage, deter and disrupt perpetrators;
3. greater support for victims and a clear plan to reduce self-harm associated with medication, bullying and debt;
4. action to stop the use of the segregation unit as an exit route from the prison and effective action to reintegrate prisoners seeking protection there, and those self-isolating on the wings, back into the main prison. (S38)

Not achieved

Incidents involving the use of force should be reduced, and its governance and accountability, including documentation, should be improved, including uses of special accommodation, planned interventions and batons. (S39)

Not achieved (recommendation repeated, 1.54)

Recommendations

Initial welfare checks of all new arrivals should be carried out by trained staff in private. (1.8)

Not achieved (recommendation repeated, 1.11)

Insiders should be properly supervised by prison staff in reception and on the first night unit. (1.9)

Not achieved (recommendation repeated, 1.12)

All new arrivals should be given written information, available in a range of formats, explaining prison rules and regulations. (1.10)

Achieved

The first night unit should not be used for temporary accommodation for prisoners moving out of the segregation unit or for prisoners moved there for their own protection. (1.11)

Achieved

Staff should check new arrivals during their first night. (1.12)

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. (1.27)

Achieved

The mandatory drug testing programme should be sufficiently resourced to ensure a robust suspicion testing programme. (1.34)

Not achieved (recommendation repeated, 1.43)

Closed visits should only be applied and continue to be used for reasons directly related to the trafficking of illicit items into visits, and when there is sufficient intelligence to support their use. (1.35)

Not achieved

The governance and oversight of incentives and earned privileges reviews and documentation should be improved. (1.39)

Not achieved

The full circumstances of a prisoner's poor behaviour should be investigated before a demotion to the basic level. (1.40)

Achieved

All disciplinary charges should be fully investigated, with clear reasons given for the decisions reached, and a quality assurance process should be implemented. (1.43)

Achieved

Prisoners on assessment, care in custody and teamwork (ACCT) case management or actively self-harming should only be placed in special accommodation as a last resort and where there are exceptional circumstances to justify it. (1.48)

Not achieved

Segregation review documentation should be completed thoroughly and include meaningful targets. (1.54)

Achieved

The quality of the regime, shower and exercise yard in the segregation unit should be improved. (1.55)

Achieved

The prison should take a strategic approach to all aspects of tackling substance misuse, including the treatment needs of prisoners, that involves all relevant departments and providers. (1.63)

Partially achieved

The role of Saxon wing as a substance misuse treatment wing should be urgently revised, and the safety of prisoners and therapeutic integrity of the unit should be prioritised. (1.64)

Achieved

Discipline staff working on the revised substance misuse treatment unit should be specially selected and trained. The cross-deployment of other staff to the unit should be reduced to a minimum. (1.65)

Achieved

The treatment pathway for secondary detoxification should be explained to prisoners and staff to ensure a consistent approach to treatment and successful outcomes for prisoners. (1.66)

Partially achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2014, external areas were mostly reasonable but some cells were in a poor condition. Relationships between staff and prisoners were generally good although a minority were indifferent and dismissive. The prison monitored the regime for prisoners with protected characteristics but consultation with minority groups was too variable and there was insufficient staff attendance at the equality meeting. Faith provision was good. Quality checks on complaints were ineffective. Physical health care provision was reasonably good, and mental health care was good and improving. The food was reasonably good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

Immigration detainees should not be held in prisons other than in exceptional circumstances following risk assessment. (2.32)

Not achieved

Recommendations

High standards of maintenance and cleanliness of wings should be consistently implemented. (2.8)

Not achieved

Cells designed for one prisoner should not be shared. (2.9)

Not achieved

The offensive displays policy should be consistently enforced. (2.10)

Achieved

The central heating system and hot water supply should be properly maintained. (2.11)

Not achieved

Personal officers should know the personal circumstances of their prisoners. (2.16)

Not achieved

The prison should investigate results of its equality monitoring data that are out of range and take remedial action where appropriate. (2.23)

Not achieved

The prison should carry out regular consultation with prisoners from minority groups and address the issues raised, and promote and celebrate diversity. (2.24)

Not achieved

Discrimination incident report forms (DIRFs) should be freely available, and reports should be responded to promptly. (2.25)

Not achieved

The prison should consult with prisoners from black and minority ethnic groups to understand and address perceptions of victimisation and negative perceptions about staff. (2.31)

Not achieved (recommendation repeated, 2.25)

The prison should develop a formal buddy scheme to assist prisoners with disabilities. (2.33)

Not achieved

The equality action plan should be developed to identify and support gay, bisexual and transgender prisoners more effectively. (2.34)

Not achieved

Complaints should be considered, even if forms are unsigned or undated, prisoners should be able to complain about the quality of food, and all responses should be prompt and fully address the issues raised. (2.41)

Partially achieved

Prisoners should have access to trained legal services staff and independent immigration advice. (2.44)

Not achieved

All clinical areas should fully comply with current infection control standards and have adequate privacy screening, and the waiting area should be fit for purpose. (2.54)

Achieved

Older prisoners and prisoners with disabilities should receive regular assessment by a health care professional and individual support in partnership with the prison's disability liaison officer. (2.55)

Achieved

Relevant health information, including health promotion and how to make a complaint, should be available on every unit and in the health care waiting area. (2.56)

Achieved

Prisoners with lifelong conditions should receive regular reviews that generate an evidence-based care plan from appropriately trained and supervised staff. (2.62)

Achieved

Waiting times for primary care services, including the optician, should not exceed clinically acceptable waiting times in the community. (2.63)

Achieved

The escort arrangements for external hospital appointments should avoid unnecessary cancellations. (2.64)

Not achieved (recommendation repeated, 2.57)

Medicines should be stored and administered in line with professional standards underpinned by in-date protocols. (2.71)

Not achieved (recommendation repeated, 2.63)

Staff should be trained to prescribe, administer and cease prescriptions correctly on SystemOne. (2.72)

Achieved

All medication should be administered with sufficient officer supervision and privacy. (2.73)

Not achieved

The dental surgery should have a separate decontamination room to comply fully with infection control standards and meet best practice guidelines. (2.77)

Achieved

Patients requiring mental health inpatient care should be transferred without delay. (2.82)

Not achieved (recommendation repeated, 2.77)

Breakfast should be served on the day it is to be eaten. (2.87)

Not achieved

All prisoners, including new arrivals, should have weekly access to the prison shop. (2.92)

Not achieved

Prisoners should not be charged a processing fee on catalogue orders. (2.93)

Not achieved (recommendation repeated, 2.89)

Purposeful activity

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

At the last inspection, in 2014, the prison had recently introduced a restricted regime and although employed prisoners could spend around nine hours out of their cell on a weekday, too many were locked up for a training prison. There had been slight improvements in learning and skills and work provision shortly before the inspection but much had deteriorated since our last full inspection and its management remained inadequate. There were still not enough activity places for the population, compounded by not enough work in some workshops and poor attendance. The variety of learning and skills and work activities was too limited. Success rates on courses were too variable. The quality of teaching and coaching was mostly good. The library was a good environment but access was too limited. Recent changes to PE access were having a positive impact. Outcomes for prisoners were poor against this healthy prison test.

Main recommendation

The prison should increase the range and improve the quality of learning, skills and work opportunities, and ensure that all places are used to capacity. (S40)

Not achieved

Recommendations

All prisoners should receive 10 hours a day out of their cell, including an hour for outside exercise. (3.4)

Not achieved

Managers should improve the observation of teaching and learning across the provision to provide clear information about the quality and share best practice. (3.10)

Achieved

Attendance at quality improvement group meeting should be improved, and discussion about the quality of teaching, learning and assessment should be more robust. (3.11)

Not achieved

There should be suitable cover for any staff shortages to ensure continuity of learning, skills and work provision. (3.15)

Not achieved

Courses in barbering, painting and decorating, and catering should be restarted as soon as possible. (3.16)

Achieved

Tutors should ensure that all learners, particularly the more able, are suitably challenged to achieve their full potential. (3.20)

Not achieved

Prisoners should be clear about the targets set in their individual learning plans so that they are fully aware of their progress and what they need to do to achieve their learning aim. (3.21)

Achieved

There should be more outreach support for prisoners with additional learning needs to enable them to develop their skills, particularly in English and mathematics. (3.22)

Not achieved

The selection and supervision of peer mentors should be more rigorous to promote learning better across the prison. (3.23)

Achieved

The work and practical skills that prisoners develop in work areas should be recorded and recognised. (3.24)

