

Report on an unannounced inspection of

HMP Lincoln

by HM Chief Inspector of Prisons

30 January–10 February 2017

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This publication is available for download at: <http://www.justiceinspectorates.gov.uk/hmiprisons/>

Printed and published by:
Her Majesty's Inspectorate of Prisons
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London
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Glossary of terms

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

Introduction

HMP Lincoln is a Victorian prison holding over 600 remand and sentenced adult and young adult men. It remains overcrowded, which, along with the age of the prison, means there are significant challenges in keeping conditions decent for those held. At recent previous inspections, we have identified a number of concerns about treatment and conditions, although by the time of our last inspection in November 2013, we saw encouraging improvements across a range of outcomes. At this inspection we found that while some progress had been maintained, deterioration was also evident.

Like other local prisons, Lincoln faced increased levels of violence, often related to the prevalence of drugs and the difficulty of managing the problem with reduced staff numbers. In recent months it had received men from other prisons across the country following concerted disorder at those establishments, adding to the already considerable number already held there from outside the Lincolnshire area. The population was now more complex and many more men disclosed vulnerabilities in our survey, including a significant number stating they had mental health problems.

Those men arriving from other prisons following disturbances had been sensibly managed and violence reduction work, while rudimentary, was appropriate and developing. The way the prison tackled 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 effective, and other prisons could learn from its approach, particularly the good partnership working with local police.

Good care was provided for the most vulnerable men in the population, but in some cases, the prison's response to death in custody investigations, as well as its application of the assessment, care in custody and teamwork (ACCT) case management processes for prisoners at risk of suicide or self-harm, was disappointing. Support for newly arrived prisoners had improved overall, but there remained significant delays in reception; this potentially created risks for prisoners on their first night, an area of concern identified in death in custody reports. Work with segregated prisoners had improved, but the oversight and management of the use of force was seriously deficient and something we have addressed in one of our main recommendations.

The quality of relationships between prisoners and staff was a real strength, and underpinned much that was good at the prison. The new governor had instituted a 'back to basics' approach, which aimed to ensure the prison was cleaner and more decent. We found some good progress as a consequence, although more needed to be done. Faith provision was very good and we considered some aspects of complaints management to be good practice. Health care provision had suffered from severe staffing shortfalls, but was maintaining some reasonable outcomes. Equalities work however, had been neglected and was weak. We have addressed this failing in our main recommendations.

Outcomes in purposeful activity and resettlement had deteriorated since the last inspection. Positive steps had been taken to stabilise and regularise the regime, but time out of cell was not sufficient. The lack of a senior learning and skills manager for several months had led to the prison losing focus, and while the issue was beginning to be addressed, the provision had regressed and now needed significant attention to ensure activities supported prisoners' rehabilitation. Resourcing to improve the considerable basic skills needs was insufficient. Some innovative work to manage men through their sentences and prepare them for release was evident but it was poorly coordinated and not generally driven by custody plans or relevant risk factors. This undermined its effectiveness.

Lincoln demonstrated many of the problems associated with old and overcrowded Victorian prisons, struggling to cope with keeping people in a safe and decent environment, while delivering a regime and interventions that support their rehabilitation. It had, however, achieved some success in addressing these challenges, and the new governor and his management team had redoubled efforts to build on the institution's strengths. The priority it was giving to trying to get the basics right while treating prisoners as individuals was to be commended.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

March 2017

Fact page

Task of the establishment

HMP Lincoln is a category B local prison serving the courts of Lincolnshire. It also takes prisoners from other East Midland local prisons to relieve overcrowding. It holds remand and convicted adult and young adult male prisoners, including foreign nationals, life-sentenced prisoners and prisoners serving indeterminate sentences for public protection.

Prison status

Public

Region

East

Number held

625

Certified normal accommodation

408

Operational capacity

729

Date of last full inspection

11–22 November 2013

Brief history

Lincoln opened in 1872. Parts of the prison were Grade II listed buildings. Three of the four main residential units were of the original Victorian design. E wing was opened in 1992.

Short description of residential units

Wing A held up to 216 prisoners, B up to 150 prisoners and C up to 198. They held a mixture of remand, convicted and sentenced adult and young adult prisoners. Wing A contained the first night centre and induction landing and E held up to 165 vulnerable prisoners, predominantly sex offenders.

Name of governor/director

Paul Yates

Escort contractor

GEOAmey

Health service provider

Nottinghamshire Healthcare NHS Foundation Trust

Learning and skills providers

NOVUS

Independent Monitoring Board chair

David Libiszewski

Community rehabilitation company (CRC)

Humberside, Lincolnshire and North Yorkshire CRC (owned by Purple Futures)

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 *Most men were generally positive about escort staff. Staff and peer mentors provided good support on arrival but the delays in reception were poor. Levels of violence were too high and some incidents were serious. There was a robust and developing focus on making the prison safer. Oversight of deaths in custody recommendations needed improvement. Levels of self-harm were high and some case work needed to be better, but care for the most vulnerable was generally good. Security arrangements were appropriate and challenges with illegal drugs well managed. The incentives and earned privileges (IEP) scheme was not used effectively to manage minor poor behaviour. The recent large backlog of adjudications had a negative effect on confidence in the process. Oversight of use of force was seriously deficient. Segregation arrangements had improved as had most aspects of substance misuse support. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S2 *At the last inspection in November 2013 we found that outcomes for prisoners in Lincoln were not sufficiently good against this healthy prison test. We made 19 recommendations in the area of safety. At this follow-up inspection we found that six of the recommendations had been achieved, six had been partially achieved and seven had not been achieved.*

S3 Most prisoners said escort staff treated them well. The Supporting People After Remand or Conviction project provided prisoners coming from Lincoln Magistrates' Court with good support. Reception processes took too long and prisoners were often locked straight into their cells late in the evening. Despite these delays and a challenging mix of new prisoners, reception staff were generally welcoming, polite and professional. First night interviews were adequate, but staff could have attempted to find out more about prisoners' vulnerabilities. Peer supporters were used well in reception. First night arrangements had improved since our last inspection, but the condition of the cells in the first night centre was still poor. Induction was not comprehensive, but deficiencies were offset by the new well thought-through prisoner advice desk (PAD) service.

S4 Levels of violence had increased since the last inspection and were high overall. The number of assaults on staff was also relatively high. In our survey, fewer prisoners than the comparator said they had been victimised by prisoners or staff; however, over a quarter said they felt unsafe at the time of the inspection. The strategic management of violence reduction was improving but some processes for dealing with poor behaviour had not yet been fully embedded. There continued to be a heavy reliance on the use of the basic level of the IEP scheme.

S5 There had been four self-inflicted deaths since the previous inspection but no overarching plan to monitor the implementation of key Prisons and Probation Ombudsman recommendations. The number of incidents of actual self-harm was high, but a few prisoners with complex needs accounted for many of the incidents. The number of prisoners on assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm was high, but had declined over the previous few months. Although some documents were reasonably good, too many were inadequate. However, prisoners at risk of self-harm told us they received very good support from staff and the reviews we attended were conducted well. The Listener scheme (in which prisoners trained by the Samaritans provide confidential emotional support to fellow prisoners) was well supported and prisoners had good access to Listeners.

- S6 The safeguarding adults policy reflected the key principles outlined in the Prison Service instruction on safeguarding. Staff were not trained in adult safeguarding, but said they would inform the safer custody team or health care department if they believed a prisoner was at risk.
- S7 Security measures were generally proportionate. Intelligence gathering was comprehensive and security information analysed well; the prison was aware of the population's offending profile and the major security challenges. Action to address concerns was detailed in relevant security objectives. Although the prison took steps to tackle them, target-searching and suspicion testing were behind schedule. The prison had an excellent relationship with the local police who provided considerable support. There had been some impressive work to manage the challenges around 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). The prison's drug supply reduction policy and action plan meant sources of supply were identified and the mandatory drug testing positive rate was relatively low.
- S8 The IEP scheme was not used sufficiently to manage minor poor behaviour. While few prisoners remained on the basic level for long, their regime was poor. The number of adjudications had risen significantly since the last inspection. A considerable number had not been processed promptly enough and had to be dismissed.
- S9 The oversight and management of force was seriously deficient. Documentation was poorly completed, we found incidents that had not been reported and very few use of force incidents were reviewed. Incidents in which a baton had been drawn or used had not been investigated. Not all planned interventions were video-recorded. Under-recording meant we could not be completely confident of how frequently force was used. Special accommodation had not been used for two years.
- S10 The segregation unit environment was generally good, although there was graffiti on some cell doors. The use of segregation had declined substantially since our last inspection, and was mostly used to maintain good order or discipline, although monitoring of segregation was very limited. The introduction of reintegration planning meant fewer prisoners were held for long periods; the majority now returned to the normal prison location. The regime had improved and prisoners could apply to attend activities away from the unit. Staff-prisoner relationships were good; staff knew the prisoners well and were respectful.
- S11 The drug strategy committee meeting was poorly attended and did not effectively steer the prison's strategic approach to drug treatment. Psychosocial support for prisoners with substance misuse problems was now better than at the last inspection following the introduction of the Trans4orm programme and better one-to-one options. However, prisoners' access to services was regularly interrupted by regime curtailments. Prisoners with clinical substance misuse treatment needs were not routinely placed in cells with observation hatches during their first night, which made monitoring difficult. Nevertheless, monitoring did take place on the first night. Ongoing clinical nursing support had improved, as had the supervision of controlled drugs administration.

Respect

S12 *The prison was now cleaner, but the buildings were old and shabby and more work was needed to make all areas acceptable. The prison remained overcrowded. Staff-prisoner relationships were generally good. Equalities work was underdeveloped and assistance for some protected characteristics needed to be improved. Faith provision was appropriate and provided good support. Complaints were generally well managed. Legal visits did not always take place in privacy. The health care department provided appropriate support overall. The food and canteen provision was relatively good. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S13 *At the last inspection in November 2013 we found that outcomes for prisoners in Lincoln were reasonably good against this healthy prison test. We made 24 recommendations in the area of respect.² At this follow-up inspection we found that 11 of the recommendations had been achieved, one had been partially achieved and 12 had not been achieved.*

S14 Communal areas in residential units were clean, and outside areas were cleaned daily. The prison remained overcrowded. There was evidence that the environmental conditions in the prison had recently improved but more needed to be done. The condition of too many cells was poor. Many lacked basic facilities, such as curtains and lockable cupboards. Toilets were poorly screened and many were dirty. The heating in cells was ineffective and many prisoners told us they slept in their clothes to keep warm. There was little evidence of graffiti or offensive displays. Many showers required refurbishment. Despite poor survey results, we found adequate provisions of clean clothing and bedding, although some clothing was of poor quality.

S15 Despite a challenging mix of prisoners, particularly over recent months, staff-prisoner relationships were generally good and most prisoners in our survey said staff treated them respectfully. What we observed echoed this. Peer and PAD workers provided some invaluable support to prisoners and staff. Consultation arrangements were good.

S16 Equalities work was less focused than at our last inspection, which the new governor recognised. He had started to revive this area of work. While monitoring was in place it was not used to develop services. Prisoner representatives supported equalities work well, although it would have been useful if they had been trained for the role. Equality concerns were successfully raised through the prisoner representative group, but more specific consultation was required to ensure prisoners' needs were met.

S17 The number of black and minority ethnic prisoners had decreased since our last inspection. In our survey, most of these men said they felt staff respected them, but they were still more negative than their white counterparts in several other areas. While interactions we observed between staff and black and minority ethnic prisoners were respectful, discrimination incident reporting forms alleging racism were not investigated robustly enough. In our survey, foreign national prisoners reported poorer experiences in many areas. There was little proactive support for them and staff lacked awareness of their language, welfare and cultural needs. Foreign nationals did not have sufficient access to an immigration officer and no independent immigration advice was provided. Some detainees had stayed at the prison for too long.

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.

- S18 In our survey, 34% of men identified as having a disability. We saw some good examples of individual support for people with disabilities but more needed to be done to identify and assist these men. Personal emergency evacuation plans and care plans were in place for men with more severe disabilities, but the accommodation was not suitable for them. Support for older men was limited. Little was done to meet the specific needs of young adult men held. No transgender prisoners were being held during the inspection, but they were included in the equalities policy. More proactive work was needed to reassure gay men that it was safe to disclose their sexuality.
- S19 Some prisoners were negative in our survey about faith provision, but the chaplaincy had a high profile in the prison and catered successfully for a range of faith groups. Chaplains were accessible and facilities were attractive and peaceful. A bespoke room for Muslim prayers was in development. Chaplains provided good pastoral support to men, including those who were vulnerable or subject to ACCT case management.
- S20 In our survey, prisoners had more confidence in the complaints system than the comparator. Complaints were well managed and the majority were timely. Responses were very good. Confidential complaints and those about staff needed oversight and monitoring. Some legal visits took place in the main visits hall, which compromised confidentiality. Useful information on legal rights was available from PAD workers and in the library, but there was no specific bail advice provision.
- S21 Despite many staff vacancies, we found a dedicated team providing a reasonably good health service overall. Partnership working and clinical governance were effective. Prisoners often experienced lengthy waits for health screening in reception because health staff were unavailable, which was unacceptable. Prisoners had good access to an appropriate range of primary care services and visiting specialists. In our survey, prisoners were mostly satisfied with health care. Waiting times were short and long-term conditions were reasonably well managed.
- S22 Medicines management was adequate. However, there were delays in patients receiving their medication and custody staff did not consistently supervise medicine queues, which compromised confidentiality and created a diversion risk. Dental provision was good. Our survey identified more prisoners with mental health problems than in comparator prisons and the integrated mental health team provided a good service to meet the high level of need. Links with Lincolnshire County Council had enabled appropriate arrangements for social care assessments and formal care packages to be delivered.
- S23 Apart from breakfast, meals were served at appropriate times and portion sizes were good. Not all serveries were adequately supervised. Canteen arrangements were relatively good and included a limited range of items that were available shortly after the men's arrival.

Purposeful activity

S24 *Staffing shortages were affecting the regime, but efforts had been made to improve prisoners' time out of their cell and to regularise any curtailments. Nevertheless, time out of cell was inadequate overall. The leadership and management of learning and skills had been deficient for several months; this was now being addressed, but outcomes had deteriorated. The education and vocational training provision was good but too small, and elsewhere no accredited opportunities were offered. The prison did not focus enough on supporting men to improve their basic skills. Efforts were being made to improve attendance, but it remained too low. Library facilities were good but the gym provision needed improvement. **Outcomes for prisoners were poor against this healthy prison test.***

S25 *At the last inspection in November 2013 we found that outcomes for prisoners in Lincoln were not sufficiently good against this healthy prison test. We made 11 recommendations in the area of purposeful activity. At this follow-up inspection we found that two of the recommendations had been achieved, one had been partially achieved and eight had not been achieved.*

S26 Although time out of cell was poor, new core day arrangements had introduced greater predictability to the regime. While each wing could have seen the regime curtailed once a week, efforts were made to avoid or minimise the impact. We found an average of 29% of prisoners locked up during our roll checks, similar to our last inspection.

S27 Management had not effectively prioritised the development of all aspects of the learning and skills provision. The range, level and progression routes offered were too limited; partnerships with employers were weak. There were long waiting lists. Other than in education, which was well managed, the provision was not subject to comprehensive quality assurance arrangements to raise standards. The pace of improvement was very slow. Attendance at activities and participation rates were particularly low. The use of data and challenging targets for performance management purposes required improvement.

S28 The prison offered enough purposeful activity places to occupy approximately 69% of the prison population. Pay rates did not discourage prisoners from participating in activities. Allocation arrangements were fair and equitable. For the large majority of prisoners, no accredited training was available. Wing workers and some orderlies were too often underemployed.

S29 Taught sessions in education and vocational training workshops were generally good but more able learners were not always challenged sufficiently. Employment skills were not recognised or recorded. Prisoners received no support outside the classroom to improve their English and maths skills.

S30 In workshops and at work, inappropriate behaviour and language was not always adequately addressed. A positive work ethic was, too often, lacking, which undermined a resettlement ethos. Prisoners' personal and social skills were not effectively enhanced to support employability. Trainers in vocational and production workshops did not consistently reinforce prisoners' understanding of health and safety practice. Prisoners generally improved their behaviour, self-confidence and esteem in education classes and learning took place within a culture of mutual respect.

S31 Prisoners' achievements of accredited qualifications were generally high. However, achievements in English and maths functional skills at level 2 required improvement. Learners in education made good progress. The men's vocational skills development at work was very limited. A significant majority of prisoners did not improve their English or maths sufficiently to support resettlement.

- S32 Two well-stocked libraries met the needs of the population but strategies to promote literacy were underdeveloped. Despite regime curtailments, access to the library had been maintained, and, according to the prison's own figures, around 68% regularly borrowed items. Those working full-time had their access restricted to once a fortnight.
- S33 Prisoners had adequate access to the physical education (PE) facilities. However, they were often closed, particularly at weekends. Very limited activities were available for the older prisoner. No accredited training programmes were offered. Links with the health care department were effectively used to provide remedial PE.

Resettlement

- S34** *Work to reduce prisoners' risks and to resettle them on release needed to be better coordinated. Offender management work was very mixed and in some cases not good enough. Some aspects of public protection work needed to be stronger. Despite it being a requirement, not all prisoners had a resettlement plan on release. Support in the resettlement pathways was also mixed and some aspects needed to be developed. The number of men who were far from their home areas made this challenging. Children and families work was generally good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S35 *At the last inspection in November 2013 we found that outcomes for prisoners in Lincoln were reasonably good against this healthy prison test. We made 12 recommendations in the area of resettlement. At this follow-up inspection we found that four of the recommendations had been achieved, five had been partially achieved and three had not been achieved.*

- S36 Although the prison undertook a large amount of good work to support prisoners in reducing their risks and reintegrating back into the community, too much of it operated in isolation, undermining the provision's overall effectiveness. There were indications that managers were now trying to rectify this, but there was still considerable work to be done. Difficulties experienced by prisoners at Lincoln were compounded by the significant number of men from out of the area. In our survey, fewer prisoners than at comparable prisons said they had done anything or that anything had happened to them at Lincoln to make them less likely to reoffend in the future.
- S37 There was no backlog of offender assessment system documents, although we were concerned that many prisoners had been transferred from Lincoln before assessments were completed. In our survey, more prisoners than in the comparator said they had an offender supervisor and a sentence plan. However, we found the effectiveness of the offender management unit work to be extremely variable. While we saw some good examples of work with some long-term offenders, this was in stark contrast to other cases where there was little or no contact, a lack of focus on risk management and poor sentence planning. Supervision and support needed to be extended to officer offender supervisors. The overall management of home detention curfew (HDC) was good but we found men being transferred before the HDC process had been completed.
- S38 Child protection and harassment cases were identified and reviewed appropriately at the weekly inter-departmental risk assessment and management panel (IRAMP) meeting. Decisions regarding monitoring were sound. However, the IRAMP meeting was poorly attended and multi-agency public protection arrangement (MAPPA) reviews did not consistently cover all relevant issues as a result of poor attendance. There remained substantial delays in the identification of prisoners' MAPPA release levels, which had an

impact on the effectiveness of resettlement planning. Work with indeterminate prisoners and on categorisation was reasonable.

- S39 Despite some good pathway provision, including work carried out by the Lincolnshire Action Trust (LAT)³, reintegration planning was too variable. Although we saw Shelter and the resettlement team undertake some good resettlement work, we also saw many examples of prisoners being released without a resettlement plan or links to wider service provision. Some staff and departments remained unclear how the reintegration planning model was supposed to work, who was responsible for it and how links to the community could most effectively be made.
- S40 Although Shelter provided generally good accommodation support for prisoners within the local area, support for those from further afield was proving problematic. Overall, around 20% of prisoners were released without a fixed address. Most of them were directed to homelessness support services. National Careers Service advisers provided prisoners with good guidance. There were no reliable data on prisoners going on to employment, training and education. Finance, benefit and debt services needed development and more debt management work was required.
- S41 Pre-release health care arrangements were effective and the mental health team provided a good level of support and liaised with community teams for those with complex and enduring mental health problems. There were good links with palliative care and end of life services. Prisoners with substance misuse issues could meet with an Addaction⁴ community worker, who visited the prison regularly to organise post-release support across Lincolnshire.
- S42 Family support was generally good. LAT undertook family engagement work and it was positive that men and their families could receive support at court, during custody and on release. We were told that booking social visits could be difficult. Visitors were searched sensitively and respectfully, but prisoners were routinely strip-searched. The atmosphere in the hall was relaxed. A play area and a good selection of refreshments and food were available. Regular themed family days were held during school holidays. They were well attended and the men and their families valued them.
- S43 There were no formally accredited offending behaviour programmes. Prisoners were not consistently transferred to prisons offering the programmes they needed as these priorities often clashed with requests for them to move closer to home and population management pressures. Despite this, we saw some examples of good work with long-term prisoners, especially men with sex offence convictions. The prison had also introduced a comprehensive strategy for managing sex offenders.

