

Report on an unannounced inspection of

HMP/YOI Portland

by HM Chief Inspector of Prisons

15–19 May 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/YOI Portland is a category C prison located on Portland Bill, Dorset. It is an historic prison, originally built in 1848, housing around 500 adult and young adult male prisoners. The prison was last inspected in 2014, when it was judged to be fundamentally safe, but on this occasion there had been a marked decline in safety, which was now judged to be poor. This was a serious and disappointing judgement that was rooted in a number of findings.

In our survey, half of prisoners said they had felt unsafe at some time, and one in four felt unsafe at the time of the inspection. The latter figure is double what it was in 2014. Levels of violence were very high, as was the level of self-harm – individual incidents of which were often serious. There did not appear to be a coordinated strategy to deal with the violence, and indeed there were significant failings in the response to it. In light of these levels of violence, it was not surprising that the use of force was higher than at comparable establishments. However, the governance of the use of force was unacceptably poor. Much paperwork connected with it was incomplete and not all planned interventions were filmed. Inexplicably, although body-worn cameras were available, they were not routinely used nor was their footage reviewed.

Just as the issue of violence required urgent management intervention, so too did there need to be a coherent strategy to reduce the supply of illicit drugs into the prison. 64% of prisoners surveyed told us it was easy to get drugs. Only one prison had returned a higher figure than that in the past year. Meanwhile, 20% said they had actually developed a drug problem since being in the prison. It was clear that the ready availability of drugs was contributing to the levels of debt, bullying and violence that were evident throughout the prison. Another symptom of the problem was the number of prisoners self-isolating across the jail.

In terms of the conditions in which prisoners were held, too many of the cells in the residential wings were in poor condition. Many of the double cells had unscreened lavatories that were extremely close to the beds in which men slept and ate their meals. Equally concerning was that some prisoners and staff had come to accept such conditions as normal. To my surprise, a senior member of staff showed me a double cell where a sheet had been used to screen the shower, with another fashioned into a makeshift curtain over the window, and told me in all seriousness that this was an example of a 'good' cell. The segregation unit was in poor condition, with cells damaged by previous occupants, sinks and lavatories ripped away and repairs taking too long to achieve.

However, despite the violence, drugs and poor living conditions, the relationships between staff and prisoners seemed generally good. We observed many positive interactions, and the workshops in particular were a good example of cooperative and collaborative relationships. Prisoners said that they felt as if they had left the confines of the prison while they were at activities. This was encouraging, but in other respects the balance had tipped too far towards acceptance of low-level poor behaviour. At the time of the inspection the smoking ban had been in place for a few weeks, but it was clear that it was being widely ignored, and that this was being tolerated by staff. More seriously, inspectors were also left with the very clear impression, and I was explicitly told by more than one prisoner, that staff were not intervening sufficiently to stop some of the violence and bullying on the wings.

For a category C prison, the prisoners were locked up for too much of the time. More than 30% of them were locked in their cells during the working day, restricting their access to many elements of the regime. There needed to be a thorough review with the intention of finding out what was achievable as opposed to what was convenient for the establishment.

There were many good things happening at Portland, but we were left with the clear view that there was a need for effective leadership to take Portland into the future and to shake off many of the vestiges of the past. A new governor was appointed a few weeks before the inspection, and he has

the opportunity to ensure that each and every member of his management team is accountable for leading key areas of activity, and that standards are maintained in the services that give rise to frustration from prisoners when they are not efficiently or consistently delivered. Our survey gave clear indications of what these things were. Too much was delegated outside the governing team. The governor and his senior team now have an opportunity to seize the initiative and drive forward the improvements that are badly needed at Portland.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

July 2017

Fact page

Task of the establishment

Male closed young offender institution and male category C adults

Prison status

Public

Region

South West

Number held

500

Certified normal accommodation

458

Operational capacity

530 (temporary reduction of 30 during installation of a new fire alarm system)

Date of last full inspection

14-24 July 2014

Brief history

Originally built in 1848 to hold convicted prisoners, Portland doubled in size following the acquisition of land from the Admiralty in 1910. From 1921 to 1983 it was a borstal, and then a youth custody centre. Its role changed to a young offender institution in 1989, and in April 2011, it became an adult and young offender establishment.

Short description of residential units

Benbow	-	89 places
Raleigh	-	89 places
Drake	-	79 places
Grenville	-	62 places, mainly young adults
Nelson	-	72 places, mainly young adults
Collingwood	-	35 places, first night and induction unit
Beaufort	-	99 places
Care and separation unit (CSU)		

Name of governor

Steve Hodson

Escort contractor

GEOAmey

Health service provider

Care UK

Learning and skills provider

Weston College

Independent Monitoring Board chair

Prudence Keely-Davies

Community rehabilitation company (CRC)

Dorset, Devon and Cornwall Community Rehabilitation Company

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 Her Majesty's Prison and Probation Service (HMPPS).