Not achieved

Managers should ensure that success rates improve to at least good for all qualifications, and in particular in English and mathematics. (3.27)

Not achieved

Attendance in education, vocational training and work provision should be better managed to ensure that prisoners participate fully. (3.28)

Not achieved

Library staff should collect and analyse accurate data about the number of prisoners accessing and using the library. (3.32)

Achieved

Prison managers should improve prisoner access to the library, including the extension of opening hours. (3.33)

Not achieved

Wherever possible, PE staff should not be cross-deployed for other duties. (3.39)

Not achieved

PE staff should reinstate a range of accredited PE courses. (3.40)

Achieved

Resettlement

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

At the last inspection, in 2014, there was insufficient strategic and operational links across resettlement provision, and some plans for development remained aspirational. Offender management was very poor, and there was insufficient quality assurance and oversight of the work. There was infrequent offender supervisor contact with prisoners, too many of whom did not have an up-to-date sentence plan or OASys assessment, which delayed their progress through the prison system. Public protection screening was reasonable but public protection arrangements were inadequate and potentially put the public at risk. Reintegration planning was variable with offender supervisors rarely involved. There was no formal pre-release planning, although provision under most resettlement pathways was adequate. Outcomes for prisoners were poor against this healthy prison test.

Main recommendation

Offender supervisors should be adequately trained to manage and undertake their role effectively. There should be regular management oversight, quality assurance and casework supervision of all offender supervisors to ensure their work is consistently delivered to a high standard. (S41)

Not achieved

Recommendations

The strategic management of resettlement should be better coordinated, incorporate both offender management and resettlement pathways provision and be led by a strategic meeting attended by senior management. (4.6)

Achieved

The reducing reoffending strategy should reflect the specific needs of the population. (4.7)

Not achieved

All prisoners should have an up to date OASys assessment and sentence plan. (4.16)

Not achieved

The offender management unit should be sufficiently resourced to ensure that prisoners receive timely and sufficient offender management to enable them to progress through their sentence. (4.17)

Not achieved

Recategorisation, release on temporary licence and home detention curfew decisions should always be informed by an up-to-date OASys assessment that identifies risk adequately. (4.18)

Not achieved

All staff in the prison should use one common system to record their work with prisoners. (4.19)

Achieved

More staff in the OMU should be trained to use the violent and sexual offenders register (Visor) and they should be properly supervised. (4.26)

Achieved

The management of MAPPAs (multi agency public protection arrangements) should be robust, and all relevant prisoners should be correctly identified, have their MAPPAs level set in good time, and have robust release plans and arrangements in place. (4.27)

Not achieved (recommendation repeated, 4.21)

The prison should be represented at MAPPAs meetings, either through attendance or the submission of a good quality report. (4.28)

Achieved

The prison should consult indeterminate sentence prisoners to identify their concerns and needs, and address these through provision such as forums or family days. (4.32)

Not achieved

There should be an immediate needs assessment of all new arrivals, with referrals to relevant support within the prison, and any unmet needs should be identified as part of discharge planning. (4.36)

Achieved

All prisoners working as resettlement orderlies should have clear roles and adequate supervision. (4.37)

Achieved

The resettlement course should link more effectively with external partners and agencies to ensure that prisoners' needs are fully met before their release. (4.42)

No longer relevant

The links between staff from CfBT and other resettlement functions should be improved. (4.43)

No longer relevant

The use of the virtual campus should be extended to allow prisoners who are near release to search for jobs and to support other employability activities. (4.44)

Not achieved

Family support provision should be increased to meet the demands of the population, and should include more family day spaces and parenting courses. (4.52)

Partially achieved

The facilities in the visitors' centre should be improved and it should be staffed before and after visiting times. (4.53)

Not achieved (recommendation repeated, 4.53)

There should be a range of programmes to meet the identified needs of the population, and referral should be on the basis of evidenced offending behaviour need set out in the prisoner's sentence plan. (4.57)

Not achieved

The prison should make every effort to ensure that prisoners complete the offending behaviour courses that are identified for them. (4.58)

Not achieved

Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	0	488	89
Recall	0	55	11
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	0	0
Total	0	543	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	0	0	0
Less than six months	0	5	0.9
six months to less than 12 months	0	25	4.6
12 months to less than 2 years	0	60	11
2 years to less than 4 years	0	156	28
4 years to less than 10 years	0	206	37.9
10 years and over (not life)	0	19	3.5
ISPP (indeterminate sentence for public protection)	0	30	5.5
Life	0	42	13.3
Total	0	543	100

Age	Number of prisoners	%
Please state minimum age here:	21	
Under 21 years	0	0
21 years to 29 years	203	37.4
30 years to 39 years	164	30.2
40 years to 49 years	113	20.8
50 years to 59 years	53	9.8
60 years to 69 years	3	0.6
70 plus years	7	1.3
Please state maximum age here:	78	
Total	543	100

Nationality	18–20-year-olds	21 and over	%
British	0	506	93.2
Foreign nationals	0	37	6.8
Total	0	543	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	0	0	0
Uncategorised sentenced	0	0	0
Category A	0	0	0
Category B	0	0	0
Category C	0	512	94.3
Category D	0	31	5.7
Other	0	0	0
Total	0	543	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	0	397	73.1
Irish	0	7	1.3
Gypsy/Irish Traveller	0	27	5.0
Other white	0	23	4.2
Mixed			
White and black Caribbean	0	12	2.2
White and black African	0	1	0.2
White and Asian	0	1	0.2
Other mixed	0	3	0.6
Asian or Asian British			
Indian	0	3	0.6
Pakistani	0	4	0.7
Bangladeshi	0	0	0
Chinese	0	0	0
Other Asian	0	7	1.3
Black or black British			
Caribbean	0	30	5.5
African	0	8	1.5
Other black	0	12	2.2
Other ethnic group			
Arab	0	4	0.7
Other ethnic group	0	1	0.2
Not stated	0	3	0.6
Total	0	543	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	0	86	15.8
Roman Catholic	0	82	15.1
Other Christian denominations	0	69	12.7
Muslim	0	43	7.9
Sikh	0	1	0.2
Hindu	0	5	0.9
Buddhist	0	8	1.5
Jewish	0	1	0.2
Other	0	11	2.0
No religion	0	237	43.7
Total	0	543	100

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)	0	8	1.6
Total	0	8	1.6

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	55	10.1
1 month to 3 months	0	0	122	22.5
3 months to six months	0	0	125	23.0
six months to 1 year	0	0	132	24.3
1 year to 2 years	0	0	65	12.0
2 years to 4 years	0	0	39	7.2
4 years or more	0	0	5	0.9
Total	0	0	543	100

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	0	0
1 month to 3 months	0	0	0	0
3 months to six months	0	0	0	0
six months to 1 year	0	0	0	0
1 year to 2 years	0	0	0	0
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
Total	0	0	0	0

Main offence	18–20-year-olds	21 and over	%
Violence against the person	0	208	38
Sexual offences	0	1	0.2
Burglary	0	88	16
Robbery	0	45	8.2
Theft and handling	0	15	2.7
Fraud and forgery	0	6	1.2
Drugs offences	0	135	24.8
Other offences	0	45	8.2
Civil offences	0	0	0
Offence not recorded /holding warrant	0	0	0
Total	0	543	100

Appendix IV: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment⁸. 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 23 November 2016 the prisoner population at HMP Guys Marsh was 546. Using the method described above, questionnaires were distributed to a sample of 195 prisoners.

We received a total of 145 completed questionnaires, a response rate of 74%. This included one questionnaire completed via interview. Twenty-three respondents refused to complete a questionnaire and 27 questionnaires were not returned.

⁸ 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
Anglia	16
Cambria	20
Dorset	12
Fontmell	12
Gwent	20
Jubilee	13
Mercia	14
Saxon	18
Wessex	17
Tarrant (Segregation unit)	3

Presentation of survey results and analyses

Over the following pages, we present the survey results for HMP Guys Marsh.

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 differences⁹ 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 Guys Marsh in 2016 compared with responses from prisoners surveyed in all other category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 38 category C training prisons since April 2012.
- The current survey responses from HMP Guys Marsh in 2016 compared with the responses of prisoners surveyed at HMP Guys Marsh in 2014.
- A comparison within the 2016 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2016 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.

⁹ 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.

- A comparison within the 2016 survey between the responses of prisoners on Saxon wing and the rest of the establishment.