³ Lincolnshire Action Trust works with HMP Lincoln to reduce re-offending by working with prisoners to help address some of the issues and challenges which have resulted in their prison sentence.

⁴ Addaction supports offenders to make behavioural changes, including with the use of alcohol and drugs.

Main concerns and recommendations

S44 Concern: There were serious deficiencies in the management and oversight of the use of force. There had been no use of force meetings to discuss matters relating to force and no scrutiny or review of incidents and not all planned interventions had been video-recorded or reviewed. Too many reports on the use of force were missing. Incidents where batons had been drawn and/or used had not been investigated.

Recommendation: The oversight and day-to-day management of use of force should ensure force is only used when necessary, mandatory recording arrangements are followed and lessons are learned when it is used.

S45 Concern: Work on equalities was not as strong as at the previous inspection and needed more operational resources. There was an underreporting of prisoners with a disability, those who were gay or bisexual and possibly those from Gypsy, Romany and Traveller backgrounds. Not enough was being done to identify or consult these prisoners to ensure their needs were met and they had equal access to facilities and activities.

Recommendation: Support for the protected characteristics must ensure their needs are understood and, where possible, met.

S46 Concern: There were enough purposeful activity places for only about 69% of the prison's population and while the management of education was good, it was not sufficient to meet all needs. For a large majority of prisoners, no accredited training was available and there was no support outside classrooms to help improve prisoners' English and maths. English and maths functional skills were only taught up to level 2.

Recommendation: Learning and skills provision should be sufficient to meet the needs of the population at Lincoln.

S47 Concern: Attendance at activities and participation rates were particularly poor.

Recommendation: All available purposeful activity places at Lincoln should be used to ensure as many men as possible are occupied in activities that contribute to their rehabilitation.

S48 Concern: Reintegration work was poorly coordinated, not all men had a resettlement plan and some pathway provision involved directing prisoners to services without effective follow up to ensure relevant action had been taken.

Recommendation: All prisoners being released should have an up-to-date resettlement plan and be offered appropriate resettlement support; community-based responsible officers should be informed of work that has been undertaken and what is still required.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 In our survey, 32% of prisoners reported journeys of over two hours, more than the 23% in similar prisons. Prisoners we spoke to said escort staff treated them well. Vans we observed were clean and in good order.
- I.2 Escort staff shared information systematically and reception staff made appropriate use of it to inform initial risk assessments. Escort records were properly completed and legible.
- I.3 Some prisoners arriving on 'out-of-area' transfers told us they had not been told where they were going. However, staff from the Supporting People After Remand or Conviction (SPARC) project saw those coming from Lincoln Magistrates' Court before their journey; they assessed their needs and gave them information about their early days in custody. SPARC staff rang the prison reception to alert staff of prisoners with special care, support or risk needs.

Good practice

- I.4 *SPARC project staff provided remanded prisoners with reassurance, as well as an assessment of their needs, which enabled them to alert the prison reception of any specific support needs.*

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.5 The reception area and holding rooms were bright, clean and well decorated. Twenty-one new prisoners arrived on the busiest day of our inspection. There were delays of up to six hours in processing prisoners, which was far too long. While delays were not normally this protracted, only 29% of prisoners in our survey said the process took less than two hours, compared with 40% in similar prisons. The over two-hour absence of a nurse to screen prisoners caused much of the delay.
- I.6 The delays were compounded by the late arrival of vans, which meant prisoners often only got to their first night accommodation late in the evening and were locked straight into their cells, potentially heightening the risks to already vulnerable prisoners. On the busiest day of the inspection, the last prisoner got to their cell at 1.30am.
- I.7 Staff were generally welcoming and polite and searching was carried out respectfully. Prisoners who appeared to be particularly vulnerable received reassurance. Despite long delays in the process and a challenging mix of prisoners (see paragraph 2.13), 80% of

prisoners in our survey said reception staff treated them with respect compared with 61% in similar prisons.

- I.8** First night interviews were conducted in private and were adequate, although staff could have found out more about prisoners' vulnerabilities. We were particularly impressed with peer workers who provided prisoners with good support and worked well with reception staff.
- I.9** Prisoners were offered a free telephone call and food at meal times. Showers were rarely offered as the shower room could only be accessed through a first night interview room. Many prisoners arriving on the wings late could not shower until the next day.
- I.10** Conditions in the first night centre were poor. Some cells were dirty, in poor decorative order and had dilapidated flooring. Only half the showers were working and many toilets did not flush properly. However, conditions on E wing, where vulnerable prisoners usually spent their first night were much better.
- I.11** During our inspection, night staff responsible for the first night centre were aware of the location of new prisoners and were sensitive to their needs. The first night protocol did not provide for additional checks to be made on all new arrivals, which was a significant omission given that many prisoners were locked straight into their cells late at night.
- I.12** Only 56% of vulnerable prisoners in our survey said they felt safe on their first night compared with 79% of other prisoners. Night staff were unsure if the prison had a system for identifying vulnerable prisoners who should have been sent directly to E wing (the vulnerable prisoners' wing) and we were told of occasions when these men were located in the first night centre instead.
- I.13** Since the last inspection, the first night centre had been gated off and other prisoners no longer had access to it. However, two high risk prisoners who were being reintegrated from the segregation unit were held there, which was inappropriate.
- I.14** Eighty-eight percent of prisoners in our survey said they had received an induction, more than in similar prisons. Peer workers ran the induction presentation. The presentation we observed was very brief and omitted key information about life in prison. Deficiencies were, however, offset by good access to the new well thought-through prisoner advice desk service (see paragraph 2.15).

Recommendations

- I.15 Prisoners should not be delayed in reception.** (Repeated recommendation I.16)
- I.16 The first night centre should provide a reasonable standard of accommodation, with clean cells and functioning toilets and showers.**
- I.17 Staff should be aware of the location of all new prisoners so that regular enhanced checks on their welfare can be made.**

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.18** Levels of violence overall had increased significantly since the last inspection and were high. In total, the prison had recorded 126 assaults and fights in the six months prior to the inspection, which was more than double the number during a similar period at the last inspection. Many resulted in minor injuries, but some were serious and required hospital treatment. Levels of violence against prisoners were high with 41 assaults and 36 fights. The number of assaults on staff was also relatively high with 49 recorded incidents.
- I.19** Too many prisoners felt unsafe. In our survey, nearly half of respondents (49%) said they had felt unsafe at Lincoln at some time. More than a quarter (27%) said they felt unsafe at the time of the inspection, which was significantly worse than the comparator of 22%. However, fewer respondents than the comparator said they had been victimised by other prisoners and staff.
- I.20** The strategic management of violence was improving, but some processes had not yet been implemented. Plans to introduce interventions designed to address many aspects of violence and antisocial behaviour, such as one-to-one work, conflict resolution and anger management were well developed and appropriate. However, during the inspection, violence reduction strategies consisted almost exclusively of putting perpetrators on the basic regime of the incentives and earned privileges (IEP) scheme.
- I.21** There was little targeted work to address specific behaviour management issues and no action plan to identify or direct necessary actions. Most prisoners were put on the basic level for 28 days and returned to the standard level if they did not act violently within that period.
- I.22** As at the last inspection, the safer custody committee met each month to monitor the overall progress of both the violence reduction and suicide prevention strategies. Links with the security department and safer custody team remained good, and there was an unrestricted flow of relevant information, such as security reports, to safer custody managers. Recording and analysis of violence to identify patterns and trends were good, as were the full-time violence reduction coordinator's investigations into incidents. Information provided by a full-time administration worker about the amount, type and location of violent incidents each month was comprehensive.

Recommendations

- I.23** **Plans to introduce several interventions designed to address many aspects of violence and antisocial behaviour such as one-to-one work, conflict resolution, and anger management, should be implemented.**
- I.24** **Targeted work to address specific behaviour management issues should be introduced, along with an action plan to identify and manage necessary actions.**

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.25** There had been four self-inflicted deaths at the prison since the last inspection, two in 2015 and two in June 2016. There was evidence that some areas of concern identified by the Prisons and Probation Ombudsman investigations into the deaths had been addressed. However, there was no overarching plan to monitor the implementation of important recommendations and we were not confident that all of them had been acted on or reviewed.
- I.26** There had been 256 incidents of self-harm in the six months prior to the inspection, which was three times higher than at the last inspection. We noted, however, that a smaller number of prisoners with complex needs accounted for many of the incidents. For example, one prisoner had harmed himself on 40 occasions and another on at least 12.
- I.27** In the six months before the inspection, 352 assessment, care in custody and teamwork (ACCT) documents for prisoners at risk of suicide or self-harm had been opened, which was higher than at the last inspection, when we found 234 over a similar period. There had, however, been a reduction in the number of open ACCTs in the previous few months and 19 were open during the inspection.
- I.28** Management structures to help reduce self-harm were reasonable. A well-established safer custody committee monitored the overall implementation of the suicide and self-harm prevention strategy and regular meetings were well attended. The collection and analysis of information was very good and a wide range of information was being used to identify trends and patterns of behaviour.
- I.29** However, ACCT procedures were not always robust enough. Care maps often lacked detail and were not updated adequately. Case reviews were timely and well conducted, but people who knew the prisoner did not always attend them, although the local mental health team nearly always did. There was a lack of communication between case managers and residential staff and we saw examples in which prisoners on open ACCTs had been put on the basic regime without any reference to ACCT documents or case reviews.
- I.30** In contrast, we saw staff who knew and cared about the personal circumstances of prisoners in crisis and helped them to deal with their problems. We saw them interact positively with vulnerable men on a day-to-day basis, demonstrating an appropriate interest in their welfare. They did not overreact or behave heavy-handedly when faced with demanding behaviour, but instead responded maturely, patiently and calmly. All the men on ACCTs told us that officers treated them well and responded to their needs.
- I.31** The Listener scheme (in which prisoners are trained by the Samaritans to provide confidential emotional support to fellow prisoners) was well established, prisoners had good access to Listeners and all of those we spoke to said that their work was valued and that they felt supported.

Recommendations

- I.32** Recommendations from deaths in custody reports should be implemented in full; senior managers should monitor their implementation through an overarching action plan.
- I.33** ACCT documentation should demonstrate consistent care for prisoners at risk of self-harm. Support arrangements should include good quality care planning and multidisciplinary reviews.

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.⁵

- I.34** The safeguarding adults policy reflected the key principles in the Prison Service instruction on safeguarding. Staff were not trained in adult safeguarding, but they were aware of bullying and victimisation and said they would contact the safer custody team and health care department if they believed a prisoner was at risk.
- I.35** Local screening procedures and assessments of risk carried out during the prisoners' first few days at the prison were effective. They included cell-sharing risk assessments and reviews and initial health care screening interviews.
- I.36** Links were developing between the prison and community safeguarding board at Lincoln County Council and the head of safer custody had attended meetings with the local safeguarding team.

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.37** Security measures were proportionate and focused on tackling the major issues facing the prison. Routine strip-searching in the segregation unit had ceased and all searching in that area now followed a risk assessment. Prisoners went to activities under free-flow movement (which allows prisoners to move about the prison unescorted) and access to activities was not restricted unreasonably by security risk assessments of prisoners or work areas.
- I.38** Good staff-prisoner relationships supported all elements of dynamic security (see section on staff-prisoner relationships), which meant that intelligence gathering from across the prison was good – an average of 525 information reports were received every month. Managers were aware of the population's offending profile and had background information on prisoners, such as gang affiliations, as well as major security concerns. Key departments were

⁵ 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).

represented at the monthly security meeting and relevant objectives were set to reflect ongoing threats, such as drugs, unauthorised articles and violence. Links and information-sharing between security and other departments were good.

- I.39** Security information was analysed quickly and well. However, target searching and suspicion testing were well behind schedule. Of the 417 intelligence-led searches requested, only 66 (16%) had been carried out over the previous six months.
- I.40** The prison had received a large number of prisoners from other prisons following unrest at those establishments in the previous six months, which could have resulted in significant problems in Lincoln as many of the prisoners were far away from home and had arrived without their property. While a small number of these prisoners had caused some problems, managers at Lincoln had proactively managed any potential disruption by ensuring all property was collected from the sending prisons and addressing these prisoners' concerns.
- I.41** The prison had an excellent working relationship with the local police. An additional investigating officer had been provided to support the prison in tackling crime within the establishment and concerns centring on the availability of 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). A quarterly meeting was held between the two organisations to ensure that information was shared and that police issues within the prison were dealt with swiftly, including crimes referred for investigation (see paragraph I.55).
- I.42** Five prisoners were subject to closed visits restrictions and five visitors were banned, all for visits-related illicit activity. The restrictions were applied for at least three months before a review was carried out, which was excessive.
- I.43** There were adequate procedures in place to protect prisoners from misconduct by staff. A small number of prisoners were subject to anti-terrorism or extremism measures at the time of our inspection.
- I.44** In our survey, more prisoners than at the previous inspection felt it was easy to obtain illegal drugs at the prison and said they had developed a drug problem at the prison. Nevertheless, the prison's drug supply reduction strategy and action plan was helping identify sources of supply and challenges with illegal drugs were well managed. Positive random mandatory drug testing rates were relatively low at 7.9% against a key performance target of 9.5%. However, no performance measures had been established for the delivery of the drug strategy and suspicion drug testing was not always being conducted (see paragraph I.39).

Recommendation

- I.45** **The suspicion drug testing programme should be sufficiently resourced so that all prisoners suspected of taking drugs are tested within required timescales and without gaps in provision.** (Repeated recommendation I.48)

Good practice

- I.46** *Quarterly meetings between prison and police managers and the appointment of a police investigation officer at the prison had resulted in the prompt resolution of matters referred to the police and ensured a good mutually beneficial relationship between the two agencies.*

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.47** The published IEP policy described how the system worked, and how prisoners could progress through the levels. All prisoners had a compact (a signed agreement between the prisoner and the prison). It offered different levels of access to private cash, computer games, visits and time out of cell, depending on what level a prisoner was on, which seemed reasonable.
- I.48** Prisoners new to custody were promoted to the standard level after 14 days unless significant poor behaviour had been recorded. Prisoners who were transferred from other prisons maintained their existing status.
- I.49** The IEP scheme was not used sufficiently to manage patterns of poor behaviour that were not serious. Most of the 64 prisoners on the basic level had committed one significant act of poor behaviour such as violence, refusal to attend work or share a cell. Although demotion to the basic level seemed justified in most of the cases we examined, some followed an alleged single incident that had not been investigated thoroughly enough.
- I.50** Overall, there was little evidence that changes in behaviour over time were monitored or acted on, and there was nothing meaningful within the system to help prisoners deal with the issues that might have caused their poor behaviour (see paragraph 1.21). If prisoners kept out of trouble for 28 days, they were returned to the standard level.
- I.51** The regime for those on the basic level was often poor. Although employed prisoners could attend purposeful activity, many were not employed and time out of their cells was restricted to about an hour a day.

Recommendations

- I.52** **Decisions to demote prisoners to the basic level should be justified and always followed by a thorough investigation.**
- I.53** **The regime for those on the basic level of the IEP scheme should provide the opportunity to demonstrate improvements in behaviour, as defined in individual and well-structured improvement targets. (Repeated recommendation 1.55)**

Discipline

Expected outcomes:

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

Disciplinary procedures

- I.54** The number of adjudications was higher than at our last inspection with 1841 in the previous six months. Adjudications were monitored at monthly adjudication standardisation meetings, where quality assurance checks were carried out on 10% of all adjudications. Data analysis was good and trends were reflected in the adjudication tariff guidelines in an attempt to tackle the most prevalent poor behaviour. The main charges were for assaults and fights, unauthorised articles and damage to prison property.
- I.55** Managers recognised that staff lacked confidence in the adjudications process. There had been a significant backlog of adjudications, including lengthy waits for responses from the police, which the prison had recently addressed (see paragraph 1.40). Over 200 adjudications had exceeded the deadline for the charges to be heard and had therefore been dismissed. The number of remanded adjudications during our inspection had been reduced to 46 and staff ensured they were heard within a reasonable period.
- I.56** Adjudications were held in the segregation unit and the independent adjudicator attended every month to hear some of the more serious charges. Records generally gave a reasonable account of the proceedings but some charges could have been more appropriately dealt with using the IEP system, which prison managers recognised. Punishments were proportionate and in accordance with the published tariff.

The use of force

- I.57** General oversight of the use of force was seriously deficient. There had only been one use of force meeting in recent months. Very few incidents involving force were reviewed and investigations had not been carried out every time a baton had been drawn or used. Not all planned interventions had been video-recorded or reviewed. We found two incidents where force had been video-recorded but not formally reported or recorded. The deficits in recording made it impossible for us to judge the level of force used or whether it had been justified and used as a last resort in every case (see main recommendation S44).
- I.58** The number of incidents of use of force had increased slightly since our last inspection. The records we were shown indicated there had been 138 incidents in the six months prior to our inspection, much of which involved the full use of restraint. Special accommodation had not been used in over two years.

Segregation

- I.59** The segregation unit environment was generally good, although some toilets and sinks were stained. The fabric of some of the cells had been improved. There was graffiti on some cell doors, but cell walls were generally cleaned or painted promptly where graffiti was evident. Exercise yards were bleak and prisoners could not have time in the open air together.
- I.60** The use of segregation had been reduced significantly, by 50%, since our last inspection. It was used mostly to maintain good order or discipline and for prisoners awaiting adjudication.

Only 46 prisoners had been segregated during the six months prior to our inspection. The monthly segregation monitoring meeting had not been held regularly in recent months and data analysis was very limited.

- I.61** There had been some commendable improvements in the unit. The introduction of reintegration planning had resulted in fewer prisoners being held in segregation for long periods and the majority (over 60%) now returned to the normal location within the prison.
- I.62** Prisoners could apply to attend activities away from the unit provided a risk assessment meant it was safe to do so and there was evidence that some had done so. All meals were served in person at prisoners' cell doors instead of men collecting them at the servery, which was mostly unnecessary.
- I.63** Staff-prisoner relationships were good and staff knew the prisoners very well. We were particularly impressed by how staff treated prisoners, tailoring interactions to meet very varied and individual needs. Reviews were timely and attended by a multidisciplinary team.
- I.64** Prisoners on open ACCT documents were sometimes located in the unit; 16 were held there in the previous six months, but a detailed explanation of why segregation was necessary in those cases was provided.

Recommendation

- I.65** **The use of segregation should be monitored and analysed regularly and action taken to address any issues identified.**

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.66** Drug agency Addaction delivered psychosocial and integrated clinical services. The drug strategy committee met monthly, but attendance by representatives from some key departments was sporadic and not enough reports were submitted at the meeting. Minutes showed that very few forward-looking strategic plans were produced.
- I.67** Psychosocial support had improved since the last inspection, with the introduction of the support unit (on C wing), where some prisoners were on the Trans4orm recovery programme, and better one-to-one options. Prisoners experienced a higher level of support in the unit when they were on the programme.
- I.68** Addaction's Trans4orm recovery programme had been running over the previous two years and over 80% of prisoner who started, completed it. Prisoners who had finished the programme and those on the course during the inspection all spoke favourably of its effectiveness in helping them make positive changes in their attitude and behaviour where offending and substance misuse were concerned.
- I.69** In our survey, prisoners felt that their access to drug treatment services and their perceptions of their effectiveness were poorer than at the last inspection. Prisoners we spoke to said regular lockdowns and cancelled group and one-to-one sessions were the reasons why they were not completely satisfied with the service.

- I.70** Assessment and first night prescribing practices were all appropriately delivered. While observation hatches had been fixed to six cells in the first night centre since the previous inspection, prisoners with clinical treatment needs were not routinely placed in these cells for their first night as they should have been. We also found that newly arrived prisoners with alcohol detoxification needs were frequently placed in cells that were not even in the first night centre. While we were told that monitoring took place on the first night, placing prisoners in inappropriate accommodation was potentially dangerous as nurses had to ask an officer to open a cell door to conduct night-time observations. The process took longer than necessary as officers were often busy with other duties.
- I.71** Nevertheless, ongoing clinical nursing support had improved and prisoners told us the nursing staff were very caring. The facilities and supervision of controlled drugs administration had improved on C wing, but on A wing, the hatch was in the middle of a landing, which gave patients no privacy.