Survey summary

Section I: About You

Q1.1	What wing or houseblock are you currently living on? See survey methodology.	
Q1.2	How old are you?	
	Under 21	1 (1%)
	21 - 29.....	55 (38%)
	30 - 39.....	35 (24%)
	40 - 49.....	38 (27%)
	50 - 59.....	14 (10%)
	60 - 69.....	0 (0%)
	70 and over	0 (0%)
Q1.3	Are you sentenced?	
	Yes	131 (92%)
	Yes - on recall.....	12 (8%)
	No - awaiting trial.....	0 (0%)
	No - awaiting sentence.....	0 (0%)
	No - awaiting deportation.....	0 (0%)
Q1.4	How long is your sentence?	
	Not sentenced.....	0 (0%)
	Less than 6 months.....	4 (3%)
	6 months to less than 1 year	10 (7%)
	1 year to less than 2 years	22 (16%)
	2 years to less than 4 years	35 (25%)
	4 years to less than 10 years.....	48 (34%)
	10 years or more.....	4 (3%)
	IPP (indeterminate sentence for public protection)	6 (4%)
	Life.....	12 (9%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes.....	10 (7%)
	No.....	131 (93%)
Q1.6	Do you understand spoken English?	
	Yes	142 (99%)
	No.....	1 (1%)
Q1.7	Do you understand written English?	
	Yes	139 (97%)
	No.....	4 (3%)

Q1.8 What is your ethnic origin?

White - British (English/ Welsh/ Scottish/ Northern Irish).....	104 (77%)	Asian or Asian British - Chinese.....	0 (0%)
White - Irish	1 (1%)	Asian or Asian British - other	0 (0%)
White - other.....	4 (3%)	Mixed race - white and black Caribbean ..	5 (4%)
Black or black British - Caribbean.....	12 (9%)	Mixed race - white and black African.....	0 (0%)
Black or black British - African	3 (2%)	Mixed race - white and Asian.....	1 (1%)
Black or black British - other	0 (0%)	Mixed race - other	0 (0%)
Asian or Asian British - Indian	1 (1%)	Arab	0 (0%)
Asian or Asian British - Pakistani.....	2 (1%)	Other ethnic group.....	1 (1%)
Asian or Asian British - Bangladeshi.....	1 (1%)		

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

Yes	5 (4%)
No.....	131 (96%)

Q1.10 What is your religion?

None.....	66 (48%)	Hindu.....	1 (1%)
Church of England	33 (24%)	Jewish.....	0 (0%)
Catholic	20 (14%)	Muslim.....	8 (6%)
Protestant.....	1 (1%)	Sikh	1 (1%)
Other Christian denomination	2 (1%)	Other	4 (3%)
Buddhist	2 (1%)		

Q1.11 How would you describe your sexual orientation?

Heterosexual/ Straight	138 (98%)
Homosexual/Gay.....	0 (0%)
Bisexual.....	3 (2%)

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

Yes	40 (28%)
No.....	101 (72%)

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

Yes	5 (4%)
No.....	136 (96%)

Q1.14 Is this your first time in prison?

Yes	44 (31%)
No.....	98 (69%)

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

Yes.....	79 (56%)
No	63 (44%)

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

Less than 2 hours	37 (26%)
2 hours or longer	98 (70%)
Don't remember	6 (4%)

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>	37 (27%)
	<i>Yes</i>	85 (62%)
	<i>No</i>	13 (9%)
	<i>Don't remember</i>	2 (1%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	37 (27%)
	<i>Yes</i>	6 (4%)
	<i>No</i>	95 (68%)
	<i>Don't remember</i>	1 (1%)
Q2.4	On your most recent journey here, was the van clean?	
	<i>Yes</i>	85 (60%)
	<i>No</i>	48 (34%)
	<i>Don't remember</i>	9 (6%)
Q2.5	On your most recent journey here, did you feel safe?	
	<i>Yes</i>	106 (75%)
	<i>No</i>	32 (23%)
	<i>Don't remember</i>	3 (2%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	37 (26%)
	<i>Well</i>	66 (47%)
	<i>Neither</i>	26 (18%)
	<i>Badly</i>	4 (3%)
	<i>Very badly</i>	8 (6%)
	<i>Don't remember</i>	0 (0%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	82 (58%)
	<i>Yes, I received written information</i>	21 (15%)
	<i>No, I was not told anything</i>	41 (29%)
	<i>Don't remember</i>	0 (0%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	<i>Yes</i>	106 (76%)
	<i>No</i>	33 (24%)
	<i>Don't remember</i>	1 (1%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	85 (60%)
	<i>2 hours or longer</i>	47 (33%)
	<i>Don't remember</i>	9 (6%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	<i>Yes</i>	118 (84%)
	<i>No</i>	18 (13%)
	<i>Don't remember</i>	4 (3%)

Q3.3	Overall, how were you treated in reception?		
	Very well.....	39 (28%)	
	Well.....	77 (55%)	
	Neither.....	17 (12%)	
	Badly.....	3 (2%)	
	Very badly.....	4 (3%)	
	Don't remember.....	0 (0%)	
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)		
	Loss of property.....	39 (28%)	Physical health.....
	Housing problems.....	22 (16%)	Mental health.....
	Contacting employers.....	2 (1%)	Needing protection from other prisoners
	Contacting family.....	25 (18%)	Getting phone numbers.....
	Childcare.....	4 (3%)	Other.....
	Money worries.....	17 (12%)	Did not have any problems.....
	Feeling depressed or suicidal.....	24 (18%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	Yes.....	27 (20%)	
	No.....	58 (42%)	
	Did not have any problems.....	53 (38%)	
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	Tobacco.....	116 (82%)	
	A shower.....	36 (25%)	
	A free telephone call.....	43 (30%)	
	Something to eat.....	71 (50%)	
	PIN phone credit.....	65 (46%)	
	Toiletries/ basic items.....	64 (45%)	
	Did not receive anything.....	10 (7%)	
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)		
	Chaplain.....	72 (52%)	
	Someone from health services.....	95 (68%)	
	A Listener/Samaritans.....	36 (26%)	
	Prison shop/ canteen.....	31 (22%)	
	Did not have access to any of these.....	26 (19%)	
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)		
	What was going to happen to you.....	50 (37%)	
	What support was available for people feeling depressed or suicidal.....	42 (31%)	
	How to make routine requests (applications).....	41 (30%)	
	Your entitlement to visits.....	30 (22%)	
	Health services.....	52 (39%)	
	Chaplaincy.....	51 (38%)	
	Not offered any information.....	47 (35%)	
Q3.9	Did you feel safe on your first night here?		
	Yes.....	98 (70%)	
	No.....	37 (26%)	
	Don't remember.....	5 (4%)	

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	17 (12%)
	<i>Within the first week</i>	52 (37%)
	<i>More than a week</i>	69 (49%)
	<i>Don't remember</i>	3 (2%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	17 (12%)
	<i>Yes</i>	58 (42%)
	<i>No</i>	50 (36%)
	<i>Don't remember</i>	13 (9%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	19 (14%)
	<i>Within the first week</i>	39 (28%)
	<i>More than a week</i>	67 (48%)
	<i>Don't remember</i>	14 (10%)

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>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	18 (13%)	30 (22%)	24 (17%)	33 (24%)	18 (13%)	16 (12%)
	<i>Attend legal visits?</i>	13 (10%)	36 (29%)	25 (20%)	13 (10%)	9 (7%)	30 (24%)
	<i>Get bail information?</i>	6 (5%)	11 (9%)	19 (15%)	16 (13%)	14 (11%)	57 (46%)
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>						27 (19%)
	<i>Yes</i>						56 (40%)
	<i>No</i>						56 (40%)
Q4.3	Can you get legal books in the library?						
	<i>Yes</i>						46 (34%)
	<i>No</i>						8 (6%)
	<i>Don't know</i>						81 (60%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:						
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>			
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	61 (44%)	76 (54%)	3 (2%)			
	<i>Are you normally able to have a shower every day?</i>	107 (78%)	31 (22%)	0 (0%)			
	<i>Do you normally receive clean sheets every week?</i>	53 (39%)	77 (57%)	5 (4%)			
	<i>Do you normally get cell cleaning materials every week?</i>	68 (50%)	65 (48%)	3 (2%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	40 (31%)	78 (60%)	13 (10%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	93 (71%)	38 (29%)	0 (0%)			
	<i>If you need to, can you normally get your stored property?</i>	24 (17%)	77 (56%)	37 (27%)			
Q4.5	What is the food like here?						
	<i>Very good</i>						4 (3%)
	<i>Good</i>						43 (31%)
	<i>Neither</i>						43 (31%)
	<i>Bad</i>						31 (22%)
	<i>Very bad</i>						18 (13%)

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	67 (49%)
	No.....	68 (49%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	56 (40%)
	No.....	26 (19%)
	Don't know	57 (41%)
Q4.8	Are your religious beliefs respected?	
	Yes	54 (39%)
	No.....	12 (9%)
	Don't know/ N/A.....	71 (52%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	75 (55%)
	No.....	10 (7%)
	Don't know/ N/A.....	52 (38%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	33 (24%)
	Very easy.....	29 (21%)
	Easy	28 (20%)
	Neither	9 (7%)
	Difficult.....	3 (2%)
	Very difficult.....	5 (4%)
	Don't know	30 (22%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?			
	Yes	115 (83%)		
	No	20 (14%)		
	Don't know	4 (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 applications dealt with fairly?	8 (6%)	66 (51%)	56 (43%)
	Are applications dealt with quickly (within seven days)?	8 (6%)	38 (30%)	82 (64%)
Q5.3	Is it easy to make a complaint?			
	Yes	74 (55%)		
	No	34 (25%)		
	Don't know	27 (20%)		
Q5.4	Please answer the following questions about complaints (If you have not made a complaint please tick the 'not made one' option.)			
		Not made one		
		Yes		
		No		
	Are complaints dealt with fairly?	41 (31%)	24 (18%)	66 (50%)
	Are complaints dealt with quickly (within seven days)?	41 (32%)	14 (11%)	72 (57%)

Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	24 (18%)
	No.....	111 (82%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?	
	Don't know who they are.....	36 (27%)
	Very easy.....	10 (7%)
	Easy	16 (12%)
	Neither	37 (28%)
	Difficult.....	22 (16%)
	Very difficult.....	13 (10%)

Section 6: Incentive and earned privileges scheme

Q6.1	Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)	
	Don't know what the IEP scheme is	4 (3%)
	Yes	55 (40%)
	No	62 (46%)
	Don't know	15 (11%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)	
	Don't know what the IEP scheme is	4 (3%)
	Yes	52 (39%)
	No.....	68 (50%)
	Don't know	11 (8%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	17 (13%)
	No.....	118 (87%)
Q6.4	If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?	
	I have not been to segregation in the last 6 months	107 (82%)
	Very well.....	6 (5%)
	Well.....	3 (2%)
	Neither	11 (8%)
	Badly.....	2 (2%)
	Very badly	2 (2%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	101 (78%)
	No.....	28 (22%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	96 (73%)
	No.....	36 (27%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	33 (24%)
	No.....	107 (76%)

Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	9 (7%)
	<i>Never</i>	16 (12%)
	<i>Rarely</i>	35 (26%)
	<i>Some of the time</i>	38 (28%)
	<i>Most of the time</i>	25 (18%)
	<i>All of the time</i>	14 (10%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	64 (45%)
	<i>In the first week</i>	35 (25%)
	<i>More than a week</i>	26 (18%)
	<i>Don't remember</i>	16 (11%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	64 (47%)
	<i>Very helpful</i>	27 (20%)
	<i>Helpful</i>	17 (13%)
	<i>Neither</i>	19 (14%)
	<i>Not very helpful</i>	3 (2%)
	<i>Not at all helpful</i>	6 (4%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	<i>Yes</i>	78 (56%)		
	<i>No</i>	61 (44%)		
Q8.2	Do you feel unsafe now?			
	<i>Yes</i>	35 (26%)		
	<i>No</i>	99 (74%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)			
	<i>Never felt unsafe</i>	61 (45%)	<i>At meal times</i>	14 (10%)
	<i>Everywhere</i>	32 (24%)	<i>At health services</i>	13 (10%)
	<i>Segregation unit</i>	3 (2%)	<i>Visits area</i>	8 (6%)
	<i>Association areas</i>	27 (20%)	<i>In wing showers</i>	22 (16%)
	<i>Reception area</i>	4 (3%)	<i>In gym showers</i>	4 (3%)
	<i>At the gym</i>	7 (5%)	<i>In corridors/stairwells</i>	20 (15%)
	<i>In an exercise yard</i>	22 (16%)	<i>On your landing/wing</i>	27 (20%)
	<i>At work</i>	16 (12%)	<i>In your cell</i>	15 (11%)
	<i>During movement</i>	29 (21%)	<i>At religious services</i>	4 (3%)
	<i>At education</i>	8 (6%)		
Q8.4	Have you been victimised by other prisoners here?			
	<i>Yes</i>	49 (36%)		
	<i>No</i>	88 (64%)		

Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	15 (11%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	22 (16%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	24 (18%)
	<i>Having your canteen/property taken</i>	16 (12%)
	<i>Medication</i>	6 (4%)
	<i>Debt</i>	14 (10%)
	<i>Drugs</i>	13 (9%)
	<i>Your race or ethnic origin</i>	4 (3%)
	<i>Your religion/religious beliefs</i>	1 (1%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	3 (2%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	2 (1%)
	<i>You have a disability</i>	3 (2%)
	<i>You were new here</i>	6 (4%)
	<i>Your offence/ crime</i>	0 (0%)
	<i>Gang related issues</i>	7 (5%)
Q8.6	Have you been victimised by staff here?	
	Yes	36 (26%)
	No	102 (74%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	16 (12%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	8 (6%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	12 (9%)
	<i>Medication</i>	5 (4%)
	<i>Debt</i>	3 (2%)
	<i>Drugs</i>	7 (5%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	5 (4%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	2 (1%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	1 (1%)
	<i>Your age</i>	3 (2%)
	<i>You have a disability</i>	3 (2%)
	<i>You were new here</i>	5 (4%)
	<i>Your offence/ crime</i>	4 (3%)
	<i>Gang related issues</i>	2 (1%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	70 (56%)
	Yes	23 (18%)
	No	33 (26%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	8 (6%)	8 (6%)	30 (22%)	23 (17%)	48 (36%)	18 (13%)
	The nurse	8 (6%)	16 (12%)	55 (40%)	22 (16%)	23 (17%)	12 (9%)
	The dentist	19 (14%)	3 (2%)	7 (5%)	11 (8%)	32 (24%)	62 (46%)
Q9.2	What do you think of the quality of the health service from the following people?						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	12 (9%)	16 (12%)	38 (28%)	23 (17%)	23 (17%)	25 (18%)
	The nurse	10 (7%)	24 (18%)	45 (34%)	22 (16%)	10 (7%)	23 (17%)
	The dentist	37 (28%)	7 (5%)	22 (17%)	24 (18%)	15 (12%)	25 (19%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						4 (3%)
	<i>Very good</i>						10 (7%)
	<i>Good</i>						35 (26%)
	<i>Neither</i>						31 (23%)
	<i>Bad</i>						28 (21%)
	<i>Very bad</i>						26 (19%)
Q9.4	Are you currently taking medication?						
	Yes						78 (57%)
	No						58 (43%)
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?						
	<i>Not taking medication</i>						58 (42%)
	<i>Yes, all my meds</i>						41 (30%)
	<i>Yes, some of my meds</i>						18 (13%)
	<i>No</i>						21 (15%)
Q9.6	Do you have any emotional or mental health problems?						
	Yes						67 (49%)
	No						69 (51%)
Q9.7	Are you being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?						
	<i>Do not have any emotional or mental health problems</i>						69 (51%)
	Yes						26 (19%)
	No						39 (29%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	60 (43%)
	No	78 (57%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	27 (20%)
	No	111 (80%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy.....	81 (60%)
	Easy.....	19 (14%)
	Neither.....	6 (4%)
	Difficult.....	0 (0%)
	Very difficult.....	1 (1%)
	Don't know.....	29 (21%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	43 (31%)
	Easy.....	25 (18%)
	Neither.....	10 (7%)
	Difficult.....	5 (4%)
	Very difficult.....	2 (1%)
	Don't know.....	53 (38%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes.....	32 (24%)
	No.....	102 (76%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes.....	16 (12%)
	No.....	122 (88%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	Did not / do not have a drug problem.....	63 (49%)
	Yes.....	39 (30%)
	No.....	26 (20%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	Did not / do not have an alcohol problem.....	111 (82%)
	Yes.....	14 (10%)
	No.....	11 (8%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	Did not have a problem/ did not receive help.....	85 (65%)
	Yes.....	29 (22%)
	No.....	17 (13%)