Recommendations

- I.72** Prisoners receiving clinical treatment should always be placed in cells with observation hatches during their first night and those undergoing alcohol detoxification should be prioritised.
- I.73** The administration of controlled drugs on A wing should cease and a more suitable location found.

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 Most internal communal areas were clean. Although cleaned daily, outside areas, particularly exercise yards, were austere.
- 2.2 The prison remained overcrowded, as most cells designed for one prisoner were occupied by two. However, there was evidence that material conditions in the prison had improved in recent months with the new governor's 'back to basics' push, but more needed to be done.
- 2.3 There was not much graffiti and we saw no offensive displays. Almost all cells had kettles. While some cells were clean and adequately decorated, the condition of too many others was poor. Cells had no lockable cupboards and prisoners requiring curtains had to improvise. Toilets were poorly screened and some had an excessive build-up of limescale and were dirty. We saw a small number of cells with broken windows.
- 2.4 The heating system was unreliable and there had been a period of about three days recently when there was no heating at all. Prisoners said it was ineffective even when they were working and many reported sleeping in their clothes to keep warm at night.
- 2.5 Communal showers were reasonably well ventilated, but some were dilapidated and others were unusable because the water pressure was too low. Many showers were poorly screened.
- 2.6 Our survey suggested that it was significantly harder to access clean clothing and bedding than at our last inspection and compared with similar prisons. Nonetheless, we found the provision adequate, although some clothing was of poor quality.
- 2.7 Our survey suggested that access to stored property had deteriorated considerably since the last inspection with only 11% of prisoners saying they could normally obtain it compared with 29% in similar prisons. Poor time out of cell, which would have made it difficult for prisoners to pick up their stored property, might have contributed to these results. In addition, many prisoners had been transferred to the prison from other establishments without their property (see paragraph 1.40). However, the prison had made good efforts to retrieve property for these prisoners. During the inspection, there was no backlog of applications for access to stored property.
- 2.8 Only 18% of prisoners in our survey said cell bells received a response within five minutes, compared with 24% elsewhere. Although cell response times had not been monitored in recent months, the records we checked suggested almost all were answered promptly.
- 2.9 In our survey, 78% of prisoners said it was easy to make an application, more than those in similar prisons. Although only 46% said applications were dealt with fairly and 35% promptly (within seven days), the results were similar to comparator prisons. There was no system for monitoring the overall timeliness or quality of responses, although the prison was carrying out some limited testing of the process.

Recommendations

- 2.10** Cells designed to hold one prisoner should not be used to hold two. Cells should be clean, well-furnished and adequately heated.
- 2.11** All wing showers should be well maintained and in good working order.
- 2.12** The prison should ensure applications receive a prompt and appropriate response.

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.

- 2.13** Staff managed a complex population of prisoners. According to our survey over a third arrived with mental health problems, more than in similar prisoners. The prison also accommodated many prisoners from outside the area and a number who had been transferred following disturbances in other prisons.
- 2.14** Despite these challenges, the prison was maintaining good relationships with prisoners and 74% of them said in our survey that staff treated them with respect. Similar proportions of black and minority ethnic prisoners and those with disabilities felt most staff treated them with respect. Relationships we observed were generally good. Prisoners we spoke to felt staff supported them well, including those who were on an assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm. The complaints process also demonstrated respectful relationships between staff and prisoners (see section on complaints).
- 2.15** Relationships were supported by the new prisoner advice desk (PAD) service, in which prisoners provided useful information and support to their peers. The process was well thought through and developing. We observed positive interactions between PAD, other peer workers and staff, which provided a good model for constructive working relationships.
- 2.16** The prison had started to monitor staff entries on the prison's case management database. However, only just over a third of prisoners in our survey said they had a personal officer and there were still too few personal officer entries showing meaningful interactions with prisoners.
- 2.17** Consultation arrangements were good; consultation meetings were held regularly and were generally purposeful, although a small number of actions, mostly concerning facilities, had been carried over repeatedly.

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 characteristic⁶ 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

- 2.18** Equalities work had lost focus since our last inspection, which the new governor recognised; he had started to revive this area of work. Governors had been given responsibility for strands of equality work and were expected to report back at the senior management team (SMT) meeting. The strategy was up to date and comprehensive, but there was no overarching action plan. Although staff were beginning to contact community groups so they could access advice and bring in services, they were not yet in place (see main recommendation S45).
- 2.19** The regular equalities meeting considered a good range of information and was attended by prisoner representatives. Attendance by key staff and follow-up action needed to be more consistent. While monitoring was in place, it was not used to develop services. Enthusiastic prisoner representatives supported equalities work well, although training for the role would have been useful.
- 2.20** At our last inspection, consultation with different protected groups was good. Although equality concerns were successfully raised through the prisoner representative group and there was evidence that the prison was responsive, more specific consultation was required to ensure that needs were met.
- 2.21** There was not enough awareness of or confidence in the discrimination incident reporting form (DIRF) system. While forms were available on wings, few (16) had been submitted in the previous six months. There was not enough oversight of investigations and no evidence that prisoners had been spoken to or their concerns fully investigated. During our inspection, new guidance had been issued to senior managers to ensure they investigated DIRFs.
- 2.22** In our survey, 9% of men identified as veterans. A veterans' group was held every three months. Guest speakers attended and there were opportunities for them to access support from organisations for former service men.

Protected characteristics

- 2.23** The number of black and minority ethnic prisoners had declined since our previous inspection, from 20% to 14%. In our survey, although these prisoners felt most staff treated them with respect, they were still more negative than their white counterparts in a number of areas, for example, they felt less safe on their first night and more victimised by staff. While interactions we observed between staff and black and minority ethnic prisoners were

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

respectful, DIRFS alleging racism were not investigated robustly enough. This group was proportionately represented in the servery, kitchen and cleaner roles and reported better access to the library and gym than white prisoners in our survey. Four Travellers had been identified and while there were no activities specifically for this group, Traveller men we spoke to reported no issues.

- 2.24** There were 93 foreign national prisoners and 10 detainees. In our survey, foreign national prisoners reported poorer experiences in several areas, including the incentives and earned privileges (IEP) scheme, complaints and applications systems and victimisation by staff. They received little proactive support and staff did not have enough awareness of their language, welfare or cultural needs. Little information was produced in other languages and limited use was made of interpreters. Prisoners were used to translate for other prisoners in inappropriate circumstances. We met some men with little or no English and we could not be confident their needs were met.
- 2.25** Foreign national prisoners had insufficient access to immigration officers and no independent immigration advice. They were not provided with details of organisations offering support. Detainees received no assistance from the prison in contacting embassies, applying for bail or accessing legal advice. We were concerned about the length of time some of the men had been held post-sentence, including one man who was over three years past his release date.
- 2.26** In our survey, 34% of men identified as having a disability, compared with around one in six recorded on the Prison Service IT system. This suggested underreporting at reception and needed to be investigated further. We saw some good examples of individual support for men with disabilities but more needed to be done to identify and assist them.
- 2.27** Personal emergency evacuation plans and care plans were in place for men with more severe impairments and the few men with very complex needs were well supported. Buddies helped with general support and everyday tasks, but much of the accommodation at the prison was not suitable for men with severe physical disabilities.
- 2.28** Many older prisoners were located on E wing, which had a small room they could use during association. Although basic, it was popular and there were plans improve it. The older men we spoke to on E wing were generally satisfied with the provision and spoke highly of the staff, but there were no specific activities for this group. A focus group had taken place for older prisoners in the rest of the prison. They had asked for specific activities related to their age.
- 2.29** Many men, 130, were under 25. A focus group had been held to ask men under 21 about their needs and the prison had contacted organisations working with young people. However, no activities were in place for this group.
- 2.30** There were no transgender prisoners at Lincoln during the inspection, but support for this group was covered in the equality strategy. A few men had identified as gay or bisexual, all of whom were on E wing. No one elsewhere in the prison had disclosed being gay or bisexual but prison staff were aware of this anomaly. A gay support group was no longer running, but gay men we spoke to reported no concerns or problems.
- 2.31** In our survey, many men said their religious beliefs were not respected. It was unclear why this was the case, but the demands of the regime, which sometimes involved choosing between corporate worship and other activities, might have been a factor. Only 23% of men said it was easy to attend religious services, fewer than the comparator and compared with our last inspection. Prisoners told us they were sometimes not unlocked for worship (see also section on time out of cell).

Recommendation

- 2.32 Foreign national prisoners' concerns should be explored and addressed and arrangements put in place to ensure they have effective structured support, including access to interpreters when needed.**

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.

- 2.33** The well-organised chaplaincy was friendly and welcoming. Facilities were good, and improving – the prison had a peaceful chapel and attractive multi-faith rooms. A Muslim prayer room was being developed.
- 2.34** Good attempts were made to encourage local chaplains and communities to attend the prison. While most faith groups in the prison were covered, where it was not possible, individual support and opportunities for worship were offered. Vulnerable prisoners had the same access to services as others and all Catholic men could attend corporate worship every week.
- 2.35** Chaplains were visible and accessible; they attended wings every day to support men. Pastoral care and support for men in crisis or experiencing bereavement was good. The chaplaincy was well advertised through leaflets and a monthly newsletter, which were delivered to every cell.
- 2.36** Chaplaincy work was well integrated into the rest of the prison. All men on an ACCT were seen at least once a week and men in segregation received a daily visit and could access individual worship if they could not attend collective worship. The managing chaplain regularly attended equality, reducing reoffending and other relevant meetings.
- 2.37** The chaplaincy coordinated a small number of prison visitors. All men were seen two weeks before release for a discharge interview and could be directed to their local faith group. The community chaplaincy supported men on release with trained volunteer mentors.

Complaints

Expected outcomes:

Effective complaints procedures are in place for prisoners, which are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.

- 2.38** In our survey, men were more positive than the comparator about complaints being dealt with fairly (39% against 27%) and about how promptly they were dealt with (35% against 22%). We found that complaints were well managed and the majority were timely. The largest areas of concern related to property and residential matters.
- 2.39** The responses we looked at were respectful, polite and thorough. We saw examples where two departments could have been responsible for answering a query, and both had answered. We also saw examples where prisoners were spoken to and action was taken. We were impressed that complaints from prisoners were also polite, which suggested that

men had respect for the system. Complaints were discussed at SMT meetings and we saw evidence that action was taken to resolve systemic matters. The number of complaints was relatively high, but we believed this reflected the system's effectiveness.

- 2.40** However, confidential access complaints (which usually go to the governor or deputy director of custody) were not recorded, monitored or investigated thoroughly enough. There was little evidence that complaints against staff had been considered properly, which was a concern.

Recommendation

- 2.41 Confidential access complaints and complaints against staff should be systematically recorded and investigated.**

Good practice

- 2.42** *The polite and thorough responses to complaints supported a respectful culture.*

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.

- 2.43** The prison no longer had trained legal officers. Some legal information was available through the new PAD workers and there was one legal laptop for appeal work. The library had a good selection of legal reference books and prisoners could borrow Prison Service instructions. Video links were used for probation interviews and court hearings and there were plans to introduce more video link facilities. No bail advice was available and while men could apply for bail accommodation through the offender management unit, this rarely happened.
- 2.44** In our survey, only 40% of men (fewer than the comparator of 50%) said it was easy to attend legal visits. There were only four legal visits rooms, which were overbooked so legal visits took place in the visits hall, which did not allow for meetings to take place in confidence.

Recommendation

- 2.45 Legal visits should take place in rooms providing privacy.**

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.

- 2.46** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁷ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

Governance arrangements

- 2.47** Nottinghamshire Healthcare NHS Foundation Trust provided health services since October 2014. Working relationships between the commissioner (NHS England), prison and provider were good and partnership board meetings were well attended. A health and social needs assessment was in place and a regularly updated action plan addressed service development recommendations.
- 2.48** Strategic clinical governance arrangements were robust and serious incidents and the health care aspects of deaths in custody action plans were effectively overseen. They informed service delivery, and lessons learnt were shared with health staff. However, there was no death in custody action plan for the whole prison (see paragraph 1.25).
- 2.49** Staff vacancies had an impact on service delivery, although the regular use of agency nurses to some extent alleviated some issues. New staff had been recruited to some posts and were due to start imminently. Despite the pressure on existing staff, a dedicated team provided a reasonably good service overall. Interactions we observed were conducted in a caring and professional manner. Clinical managers and the newly appointed head of health care had service improvement plans and knew what measures would improve and enhance services; services were well led. Health care services were provided 24 hours a day and one qualified nurse and a health care assistant were present at night time.
- 2.50** Working relationships between primary care staff, the integrated mental health team and the substance misuse team were very good. An effective daily handover attended by representatives of all teams, including pharmacy and administration, ensured communication was good and clinical concerns were identified.
- 2.51** Mandatory training was well managed and staff were encouraged to participate in professional development opportunities. An established system for managerial supervision was in place and most staff felt they received good support through regular clinical supervision.
- 2.52** There was no separate patient forum, but health was discussed at the prisoner representative group. Patient satisfaction questionnaires were available and feedback about the service had been positive. The secure health care complaints system operated separately from the prison complaints system. Sampled responses were respectful and mostly addressed the issues highlighted.

⁷ 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>.

- 2.53** The large health care unit was clean and tidy and met infection control standards. Staff had access to a good range of policies, including infection control and safeguarding.
- 2.54** Clinical records we examined were generally good and included care plans for mental health and wound care. Specific templates reflecting current National Institute for Health and Care Excellence guidelines were starting to be used to produce care plans for those with long-term conditions but further development was required (see also paragraph 2.61).
- 2.55** Appropriate regularly checked emergency equipment was held in clinical areas across the prison. Custody staff had access to automated external defibrillators (AEDs) but there were no formal monitoring arrangements. The prison ensured staff trained in first aid were on each shift and 31% of custody staff had received first aid training that included AED familiarisation. Although most custody staff we spoke to were aware of emergency protocols, some were unclear about when to use them, which could delay an ambulance being called, adversely affecting prisoner outcomes.
- 2.56** Health promotion initiatives were in place to promote well-being. Health information boards on the wings and in the health care centre displayed up-to-date information and helped keep prisoners informed. Prisoners who wished to stop smoking had access to smoking cessation clinics that provided good support.
- 2.57** Access to immunisations and screening for blood-borne viruses, as well as age appropriate screening was good. Effective use was made of visiting sexual health specialists and barrier protection was well advertised and available from health staff.

Recommendation

- 2.58** **The prison should establish an effective monitoring system for AEDs and all custody staff should understand agreed emergency codes to ensure prompt and appropriate responses to medical emergencies.**

Delivery of care (physical health)

- 2.59** A registered nurse carried out comprehensive health screenings for prisoners in the dedicated health care room in reception. However, the nurse had to leave reception for over two hours every afternoon to administer medication on one of the wings, returning at 6.30pm. This caused unacceptable delays for prisoners who had to wait lengthy periods for their health screening, although there were plans to address this (see paragraph 1.5).
- 2.60** There was an appropriate range of primary care services, including physiotherapy and podiatry. Although waiting times were good, non-attendance rates were being monitored for common trends to help reduce wasted clinical time.
- 2.61** The primary care team offered some nurse-led clinics, including daily triage and wound care. Long-term conditions were reasonably well managed and overseen by the GP. Nurse-led clinics were developing.
- 2.62** Prisoners we spoke to were mostly positive about the quality of care they received from health care staff. In our survey, they were more satisfied with the quality of health services provided by the doctor than the comparator (48% compared to 40%) and compared with our last inspection (36%). Waiting times for routine GP appointments were good at just over one week. Prisoners had access to 'on the day' urgent GP appointments based on clinical need. Out of hours' GP cover was provided to the same level as in the community.

However, there was no planned GP cover at weekends or in the evening to see new arrivals, which contributed to delays in prisoners receiving their medication (see paragraph 2.65).

- 2.63** A dedicated member of staff managed external hospital appointments well. Patients were referred promptly to secondary health services and very few appointments were cancelled because of a lack of prison escort staff, which meant necessary treatment was rarely delayed.

Recommendation

- 2.64** **Nurse-led clinics for prisoners with life-long conditions, underpinned by evidence-based care plans, should be developed further and assessment, treatment and reviews undertaken by appropriately trained and supervised staff.**

Pharmacy

- 2.65** Medicines were dispensed by a community pharmacy and individually labelled. We saw how several patients who came for their medication were informed that it was not there. As each prescription query was assigned to one of the GP slots, it sometimes led to delays. Stock check arrangements were appropriately recorded and medicines stored in the main pharmacy unit and wing treatment rooms. However, some controlled drugs cabinets needed to be rag-bolted rather than screwed to the wall.
- 2.66** An up-to-date in-possession policy took account of the patient and their medication. Patients had an initial in-possession assessment on reception, but it was not always routinely reviewed to enable them to change their status.
- 2.67** Medicines were administered by trained pharmacy technicians and nurses every day at 8am and 4pm on the wings. A second person had to witness controlled drug administrations and a lack of available staff meant some patients experienced delays while a second member of staff was summoned. Officer support to monitor medication queues was inconsistent, which compromised patient confidentiality and potentially increased the likelihood of diversion. The large purified bottled water used to clean the methadone pump would not have been sterile beyond three months after it had been opened. Using smaller bottles would have reduced the risk of bacterial growth and needed to be used.
- 2.68** Patients could receive 16 paracetamol or 24 ibuprofen, along with a number of other simple medicines from health care staff and the prison had a policy to cover these medicines. Paracetamol was also available on the canteen list. We observed staff estimating the amount of indigestion mixture to give someone, instead of measuring it out precisely. The mixture was authorised on the computer but was not listed in the policy document. There were few patient group directions (PGDs) (which enable nurses to supply and administer prescription-only medicine), which meant staff could not administer more potent pharmacy medications without a prescription. Some patients were issued with sedating night-time medication at 5pm, which was inappropriate. Patients did not have lockable storage in their cells for medication and we saw one patient reporting the theft of his medication by a cellmate who was being transferred to another prison.
- 2.69** Prescribing was reported to be in line with the formulary (medications used to inform prescribing), however, there were no routine audits of tradable medication, which should be in place.

Recommendations

- 2.70** In-possession risk assessments should be reviewed routinely and lockable in-cell cupboards should be provided so prisoners can store their medication securely.
- 2.71** Arrangements for medication administration should ensure that prisoners are given their medication in confidence and safely. (Repeated recommendation 2.72)
- 2.72** Patients should receive their medication promptly and at clinically appropriate times to ensure continuity of treatment is appropriately maintained.

Dentistry

- 2.73** Dental services were provided by a dentist and a dental nurse. Appointments were appropriately prioritised according to clinical need and dental sessions offered a range of treatment, equivalent to what was available in the community. Urgent referrals were seen promptly and waiting times for routine appointments were at around two weeks, which was good. Oral health promotion was provided during consultations and leaflets were handed out. Governance processes were good and ensured safe dental services were provided. The dental suite met infection control standards and waste material was disposed of appropriately.

Delivery of care (mental health)

- 2.74** In our survey, more prisoners than last time and compared with similar prisons reported having emotional well-being or mental health problems. However more prisoners with these problems than the comparator said they had received help (60% compared to 40%).
- 2.75** The integrated mental health service provided good primary and secondary mental health care, which was available from Monday to Friday, 8.30am to 5pm. The multidisciplinary team consisted of mental health nurses who had received additional psychological well-being training, a learning disability nurse, a counsellor and, an occupational therapist. Two psychiatrists visited every week for a day each and a psychologist was due to start shortly.
- 2.76** A stepped care model was in place, providing a range of treatments from less intensive interventions for prisoners with short-term mild and moderate mental health needs to services for prisoners with longstanding, complex problems.
- 2.77** On average 160 referrals per month were received through staff, including reception, or prisoners referred themselves. Mental health assessments were carried out promptly within five working days and thorough risk assessments were undertaken. The team's caseload was approximately 140. Physical health checks were carried out to monitor patients who were prescribed mood stabilisers and anti-psychotic medication.
- 2.78** The prison had a week day duty emergency system, where a member of the team was allocated to respond to urgent calls and provide input into the ACCT process, including prisoners' first case reviews, which was good.
- 2.79** Patients attended individual sessions in the health care centre and assertive outreach was offered on the wings. Effective multidisciplinary team meetings were held twice a week for the secondary service and every two weeks for the primary team, where ongoing care and new referrals were reviewed.