Section II: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	8 (6%)	23 (17%)	67 (49%)	20 (14%)	14 (10%)	6 (4%)
	Vocational or skills training	17 (13%)	15 (12%)	46 (36%)	27 (21%)	15 (12%)	8 (6%)
	Education (including basic skills)	18 (14%)	18 (14%)	54 (42%)	26 (20%)	7 (5%)	5 (4%)
	Offending behaviour programmes	20 (16%)	11 (9%)	26 (20%)	27 (21%)	31 (24%)	14 (11%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				18 (14%)
	Prison job				96 (73%)
	Vocational or skills training.....				18 (14%)
	Education (including basic skills).....				22 (17%)
	Offending behaviour programmes				16 (12%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	11 (9%)	48 (38%)	47 (37%)	20 (16%)
	Vocational or skills training	25 (23%)	47 (44%)	26 (24%)	10 (9%)
	Education (including basic skills)	18 (17%)	48 (45%)	31 (29%)	9 (8%)
	Offending behaviour programmes	25 (22%)	43 (38%)	31 (28%)	13 (12%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				22 (16%)
	<i>Never</i>				42 (31%)
	<i>Less than once a week</i>				41 (31%)
	<i>About once a week</i>				20 (15%)
	<i>More than once a week</i>				9 (7%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				48 (36%)
	<i>Yes</i>				61 (45%)
	<i>No</i>				26 (19%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				26 (19%)
	<i>0</i>				42 (31%)
	<i>1 to 2</i>				40 (30%)
	<i>3 to 5</i>				25 (19%)
	<i>More than 5</i>				2 (1%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				11 (8%)
	<i>0</i>				16 (12%)
	<i>1 to 2</i>				36 (26%)
	<i>3 to 5</i>				32 (23%)
	<i>More than 5</i>				44 (32%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				4 (3%)
	<i>0</i>				10 (7%)
	<i>1 to 2</i>				3 (2%)
	<i>3 to 5</i>				26 (19%)
	<i>More than 5</i>				94 (69%)

Q11.9	How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)	
	<i>Less than 2 hours</i>	13 (9%)
	<i>2 to less than 4 hours</i>	20 (14%)
	<i>4 to less than 6 hours</i>	19 (14%)
	<i>6 to less than 8 hours</i>	31 (22%)
	<i>8 to less than 10 hours</i>	24 (17%)
	<i>10 hours or more</i>	20 (14%)
	<i>Don't know</i>	13 (9%)

Section 12: Contact with family and friends

Q12.1	Have staff supported you and helped you to maintain contact with your family/friends while in this prison?	
	<i>Yes</i>	42 (30%)
	<i>No</i>	96 (70%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	60 (43%)
	<i>No</i>	79 (57%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	40 (28%)
	<i>No</i>	101 (72%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	27 (19%)
	<i>Very easy</i>	7 (5%)
	<i>Easy</i>	17 (12%)
	<i>Neither</i>	18 (13%)
	<i>Difficult</i>	30 (22%)
	<i>Very difficult</i>	36 (26%)
	<i>Don't know</i>	4 (3%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	99 (74%)
	<i>No</i>	35 (26%)
Q13.2	What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)	
	<i>Not sentenced/ NA</i>	35 (27%)
	<i>No contact</i>	52 (39%)
	<i>Letter</i>	21 (16%)
	<i>Phone</i>	22 (17%)
	<i>Visit</i>	19 (14%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	93 (70%)
	<i>No</i>	39 (30%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	43 (33%)
	<i>No</i>	88 (67%)

Q13.5	How involved were you in the development of your sentence plan?			
	<i>Do not have a sentence plan/ not sentenced</i>	88 (65%)		
	<i>Very involved</i>	13 (10%)		
	<i>Involved</i>	17 (13%)		
	<i>Neither</i>	5 (4%)		
	<i>Not very involved</i>	3 (2%)		
	<i>Not at all involved</i>	9 (7%)		
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)			
	<i>Do not have a sentence plan/ not sentenced</i>	88 (66%)		
	<i>Nobody</i>	20 (15%)		
	<i>Offender supervisor</i>	20 (15%)		
	<i>Offender manager</i>	10 (7%)		
	<i>Named/ personal officer</i>	8 (6%)		
	<i>Staff from other departments</i>	9 (7%)		
Q13.7	Can you achieve any of your sentence plan targets in this prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	88 (65%)		
	<i>Yes</i>	32 (24%)		
	<i>No</i>	6 (4%)		
	<i>Don't know</i>	9 (7%)		
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	88 (64%)		
	<i>Yes</i>	14 (10%)		
	<i>No</i>	30 (22%)		
	<i>Don't know</i>	5 (4%)		
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?			
	<i>Do not have a sentence plan/ not sentenced</i>	88 (64%)		
	<i>Yes</i>	14 (10%)		
	<i>No</i>	23 (17%)		
	<i>Don't know</i>	12 (9%)		
Q13.10	Do you have a needs based custody plan?			
	<i>Yes</i>	7 (5%)		
	<i>No</i>	65 (49%)		
	<i>Don't know</i>	62 (46%)		
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?			
	<i>Yes</i>	21 (15%)		
	<i>No</i>	115 (85%)		
Q13.12	Do you know of anyone in this prison who can help you with the following on release?: (Please tick all that apply to you.)			
		<i>Do not need help</i>	<i>Yes</i>	
			<i>No</i>	
	Employment	26 (21%)	39 (31%)	61 (48%)
	Accommodation	24 (19%)	48 (38%)	55 (43%)
	Benefits	25 (20%)	45 (35%)	57 (45%)
	Finances	29 (24%)	29 (24%)	65 (53%)
	Education	28 (23%)	35 (28%)	61 (49%)
	Drugs and alcohol	32 (27%)	44 (37%)	43 (36%)

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

<i>Not sentenced</i>	0 (0%)
Yes	71 (54%)
No	61 (46%)

Main comparator and comparator to last time



Prisoner survey responses HMP Guys Marsh 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

		HMP Guys Marsh 2016	Category C training prisons comparator	HMP Guys Marsh 2016	HMP Guys Marsh 2014
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		145	6,580	145	166
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	2%	1%	1%
1.3	Are you sentenced?	100%	100%	100%	99%
1.3	Are you on recall?	8%	9%	8%	17%
1.4	Is your sentence less than 12 months?	10%	6%	10%	4%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	4%	8%	4%	4%
1.5	Are you a foreign national?	7%	11%	7%	5%
1.6	Do you understand spoken English?	99%	99%	99%	99%
1.7	Do you understand written English?	97%	98%	97%	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.)	19%	26%	19%	17%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	5%	4%	5%
1.1	Are you Muslim?	6%	13%	6%	8%
1.11	Are you homosexual/gay or bisexual?	2%	4%	2%	2%
1.12	Do you consider yourself to have a disability?	28%	22%	28%	19%
1.13	Are you a veteran (ex-armed services)?	4%	6%	4%	6%
1.14	Is this your first time in prison?	31%	39%	31%	26%
1.15	Do you have any children under the age of 18?	56%	51%	56%	56%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	70%	45%	70%	58%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	85%	73%	85%	80%
2.3	Were you offered a toilet break?	6%	8%	6%	3%
2.4	Was the van clean?	60%	61%	60%	60%
2.5	Did you feel safe?	75%	79%	75%	79%
2.6	Were you treated well/very well by the escort staff?	73%	73%	73%	75%
2.7	Before you arrived here were you told that you were coming here?	58%	60%	58%	61%
2.7	Before you arrived here did you receive any written information about coming here?	15%	13%	15%	19%
2.8	When you first arrived here did your property arrive at the same time as you?	76%	85%	76%	81%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	60%	53%	60%	69%
3.2	When you were searched in reception, was this carried out in a respectful way?	84%	85%	84%	83%
3.3	Were you treated well/very well in reception?	83%	75%	83%	79%
	When you first arrived:				
3.4	Did you have any problems?	61%	61%	61%	61%
3.4	Did you have any problems with loss of property?	29%	19%	29%	23%
3.4	Did you have any housing problems?	16%	13%	16%	16%
3.4	Did you have any problems contacting employers?	2%	2%	2%	3%
3.4	Did you have any problems contacting family?	18%	19%	18%	19%
3.4	Did you have any problems ensuring dependants were being looked after?	3%	2%	3%	3%
3.4	Did you have any money worries?	12%	13%	12%	14%
3.4	Did you have any problems with feeling depressed or suicidal?	17%	15%	17%	16%
3.4	Did you have any physical health problems?	13%	13%	13%	12%
3.4	Did you have any mental health problems?	30%	18%	30%	19%
3.4	Did you have any problems with needing protection from other prisoners?	7%	5%	7%	7%
3.4	Did you have problems accessing phone numbers?	13%	16%	13%	13%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	32%	36%	32%	41%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	82%	74%	82%	85%
3.6	A shower?	25%	28%	25%	26%
3.6	A free telephone call?	30%	41%	30%	27%
3.6	Something to eat?	50%	56%	50%	46%
3.6	PIN phone credit?	46%	50%	46%	55%
3.6	Toiletries/ basic items?	45%	48%	45%	47%