- 2.80** The team had delivered mental health awareness training to 34% of custody staff and planned to provide further sessions when prison staff could be made available.
- 2.81** Four prisoners had been transferred to secure mental health units under the Mental Health Act in the six months since September 2016. All transfers had exceeded the 14-day guideline; the longest was 16 weeks, which was too long.

Recommendation

- 2.82** **The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales.**

Social care

- 2.83** Prisoners with social care needs were promptly identified through the reception health screening. However, more could have been done to raise awareness among prison officers of the referral process. Links with Lincolnshire County Council meant arrangements for social care assessments could be consistent and reviews could take place. Trained social care staff had been employed to deliver care and support to three prisoners. Agreed care plans had been implemented to meet their needs and, where required, equipment had been provided and adaptations to cells made.

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.

- 2.84** In our survey, 27% of prisoners said the food was good or very good, better than the comparator. However, some prisoners we spoke to were negative about portion sizes at lunch times. However, the quantity and quality of food served during the inspection was reasonably good.
- 2.85** A four-week menu cycle offered varied options for each meal, including many home-made dishes, catering for the full range of dietary requirements. Religious and cultural events were celebrated with appropriate food choices. Breakfast packs continued to be distributed the evening before, although lunch and evening meals were served at reasonable times. Prisoners could not eat together and all of them had to eat in their cells.
- 2.86** Prisoners were consulted about the food at the prisoner representative group; there was also an annual survey and food comments folders available on the wings. The servery for A and B wings was adjacent to the kitchen, which meant prisoners had the chance to tell catering staff what they thought of the food.
- 2.87** The main kitchen was clean but the floor required attention; it was due to be replaced after some significant delays. Prisoners who worked there and on wing serveries had basic food hygiene training and residential servery areas were clean. Not all prisoners working on serveries wore appropriate clothing. Staff supervision of meals was sometimes not sufficient on the wings and prisoners were left to organise the meals service.

Recommendation

- 2.88 Breakfast packs should be issued on the day they are meant to be eaten.**
(Repeated recommendation 2.86)

Purchases

Expected outcomes:

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

- 2.89** Prisoners could buy a reasonable range of goods to meet their diverse needs. There were over 300 products for prisoners to choose from, many of which prisoners had suggested through prisoner consultation meetings. However, in our survey, only 39% of respondents said the shop sold a wide enough range of goods to meet their needs.
- 2.90** New arrivals could buy a pack of shop products on arrival and again after a few days, which meant they did not need to borrow items and were therefore less at risk of getting into debt or being bullied.
- 2.91** Prisoners could shop from catalogues and order newspapers and magazines every week without administration charges.

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.⁸

- 3.1** Time out of cell was poor and had been affected considerably by staff vacancies and sickness absences. A new 'core day', introduced shortly before the inspection, had brought greater predictability to the regime, which many prisoners we spoke to welcomed. Those working full-time could expect to receive about seven hours' time out of cell and part-time workers, four and a half. Prisoners on the basic level of the incentives and earned privileges scheme could receive as little as 45 minutes' time out of cell each day.
- 3.2** In addition, regime curtailments meant prisoners could have as little as 45 minutes' time out of cell, with no association. However, efforts were being made, through the redeployment of staff, to avoid such curtailments, or minimise their impact.
- 3.3** Healthcare staff shortages and poor time out of cell, compounded by long waits in medicine queues, cut into prisoners' already limited time for domestic tasks and outside exercise; only about 45 minutes was scheduled for these activities. We found around 29% of prisoners locked up during our roll checks, similar to what we found during the previous inspection (26%).

Recommendation

- 3.4 Prisoners should have good access to association and outdoor exercise and have enough time to attend to their domestic needs.**

⁸ 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 Ofsted⁹ made the following assessments about the learning and skills and work provision:

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

Management of learning and skills and work

- 3.6** Strategic and operational management of learning, skills and work did not effectively drive the development of the provision to support prisoners' successful resettlement. The provision was not based on a recent assessment of the needs of the prison population and the range, level and progressions routes offered were too limited. Typically, around 60% of new prisoners had English and maths skills below level 1. Prisoners without a level 1 or above were expected to gain the qualification by studying once they had commenced work. There were long waiting lists for vocational training and education courses, particularly in English and maths.
- 3.7** The pace of improvement was slow. Managers did not prioritise prisoners' attendance at activities and participation rates were low and had declined since the previous inspection. Education and training facilities were often underused due to regime demands. Partnerships with employers were inadequate to support prisoners' successful resettlement.
- 3.8** The small education and training provision provided by NOVUS was good. Apart from education, the provision was not subject to comprehensive quality assurance arrangements to raise standards. Very recently, the quality improvement group had started to focus on evaluating and raising quality rather than just tackling operational activities. However, it was too early to assess the impact of this welcome change.
- 3.9** The prison's use of data and targets for performance management required improvement. An action plan was in place, but measures to aid monitoring were underused. Progress in achieving outcomes was too slow.

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

Recommendations

- 3.10 Partnership working with employers should be developed and used to support prisoners' resettlement.**
- 3.11 Performance management should use data and targets effectively to drive improvement.**

Provision of activities

- 3.12** Induction was generally well planned and managed. Staff treated learners with respect and helped them develop focused and realistic targets for their education and future work plans.
- 3.13** The prison offered 449 full-time equivalent purposeful activity places that included 160 part-time places. This was only enough to occupy 69% of the prison population. Prisoners attended workshops and education on a part-time basis. Attendance at vocational training and work was full-time only. Changes in pay rates had been introduced to encourage participation in activities, but with limited success. Allocations were fair and equitable.
- 3.14** During the inspection, 118 learners attended education classes. While some relevant education courses were offered, the number of places was too limited. They included courses in: English and maths; information and communication technology (ICT); English for speakers of other languages (ESOL; employability; personal finance; and customer services.
- 3.15** The prison had 390 full-time equivalent work places that included employment in textile garment manufacturing. An appropriate variety of work activities was available in prison areas, including in the kitchens, gardens and waste disposal. Other activities included cleaning, servery and laundry work on the wings. Additional orderly work comprised duties in prison departments, such as the library, education, and gym. No accredited training was available in the workshops or work areas to help prisoners prepare for employment on release. Wing workers were underemployed.
- 3.16** The vocational workshops provided 30 full-time equivalent places offering painting and decorating and carpentry and joinery at level 1. The prison supported 19 learners on distance learning courses and three on Open University programmes. Except in the kitchen, vulnerable prisoners had the same access to purposeful activities as other prisoners.

Quality of provision

- 3.17** Individual coaching in most of the provision, which consisted of workshops and work, required improvement. It did not ensure all prisoners were fully occupied or sufficiently challenged. Prisoners' work did not routinely provide them with the opportunity to experience the demands of commercial time constraints or standards. The breadth of work and training was too limited to ensure prisoners undertook progressively more complex tasks and greater responsibility. Arrangements to recognise and promote most prisoners' employability and transferable skills were in place but not used. Few prisoners participated in a classroom-based course to improve their English and maths skills. No outreach support was available.
- 3.18** Teaching in the small vocational training provision was good. Tutors used their relevant industrial experience well to ensure prisoners were involved and made good progress in sessions. They used assessment appropriately to promote learners' progress.

- 3.19** Standards of accommodation were good throughout education. Classroom-based courses, offered by the education provider, were well planned to meet learners' short stays. Teaching and learning had improved since the last inspection and was usually good. Tutors prepared interesting and varied activities that developed learners' understanding and skills well. In the better sessions classroom management and learners' behaviour were good. In a minority of maths sessions, they required improvement to ensure all learners stayed focused.
- 3.20** Tutors in education knew their learners well and planned activities to build on learners' starting points. Peer mentors helped support learners to progress. Tutors incorporated a range of group and individual activity to help prisoners develop team working and independent learning skills. Verbal feedback during lessons was constructive and ensured prisoners generally achieved well. Written feedback did not always focus on how prisoners could improve. In most sessions, good connections were made to employment. For example, in ICT, learners worked well in groups to identify the range of jobs in a theme park that used computer skills. Prisoners understood how their course would help them find employment and develop their careers. More able learners did not always receive sufficiently challenging tasks to enable them to achieve their maximum potential.
- 3.21** Most individual learning plans were completed well; learners set their own academic and personal targets. However, learners' progress reviews did not consistently highlight what else they needed to do to succeed.

Recommendations

- 3.22 Individual coaching in workshops and work should be improved so prisoners are fully occupied and challenged.**
- 3.23 Prisoners should have the opportunity to have their employability and transferable skills recognised and promoted to a higher level.**
- 3.24 The prison should ensure work includes progressively more demanding activities so that prisoners develop their skills and attain relevant qualifications.**

Personal development and behaviour

- 3.25** In production workshops and at work, inappropriate language and behaviour was not sufficiently challenged to enhance prisoners' employability. Prisoners were not set individual improvement targets, nor was their work rate monitored. As a result, they failed to develop an appropriate work ethic.
- 3.26** Prisoners were not always provided with appropriate personal protective equipment. Health and safety procedures were not comprehensively enforced. For example, prisoners could smoke in a textile workshop area. Prisoners working on the wings were underemployed and therefore did not sufficiently develop valuable employment skills.
- 3.27** Behaviour was generally good in education classes with learners setting themselves improvement targets for their behaviour and their employment skills, such as listening to others. In classes, prisoners diligently worked on individual, pair and group tasks. Many were highly motivated and completed work in their cells. Learners were proud of their neat, well-presented written and practical work. They developed the self-esteem and confidence they needed to present their ideas to their peers and respond appropriately to feedback. In all learning and work areas relationships between staff and learners were respectful.

Recommendations

- 3.28** Staff should set prisoners challenging performance targets, including for their behaviour, to enhance their employability.
- 3.29** The prison should provide prisoners with appropriate personal protective equipment and safe working practices should be adopted.

Education and vocational achievements

- 3.30** A significant number of prisoners could not access accredited or non-accredited training to improve their English, maths or ICT skills. In 2015–2016, too many learners in education and vocational workshops did not achieve their qualifications as they moved to other prisons prior to completing their studies. In work, prisoners demonstrated very limited vocational skills development. Within the production workshops, the development of prisoners' higher level skills, valued by industry, was weak. Prisoners allocated to work in areas, such as the serveries, cleaning and painting and decorating did not receive relevant training or acquire qualifications appropriate for their roles.
- 3.31** Across the provision, attendance was erratic and low. Regular curtailments of the prison regime since June 2016 had a particularly significant impact. During the inspection, too many sessions we observed did not start on time. In education, this had a negative effect on learners' progress. They took longer to achieve their qualification and their ability to progress to higher level courses was impaired.
- 3.32** Where learners stayed on their course for the planned duration, their pass rates were mostly high or very high. In 2015–2016, pass rates at entry levels in English and maths were very high and had improved since the previous inspection. However, the rates at level 2 in both English and maths required improvement.

Recommendation

- 3.33** The prison should ensure that prisoners develop their English, maths and ICT skills appropriately, and have them accredited where relevant.

Library

- 3.34** The prison had two libraries staffed by a library manager and senior library assistant. Five library orderlies supported them.
- 3.35** Despite regime curtailments, access to the library was good. Library records showed around 68% of prisoners regularly borrowed items. Full-time workers could only visit the library once a fortnight. Staff did not provide a trolley service to the wings, but met prisoners' individual requests.
- 3.36** Stock records were accurate and produced useful reports to identify users' preferences. Managers had good links with other prisons for inter-library loans. A suitable range of legal texts, Prison Service instructions and foreign language texts was available. Stock loss was too high.
- 3.37** A good range of texts for men with dyslexia and 'easy reads' was available but underused. Twenty-four prisoners were involved in the Six Book Challenge reading scheme. Turning

Pages, a mentoring scheme to help prisoners learn to read, had eight mentors and 12 participants. No one had ever completed the course because mentors and participants had no time allocated to work together. Strategies to promote wider prison literacy levels were underdeveloped. There were no reading groups and Storybook Dads (in which prisoners record stories for their children) had not been run for over three years.

- 3.38** The prison had four laptops and two DVD players, but they had not been installed and prisoners could not use them to help in areas, such as driving licence theory.

Recommendations

- 3.39** All prisoners should have equitable library access, including full-time workers.

- 3.40** A full range of strategies to raise prison literacy levels should be introduced.

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.

- 3.41** Prisoners had adequate access to the physical education (PE) facilities and most could attend two or three sessions per week. However, too often the facilities were closed, particularly at the weekend due to staff redeployment and other regime demands. In our survey, 25% of prisoners said they used the gym at least three times a week. The prison had not recently carried out a survey to identify why prisoners chose not to attend.
- 3.42** The five PE department staff were suitably qualified and experienced. One further member of staff was awaiting training to become appropriately qualified for his role. Six prisoner orderlies helped in the gym.
- 3.43** Gym equipment was adequate and included cardiovascular, resistance and free weight machines. Inadequate lighting meant the main hall could not be used for contact sports. A very limited range of activities was available for older prisoners and accredited training courses were not offered.
- 3.44** Prisoners participated in a detailed gym induction that included a declaration of personal health concerns. PE staff worked well with the health care department to provide individual remedial gym sessions to aid prisoners' recovery. The benefits of participating in gym activities to promote healthy living were appropriately advertised on wings.
- 3.45** All areas were clean and appropriately maintained. There were no screens in the communal showers.

Recommendation

- 3.46** A prison survey should be undertaken and used to provide activities that meet prisoners' needs effectively, including accredited courses and specialist provision for older prisoners.

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

- 4.1 The range of provision to help prisoners reduce their risk of reoffending and harm and to reintegrate them back into the community was extensive, but too much of it operated in isolation, undermining its overall effectiveness. Although managers recognised these shortfalls and were beginning to better integrate services, much remained to be done. Problems were exacerbated by the number of men held at Lincoln who were from outside the area.
- 4.2 The resettlement function was managed through the reducing reoffending strategy group, consisting of key department representatives from across the prison. The group met every two months and reviewed progress against the reducing reoffending strategy, published in April 2016. The meetings, however, focused almost exclusively on resettlement pathways; there were few indications that the integration of pathway work with the role of offender management or Shelter (sub-contracted by the Humberside, Lincolnshire and North Yorkshire Community Rehabilitation Company (CRC)) was discussed or raised as a concern. Attendance at the meeting was also variable and there was often no representative from the offender management unit (OMU).
- 4.3 Offender management did not have its own policy or strategy document. We were told that practice was determined by various national policies and guidance, but it was unclear how priorities specific to Lincoln were determined or how offender supervisors were expected to work with other services. The department had also suffered from the redeployment of its staff and we were told it had forfeited over 2500 hours of offender supervisor time in the previous 12 months, equating to more than one full-time member of staff each week.
- 4.4 In our survey, fewer prisoners than at comparator prisons (35% against 45%) said they had done something or something had happened to them at Lincoln to make them less likely to reoffend in the future.

Recommendation

- 4.5 **The prison should develop and implement a clear strategy covering all aspects of service integration and provision involved in the rehabilitation and reintegration of prisoners.**

Offender management and planning

Expected outcomes:

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

- 4.6** Most sentenced prisoners only stayed at Lincoln for a relatively short time. During our inspection 93% of the sentenced population had been at Lincoln for less than 12 months, and 55% for less than three months. The OMU had three 'pods' to which eight officer offender supervisors were allocated. One of the three probation officer offender supervisors was also allocated to each pod. Work was assigned exclusively according to the teams' capacity, with little or no consideration of experience or knowledge.
- 4.7** An offender supervisor saw all remanded or newly sentenced prisoners within 24 hours of their arrival at Lincoln to complete a basic custody screening. Shelter completed resettlement plans within a further five days. None of the documents we looked at during the inspection contained any public protection information and we came across a number of examples where no assessment or plan had been completed. However, in each case the prisoner had been transferred to Lincoln from another establishment. Although we were told there was no backlog of offender assessment system (OASys) documents, the prison had transferred 103 prisoners in the previous six months before an assessment had been completed. This was primarily due to pressure from the population management group to create places at Lincoln for new prisoners. In several of the cases we looked at, OASys documents were out of date.
- 4.8** In our survey, 74% of prisoners, more than the comparator (61%), said they had an offender manager in the community. More also said they had a named offender supervisor (54% against 30%) and 39% said they had a sentenced plan, compared with only 32% in comparable prisons. However, it was disappointing that 61% of prisoners said that no one was working with them to help them achieve sentence plan targets. Although our case reviews identified considerable variation in the work undertaken, they did broadly reflect these survey findings.
- 4.9** In all the cases we reviewed, an offender supervisor had been allocated and most had a sentence plan and/or a resettlement plan. In several instances, the prisoner had been transferred to Lincoln relatively recently and there was evidence that plans were not consistently updated; in some cases, we found sentence plan targets were not relevant to their location in Lincoln. In too many cases we found there was no ongoing contact between the offender supervisor and the prisoner, which was a concern when they were assessed as posing a high risk of harm and were close to being released.
- 4.10** We also found a worrying number of cases where, despite work having been carried out, nothing was recorded on P-Nomis (the Prison Service IT system) to help inform wider release planning through other departments or reintegration back into the community. In one example, good offender supervisor interactions had been undermined by a failure to record information from a series of multidisciplinary meetings to plan the prisoner's release and manage his significant mental health problems.
- 4.11** In contrast, we also saw some examples of good work with prisoners. In one example, an offender supervisor and offender manager, along with a psychologist, worked together to try to get a prisoner relocated to somewhere better suited to his needs.
- 4.12** No casework supervision was offered to any of the officer offender supervisors. While staff could offer support if it was asked for, we were concerned that some officer offender

supervisors managing high risk prisoners would receive little or no oversight of their work to ensure it was consistent or effective. We were told that probation staff did receive such support from the senior probation officer.

- 4.13** In the six months up to the inspection, 142 men had been considered by the home detention curfew (HDC) board, 42 of whom had been successful. Many men were appropriately excluded owing to previous breaches or offences, but we were concerned that a further 39 had been transferred to another prison, despite the HDC process having been started. We looked at the cases of several prisoners and found that where HDC had been declined, decisions appeared justified. Most prisoners (32) who were successful in obtaining HDC were released on their HDC eligibility date.

Recommendations

- 4.14 Prisoners should not be transferred from Lincoln before an up to date OASys is completed or while being considered for HDC, except in exceptional circumstances.**
- 4.15 Prisoners transferred to Lincoln within six months of release should be prioritised for contact and should have their OASys updated, especially those assessed as posing a high or very high risk of harm.**
- 4.16 All work undertaken by the offender management unit should be recorded on P-Nomis to ensure effective communication with other departments.**
- 4.17 All offender supervisors should receive regular professional casework supervision, especially those managing high risk of harm prisoners.**

Public protection

- 4.18** The prison had its own public protection policy but did not consistently adhere to it. During the inspection 197 prisoners were identified as posing a public protection concern (96 for harassment or with restraining orders and 101 for child protection) and 74 were subject to telephone and/or mail monitoring. Cases were appropriately reviewed at the weekly inter-departmental risk assessment and management panel (IRAMP) meetings. However, they were poorly attended, often by only three or four people, including a minute taker. The meeting reviewed multi-agency public protection arrangement (MAPPA) cases and other prisoners assessed as high risk. The absence of key representatives from across the prison potentially undermined the effectiveness of this process.
- 4.19** The prison held 166 men identified as subject to MAPPA. It was a concern that we came across a number of men within a few weeks of their release whose designated MAPPA level had not been confirmed by the community responsible officer and who had also not had their cases reviewed by the IRAMP. We were told that the prison did respond to requests for MAPPA F information-sharing reports and those we reviewed were reasonable.

Recommendation

- 4.20 The IRAMP should be better focused on its work reviewing MAPPA cases and all men subject to MAPPA should be reviewed regularly in the last few months before release.**

Categorisation

- 4.21** Categorisation and categorisation reviews were up to date and generally undertaken on time. During the inspection, 77% of the sentenced population were category C prisoners and their transfer to other prisons was relatively easy. However, because around 60% of the population were from outside the area, there were often conflicting priorities. Prisoners often wanted to move closer to home, while the prison needed to create space for new arrivals. It was relatively rare that prisoners were transferred to meet sentence plan targets or complete offending behaviour courses. The prison had good links with North Sea Camp open prison and most category D prisoners with sufficient time to serve were transferred there.
- 4.22** The greatest difficulty related to the transfer of category B prisoners (63 during the inspection), especially those serving four years and less. In some cases, they spent their whole sentence at Lincoln. Thirty-five prisoners had been at Lincoln over a year and 11 for over two years.

Indeterminate sentence prisoners

- 4.23** The prison held 62 indeterminate sentence prisoners, including 29 serving sentences for public protection. Most prisoners were either on recall or had been returned from open conditions, although two had been sentenced within the previous 12 months. Multi-agency lifer risk assessment panels had been completed with few problems or delays. Although all indeterminate prisoners were allocated an offender supervisor, there was no separate policy or any specific provision beyond those for all prisoners. A recent survey of indeterminate sentence prisoners indicated they most needed family visits, which they could access alongside other prisoners.

Reintegration planning

Expected outcomes:

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

- 4.24** The prison released an average of about 84 men each month. Shelter managed resettlement planning. The organisation was responsible for five mandatory areas of work (accommodation, employment training and education, finance benefit and debt, support for those working in the sex industry and support for victims of domestic abuse) as well as for coordinating all support with the community responsible officer. Shelter staff were expected to interview prisoners around 12 weeks prior to release to evaluate their needs and make referrals to service providers. Although the work we saw was variable, we were concerned by how many men due to be released within a few days had no resettlement plan or one that had not been reviewed since they had arrived into custody.
- 4.25** This shortfall was compounded by the pathway providers' lack of integration. Even when resettlement plans had been completed within a prisoner's last 12 weeks of their sentence, they simply responded to any identified concerns by indicating that work was required. They contained no update on whether any work had been undertaken. The plans we saw were of little value in keeping the community responsible officer informed about a prisoner. This was disappointing as there was evidence that some good work was being undertaken by several organisations prior to prisoners' release.

- 4.26** There was confusion about who was responsible for liaising with community responsible officers. Managers in the OMU believed that for prisoners serving less than 12 months this role fell to Shelter staff and for those serving over 12 months, offender supervisors were responsible. This view was not shared by Shelter staff and some offender supervisors were not clear where responsibility lay.
- 4.27** Lincolnshire Action Trust (LAT) had, up until May 2015, provided the resettlement service at the prison. The department had been reduced considerably but still ran some innovative projects, including the Supporting People After Remand or Conviction (SPARC) project (see paragraph 1.3), an employability and support project. The latter offered prisoners an opportunity to obtain information about community services, meet their families and charge mobile phones immediately after leaving prison (see also paragraph 4.41). This project was well managed and prisoners appreciated it, but it was not linked to the work of the Shelter team, which risked resettlement plans not being reinforced and referrals to community support not being made. Links between LAT and both the OMU and Shelter were weak.

Accommodation

- 4.28** Shelter offered prisoners support with accommodation problems both on arrival, as well as in their last few weeks prior to release. Help to end tenancies or ensure housing benefit was maintained was generally reasonable, but support for those released from custody was more problematic. Good links had been established with community support agencies and services within Lincoln, but for those who were from outside the area – around 60% of those released – assistance varied considerably and fewer links had been established. As a result, over 20% of prisoners were released without a fixed address. Prisoners were given information on where to go if they were homeless prior to release.

Education, training and employment

- 4.29** The quality of the National Careers Service provided by Futures was good. Advisers provided clear impartial help for prisoners that reflected their previous experience and plans well. Staff did not visit prisoners on the wings when they were subject to lockdowns. Prisoners received help to look for jobs, write CVs and undertake distance learning courses using the virtual campus (internet access for prisoners to community education, training and employment opportunities). Wider use of the virtual campus was underdeveloped.
- 4.30** Analyses of prisoners' employment goals and relevant labour market information were produced so work and training could be planned prior to release. However, the information was not used effectively enough to develop the curriculum or work opportunities.
- 4.31** Employment services were not sufficiently well coordinated to avoid the duplication of activities. Reliable data on prisoners entering education, training and employment on release were not available.

Recommendation

- 4.32** **The prison should exploit fully the potential of the virtual campus.**

Health care

- 4.33** Pre-release health care arrangements were effective and prisoners on medication were discharged with a seven-day supply and a discharge letter for the GP. The mental health team provided a good level of support and liaised with community teams for those with complex and enduring mental health problems. There were good links with palliative care and end of life services when required.

Drugs and alcohol

- 4.34** Prisoners in the last weeks of their sentence could meet with an Addaction community worker who visited the prison regularly to organise post-release drug and alcohol support across Lincolnshire. Drugs information was available during visits and a family support phone line had recently been established. Links between the substance use service and other prison-based resettlement services required improvement (see paragraph 4.25).

Finance, benefit and debt

- 4.35** Shelter staff provided prisoners with a 'debt pack', which provided good information about debt management and some standard letters so debts could be frozen while they were in custody. Although in our survey, 29% of prisoners, compared with 21% in comparator prisons, said they knew whom to speak to about finances, we were not confident that the service met prisoners' needs and no figures were kept of how effective the provision was. We were told that prisoners now had free phone access to a debt advice line, although prisoners we spoke to were unaware of it. A 'money matters' programme was being introduced.
- 4.36** Prisoners had good access to guidance on benefit claims. However, around 50% of prisoners leaving Lincoln could not work because of a physical or mental health problem but could start benefit claims prior to release. We were concerned as this group was often among the most vulnerable.

Children, families and contact with the outside world

- 4.37** There was no overarching family strategy or direct lead staff member to oversee this work, although the family pathway was discussed quarterly at the reducing reoffending meeting.
- 4.38** Booking line staff were helpful, but we were told it could be hard to book social visits. There was nowhere on site that visitors could get refreshments before the visit. Visitors were searched sensitively and respectfully, but prisoners were routinely strip-searched.
- 4.39** At our last inspection, we were concerned that men from E wing waited in a holding room that was in full view of the visits room. The holding room was now in another unsuitable location; it was not supervised and prisoners had no access to an officer if they needed one.
- 4.40** Visits staff were approachable and unobtrusive. The visits hall was clean and pleasant and the atmosphere relaxed. A play area and a good selection of refreshments, served by prisoners, were available. Closed visits took place in full view of the visits hall, which was not appropriate. Regular themed family days were held during school holidays. They were well attended and men and their families valued them.

- 4.41** Good family support and family engagement work was available through the LAT. Men and their families could receive support at court, during custody and on release (see also paragraph 4.27). The First Centre, just outside the prison, provided local families with a drop-in service. All men and their friends and families could access support, including advocacy, family mediation and referrals to specialist organisations or lawyers. The LAT also ran regular Being a Dad parenting skills courses for prisoners. The 'departure lounge' service, based in the First Centre, was a welcoming space where men and their friends and families could be reunited.

Recommendations

- 4.42** Prisoners should only be strip-searched if a risk assessment deems it necessary.
- 4.43** Men from E wing who are waiting for visits should be held in an appropriate location with reasonable facilities.

Attitudes, thinking and behaviour

- 4.44** There were no formally accredited offending behaviour programmes at Lincoln. Some individual work was undertaken via the OMU, often in consultation or partnership with the area psychology service, but the number seen was small. However, the prison had developed a sex offender management strategy in August 2016. There were signs that it was having some impact, both in helping to move prisoners on to more appropriate establishments and in working directly with them.
- 4.45** Where offending behaviour programmes were required, prisoners could be transferred to a prison delivering them. However, we were told this was often a source of frustration since men were frequently transferred to prisons that would take them rather than to those providing the right range of interventions.

Recommendation

- 4.46** Prisoners with offending behaviour needs, especially those identified as posing a high risk of harm or high risk of reoffending, should have access to necessary support, either at Lincoln or at an alternative establishment.

Additional resettlement services

- 4.47** Prisoners were asked during the preparation of resettlement plans if they had experienced domestic abuse or had worked in the sex industry; very few said they wanted help or support. Shelter staff were trying to find appropriate community support to which they could direct prisoners but at the time of the inspection such provision was absent.

Recommendation

- 4.48** The prison should ensure that prisoners identified as victims of domestic abuse or having worked in the sex industry are able to access necessary support.

Section 5. Summary of recommendations and good practice

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

Main recommendations

To the governor

- 5.1** The oversight and day-to-day management of use of force should ensure force is only used when necessary, mandatory recording arrangements are followed and lessons are learned when it is used. (S44)
- 5.2** Support for the protected characteristics must ensure their needs are understood and, where possible, met. (S45)
- 5.3** Learning and skills provision should be sufficient to meet the needs of the population at Lincoln. (S46)
- 5.4** All available purposeful activity places at Lincoln should be used to ensure as many men as possible are occupied in activities that contribute to their rehabilitation. (S47)
- 5.5** All prisoners being released should have an up-to-date resettlement plan and be offered appropriate resettlement support; community-based responsible officers should be informed of work that has been undertaken and what is still required. (S48)

Recommendations

Early days in custody

- 5.6** Prisoners should not be delayed in reception. (1.15, repeated recommendation 1.16)
- 5.7** The first night centre should provide a reasonable standard of accommodation, with clean cells and functioning toilets and showers. (1.16)
- 5.8** Staff should be aware of the location of all new prisoners so that regular enhanced checks on their welfare can be made. (1.17)

Bullying and violence reduction

- 5.9** Plans to introduce several interventions designed to address many aspects of violence and antisocial behaviour such as one-to-one work, conflict resolution, and anger management, should be implemented. (1.23)
- 5.10** Targeted work to address specific behaviour management issues should be introduced, along with an action plan to identify and manage necessary actions. (1.24)

Self-harm and suicide

- 5.11** Recommendations from deaths in custody reports should be implemented in full; senior managers should monitor their implementation through an overarching action plan. (1.32)
- 5.12** ACCT documentation should demonstrate consistent care for prisoners at risk of self-harm. Support arrangements should include good quality care planning and multidisciplinary reviews. (1.33)

Security

- 5.13** The suspicion drug testing programme should be sufficiently resourced so that all prisoners suspected of taking drugs are tested within required timescales and without gaps in provision. (1.45, repeated recommendation 1.48)

Incentives and earned privileges

- 5.14** Decisions to demote prisoners to the basic level should be justified and always followed by a thorough investigation. (1.52)
- 5.15** The regime for those on the basic level of the IEP scheme should provide the opportunity to demonstrate improvements in behaviour, as defined in individual and well-structured improvement targets. (1.53, repeated recommendation 1.55)

Discipline

- 5.16** The use of segregation should be monitored and analysed regularly and action taken to address any issues identified. (1.65)

Substance misuse

- 5.17** Prisoners receiving clinical treatment should always be placed in cells with observation hatches during their first night and those undergoing alcohol detoxification should be prioritised. (1.72)
- 5.18** The administration of controlled drugs on A wing should cease and a more suitable location found. (1.73)

Residential units

- 5.19** Cells designed to hold one prisoner should not be used to hold two. Cells should be clean, well-furnished and adequately heated. (2.10)
- 5.20** All wing showers should be well maintained and in good working order. (2.11)
- 5.21** The prison should ensure applications receive a prompt and appropriate response. (2.12)

Equality and diversity

- 5.22** Foreign national prisoners' concerns should be explored and addressed and arrangements put in place to ensure they have effective structured support, including access to interpreters when needed. (2.32)

Complaints

- 5.23** Confidential access complaints and complaints against staff should be systematically recorded and investigated. (2.41)

Legal rights

- 5.24** Legal visits should take place in rooms providing privacy. (2.45)

Health services

- 5.25** The prison should establish an effective monitoring system for AEDs and all custody staff should understand agreed emergency codes to ensure prompt and appropriate responses to medical emergencies. (2.58)
- 5.26** Nurse-led clinics for prisoners with life-long conditions, underpinned by evidence-based care plans, should be developed further and assessment, treatment and reviews undertaken by appropriately trained and supervised staff. (2.64)
- 5.27** In-possession risk assessments should be reviewed routinely and lockable in-cell cupboards should be provided so prisoners can store their medication securely. (2.70)
- 5.28** Arrangements for medication administration should ensure that prisoners are given their medication in confidence and safely. (2.71, repeated recommendation 2.72)
- 5.29** Patients should receive their medication promptly and at clinically appropriate times to ensure continuity of treatment is appropriately maintained. (2.72)
- 5.30** The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.82)

Catering

- 5.31** Breakfast packs should be issued on the day they are meant to be eaten. (2.88, repeated recommendation 2.86)

Time out of cell

- 5.32** Prisoners should have good access to association and outdoor exercise and have enough time to attend to their domestic needs. (3.4)

Learning and skills and work activities

- 5.33** Partnership working with employers should be developed and used to support prisoners' resettlement. (3.10)
- 5.34** Performance management should use data and targets effectively to drive improvement. (3.11)
- 5.35** Individual coaching in workshops and work should be improved so prisoners are fully occupied and challenged. (3.22)

- 5.36** Prisoners should have the opportunity to have their employability and transferable skills recognised and promoted to a higher level. (3.23)
- 5.37** The prison should ensure work includes progressively more demanding activities so that prisoners develop their skills and attain relevant qualifications. (3.24)
- 5.38** Staff should set prisoners challenging performance targets, including for their behaviour, to enhance their employability. (3.28)
- 5.39** The prison should provide prisoners with appropriate personal protective equipment and safe working practices should be adopted. (3.29)
- 5.40** The prison should ensure that prisoners develop their English, maths and ICT skills appropriately, and have them accredited where relevant. (3.33)
- 5.41** All prisoners should have equitable library access, including full-time workers. (3.39)
- 5.42** A full range of strategies to raise prison literacy levels should be introduced. (3.40)

Physical education and healthy living

- 5.43** A prison survey should be undertaken and used to provide activities that meet prisoners' needs effectively, including accredited courses and specialist provision for older prisoners. (3.46)

Strategic management of resettlement

- 5.44** The prison should develop and implement a clear strategy covering all aspects of service integration and provision involved in the rehabilitation and reintegration of prisoners. (4.5)

Offender management and planning

- 5.45** Prisoners should not be transferred from Lincoln before an up to date OASys is completed or while being considered for HDC, except in exceptional circumstances. (4.14)
- 5.46** Prisoners transferred to Lincoln within six months of release should be prioritised for contact and should have their OASys updated, especially those assessed as posing a high or very high risk of harm. (4.15)
- 5.47** All work undertaken by the offender management unit should be recorded on P-Nomis to ensure effective communication with other departments. (4.16)
- 5.48** All offender supervisors should receive regular professional casework supervision, especially those managing high risk of harm prisoners. (4.17)
- 5.49** The IRAMP should be better focused on its work reviewing MAPPA cases and all men subject to MAPPA should be reviewed regularly in the last few months before release. (4.20)

Reintegration planning

- 5.50** The prison should exploit fully the potential of the virtual campus. (4.32)
- 5.51** Prisoners should only be strip-searched if a risk assessment deems it necessary. (4.42)

- 5.52** Men from E wing who are waiting for visits should be held in an appropriate location with reasonable facilities. (4.43)
- 5.53** Prisoners with offending behaviour needs, especially those identified as posing a high risk of harm or high risk of reoffending, should have access to necessary support, either at Lincoln or at an alternative establishment. (4.46)
- 5.54** The prison should ensure that prisoners identified as victims of domestic abuse or having worked in the sex industry are able to access necessary support. (4.48)

Examples of good practice

- 5.55** SPARC project staff provided remanded prisoners with reassurance, as well as an assessment of their needs, which enabled them to alert the prison reception of any specific support needs. (1.4)
- 5.56** Quarterly meetings between prison and police managers and the appointment of a police investigation officer at the prison had resulted in the prompt resolution of matters referred to the police and ensured a good mutually beneficial relationship between the two agencies. (1.46)
- 5.57** The polite and thorough responses to complaints supported a respectful culture. (2.42)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Sean Sullivan	Team leader
Francesca Cooney	Inspector
Karen Dillon	Inspector
Deri Hughes-Roberts	Inspector
Keith McInnis	Inspector
Gordon Riach	Inspector
Ellis Cowling	Researcher
Anna Fenton	Researcher
Helen Ranns	Researcher
Emma Seymour	Researcher
Paul Roberts	Substance misuse inspector
Maureen Jamieson	Health services inspector
Peter Gibbs	Pharmacist
Gary Turney	Care Quality Commission inspector
Julie Ashton	Ofsted inspector
Marina Gaze	Ofsted inspector
Darryl Jones	Ofsted inspector
Paddy Doyle	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, we found that the new reception was welcoming but prisoners stayed there for too long. First night arrangements were poor, with dirty accommodation and a lack of support. Induction was reasonably good. Too many prisoners felt unsafe but arrangements for identifying violent incidents and reducing levels of harm had improved. Prisoners at risk of harm felt well supported but we were not assured that case management was always effective. Security arrangements, including dynamic security, were good. Drug availability was similar to that at other prisons but there was no supply-reduction plan. The number of incidents involving the use of force had reduced but processes were not effectively managed. The use of segregation had decreased considerably but the new unit was not fit for purpose. Drug and alcohol treatment had improved. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

The first night environment should be relatively calm and quiet. Cells should be clean and prepared for use. New prisoners should be provided with support from staff and peer supporters. (S49)

Partially achieved

New arrangements to identify incidents of victimisation and violence should be embedded. All staff should be aware of and use violence reduction processes to make the prison safer. (S50)

Partially achieved

Recommendations

Prisoners should not be delayed in reception. (I.16)

Not achieved (recommendation repeated, I.15)

Case management and review arrangements for prisoners at risk of self-harm should be improved. (I.33)

Partially achieved

The number of Listeners should be increased. (I.34)

Partially achieved

Formal adult safeguarding policies should be introduced. (I.38)

Achieved

A drug supply-reduction strategy should be developed and should include an action plan and performance measures. (I.47)

Partially achieved

The suspicion drug testing programme should be sufficiently resourced so that all prisoners suspected of taking drugs are tested within required timescales and without gaps in provision. (1.48)
Not achieved (recommendation repeated, 1.45)

Prisoners' negative perceptions of the incentives and earned privileges (IEP) scheme should be explored and steps taken to improve their understanding and confidence in it. (1.54)
Not achieved

The regime for those on the basic level of the IEP scheme should provide the opportunity to demonstrate improvements in behaviour, as defined in individual and well-structured improvement targets. (1.55)
Not achieved (recommendation repeated, 1.53)

All planned uses of force should be video-recorded and reviewed. (1.65)
Not achieved

Use of force dossiers should be fully completed in all cases and should include completed F213 and Annex A forms. (1.66)
Not achieved

The segregation unit should be made fit for purpose and robust enough to withstand the rigours of violent and disruptive prisoners. (1.75)
Achieved

The regime for prisoners in the segregation unit should be improved. (1.76)
Achieved

Prisoners should not be routinely strip-searched on location to the segregation unit. (1.77)
Achieved

Reintegration planning for those held in the segregation unit should be introduced and recorded. (1.78)
Achieved

Support services should be extended and include the development of a recovery unit. (1.87)
Achieved

There should be appropriate facilities to observe and monitor prisoners during stabilisation/detoxification. In the absence of a designated unit, observation hatches should be fitted on the first night landing. (1.88)
Not achieved

Controlled medication should be administered in a safe and suitable environment, and wing officers should be consistently available to supervise prisoners. (1.89).
Partially achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, we found that the cleanliness of the prison had improved and most areas were clean. There was good access to showers but insufficient prison clothing. Applications were not tracked. We saw good staff–prisoner relationships. The management of equality and diversity had improved and support for minority groups was evident but some basic needs remained unmet. The number of complaints was high and they were poorly managed. Health services, including access to key services, had improved and were good. A good level of primary and secondary mental health care was provided. The standard of food was reasonably good. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Cells designed to hold one prisoner should not be used to hold two. (2.7)

Not achieved

All wing showers should be maintained in good working order and any repairs effected quickly. (2.8)

Not achieved

There should be adequate clothing available each week for all prisoners. (2.9)

Achieved

Responses to applications should be tracked and monitored. (2.10)

Not achieved

Prisoners' negative perceptions of staff–prisoner relationships should be explored and acted on. (2.16)

Achieved

Electronic case note entries should be regularly updated to provide general oversight of a prisoner's behaviour and progress. (2.17)

Not achieved

Equality of prisoner treatment and access to the regime should be monitored for all protected characteristics and appropriate action taken to rectify any inequalities. (2.22)

Partially achieved

Discrimination incident report forms should be fully investigated and the complainant interviewed as part of the investigation. All should be signed off by a senior manager and quality assurance processes should be introduced. (2.23)

Not achieved

Prison information should be provided in the most commonly used languages. Professional telephone interpreting services should be used for confidential matters. (2.33)

Not achieved

Foreign national prisoners should be reliably provided with free monthly telephone calls, irrespective of visits. (2.34)

Achieved

Social care plans should be developed for all prisoners with disabilities who require additional help to complete everyday tasks. (2.35)

Achieved

Older prisoners and those with disabilities unlocked during the core day should have access to appropriate activities. (2.36)

Not achieved

A strategy and action plan should be introduced specifying how the specific needs of young prisoners will be met. (2.37)

Not achieved

A weekly Mass should be provided for all Catholic prisoners. (2.42)

Achieved

The data on complaints should be analysed to identify and take action as necessary. (2.47)

Achieved

Quality assurance of complaints should be introduced. (2.48)

Achieved

A full bail information and support service should be developed and offered to all newly remanded prisoners. (2.52)

Not achieved

An up-to-date health needs assessment should be completed to inform healthcare delivery. (2.64)

Achieved

The reception of prisoners should not be delayed because of a lack of availability of health services staff. (2.65)

Not achieved

Arrangements for medication administration should ensure that prisoners are given their medication in confidence and safely. (2.72)

Not achieved (recommendation repeated, 2.71)

The in-possession risk assessment should include the identity of the medication being assessed (2.73).