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction continued					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	52%	53%	52%	60%
3.7	Someone from health services?	68%	70%	68%	71%
3.7	A Listener/Samaritans?	26%	33%	26%	41%
3.7	Prison shop/ canteen?	22%	25%	22%	22%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	37%	50%	37%	51%
3.8	Support was available for people feeling depressed or suicidal?	31%	40%	31%	35%
3.8	How to make routine requests?	31%	44%	31%	37%
3.8	Your entitlement to visits?	22%	39%	22%	33%
3.8	Health services?	39%	52%	39%	46%
3.8	The chaplaincy?	38%	48%	38%	49%
3.9	Did you feel safe on your first night here?	70%	80%	70%	79%
3.10	Have you been on an induction course?	88%	90%	88%	93%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	48%	60%	48%	54%
3.12	Did you receive an education (skills for life) assessment?	86%	84%	86%	84%
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?	35%	43%	35%	54%
4.1	Attend legal visits?	39%	45%	39%	49%
4.1	Get bail information?	14%	14%	14%	17%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	40%	39%	40%	41%
4.3	Can you get legal books in the library?	34%	41%	34%	47%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	44%	66%	44%	66%
4.4	Are you normally able to have a shower every day?	78%	91%	78%	91%
4.4	Do you normally receive clean sheets every week?	39%	69%	39%	71%
4.4	Do you normally get cell cleaning materials every week?	50%	64%	50%	80%
4.4	Is your cell call bell normally answered within five minutes?	31%	34%	31%	41%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	71%	68%	71%	76%
4.4	Can you normally get your stored property, if you need to?	17%	23%	17%	24%
4.5	Is the food in this prison good/very good?	34%	31%	34%	22%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	49%	48%	49%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	40%	55%	40%	65%
4.8	Are your religious beliefs respected?	40%	52%	40%	49%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	55%	58%	55%	71%
4.10	Is it easy/very easy to attend religious services?	42%	50%	42%	41%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	83%	80%	83%	87%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	54%	55%	54%	63%
5.2	Do you feel applications are dealt with quickly (within seven days)?	32%	38%	32%	46%
5.3	Is it easy to make a complaint?	55%	59%	55%	60%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	27%	33%	27%	33%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	16%	28%	16%	34%
5.5	Have you ever been prevented from making a complaint when you wanted to?	18%	19%	18%	25%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	19%	29%	19%	37%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	48%	40%	54%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	45%	39%	42%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	13%	9%	13%	7%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	37%	36%	37%	34%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	78%	79%	78%	85%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	73%	73%	73%	75%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	24%	29%	24%	30%
7.4	Do staff normally speak to you most of the time/all of the time during association?	29%	21%	29%	25%
7.5	Do you have a personal officer?	55%	63%	55%	75%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	61%	62%	61%	64%

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SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	56%	38%	56%	40%
8.2	Do you feel unsafe now?	26%	16%	26%	23%
8.4	Have you been victimised by other prisoners here?	36%	28%	36%	31%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	11%	11%	11%	15%
8.5	Hit, kicked or assaulted you?	16%	8%	16%	15%
8.5	Sexually abused you?	1%	1%	1%	1%
8.5	Threatened or intimidated you?	18%	16%	18%	21%
8.5	Taken your canteen/property?	12%	7%	12%	10%
8.5	Victimised you because of medication?	5%	4%	5%	6%
8.5	Victimised you because of debt?	10%	5%	10%	8%
8.5	Victimised you because of drugs?	10%	4%	10%	8%
8.5	Victimised you because of your race or ethnic origin?	3%	4%	3%	5%
8.5	Victimised you because of your religion/religious beliefs?	1%	3%	1%	4%
8.5	Victimised you because of your nationality?	2%	3%	2%	5%
8.5	Victimised you because you were from a different part of the country?	2%	4%	2%	5%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.5	Victimised you because of your sexual orientation?	0%	2%	0%	1%
8.5	Victimised you because of your age?	2%	3%	2%	2%
8.5	Victimised you because you have a disability?	2%	3%	2%	3%
8.5	Victimised you because you were new here?	5%	5%	5%	6%
8.5	Victimised you because of your offence/crime?	0%	4%	0%	4%
8.5	Victimised you because of gang related issues?	5%	5%	5%	5%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	26%	28%	26%	35%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	12%	10%	12%	11%
8.7	Hit, kicked or assaulted you?	6%	4%	6%	5%
8.7	Sexually abused you?	2%	1%	2%	1%
8.7	Threatened or intimidated you?	9%	12%	9%	14%
8.7	Victimised you because of medication?	4%	4%	4%	3%
8.7	Victimised you because of debt?	2%	2%	2%	3%
8.7	Victimised you because of drugs?	5%	2%	5%	2%
8.7	Victimised you because of your race or ethnic origin?	5%	4%	5%	3%
8.7	Victimised you because of your religion/religious beliefs?	4%	3%	4%	5%
8.7	Victimised you because of your nationality?	2%	3%	2%	2%
8.7	Victimised you because you were from a different part of the country?	2%	3%	2%	5%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	0%
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	0%
8.7	Victimised you because of your age?	2%	2%	2%	1%
8.7	Victimised you because you have a disability?	2%	3%	2%	2%
8.7	Victimised you because you were new here?	4%	4%	4%	3%
8.7	Victimised you because of your offence/crime?	3%	4%	3%	4%
8.7	Victimised you because of gang related issues?	2%	2%	2%	2%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	41%	40%	41%	38%

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SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	28%	28%	28%	39%
9.1	Is it easy/very easy to see the nurse?	52%	49%	52%	57%
9.1	Is it easy/very easy to see the dentist?	8%	14%	8%	19%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	43%	49%	43%	44%
9.2	The nurse?	56%	57%	56%	64%
9.2	The dentist?	31%	44%	31%	49%
9.3	The overall quality of health services?	35%	42%	35%	43%
9.4	Are you currently taking medication?	57%	50%	57%	44%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	74%	83%	74%	77%
9.6	Do you have any emotional well being or mental health problems?	49%	64%	49%	32%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	40%	50%	40%	40%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	44%	25%	44%	32%
10.2	Did you have a problem with alcohol when you came into this prison?	20%	16%	20%	21%
10.3	Is it easy/very easy to get illegal drugs in this prison?	74%	43%	74%	63%
10.4	Is it easy/very easy to get alcohol in this prison?	49%	24%	49%	50%
10.5	Have you developed a problem with drugs since you have been in this prison?	24%	10%	24%	19%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	12%	7%	12%	10%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	60%	61%	60%	62%
10.8	Have you received any support or help with your alcohol problem while in this prison?	56%	62%	56%	57%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	63%	76%	63%	73%