Achieved

All relevant prisoners should have access to professional counselling services. (2.79)

Achieved

Breakfast packs should be issued on the day they are meant to be eaten. (2.86)

Not achieved (recommendation repeated, 2.88)

Prisoners should be able to access a full prison shop order within 72 hours of arrival and should not be charged for the delivery of catalogue items, newspapers and magazines. (2.91)

Achieved

Purposeful activity

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

At the last inspection, in 2013, we found that adherence to the daily regime had improved and was good. Time out of cell was reasonable for employed prisoners but poor for those who were unemployed. The new national core day allowed too little association. Learning and skills provision had improved. There were sufficient activity places for most of the population but attendance was poor. The range and variety of education, vocational training and work was generally appropriate but some higher-level qualifications were yet to be introduced. Prisoner functional skills were not sufficiently developed. The quality of teaching and learning was inconsistent. Achievements of qualifications were generally good. The libraries had been enhanced and usage was good. PE provision was reasonable. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Attendance at education, work and vocational training should be prioritised, non-attendance should be challenged and planned disruptions should be resolved. (S51)

Not achieved

Recommendations

Access to evening association should be increased. (3.5)

Not achieved

All prisoners should have access to at least an hour's daily exercise in the open air. (3.6)

Not achieved

Data and targets should be more widely used to aid monitoring and raise standards. (3.13)

Not achieved

Quality assurance arrangements across all learning and skills provision should be implemented. (3.14)

Not achieved

Higher-level qualifications should be introduced in some vocational and production workshops to enable prisoners to progress. (3.22)

Not achieved

The virtual campus should fully support learners' development. (3.23)

Not achieved

The quality of teaching and learning should be improved so that it is all of a high standard. (3.30)

Achieved

The English and mathematics skills of all learners should be improved considerably. (3.31)

Not achieved

Pass rates in English and mathematics at entry and intermediate level, and information technology qualifications at intermediate level should be significantly improved. (3.35)

Partially achieved

Recreational PE should not disrupt learning, training or work. (3.44)

Achieved

Resettlement

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

At the last inspection, in 2013, the strategic management of resettlement was developing slowly but was still not informed by an effective needs analysis. Offender management had been restructured and provided a good platform for further development, although the backlog of offender assessment system (OASys) assessments had increased. Short-term prisoners now had an effective custody plan. The number of category D prisoners was high and too many were not proactively managed. Reintegration planning was good. All prisoners had access to mostly good-quality resettlement provision. A large number of sex offenders underwent no meaningful offending behaviour work and had little opportunity for progression. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

The backlog of OASys assessments should be tackled and all relevant prisoners should be seen by their offender supervisor promptly to be assessed, have relevant targets set, and progression and/or transfer pursued. (S52)

Partially achieved

Recommendations

A comprehensive needs analysis should inform the reducing reoffending strategy and action plan, including provision for minority groups such as indeterminate-sentenced prisoners and young adults. (4.6)

Partially achieved

Offender supervisors should not be cross-deployed and their workloads should be more closely managed to avoid slippages and promote a more proactive approach. (4.13)

Not achieved

Risk of serious harm assessments should always accurately identify risks to others while in custody. (4.18)

Not achieved

Information from security information reports should be entered onto the violent and sexual offenders register. (4.19)

Achieved

Decisions about the future categorisation of prisoners returned from open conditions should be made at the earliest opportunity. (4.25)

Achieved

Category D prisoners should be transferred quickly to an open prison. (4.26)

Achieved

Provision for indeterminate-sentenced prisoners should be improved and include forums and family days. (4.31)

Partially achieved

Resources to help prisoners in managing debt should be increased to meet demand. (4.44)

Achieved

Prisoners should be able to access a financial capability course. (4.45)

Partially achieved

Vulnerable prisoners leaving social visits should not be required to wait in cramped, hot and scruffy conditions in full view of other prisoners and visitors. (4.54)

Not achieved

The offending behaviour needs of the population, including sex offenders in denial of their offending, should be analysed and a comprehensive strategy put in place. (4.59)

Partially achieved

Appendix III: Prison population profile

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

Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	25	333	55.4%
Recall	1	69	10.8%
Convicted unsentenced	0	0	0.0%
Remand	9	88	15.0%
Civil prisoners	0	0	0.0%
Detainees	0	0	0.0%
Convicted unsentenced	7	51	9.0%
Immigration detainees	0	7	1.1%
Indeterminate sentence	0	51	7.9%
Unknown	0	5	0.8%
Total	42	604	100.0%

Sentence	18–20 yr olds	21 and over	%
Unsentenced	16	154	26.3%
Less than 6 months	4	53	8.8%
6 months to less than 12 months	8	56	9.9%
12 months to less than 2 years	6	67	11.3%
2 years to less than 3 years	3	48	7.9%
3 years to less than 4 years	1	38	6.0%
4 years to less than 10 years	4	93	15.0%
10 years and over (not life)	0	34	5.3%
ISPP (indeterminate sentence for public protection)		29	9.4%
Life		32	4.5%
Total	42	604	100.0%

Age	Number of prisoners	%
Under 21 years	42	6.5%
21 years to 29 years	224	34.7%
30 years to 39 years	187	28.9%
40 years to 49 years	120	18.6%
50 years to 59 years	50	7.7%
60 years to 69 years	17	2.6%
70 plus years: <i>maximum age=86</i>	6	0.9%
Total	646	100

Nationality	18–20 yr olds	21 and over	%
British	40	509	85.0%
Foreign nationals	2	91	14.4%
Not stated	0	4	0.6%
Total	42	604	100.0%

Security category	18–20 yr olds	21 and over	%
Uncategorised unsentenced	16	151	25.8%
Category B	0	63	9.8%
Category C	0	349	54.0%
Category D	0	40	6.2%
YOI open	3	0	0.5%
Other closed	23	1	3.7%
Total	42	604	100%

Ethnicity	18–20 yr olds	21 and over	%
White			
British	38	439	73.8%
Irish	0	3	0.5%
Gypsy/Irish Traveller	0	4	0.6%
Other white	1	68	10.7%
Mixed			
White and black Caribbean	1	10	1.7%
White and black African	0	2	0.3%
White and Asian	0	0	0%
Other mixed	0	8	1.2%
Asian or Asian British			
Indian	0	11	1.7%
Pakistani	1	5	0.9%
Bangladeshi	0	3	0.5%
Chinese	0	0	0%
Other Asian	0	4	0.5%
Black or black British			
Caribbean	1	20	3.3%
African	0	13	2.0%
Other black	0	13	2.0%
Other ethnic group			
Arab	0	1	0.2%
Other ethnic group	0	0	0
Not stated	0	0	0
Total	42	604	100%

Religion	18–20 yr olds	21 and over	%
Church of England	6	136	22.0%
Roman Catholic	4	99	15.9%
Other Christian denominations	2	82	13.0%
Muslim	2	47	7.6%
Sikh	0	6	0.9%
Hindu	0	1	0.2%
Buddhist	0	6	0.9%
Jewish	0	2	0.3%
Other	0	7	1.1%
No religion	28	217	37.9%
Nor stated	0	1	0.2%
Total	42	604	100.0%

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	9	1.4%	111	17.2%
1 month to 3 months	10	1.5%	132	20.4%
3 months to 6 months	4	0.6%	99	15.3%
6 months to 1 year	3	0.5%	73	11.3%
1 year to 2 years	0	0.0%	24	3.7%
2 years to 4 years	0	0.0%	8	1.2%
4 years or more	0	0.0%	3	0.5%
Total				

Sentenced prisoners only

		%
Foreign nationals detained post sentence expiry	7	1.1%
Total	7	1.1%

Unsentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	5	0.8%	58	9.0%
1 month to 3 months	3	0.5%	51	7.9%
3 months to 6 months	5	0.8%	33	5.1%
6 months to 1 year	2	0.3%	8	1.2%
1 year to 2 years	1	0.2%	4	0.6%
2 years to 4 years	0	0.0%	0	0.0%
Total	16	2.5%	154	23.8%

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 establishment¹⁰. Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 30 January 2017 the prisoner population at HMP Lincoln was 646. Using the method described above, questionnaires were distributed to a sample of 213 prisoners.

We received a total of 168 completed questionnaires, a response rate of 79%. This included one questionnaire completed via interview. Twenty-five respondents refused to complete a questionnaire and 20 questionnaires were not returned.

¹⁰ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

Wing/unit	Number of completed survey returns
A	47
B	33
C	43
E	43
Segregation unit	2

Presentation of survey results and analyses

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

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 differences¹¹ 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 Lincoln in 2017 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 33 local prisons since April 2013.
- The current survey responses from HMP Lincoln in 2017 compared with the responses of prisoners surveyed at HMP Lincoln in 2013.
- A comparison within the 2017 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2017 survey between those who are British and those who are foreign nationals.
- A comparison within the 2017 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2017 survey between the vulnerable prisoner wing (E) and the rest of the establishment.

¹¹ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.01 which means that there is only a 1% likelihood that the difference is due to chance.

Survey summary

Section I: About You

Q1.1	What wing or houseblock are you currently living on? See shortened methodology	
Q1.2	How old are you?	
	Under 21	8 (5%)
	21 - 29.....	64 (38%)
	30 - 39.....	48 (29%)
	40 - 49.....	30 (18%)
	50 - 59.....	13 (8%)
	60 - 69.....	3 (2%)
	70 and over	1 (1%)
Q1.3	Are you sentenced?	
	Yes	103 (62%)
	Yes - on recall.....	17 (10%)
	No - awaiting trial.....	29 (17%)
	No - awaiting sentence	15 (9%)
	No - awaiting deportation.....	2 (1%)
Q1.4	How long is your sentence?	
	Not sentenced.....	46 (29%)
	Less than 6 months.....	23 (14%)
	6 months to less than 1 year	14 (9%)
	1 year to less than 2 years	10 (6%)
	2 years to less than 4 years	14 (9%)
	4 years to less than 10 years.....	26 (16%)
	10 years or more.....	11 (7%)
	IPP (indeterminate sentence for public protection)	10 (6%)
	Life.....	7 (4%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes.....	17 (11%)
	No.....	144 (89%)
Q1.6	Do you understand spoken English?	
	Yes.....	163 (98%)
	No.....	3 (2%)
Q1.7	Do you understand written English?	
	Yes	159 (96%)
	No.....	7 (4%)

Q1.8	What is your ethnic origin?		
	White - British (English/ Welsh/ Scottish/ Northern Irish).....	122 (73%)	Asian or Asian British - Chinese 0 (0%)
	White - Irish	2 (1%)	Asian or Asian British - other..... 0 (0%)
	White - other.....	17 (10%)	Mixed race - white and black Caribbean 4 (2%)
	Black or black British - Caribbean.....	10 (6%)	Mixed race - white and black African ... 2 (1%)
	Black or black British - African	1 (1%)	Mixed race - white and Asian 0 (0%)
	Black or black British - other.....	0 (0%)	Mixed race - other..... 1 (1%)
	Asian or Asian British - Indian	3 (2%)	Arab..... 1 (1%)
	Asian or Asian British - Pakistani.....	2 (1%)	Other ethnic group 2 (1%)
	Asian or Asian British - Bangladeshi.....	0 (0%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes		6 (4%)
	No.....		157 (96%)
Q1.10	What is your religion?		
	None.....	71 (43%)	Hindu 0 (0%)
	Church of England.....	38 (23%)	Jewish 0 (0%)
	Catholic	22 (13%)	Muslim 14 (8%)
	Protestant.....	0 (0%)	Sikh 3 (2%)
	Other Christian denomination	11 (7%)	Other 5 (3%)
	Buddhist	1 (1%)	
Q1.11	How would you describe your sexual orientation?		
	Heterosexual/ Straight.....		164 (99%)
	Homosexual/Gay.....		1 (1%)
	Bisexual		1 (1%)
Q1.12	Do you consider yourself to have a disability (i.e. do you need help with any long term physical, mental or learning needs)?		
	Yes		56 (34%)
	No.....		110 (66%)
Q1.13	Are you a veteran (ex-armed services)?		
	Yes		14 (8%)
	No.....		152 (92%)
Q1.14	Is this your first time in prison?		
	Yes		52 (31%)
	No.....		116 (69%)
Q1.15	Do you have children under the age of 18?		
	Yes		90 (54%)
	No.....		76 (46%)

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		103 (61%)
	2 hours or longer		54 (32%)
	Don't remember		11 (7%)

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>	103 (61%)
	Yes	31 (18%)
	No.....	33 (20%)
	<i>Don't remember</i>	1 (1%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	103 (61%)
	Yes	5 (3%)
	No.....	59 (35%)
	<i>Don't remember</i>	1 (1%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	113 (67%)
	No.....	39 (23%)
	<i>Don't remember</i>	16 (10%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	132 (79%)
	No.....	32 (19%)
	<i>Don't remember</i>	4 (2%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	46 (28%)
	<i>Well</i>	73 (44%)
	<i>Neither</i>	30 (18%)
	<i>Badly</i>	12 (7%)
	<i>Very badly</i>	3 (2%)
	<i>Don't remember</i>	3 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	107 (64%)
	<i>Yes, I received written information</i>	13 (8%)
	<i>No, I was not told anything</i>	46 (28%)
	<i>Don't remember</i>	5 (3%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	127 (77%)
	No.....	34 (20%)
	<i>Don't remember</i>	5 (3%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	48 (29%)
	<i>2 hours or longer</i>	110 (66%)
	<i>Don't remember</i>	9 (5%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	138 (84%)
	No	20 (12%)
	<i>Don't remember</i>	7 (4%)

Q3.3 Overall, how were you treated in reception?

Very well.....	47 (28%)
Well.....	87 (52%)
Neither.....	17 (10%)
Badly.....	10 (6%)
Very badly.....	5 (3%)
Don't remember.....	1 (1%)

Q3.4 Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)

Loss of property.....	28 (17%)	Physical health.....	22 (13%)
Housing problems.....	31 (19%)	Mental health.....	57 (35%)
Contacting employers.....	5 (3%)	Needing protection from other prisoners	10 (6%)
Contacting family.....	53 (33%)	Getting phone numbers.....	47 (29%)
Childcare.....	3 (2%)	Other.....	9 (6%)
Money worries.....	23 (14%)	Did not have any problems.....	38 (23%)
Feeling depressed or suicidal.....	46 (28%)		

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

Yes.....	50 (31%)
No.....	71 (45%)
Did not have any problems.....	38 (24%)

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

Tobacco.....	139 (84%)
A shower.....	25 (15%)
A free telephone call.....	104 (63%)
Something to eat.....	119 (72%)
PIN phone credit.....	38 (23%)
Toiletries/ basic items.....	98 (59%)
Did not receive anything.....	6 (4%)

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.....	75 (46%)
Someone from health services.....	111 (68%)
A Listener/Samaritans.....	45 (27%)
Prison shop/ canteen.....	60 (37%)
Did not have access to any of these.....	27 (16%)

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.....	60 (37%)
What support was available for people feeling depressed or suicidal.....	58 (36%)
How to make routine requests (applications).....	43 (26%)
Your entitlement to visits.....	38 (23%)
Health services.....	61 (37%)
Chaplaincy.....	59 (36%)
Not offered any information.....	54 (33%)

Q3.9	Did you feel safe on your first night here?	
	Yes	120 (72%)
	No.....	41 (25%)
	Don't remember	5 (3%)
Q3.10	How soon after you arrived here did you go on an induction course?	
	Have not been on an induction course	20 (12%)
	Within the first week.....	100 (61%)
	More than a week.....	35 (21%)
	Don't remember	10 (6%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	Have not been on an induction course	20 (12%)
	Yes	71 (44%)
	No.....	63 (39%)
	Don't remember	8 (5%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment.....	20 (12%)
	Within the first week.....	62 (38%)
	More than a week.....	72 (44%)
	Don't remember	9 (6%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		Very easy	Easy	Neither	Difficult	Very difficult
	Communicate with your solicitor or legal representative?	16 (10%)	32 (20%)	24 (15%)	35 (22%)	30 (19%)
	Attend legal visits?	15 (10%)	43 (29%)	24 (16%)	18 (12%)	4 (3%)
	Get bail information?	6 (4%)	11 (8%)	24 (18%)	26 (19%)	19 (14%)
						N/A
						22 (14%)
						42 (29%)
						51 (37%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?					
	Not had any letters.....					30 (19%)
	Yes					63 (39%)
	No.....					68 (42%)
Q4.3	Can you get legal books in the library?					
	Yes					57 (35%)
	No.....					17 (10%)
	Don't know					91 (55%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		Yes	No	Don't know		
	Do you normally have enough clean, suitable clothes for the week?	54 (33%)	101 (62%)	8 (5%)		
	Are you normally able to have a shower every day?	81 (51%)	78 (49%)	0 (0%)		
	Do you normally receive clean sheets every week?	72 (46%)	74 (47%)	12 (8%)		
	Do you normally get cell cleaning materials every week?	78 (48%)	76 (47%)	7 (4%)		
	Is your cell call bell normally answered within five minutes?	28 (18%)	125 (80%)	4 (3%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	85 (53%)	74 (46%)	1 (1%)		
	If you need to, can you normally get your stored property?	17 (11%)	103 (64%)	41 (25%)		

Q4.5	What is the food like here?		
	Very good.....	7 (4%)	
	Good.....	37 (23%)	
	Neither.....	39 (24%)	
	Bad.....	40 (25%)	
	Very bad.....	37 (23%)	
Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?		
	Have not bought anything yet/ don't know.....	12 (7%)	
	Yes.....	63 (39%)	
	No.....	87 (54%)	
Q4.7	Can you speak to a Listener at any time, if you want to?		
	Yes.....	98 (59%)	
	No.....	12 (7%)	
	Don't know.....	55 (33%)	
Q4.8	Are your religious beliefs respected?		
	Yes.....	57 (35%)	
	No.....	22 (13%)	
	Don't know/ N/A.....	84 (52%)	
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?		
	Yes.....	74 (45%)	
	No.....	16 (10%)	
	Don't know/ N/A.....	73 (45%)	
Q4.10	How easy or difficult is it for you to attend religious services?		
	I don't want to attend.....	44 (27%)	
	Very easy.....	18 (11%)	
	Easy.....	20 (12%)	
	Neither.....	11 (7%)	
	Difficult.....	12 (7%)	
	Very difficult.....	9 (5%)	
	Don't know.....	51 (31%)	

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?			
	Yes.....	128 (78%)		
	No.....	28 (17%)		
	Don't know.....	8 (5%)		
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)			
		Not made one	Yes	No
	Are applications dealt with fairly?	18 (12%)	63 (40%)	75 (48%)
	Are applications dealt with quickly (within seven days)?	18 (12%)	47 (31%)	87 (57%)
Q5.3	Is it easy to make a complaint?			
	Yes.....	83 (54%)		
	No.....	22 (14%)		
	Don't know.....	49 (32%)		

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?	69 (43%)	36 (22%)	56 (35%)
Are complaints dealt with quickly (within seven days)?	69 (45%)	30 (19%)	56 (36%)

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

Yes	31 (19%)
No	129 (81%)

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

Don't know who they are.....	55 (34%)
Very easy.....	16 (10%)
Easy.....	18 (11%)
Neither.....	33 (20%)
Difficult.....	25 (16%)
Very difficult.....	14 (9%)

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	23 (14%)
Yes	67 (41%)
No	50 (30%)
Don't know	24 (15%)

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	23 (15%)
Yes	55 (35%)
No.....	59 (38%)
Don't know	19 (12%)

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

Yes	27 (17%)
No.....	134 (83%)

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	133 (82%)
Very well.....	5 (3%)
Well.....	7 (4%)
Neither.....	6 (4%)
Badly.....	3 (2%)
Very badly.....	8 (5%)

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

Yes	119 (74%)
No.....	41 (26%)

Q7.2 Is there a member of staff you can turn to for help if you have a problem?

Yes	96 (60%)
No.....	63 (40%)

Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	39 (24%)
	No.....	126 (76%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	9 (5%)
	Never.....	39 (24%)
	Rarely	40 (24%)
	Some of the time	44 (27%)
	Most of the time.....	22 (13%)
	All of the time.....	11 (7%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	106 (63%)
	<i>In the first week</i>	13 (8%)
	<i>More than a week</i>	32 (19%)
	<i>Don't remember</i>	16 (10%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	106 (67%)
	Very helpful.....	11 (7%)
	Helpful	23 (15%)
	Neither	9 (6%)
	Not very helpful	6 (4%)
	Not at all helpful.....	3 (2%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	Yes	81 (49%)
	No.....	83 (51%)
Q8.2	Do you feel unsafe now?	
	Yes	43 (27%)
	No.....	115 (73%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	<i>Never felt unsafe</i>	83 (53%)
	<i>Everywhere</i>	26 (16%)
	<i>Segregation unit</i>	5 (3%)
	<i>Association areas</i>	34 (22%)
	<i>Reception area</i>	8 (5%)
	<i>At the gym</i>	12 (8%)
	<i>In an exercise yard</i>	26 (16%)
	<i>At work</i>	14 (9%)
	<i>During movement</i>	22 (14%)
	<i>At education</i>	10 (6%)
	<i>At meal times</i>	27 (17%)
	<i>At health services</i>	16 (10%)
	<i>Visits area</i>	24 (15%)
	<i>In wing showers</i>	31 (20%)
	<i>In gym showers</i>	16 (10%)
	<i>In corridors/stairwells</i>	25 (16%)
	<i>On your landing/wing</i>	32 (20%)
	<i>In your cell</i>	17 (11%)
	<i>At religious services</i>	5 (3%)
Q8.4	Have you been victimised by other prisoners here?	
	Yes	44 (27%)
	No.....	122 (73%)

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 (9%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	13 (8%)
<i>Sexual abuse</i>	1 (1%)
<i>Feeling threatened or intimidated</i>	24 (14%)
<i>Having your canteen/property taken</i>	12 (7%)
<i>Medication</i>	7 (4%)
<i>Debt</i>	5 (3%)
<i>Drugs</i>	5 (3%)
<i>Your race or ethnic origin</i>	5 (3%)
<i>Your religion/religious beliefs</i>	5 (3%)
<i>Your nationality</i>	1 (1%)
<i>You are from a different part of the country than others</i>	5 (3%)
<i>You are from a traveller community</i>	2 (1%)
<i>Your sexual orientation</i>	0 (0%)
<i>Your age</i>	1 (1%)
<i>You have a disability</i>	8 (5%)
<i>You were new here</i>	13 (8%)
<i>Your offence/ crime</i>	4 (2%)
<i>Gang related issues</i>	8 (5%)

Q8.6 Have you been victimised by staff here?

Yes	41 (25%)
No	124 (75%)

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>	20 (12%)
<i>Physical abuse (being hit, kicked or assaulted)</i>	7 (4%)
<i>Sexual abuse</i>	1 (1%)
<i>Feeling threatened or intimidated</i>	16 (10%)
<i>Medication</i>	8 (5%)
<i>Debt</i>	0 (0%)
<i>Drugs</i>	2 (1%)
<i>Your race or ethnic origin</i>	7 (4%)
<i>Your religion/religious beliefs</i>	5 (3%)
<i>Your nationality</i>	4 (2%)
<i>You are from a different part of the country than others</i>	5 (3%)
<i>You are from a traveller community</i>	2 (1%)
<i>Your sexual orientation</i>	0 (0%)
<i>Your age</i>	2 (1%)
<i>You have a disability</i>	7 (4%)
<i>You were new here</i>	7 (4%)
<i>Your offence/ crime</i>	4 (2%)
<i>Gang related issues</i>	5 (3%)

Q8.8 If you have been victimised by prisoners or staff, did you report it?

<i>Not been victimised</i>	101 (66%)
Yes	24 (16%)
No	28 (18%)

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	24 (15%)	10 (6%)	24 (15%)	14 (9%)	60 (37%)	30 (19%)
	The nurse	23 (15%)	15 (9%)	35 (22%)	26 (16%)	44 (28%)	15 (9%)
	The dentist	26 (17%)	5 (3%)	12 (8%)	12 (8%)	57 (37%)	43 (28%)
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	43 (27%)	11 (7%)	45 (28%)	14 (9%)	29 (18%)	18 (11%)
	The nurse	29 (19%)	12 (8%)	51 (33%)	21 (14%)	25 (16%)	16 (10%)
	The dentist	58 (39%)	8 (5%)	28 (19%)	20 (13%)	18 (12%)	18 (12%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						24 (15%)
	<i>Very good</i>						10 (6%)
	<i>Good</i>						38 (24%)
	<i>Neither</i>						29 (18%)
	<i>Bad</i>						35 (22%)
	<i>Very bad</i>						24 (15%)
Q9.4	Are you currently taking medication?						
	Yes						96 (59%)
	No						68 (41%)
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>						68 (42%)
	<i>Yes, all my meds</i>						30 (19%)
	<i>Yes, some of my meds</i>						21 (13%)
	<i>No</i>						43 (27%)
Q9.6	Do you have any emotional or mental health problems?						
	Yes						96 (59%)
	No						68 (41%)
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>						68 (43%)
	Yes						55 (35%)
	No						36 (23%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	53 (33%)
	No	110 (67%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	41 (25%)
	No	123 (75%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy.....	54 (33%)
	Easy	15 (9%)
	Neither	9 (5%)
	Difficult.....	5 (3%)
	Very difficult.....	3 (2%)
	Don't know	78 (48%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	16 (10%)
	Easy	13 (8%)
	Neither	17 (10%)
	Difficult.....	12 (7%)
	Very difficult.....	9 (5%)
	Don't know	97 (59%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	17 (10%)
	No.....	146 (90%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	14 (9%)
	No.....	147 (91%)
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	96 (64%)
	Yes	31 (21%)
	No.....	23 (15%)
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.....	123 (79%)
	Yes	17 (11%)
	No.....	15 (10%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	Did not have a problem/ did not receive help.....	108 (75%)
	Yes	26 (18%)
	No.....	10 (7%)

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	29 (18%)	24 (15%)	52 (32%)	18 (11%)	24 (15%)	14 (9%)
	Vocational or skills training	42 (29%)	10 (7%)	36 (25%)	22 (15%)	25 (17%)	10 (7%)
	Education (including basic skills)	32 (21%)	17 (11%)	54 (36%)	22 (15%)	17 (11%)	9 (6%)
	Offending behaviour programmes	64 (43%)	5 (3%)	20 (14%)	21 (14%)	13 (9%)	25 (17%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	Not involved in any of these				41 (26%)
	Prison job				98 (62%)
	Vocational or skills training.....				16 (10%)
	Education (including basic skills).....				34 (22%)
	Offending behaviour programmes				5 (3%)
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	27 (18%)	38 (26%)	62 (42%)	19 (13%)
	Vocational or skills training	39 (35%)	20 (18%)	34 (31%)	17 (15%)
	Education (including basic skills)	30 (25%)	39 (32%)	33 (27%)	19 (16%)
	Offending behaviour programmes	44 (40%)	20 (18%)	29 (26%)	18 (16%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				25 (16%)
	<i>Never</i>				37 (24%)
	<i>Less than once a week</i>				43 (28%)
	<i>About once a week</i>				42 (27%)
	<i>More than once a week</i>				9 (6%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				56 (36%)
	<i>Yes</i>				58 (37%)
	<i>No</i>				42 (27%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				45 (28%)
	<i>0</i>				42 (26%)
	<i>1 to 2</i>				34 (21%)
	<i>3 to 5</i>				35 (22%)
	<i>More than 5</i>				5 (3%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				39 (25%)
	<i>0</i>				28 (18%)
	<i>1 to 2</i>				66 (42%)
	<i>3 to 5</i>				18 (11%)
	<i>More than 5</i>				6 (4%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				6 (4%)
	<i>0</i>				7 (4%)
	<i>1 to 2</i>				24 (15%)
	<i>3 to 5</i>				70 (44%)
	<i>More than 5</i>				53 (33%)

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>	56 (34%)
	<i>2 to less than 4 hours</i>	31 (19%)
	<i>4 to less than 6 hours</i>	31 (19%)
	<i>6 to less than 8 hours</i>	16 (10%)
	<i>8 to less than 10 hours</i>	8 (5%)
	<i>10 hours or more</i>	13 (8%)
	<i>Don't know</i>	8 (5%)

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>	55 (34%)
	<i>No</i>	106 (66%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	68 (42%)
	<i>No</i>	93 (58%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	62 (39%)
	<i>No</i>	99 (61%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	33 (20%)
	<i>Very easy</i>	16 (10%)
	<i>Easy</i>	30 (19%)
	<i>Neither</i>	15 (9%)
	<i>Difficult</i>	19 (12%)
	<i>Very difficult</i>	44 (27%)
	<i>Don't know</i>	5 (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>	46 (29%)
	<i>Yes</i>	84 (53%)
	<i>No</i>	29 (18%)
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>	75 (47%)
	<i>No contact</i>	37 (23%)
	<i>Letter</i>	26 (16%)
	<i>Phone</i>	13 (8%)
	<i>Visit</i>	28 (17%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	84 (54%)
	<i>No</i>	73 (46%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	46 (29%)
	<i>Yes</i>	45 (28%)
	<i>No</i>	69 (43%)

Q13.5	How involved were you in the development of your sentence plan?			
	<i>Do not have a sentence plan/ not sentenced</i>	115	(72%)	
	<i>Very involved</i>	15	(9%)	
	<i>Involved</i>	11	(7%)	
	<i>Neither</i>	5	(3%)	
	<i>Not very involved</i>	8	(5%)	
	<i>Not at all involved</i>	6	(4%)	
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>	115	(73%)	
	<i>Nobody</i>	26	(16%)	
	<i>Offender supervisor</i>	12	(8%)	
	<i>Offender manager</i>	9	(6%)	
	<i>Named/ personal officer</i>	2	(1%)	
	<i>Staff from other departments</i>	7	(4%)	
Q13.7	Can you achieve any of your sentence plan targets in this prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	115	(72%)	
	<i>Yes</i>	13	(8%)	
	<i>No</i>	22	(14%)	
	<i>Don't know</i>	9	(6%)	
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>	115	(72%)	
	<i>Yes</i>	13	(8%)	
	<i>No</i>	15	(9%)	
	<i>Don't know</i>	16	(10%)	
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>	115	(72%)	
	<i>Yes</i>	11	(7%)	
	<i>No</i>	14	(9%)	
	<i>Don't know</i>	20	(13%)	
Q13.10	Do you have a needs-based custody plan?			
	<i>Yes</i>	12	(8%)	
	<i>No</i>	66	(42%)	
	<i>Don't know</i>	78	(50%)	
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?			
	<i>Yes</i>	16	(10%)	
	<i>No</i>	143	(90%)	
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	45 (30%)	33 (22%)	74 (49%)
	Accommodation	38 (26%)	38 (26%)	71 (48%)
	Benefits	38 (26%)	44 (30%)	65 (44%)
	Finances	40 (29%)	28 (20%)	70 (51%)
	Education	43 (32%)	29 (21%)	64 (47%)
	Drugs and alcohol	47 (33%)	47 (33%)	47 (33%)

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>	46 (30%)
Yes	38 (25%)
No	70 (45%)

Main comparator and comparator to last time



Prisoner survey responses HMP Lincoln 2017

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 Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		168	6,086	168	176
SECTION 1: General information					
1.2	Are you under 21 years of age?	5%	6%	5%	3%
1.3	Are you sentenced?	72%	68%	72%	85%
1.3	Are you on recall?	10%	10%	10%	7%
1.4	Is your sentence less than 12 months?	23%	20%	23%	26%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	6%	3%	6%	5%
1.5	Are you a foreign national?	11%	13%	11%	16%
1.6	Do you understand spoken English?	98%	97%	98%	97%
1.7	Do you understand written English?	96%	96%	96%	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.)	16%	25%	16%	16%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	5%	4%	6%
1.1	Are you Muslim?	9%	12%	9%	8%
1.11	Are you homosexual/gay or bisexual?	1%	3%	1%	5%
1.12	Do you consider yourself to have a disability?	34%	26%	34%	23%
1.13	Are you a veteran (ex-armed services)?	9%	6%	9%	3%
1.14	Is this your first time in prison?	31%	33%	31%	38%
1.15	Do you have any children under the age of 18?	54%	53%	54%	55%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	32%	23%	32%	30%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	48%	40%	48%	56%
2.3	Were you offered a toilet break?	8%	8%	8%	11%
2.4	Was the van clean?	67%	57%	67%	69%
2.5	Did you feel safe?	79%	74%	79%	82%
2.6	Were you treated well/very well by the escort staff?	71%	67%	71%	78%
2.7	Before you arrived here were you told that you were coming here?	64%	63%	64%	69%
2.7	Before you arrived here did you receive any written information about coming here?	8%	3%	8%	10%
2.8	When you first arrived here did your property arrive at the same time as you?	77%	78%	77%	86%

Main comparator and comparator to last time

Key to tables

		HMP Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	29%	40%	29%	35%
3.2	When you were searched in reception, was this carried out in a respectful way?	84%	77%	84%	87%
3.3	Were you treated well/very well in reception?	80%	61%	80%	75%
	When you first arrived:				
3.4	Did you have any problems?	77%	78%	77%	76%
3.4	Did you have any problems with loss of property?	17%	16%	17%	15%
3.4	Did you have any housing problems?	19%	23%	19%	18%
3.4	Did you have any problems contacting employers?	3%	6%	3%	4%
3.4	Did you have any problems contacting family?	33%	35%	33%	36%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	3%	2%	4%
3.4	Did you have any money worries?	14%	24%	14%	18%
3.4	Did you have any problems with feeling depressed or suicidal?	28%	25%	28%	21%
3.4	Did you have any physical health problems?	14%	18%	14%	19%
3.4	Did you have any mental health problems?	35%	26%	35%	21%
3.4	Did you have any problems with needing protection from other prisoners?	6%	9%	6%	9%
3.4	Did you have problems accessing phone numbers?	29%	32%	29%	26%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	41%	31%	41%	38%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	84%	74%	84%	80%
3.6	A shower?	15%	28%	15%	18%
3.6	A free telephone call?	63%	54%	63%	35%
3.6	Something to eat?	72%	71%	72%	66%
3.6	PIN phone credit?	23%	51%	23%	34%
3.6	Toiletries/ basic items?	59%	58%	59%	52%

Key to tables

Main comparator and comparator to last time

	Any percentage highlighted in green is significantly better	HMP Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
	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?	46%	44%	46%	52%
3.7	Someone from health services?	68%	66%	68%	69%
3.7	A Listener/Samaritans?	27%	30%	27%	24%
3.7	Prison shop/ canteen?	37%	21%	37%	35%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	37%	41%	37%	36%
3.8	Support was available for people feeling depressed or suicidal?	36%	36%	36%	35%
3.8	How to make routine requests?	26%	34%	26%	30%
3.8	Your entitlement to visits?	23%	33%	23%	30%
3.8	Health services?	37%	43%	37%	40%
3.8	The chaplaincy?	36%	39%	36%	37%
3.9	Did you feel safe on your first night here?	72%	68%	72%	72%
3.10	Have you been on an induction course?	88%	74%	88%	91%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	50%	49%	50%	57%
3.12	Did you receive an education (skills for life) assessment?	88%	74%	88%	77%
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?	30%	35%	30%	33%
4.1	Attend legal visits?	40%	50%	40%	42%
4.1	Get bail information?	12%	17%	12%	19%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	39%	41%	39%	40%
4.3	Can you get legal books in the library?	35%	34%	35%	46%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	33%	49%	33%	48%
4.4	Are you normally able to have a shower every day?	51%	73%	51%	86%
4.4	Do you normally receive clean sheets every week?	46%	64%	46%	79%
4.4	Do you normally get cell cleaning materials every week?	48%	50%	48%	57%
4.4	Is your cell call bell normally answered within five minutes?	18%	24%	18%	27%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	53%	56%	53%	66%
4.4	Can you normally get your stored property, if you need to?	11%	20%	11%	24%
4.5	Is the food in this prison good/very good?	27%	21%	27%	23%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	39%	47%	39%	47%
4.7	Are you able to speak to a Listener at any time, if you want to?	59%	53%	59%	55%
4.8	Are your religious beliefs respected?	35%	48%	35%	48%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	45%	50%	45%	49%
4.10	Is it easy/very easy to attend religious services?	23%	43%	23%	36%

Main comparator and comparator to last time

Key to tables

		HMP Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	78%	71%	78%	73%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	46%	47%	46%	53%
5.2	Do you feel applications are dealt with quickly (within seven days)?	35%	32%	35%	38%
5.3	Is it easy to make a complaint?	54%	48%	54%	49%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	39%	27%	39%	27%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	35%	22%	35%	30%
5.5	Have you ever been prevented from making a complaint when you wanted to?	19%	21%	19%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	21%	18%	21%	20%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	41%	39%	41%	40%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	35%	39%	35%	32%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	17%	11%	17%	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?	41%	33%	41%	36%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	74%	73%	74%	76%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	60%	67%	60%	68%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	24%	27%	24%	26%
7.4	Do staff normally speak to you most of the time/all of the time during association?	20%	17%	20%	14%
7.5	Do you have a personal officer?	37%	34%	37%	42%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	66%	66%	66%	65%

Main comparator and comparator to last time

Key to tables

		HMP Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
	Any percentage highlighted in green is significantly better				
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	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	49%	49%	49%	41%
8.2	Do you feel unsafe now?	27%	22%	27%	21%
8.4	Have you been victimised by other prisoners here?	26%	32%	26%	31%
Since you have been here, have other prisoners:					
8.5	Made insulting remarks about you, your family or friends?	9%	13%	9%	11%
8.5	Hit, kicked or assaulted you?	8%	10%	8%	9%
8.5	Sexually abused you?	1%	2%	1%	4%
8.5	Threatened or intimidated you?	14%	17%	14%	12%
8.5	Taken your canteen/property?	7%	8%	7%	8%
8.5	Victimised you because of medication?	4%	5%	4%	4%
8.5	Victimised you because of debt?	3%	4%	3%	2%
8.5	Victimised you because of drugs?	3%	5%	3%	2%
8.5	Victimised you because of your race or ethnic origin?	3%	4%	3%	4%
8.5	Victimised you because of your religion/religious beliefs?	3%	4%	3%	6%
8.5	Victimised you because of your nationality?	1%	3%	1%	4%
8.5	Victimised you because you were from a different part of the country?	3%	4%	3%	5%
8.5	Victimised you because you are from a Traveller community?	1%	2%	1%	2%
8.5	Victimised you because of your sexual orientation?	0%	2%	0%	2%
8.5	Victimised you because of your age?	1%	3%	1%	2%
8.5	Victimised you because you have a disability?	5%	4%	5%	2%
8.5	Victimised you because you were new here?	8%	7%	8%	7%
8.5	Victimised you because of your offence/crime?	2%	7%	2%	4%
8.5	Victimised you because of gang related issues?	5%	6%	5%	4%