Main comparator and comparator to last time

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SECTION 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	65%	48%	65%	56%
11.1	Vocational or skills training?	48%	42%	48%	48%
11.1	Education (including basic skills)?	56%	56%	56%	56%
11.1	Offending behaviour programmes?	29%	24%	29%	36%
Are you currently involved in any of the following activities:					
11.2	A prison job?	73%	59%	73%	75%
11.2	Vocational or skills training?	14%	16%	14%	7%
11.2	Education (including basic skills)?	17%	22%	17%	12%
11.2	Offending behaviour programmes?	12%	11%	12%	13%
11.3	Have you had a job while in this prison?	91%	84%	91%	89%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	42%	44%	42%	46%
11.3	Have you been involved in vocational or skills training while in this prison?	77%	75%	77%	79%
For those who have had vocational or skills training while in this prison:					
11.3	Do you feel the vocational or skills training will help you on release?	57%	57%	57%	50%
11.3	Have you been involved in education while in this prison?	83%	80%	83%	81%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	55%	58%	55%	50%
11.3	Have you been involved in offending behaviour programmes while in this prison?	78%	71%	78%	80%
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?	49%	50%	49%	50%
11.4	Do you go to the library at least once a week?	22%	42%	22%	29%
11.5	Does the library have a wide enough range of materials to meet your needs?	45%	45%	45%	37%
11.6	Do you go to the gym three or more times a week?	20%	33%	20%	25%
11.7	Do you go outside for exercise three or more times a week?	55%	53%	55%	60%
11.8	Do you go on association more than five times each week?	69%	62%	69%	69%
11.9	Do you spend ten or more hours out of your cell on a weekday?	14%	17%	14%	14%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	30%	33%	30%	30%
12.2	Have you had any problems with sending or receiving mail?	43%	42%	43%	45%
12.3	Have you had any problems getting access to the telephones?	28%	21%	28%	24%
12.4	Is it easy/ very easy for your friends and family to get here?	17%	28%	17%	18%

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SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	74%	81%	74%	85%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	54%	36%	54%	36%
13.2	Contact by letter?	22%	33%	22%	34%
13.2	Contact by phone?	23%	26%	23%	30%
13.2	Contact by visit?	20%	32%	20%	25%
13.3	Do you have a named offender supervisor in this prison?	71%	76%	71%	76%
For those who are sentenced:					
13.4	Do you have a sentence plan?	33%	62%	33%	51%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	64%	54%	64%	47%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	43%	46%	43%	44%
13.6	Offender supervisor?	43%	38%	43%	37%
13.6	Offender manager?	22%	28%	22%	31%
13.6	Named/ personal officer?	17%	12%	17%	12%
13.6	Staff from other departments?	20%	15%	20%	14%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	68%	61%	68%	59%
13.8	Are there plans for you to achieve any of your targets in another prison?	29%	19%	29%	28%
13.9	Are there plans for you to achieve any of your targets in the community?	29%	29%	29%	27%
13.10	Do you have a needs based custody plan?	5%	6%	5%	9%
13.11	Do you feel that any member of staff has helped you to prepare for release?	15%	15%	15%	19%
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	39%	34%	39%	37%
13.12	Accommodation?	47%	36%	47%	37%
13.12	Benefits?	44%	38%	44%	42%
13.12	Finances?	31%	27%	31%	29%
13.12	Education?	37%	34%	37%	34%
13.12	Drugs and alcohol?	51%	42%	51%	46%
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	54%	54%	54%	52%

Diversity analysis



Key question responses (ethnicity) HMP Guys Marsh 2016

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

Key to tables

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
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	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		26	109
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	8%	6%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	96%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	4%
1.1	Are you Muslim?	28%	1%
1.12	Do you consider yourself to have a disability?	40%	26%
1.13	Are you a veteran (ex-armed services)?	4%	4%
1.14	Is this your first time in prison?	24%	33%
2.6	Were you treated well/very well by the escort staff?	68%	75%
2.7	Before you arrived here were you told that you were coming here?	61%	57%
3.2	When you were searched in reception, was this carried out in a respectful way?	65%	89%
3.3	Were you treated well/very well in reception?	77%	85%
3.4	Did you have any problems when you first arrived?	74%	58%
3.7	Did you have access to someone from health care when you first arrived here?	64%	71%
3.9	Did you feel safe on your first night here?	71%	71%
3.10	Have you been on an induction course?	88%	88%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	24%	34%

Diversity analysis

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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
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4.4	Are you normally offered enough clean, suitable clothes for the week?	24%	48%
4.4	Are you normally able to have a shower every day?	68%	79%
4.4	Is your cell call bell normally answered within five minutes?	28%	34%
4.5	Is the food in this prison good/very good?	36%	35%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	37%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	32%	42%
4.8	Do you feel your religious beliefs are respected?	42%	38%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	48%	55%
5.1	Is it easy to make an application?	72%	86%
5.3	Is it easy to make a complaint?	44%	58%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	26%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	40%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	5%	13%
7.1	Do most staff, in this prison, treat you with respect?	61%	81%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	81%	72%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	20%	30%
7.4	Do you have a personal officer?	44%	57%
8.1	Have you ever felt unsafe here?	56%	53%
8.2	Do you feel unsafe now?	46%	22%
8.3	Have you been victimised by other prisoners?	37%	34%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	17%	18%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	9%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	9%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	3%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	46%	23%
8.7	Have you ever felt threatened or intimidated by staff here?	17%	8%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	22%	1%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	17%	1%
8.7	Have you been victimised because of your nationality? (By staff)	9%	1%
8.7	Have you been victimised because you have a disability? (By staff)	5%	2%
9.1	Is it easy/very easy to see the doctor?	26%	30%
9.1	Is it easy/ very easy to see the nurse?	54%	52%
9.4	Are you currently taking medication?	54%	58%
9.6	Do you feel you have any emotional well being/mental health issues?	31%	51%
10.3	Is it easy/very easy to get illegal drugs in this prison?	63%	76%
11.2	Are you currently working in the prison?	77%	74%
11.2	Are you currently undertaking vocational or skills training?	13%	13%
11.2	Are you currently in education (including basic skills)?	13%	18%
11.2	Are you currently taking part in an offending behaviour programme?	23%	11%
11.4	Do you go to the library at least once a week?	17%	22%
11.6	Do you go to the gym three or more times a week?	17%	22%
11.7	Do you go outside for exercise three or more times a week?	54%	55%
11.8	On average, do you go on association more than five times each week?	67%	69%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	9%	16%
12.2	Have you had any problems sending or receiving mail?	50%	41%
12.3	Have you had any problems getting access to the telephones?	42%	25%

Diversity Analysis



Key question responses (disability) HMP Guys Marsh 2016

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	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		40	101
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	13%	5%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	97%	97%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	26%	16%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	8%	2%
1.1	Are you Muslim?	0%	8%
1.12	Do you consider yourself to have a disability?	-	-
1.13	Are you a veteran (ex-armed services)?	7%	2%
1.14	Is this your first time in prison?	25%	33%
2.6	Were you treated well/very well by the escort staff?	72%	73%
2.7	Before you arrived here were you told that you were coming here?	67%	55%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	83%
3.3	Were you treated well/very well in reception?	85%	83%
3.4	Did you have any problems when you first arrived?	76%	55%
3.7	Did you have access to someone from health care when you first arrived here?	64%	70%
3.9	Did you feel safe on your first night here?	69%	71%
3.10	Have you been on an induction course?	80%	91%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	32%	35%

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
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	36%	47%
4.4	Are you normally able to have a shower every day?	74%	79%
4.4	Is your cell call bell normally answered within five minutes?	20%	36%
4.5	Is the food in this prison good/very good?	29%	35%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	38%	53%
4.7	Are you able to speak to a Listener at any time, if you want to?	36%	41%
4.8	Do you feel your religious beliefs are respected?	41%	38%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	56%
5.1	Is it easy to make an application?	74%	87%
5.3	Is it easy to make a complaint?	45%	59%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	31%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	26%	7%
7.1	Do most staff, in this prison, treat you with respect?	73%	80%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	60%	78%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	14%	34%
7.4	Do you have a personal officer?	35%	62%
8.1	Have you ever felt unsafe here?	68%	50%
8.2	Do you feel unsafe now?	40%	21%
8.3	Have you been victimised by other prisoners?	49%	30%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	23%	15%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	1%
8.5	Have you been victimised because of your age? (By prisoners)	5%	0%
8.5	Have you been victimised because you have a disability? (By prisoners)	5%	1%

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
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	30%	25%
8.7	Have you ever felt threatened or intimidated by staff here?	13%	7%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	3%
8.7	Have you been victimised because of your nationality? (By staff)	5%	1%
8.7	Have you been victimised because of your age? (By staff)	5%	1%
8.7	Have you been victimised because you have a disability? (By staff)	5%	1%
9.1	Is it easy/very easy to see the doctor?	20%	32%
9.1	Is it easy/ very easy to see the nurse?	45%	54%
9.4	Are you currently taking medication?	64%	54%
9.6	Do you feel you have any emotional well being/mental health issues?	67%	40%
10.3	Is it easy/very easy to get illegal drugs in this prison?	77%	71%
11.2	Are you currently working in the prison?	71%	74%
11.2	Are you currently undertaking vocational or skills training?	17%	11%
11.2	Are you currently in education (including basic skills)?	17%	16%
11.2	Are you currently taking part in an offending behaviour programme?	14%	11%
11.4	Do you go to the library at least once a week?	16%	25%
11.6	Do you go to the gym three or more times a week?	6%	26%
11.7	Do you go outside for exercise three or more times a week?	45%	58%
11.8	On average, do you go on association more than five times each week?	69%	71%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	10%	17%
12.2	Have you had any problems sending or receiving mail?	51%	39%
12.3	Have you had any problems getting access to the telephones?	35%	24%



Prisoner survey responses HMP Guys Marsh 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

		Saxon Wing	All other wings
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		18	124
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	1%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	22%	7%
1.4	Is your sentence less than 12 months?	16%	9%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	4%
1.5	Are you a foreign national?	16%	6%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	94%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	6%	21%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	3%
1.1	Are you Muslim?	0%	7%
1.11	Are you homosexual/gay or bisexual?	6%	2%
1.12	Do you consider yourself to have a disability?	56%	25%
1.13	Are you a veteran (ex-armed services)?	6%	3%
1.14	Is this your first time in prison?	6%	34%
1.15	Do you have any children under the age of 18?	66%	55%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	84%	68%
2.5	Did you feel safe?	84%	73%
2.6	Were you treated well/very well by the escort staff?	84%	71%
2.7	Before you arrived here were you told that you were coming here?	77%	55%
2.8	When you first arrived here did your property arrive at the same time as you?	78%	77%

Key to tables

	Any percentage highlighted in green is significantly better	Saxon Wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	66%	58%
3.2	When you were searched in reception, was this carried out in a respectful way?	94%	83%
3.3	Were you treated well/very well in reception?	88%	82%
	When you first arrived:		
3.4	Did you have any problems?	82%	58%
3.4	Did you have any problems with loss of property?	32%	26%
3.4	Did you have any housing problems?	32%	14%
3.4	Did you have any problems contacting employers?	0%	2%
3.4	Did you have any problems contacting family?	18%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	7%	3%
3.4	Did you have any money worries?	13%	13%
3.4	Did you have any problems with feeling depressed or suicidal?	25%	16%
3.4	Did you have any physical health problems?	18%	13%
3.4	Did you have any mental health problems?	50%	27%
3.4	Did you have any problems with needing protection from other prisoners?	7%	7%
3.4	Did you have problems accessing phone numbers?	18%	13%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	88%	80%
3.6	A shower?	28%	26%
3.6	A free telephone call?	16%	32%
3.6	Something to eat?	61%	49%
3.6	PIN phone credit?	39%	47%
3.6	Toiletries/ basic items?	44%	45%

Key to tables

	Any percentage highlighted in green is significantly better	Saxon Wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
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?	61%	51%
3.7	Someone from health services?	50%	70%
3.7	A Listener/Samaritans?	16%	28%
3.7	Prison shop/ canteen?	12%	25%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	36%	37%
3.8	Support was available for people feeling depressed or suicidal?	53%	28%
3.8	How to make routine requests?	41%	29%
3.8	Your entitlement to visits?	30%	22%
3.8	Health services?	36%	40%
3.8	The chaplaincy?	41%	38%
3.9	Did you feel safe on your first night here?	78%	69%
3.10	Have you been on an induction course?	84%	90%
3.12	Did you receive an education (skills for life) assessment?	72%	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?	23%	37%
4.1	Attend legal visits?	33%	40%
4.1	Get bail information?	20%	13%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	38%	41%
4.3	Can you get legal books in the library?	27%	35%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	39%	44%
4.4	Are you normally able to have a shower every day?	78%	77%
4.4	Do you normally receive clean sheets every week?	61%	35%
4.4	Do you normally get cell cleaning materials every week?	56%	50%
4.4	Is your cell call bell normally answered within five minutes?	39%	29%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	72%	70%
4.4	Can you normally get your stored property, if you need to?	28%	16%
4.5	Is the food in this prison good/very good?	28%	35%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	64%	45%
4.7	Are you able to speak to a Listener at any time, if you want to?	34%	42%
4.8	Are your religious beliefs are respected?	50%	38%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	70%	52%
4.10	Is it easy/very easy to attend religious services?	61%	39%

Key to tables

	Any percentage highlighted in green is significantly better	Saxon Wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	72%	84%
5.3	Is it easy to make a complaint?	59%	53%
5.5	Have you ever been prevented from making a complaint when you wanted to?	13%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	14%	19%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	23%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	57%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	36%	8%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	93%	77%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	53%	76%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	34%	22%
7.4	Do staff normally speak to you most of the time/all of the time during association?	17%	30%
7.5	Do you have a personal officer?	34%	59%

Key to tables

	Any percentage highlighted in green is significantly better	Saxon Wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	61%	55%
8.2	Do you feel unsafe now?	28%	26%
8.4	Have you been victimised by other prisoners here?	53%	32%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	12%	11%
8.5	Hit, kicked or assaulted you?	23%	15%
8.5	Sexually abused you?	6%	0%
8.5	Threatened or intimidated you?	17%	17%
8.5	Taken your canteen/property?	23%	9%
8.5	Victimised you because of medication?	17%	3%
8.5	Victimised you because of debt?	17%	9%
8.5	Victimised you because of drugs?	12%	9%
8.5	Victimised you because of your race or ethnic origin?	0%	3%
8.5	Victimised you because of your religion/religious beliefs?	0%	1%
8.5	Victimised you because of your nationality?	0%	3%
8.5	Victimised you because you were from a different part of the country?	0%	3%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	0%	0%
8.5	Victimised you because of your age?	0%	2%
8.5	Victimised you because you have a disability?	0%	3%
8.5	Victimised you because you were new here?	0%	5%
8.5	Victimised you because of your offence/crime?	0%	0%
8.5	Victimised you because of gang related issues?	0%	6%

Key to tables

	Any percentage highlighted in green is significantly better	Saxon Wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	44%	24%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	22%	10%
8.7	Hit, kicked or assaulted you?	16%	4%
8.7	Sexually abused you?	0%	2%
8.7	Threatened or intimidated you?	0%	10%
8.7	Victimised you because of medication?	12%	3%
8.7	Victimised you because of debt?	0%	3%
8.7	Victimised you because of drugs?	12%	4%
8.7	Victimised you because of your race or ethnic origin?	0%	5%
8.7	Victimised you because of your religion/religious beliefs?	0%	4%
8.7	Victimised you because of your nationality?	0%	3%
8.7	Victimised you because you were from a different part of the country?	0%	2%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	0%	3%
8.7	Victimised you because you have a disability?	6%	2%
8.7	Victimised you because you were new here?	0%	4%
8.7	Victimised you because of your offence/crime?	0%	3%
8.7	Victimised you because of gang related issues?	0%	2%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	32%	28%
9.1	Is it easy/very easy to see the nurse?	47%	53%
9.1	Is it easy/very easy to see the dentist?	18%	6%
9.4	Are you currently taking medication?	77%	54%
9.6	Do you have any emotional well being or mental health problems?	83%	44%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	77%	40%
10.2	Did you have a problem with alcohol when you came into this prison?	36%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	84%	72%
10.4	Is it easy/very easy to get alcohol in this prison?	66%	46%
10.5	Have you developed a problem with drugs since you have been in this prison?	44%	20%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	34%	8%

Key to tables

	Any percentage highlighted in green is significantly better	Saxon Wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	61%	66%
11.1	Vocational or skills training?	33%	51%
11.1	Education (including basic skills)?	64%	56%
11.1	Offending Behaviour Programmes?	54%	26%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	60%	76%
11.2	Vocational or skills training?	7%	15%
11.2	Education (including basic skills)?	14%	18%
11.2	Offending Behaviour Programmes?	14%	12%
11.4	Do you go to the library at least once a week?	0%	24%
11.5	Does the library have a wide enough range of materials to meet your needs?	50%	44%
11.6	Do you go to the gym three or more times a week?	7%	22%
11.7	Do you go outside for exercise three or more times a week?	56%	55%
11.8	Do you go on association more than five times each week?	64%	70%
11.9	Do you spend ten or more hours out of your cell on a weekday?	0%	17%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	32%	31%
12.2	Have you had any problems with sending or receiving mail?	47%	43%
12.3	Have you had any problems getting access to the telephones?	28%	28%
12.4	Is it easy/ very easy for your friends and family to get here?	12%	18%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	43%	75%
13.10	Do you have a needs based custody plan?	0%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	17%	15%