Main comparator and comparator to last time

Key to tables

		HMP Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	25%	32%	25%	29%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	12%	12%	12%	8%
8.7	Hit, kicked or assaulted you?	4%	6%	4%	3%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	10%	14%	10%	8%
8.7	Victimised you because of medication?	5%	6%	5%	6%
8.7	Victimised you because of debt?	0%	2%	0%	1%
8.7	Victimised you because of drugs?	1%	3%	1%	2%
8.7	Victimised you because of your race or ethnic origin?	4%	4%	4%	6%
8.7	Victimised you because of your religion/religious beliefs?	3%	4%	3%	4%
8.7	Victimised you because of your nationality?	2%	3%	2%	3%
8.7	Victimised you because you were from a different part of the country?	3%	3%	3%	3%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	1%
8.7	Victimised you because of your age?	1%	2%	1%	4%
8.7	Victimised you because you have a disability?	4%	4%	4%	2%
8.7	Victimised you because you were new here?	4%	5%	4%	5%
8.7	Victimised you because of your offence/crime?	2%	5%	2%	4%
8.7	Victimised you because of gang related issues?	3%	3%	3%	2%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	46%	34%	46%	41%

Main comparator and comparator to last time

Key to tables

		HMP Lincoln 2017	Local Prisons Comparator	HMP Lincoln 2017	HMP Lincoln 2013
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	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	21%	21%	21%	17%
9.1	Is it easy/very easy to see the nurse?	32%	42%	32%	41%
9.1	Is it easy/very easy to see the dentist?	11%	9%	11%	10%
	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?	48%	40%	48%	36%
9.2	The nurse?	50%	50%	50%	49%
9.2	The dentist?	39%	29%	39%	33%
9.3	The overall quality of health services?	35%	35%	35%	37%
9.4	Are you currently taking medication?	59%	52%	59%	49%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	54%	57%	54%	73%
9.6	Do you have any emotional well being or mental health problems?	59%	42%	59%	38%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	60%	40%	60%	50%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	33%	33%	33%	30%
10.2	Did you have a problem with alcohol when you came into this prison?	25%	21%	25%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	42%	41%	42%	32%
10.4	Is it easy/very easy to get alcohol in this prison?	18%	19%	18%	14%
10.5	Have you developed a problem with drugs since you have been in this prison?	10%	10%	10%	5%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	9%	9%	9%	8%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	57%	56%	57%	72%
10.8	Have you received any support or help with your alcohol problem while in this prison?	53%	53%	53%	61%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	72%	74%	72%	85%

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 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	47%	32%	47%	29%
11.1	Vocational or skills training?	32%	29%	32%	28%
11.1	Education (including basic skills)?	47%	45%	47%	45%
11.1	Offending behaviour programmes?	17%	18%	17%	12%
Are you currently involved in any of the following activities:					
11.2	A prison job?	62%	45%	62%	46%
11.2	Vocational or skills training?	10%	8%	10%	6%
11.2	Education (including basic skills)?	22%	23%	22%	25%
11.2	Offending behaviour programmes?	3%	7%	3%	3%
11.3	Have you had a job while in this prison?	82%	69%	82%	69%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	32%	38%	32%	32%
11.3	Have you been involved in vocational or skills training while in this prison?	65%	56%	65%	52%
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?	28%	43%	28%	30%
11.3	Have you been involved in education while in this prison?	75%	66%	75%	68%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	43%	49%	43%	46%
11.3	Have you been involved in offending behaviour programmes while in this prison?	60%	53%	60%	45%
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?	30%	39%	30%	24%
11.4	Do you go to the library at least once a week?	33%	28%	33%	55%
11.5	Does the library have a wide enough range of materials to meet your needs?	37%	32%	37%	45%
11.6	Do you go to the gym three or more times a week?	25%	24%	25%	23%
11.7	Do you go outside for exercise three or more times a week?	15%	41%	15%	19%
11.8	Do you go on association more than five times each week?	33%	43%	33%	42%
11.9	Do you spend ten or more hours out of your cell on a weekday?	8%	9%	8%	11%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	30%	34%	37%
12.2	Have you had any problems with sending or receiving mail?	42%	48%	42%	51%
12.3	Have you had any problems getting access to the telephones?	39%	34%	39%	30%
12.4	Is it easy/ very easy for your friends and family to get here?	28%	35%	28%	24%

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 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%	61%	74%	67%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	43%	44%	43%	39%
13.2	Contact by letter?	30%	27%	30%	30%
13.2	Contact by phone?	15%	12%	15%	9%
13.2	Contact by visit?	33%	35%	33%	41%
13.3	Do you have a named offender supervisor in this prison?	54%	30%	54%	51%
For those who are sentenced:					
13.4	Do you have a sentence plan?	39%	32%	39%	33%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	58%	54%	58%	59%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	61%	48%	61%	42%
13.6	Offender supervisor?	28%	32%	28%	29%
13.6	Offender manager?	21%	25%	21%	27%
13.6	Named/ personal officer?	5%	11%	5%	5%
13.6	Staff from other departments?	16%	18%	16%	12%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	30%	51%	30%	40%
13.8	Are there plans for you to achieve any of your targets in another prison?	30%	28%	30%	19%
13.9	Are there plans for you to achieve any of your targets in the community?	24%	32%	24%	30%
13.10	Do you have a needs based custody plan?	8%	7%	8%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	10%	10%	10%	12%
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?	31%	26%	31%	31%
13.12	Accommodation?	35%	32%	35%	44%
13.12	Benefits?	40%	34%	40%	47%
13.12	Finances?	29%	21%	29%	29%
13.12	Education?	31%	27%	31%	32%
13.12	Drugs and alcohol?	50%	40%	50%	42%
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?	35%	45%	35%	33%

Diversity analysis



Key question responses (ethnicity and foreign national) HMP Lincoln 2017

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	Foreign national prisoners	British prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		26	141	17	144
1.3	Are you sentenced?	76%	71%	50%	76%
1.5	Are you a foreign national?	16%	10%		
1.6	Do you understand spoken English?	100%	98%	82%	100%
1.7	Do you understand written English?	96%	96%	77%	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.)			23%	14%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	4%	0%	4%
1.1	Are you Muslim?	42%	3%	13%	8%
1.12	Do you consider yourself to have a disability?	23%	36%	23%	35%
1.13	Are you a veteran (ex-armed services)?	4%	9%	18%	8%
1.14	Is this your first time in prison?	23%	33%	71%	26%
2.6	Were you treated well/very well by the escort staff?	60%	73%	47%	75%
2.7	Before you arrived here were you told that you were coming here?	54%	66%	41%	67%
3.2	When you were searched in reception, was this carried out in a respectful way?	80%	84%	75%	87%
3.3	Were you treated well/very well in reception?	76%	81%	69%	81%
3.4	Did you have any problems when you first arrived?	73%	77%	77%	77%
3.7	Did you have access to someone from health care when you first arrived here?	64%	68%	50%	70%
3.9	Did you feel safe on your first night here?	56%	75%	59%	74%
3.10	Have you been on an induction course?	88%	88%	87%	88%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	24%	32%	26%	31%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	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%	33%	50%	31%
4.4	Are you normally able to have a shower every day?	58%	49%	37%	51%
4.4	Is your cell call bell normally answered within five minutes?	29%	16%	37%	16%
4.5	Is the food in this prison good/very good?	20%	29%	25%	28%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	12%	44%	37%	39%
4.7	Are you able to speak to a Listener at any time, if you want to?	36%	63%	37%	63%
4.8	Do you feel your religious beliefs are respected?	42%	33%	37%	35%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	52%	45%	23%	47%
5.1	Is it easy to make an application?	80%	78%	57%	80%
5.3	Is it easy to make a complaint?	48%	55%	26%	58%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	44%	40%	7%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	35%	7%	39%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	8%	19%	13%	18%
7.1	Do most staff, in this prison, treat you with respect?	79%	73%	63%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	54%	61%	59%	62%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	23%	20%	18%	21%
7.4	Do you have a personal officer?	31%	38%	29%	36%
8.1	Have you ever felt unsafe here?	52%	49%	57%	50%
8.2	Do you feel unsafe now?	36%	26%	31%	27%
8.3	Have you been victimised by other prisoners?	28%	26%	18%	29%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	16%	14%	12%	15%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	12%	2%	6%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	3%	0%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	1%	0%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	4%	5%	0%	6%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners
	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%	21%	41%	23%
8.7	Have you ever felt threatened or intimidated by staff here?	12%	9%	18%	9%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	19%	2%	12%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	15%	1%	6%	2%
8.7	Have you been victimised because of your nationality? (By staff)	4%	2%	18%	0%
8.7	Have you been victimised because you have a disability? (By staff)	12%	3%	0%	4%
9.1	Is it easy/very easy to see the doctor?	20%	21%	19%	21%
9.1	Is it easy/ very easy to see the nurse?	35%	31%	25%	32%
9.4	Are you currently taking medication?	56%	59%	25%	63%
9.6	Do you feel you have any emotional well being/mental health issues?	68%	57%	37%	62%
10.3	Is it easy/very easy to get illegal drugs in this prison?	20%	46%	19%	45%
11.2	Are you currently working in the prison?	58%	64%	53%	63%
11.2	Are you currently undertaking vocational or skills training?	9%	11%	18%	10%
11.2	Are you currently in education (including basic skills)?	21%	22%	41%	19%
11.2	Are you currently taking part in an offending behaviour programme?	0%	4%	0%	4%
11.4	Do you go to the library at least once a week?	62%	27%	40%	32%
11.6	Do you go to the gym three or more times a week?	39%	23%	21%	27%
11.7	Do you go outside for exercise three or more times a week?	14%	16%	21%	16%
11.8	On average, do you go on association more than five times each week?	28%	34%	19%	36%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	4%	9%	0%	9%
12.2	Have you had any problems sending or receiving mail?	36%	44%	47%	42%
12.3	Have you had any problems getting access to the telephones?	52%	36%	50%	37%

Diversity Analysis



Key question responses (disability) HMP Lincoln 2017

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		56	110
1.3	Are you sentenced?	73%	72%
1.5	Are you a foreign national?	7%	12%
1.6	Do you understand spoken English?	100%	97%
1.7	Do you understand written English?	98%	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.)	11%	18%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	2%
1.1	Are you Muslim?	2%	12%
1.12	Do you consider yourself to have a disability?		
1.13	Are you a veteran (ex-armed services)?	9%	8%
1.14	Is this your first time in prison?	29%	32%
2.6	Were you treated well/very well by the escort staff?	73%	70%
2.7	Before you arrived here were you told that you were coming here?	70%	61%
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%	78%
3.4	Did you have any problems when you first arrived?	89%	71%
3.7	Did you have access to someone from health care when you first arrived here?	66%	70%
3.9	Did you feel safe on your first night here?	73%	72%
3.10	Have you been on an induction course?	93%	86%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	32%	29%

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?	33%	33%
4.4	Are you normally able to have a shower every day?	67%	42%
4.4	Is your cell call bell normally answered within five minutes?	18%	18%
4.5	Is the food in this prison good/very good?	27%	27%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	36%	40%
4.7	Are you able to speak to a Listener at any time, if you want to?	69%	55%
4.8	Do you feel your religious beliefs are respected?	26%	39%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	51%	41%
5.1	Is it easy to make an application?	76%	79%
5.3	Is it easy to make a complaint?	58%	51%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	42%	40%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	39%	33%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	13%	19%
7.1	Do most staff, in this prison, treat you with respect?	80%	71%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	66%	58%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	27%	16%
7.4	Do you have a personal officer?	41%	33%
8.1	Have you ever felt unsafe here?	58%	45%
8.2	Do you feel unsafe now?	25%	28%
8.3	Have you been victimised by other prisoners?	43%	19%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	21%	11%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	2%	0%
8.5	Have you been victimised because of your age? (By prisoners)	2%	0%
8.5	Have you been victimised because you have a disability? (By prisoners)	13%	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?	23%	26%
8.7	Have you ever felt threatened or intimidated by staff here?	6%	12%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	6%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	5%
8.7	Have you been victimised because of your nationality? (By staff)	0%	4%
8.7	Have you been victimised because of your age? (By staff)	0%	2%
8.7	Have you been victimised because you have a disability? (By staff)	7%	3%
9.1	Is it easy/very easy to see the doctor?	22%	20%
9.1	Is it easy/ very easy to see the nurse?	40%	27%
9.4	Are you currently taking medication?	78%	49%
9.6	Do you feel you have any emotional well being/mental health issues?	84%	45%
10.3	Is it easy/very easy to get illegal drugs in this prison?	45%	41%
11.2	Are you currently working in the prison?	45%	71%
11.2	Are you currently undertaking vocational or skills training?	15%	8%
11.2	Are you currently in education (including basic skills)?	27%	19%
11.2	Are you currently taking part in an offending behaviour programme?	4%	3%
11.4	Do you go to the library at least once a week?	26%	37%
11.6	Do you go to the gym three or more times a week?	19%	27%
11.7	Do you go outside for exercise three or more times a week?	11%	18%
11.8	On average, do you go on association more than five times each week?	41%	30%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	7%	9%
12.2	Have you had any problems sending or receiving mail?	39%	44%
12.3	Have you had any problems getting access to the telephones?	36%	41%



Prisoner survey responses HMP Lincoln 2017

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

		E Wing (VP Wing) Lincoln 2017	A, B & C Wings Lincoln 2017
	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		43	123
SECTION 1: General information			
1.2	Are you under 21 years of age?	2%	6%
1.3	Are you sentenced?	81%	70%
1.3	Are you on recall?	7%	12%
1.4	Is your sentence less than 12 months?	19%	25%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	9%	5%
1.5	Are you a foreign national?	5%	13%
1.6	Do you understand spoken English?	100%	97%
1.7	Do you understand written English?	100%	94%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	12%	17%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	3%
1.1	Are you Muslim?	5%	10%
1.11	Are you homosexual/gay or bisexual?	5%	0%
1.12	Do you consider yourself to have a disability?	42%	31%
1.13	Are you a veteran (ex-armed services)?	9%	8%
1.14	Is this your first time in prison?	46%	26%
1.15	Do you have any children under the age of 18?	44%	57%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	24%	34%
2.5	Did you feel safe?	75%	80%
2.6	Were you treated well/very well by the escort staff?	70%	73%
2.7	Before you arrived here were you told that you were coming here?	63%	65%
2.8	When you first arrived here did your property arrive at the same time as you?	91%	72%

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SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	16%	34%
3.2	When you were searched in reception, was this carried out in a respectful way?	95%	79%
3.3	Were you treated well/very well in reception?	84%	80%
	When you first arrived:		
3.4	Did you have any problems?	85%	74%
3.4	Did you have any problems with loss of property?	15%	18%
3.4	Did you have any housing problems?	22%	18%
3.4	Did you have any problems contacting employers?	3%	3%
3.4	Did you have any problems contacting family?	41%	29%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	3%
3.4	Did you have any money worries?	12%	15%
3.4	Did you have any problems with feeling depressed or suicidal?	44%	23%
3.4	Did you have any physical health problems?	10%	14%
3.4	Did you have any mental health problems?	39%	33%
3.4	Did you have any problems with needing protection from other prisoners?	20%	1%
3.4	Did you have problems accessing phone numbers?	29%	29%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	72%	89%
3.6	A shower?	9%	18%
3.6	A free telephone call?	49%	68%
3.6	Something to eat?	72%	72%
3.6	PIN phone credit?	19%	25%
3.6	Toiletries/ basic items?	56%	61%

Key to tables

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SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	30%	52%
3.7	Someone from health services?	56%	72%
3.7	A Listener/Samaritans?	24%	29%
3.7	Prison shop/ canteen?	30%	40%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	37%	37%
3.8	Support was available for people feeling depressed or suicidal?	37%	35%
3.8	How to make routine requests?	21%	29%
3.8	Your entitlement to visits?	24%	24%
3.8	Health services?	37%	38%
3.8	The chaplaincy?	24%	41%
3.9	Did you feel safe on your first night here?	56%	79%
3.10	Have you been on an induction course?	72%	93%
3.12	Did you receive an education (skills for life) assessment?	88%	87%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	23%	32%
4.1	Attend legal visits?	42%	40%
4.1	Get bail information?	9%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	31%	42%
4.3	Can you get legal books in the library?	28%	37%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	33%	32%
4.4	Are you normally able to have a shower every day?	44%	53%
4.4	Do you normally receive clean sheets every week?	66%	38%
4.4	Do you normally get cell cleaning materials every week?	45%	50%
4.4	Is your cell call bell normally answered within five minutes?	22%	17%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	69%	48%
4.4	Can you normally get your stored property, if you need to?	5%	13%
4.5	Is the food in this prison good/very good?	26%	28%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	36%	40%
4.7	Are you able to speak to a Listener at any time, if you want to?	70%	57%
4.8	Are your religious beliefs are respected?	39%	33%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	45%	46%
4.10	Is it easy/very easy to attend religious services?	24%	23%

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SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	77%	79%
5.3	Is it easy to make a complaint?	54%	54%
5.5	Have you ever been prevented from making a complaint when you wanted to?	19%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	21%	21%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	46%	40%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	30%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	12%	17%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	72%	76%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	62%	61%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	24%	23%
7.4	Do staff normally speak to you most of the time/all of the time during association?	19%	21%
7.5	Do you have a personal officer?	51%	32%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	56%	46%
8.2	Do you feel unsafe now?	31%	25%
8.4	Have you been victimised by other prisoners here?	37%	22%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	14%	8%
8.5	Hit, kicked or assaulted you?	12%	7%
8.5	Sexually abused you?	2%	0%
8.5	Threatened or intimidated you?	24%	12%
8.5	Taken your canteen/property?	14%	5%
8.5	Victimised you because of medication?	9%	3%
8.5	Victimised you because of debt?	7%	2%
8.5	Victimised you because of drugs?	5%	3%
8.5	Victimised you because of your race or ethnic origin?	7%	2%
8.5	Victimised you because of your religion/religious beliefs?	7%	1%
8.5	Victimised you because of your nationality?	2%	0%
8.5	Victimised you because you were from a different part of the country?	5%	2%
8.5	Victimised you because you are from a traveller community?	2%	1%
8.5	Victimised you because of your sexual orientation?	0%	0%
8.5	Victimised you because of your age?	2%	0%
8.5	Victimised you because you have a disability?	9%	3%
8.5	Victimised you because you were new here?	9%	8%
8.5	Victimised you because of your offence/crime?	7%	1%
8.5	Victimised you because of gang related issues?	9%	3%

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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	19%	26%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	12%	13%
8.7	Hit, kicked or assaulted you?	2%	3%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	7%	10%
8.7	Victimised you because of medication?	0%	6%
8.7	Victimised you because of debt?	0%	0%
8.7	Victimised you because of drugs?	0%	1%
8.7	Victimised you because of your race or ethnic origin?	2%	5%
8.7	Victimised you because of your religion/religious beliefs?	2%	3%
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%	3%
8.7	Victimised you because you are from a traveller community?	2%	1%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	0%	1%
8.7	Victimised you because you have a disability?	7%	3%
8.7	Victimised you because you were new here?	2%	4%
8.7	Victimised you because of your offence/crime?	2%	3%
8.7	Victimised you because of gang related issues?	7%	1%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	14%	23%
9.1	Is it easy/very easy to see the nurse?	24%	34%
9.1	Is it easy/very easy to see the dentist?	0%	15%
9.4	Are you currently taking medication?	70%	55%
9.6	Do you have any emotional well being or mental health problems?	58%	58%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	22%	37%
10.2	Did you have a problem with alcohol when you came into this prison?	21%	26%
10.3	Is it easy/very easy to get illegal drugs in this prison?	36%	43%
10.4	Is it easy/very easy to get alcohol in this prison?	19%	16%
10.5	Have you developed a problem with drugs since you have been in this prison?	7%	11%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	9%

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SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	61%	43%
11.1	Vocational or skills training?	27%	34%
11.1	Education (including basic skills)?	47%	48%
11.1	Offending Behaviour Programmes?	15%	18%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	69%	61%
11.2	Vocational or skills training?	12%	10%
11.2	Education (including basic skills)?	28%	20%
11.2	Offending Behaviour Programmes?	3%	3%
11.4	Do you go to the library at least once a week?	27%	35%
11.5	Does the library have a wide enough range of materials to meet your needs?	39%	37%
11.6	Do you go to the gym three or more times a week?	28%	24%
11.7	Do you go outside for exercise three or more times a week?	17%	14%
11.8	Do you go on association more than five times each week?	37%	32%
11.9	Do you spend ten or more hours out of your cell on a weekday?	7%	9%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	48%	30%
12.2	Have you had any problems with sending or receiving mail?	35%	45%
12.3	Have you had any problems getting access to the telephones?	37%	39%
12.4	Is it easy/ very easy for your friends and family to get here?	30%	27%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	69%	48%
13.10	Do you have a needs based custody plan?	9%	7%
13.11	Do you feel that any member of staff has helped you to prepare for release?	16%	8%