- **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 and the General Pharmaceutical Council (GPhC). 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 and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the prison population profile can be found in Appendices I and III respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

S1 Reception staff were very welcoming, and procedures for new arrivals were appropriate. The first night unit was a decent environment where prisoners felt supported. Too many prisoners felt unsafe and levels of violence were very high. Self-harm was also high and often serious. The establishment's response to diminished safety was inadequate. The incentives and earned privileges (IEP) scheme was used inconsistently, and the adjudication system failed to deal with many serious charges. Despite the widespread availability of drugs, the prison lacked a meaningful supply reduction action plan. Use of force was high and its governance was unacceptably weak. The segregation environment and regime were poor. Substance misuse support had improved since the last inspection and was good. **Outcomes for prisoners were poor against this healthy prison test.**

S2 At the last inspection in July 2014 we found that outcomes for prisoners in Portland were reasonably good against this healthy prison test. We made 21 recommendations in the area of safety. At this follow-up inspection we found that six of the recommendations had been achieved, three had been partially achieved and 12 had not been achieved.

S3 After long journeys, some new arrivals spent too long waiting on escort vans outside reception. Reception was clean and organised, and staff treated new arrivals well. Interviews took place in private and assessed appropriate risk factors. However, prisoners waited too long in bare holding rooms before they moved to first night accommodation. The first night unit was a generally positive environment and prisoners felt supported. Cells were clean and new arrivals were provided with most basic items. Peer workers and prison staff delivered a useful initial induction to prison life, but the extended induction programme was not tracked to ensure that prisoners completed it.

S4 In our survey, almost a quarter of prisoners said they felt unsafe, twice as high as the response at the previous inspection. Bullying and violence were higher than at similar prisons and the last inspection but the prison had no coordinated response to the problem. The management of perpetrators of violence and support for victims were weak. Prisoners who felt vulnerable continued to live in restricted conditions without an appropriate daily regime or support.

S5 Levels of self-harm, some of which was serious, had increased significantly and were substantially higher than at similar prisons and at the last inspection. There was insufficient strategic work to address this. Aspects of case management for at-risk prisoners had improved but there were still weaknesses in care maps, reviews, and staff observational entries about prisoners in the records. Overall care was inconsistent, apart from some isolated very good examples. There was only one active Listener (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) at the time of the inspection, and the Listener suite was inadequate. The weekly complex case meeting discussed the most critical at-risk prisoners but produced too few tangible actions to manage and reduce risk. Safeguarding arrangements to protect prisoners at risk of abuse or neglect were poor. The prison had implemented recommendations from the Prisons and Probation Ombudsman following deaths in custody since the last inspection.

S6 Some aspects of procedural security were overcontrolled for a category C prison. A high level of intelligence was received and processed efficiently but there were significant delays in

actions, including searching and drug testing. The availability of drugs was widespread and yet the prison lacked a detailed supply reduction action plan.

- S7 The application of the IEP scheme was inconsistent and did not effectively motivate prisoners to change their behaviour. The number of adjudications was very high. Too many, including some for violence, were not proceeded with or were remanded and unlikely to be heard.
- S8 The use of force was high for the type of establishment and its governance was inadequate. Baton use was very high, use of force paperwork was incomplete, body-worn cameras were not routinely used or reviewed, and not all planned interventions were filmed. Use of segregation was high but most prisoners had relatively short stays and generally returned to normal location at Portland. Segregation staff were knowledgeable about the prisoners in their care but were too accepting of very poor living conditions on the unit. The regime was poor.
- S9 Substance misuse support had improved since the last inspection and was good. The service provided an accessible range of interventions and prisoners were positive about the help they received. There was now good joint working between substance misuse services to manage prisoners receiving methadone treatment, but mental health support was currently limited.

Respect

S10 *Living conditions for most prisoners were poor. Cramped cells lacked privacy and contained graffiti and offensive displays. Prisoner access to basic amenities and facilities was often restricted. We witnessed many positive interactions between staff and prisoners. Despite this, too many managers and staff had failed to notice and address poor conditions, behaviour and treatment. Prisoners lacked confidence in the application and complaints systems. Equality and diversity work was not given sufficient priority, and there was limited consultation with minority groups of prisoners. A well-integrated chaplaincy provided good support. Significant health staff shortages limited mental health support, but primary health services were reasonably good overall. The quality and quantity of food provided were not always sufficient. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S11 *At the last inspection in July 2014 we found that outcomes for prisoners in Portland were not sufficiently good against this healthy prison test. We made 28 recommendations in the area of respect. At this follow-up inspection we found that eight of the recommendations had been achieved, four had been partially achieved and 16 had not been achieved.*

- S12 Some external communal areas were attractive and well maintained, but internal communal areas were neglected and many cells were in poor condition, lacking basic items such as curtains and kettles. Cramped shared cells provided inadequate accommodation; the unscreened toilet was unacceptably close to beds where prisoners slept and ate their meals. Graffiti and offensive displays went unchallenged by staff. Our survey indicated a significant decline in satisfaction with indicators of decency, such as access to a daily shower, and we found evidence to support these negative perceptions. The low prisoner confidence in the application system also required further exploration.
- S13 Most staff were approachable and friendly, and some were clearly committed to improving standards for prisoners in their care. However, managers and staff were also too accepting of poor conditions and behaviour, and the needs of some vulnerable prisoners went

unnoticed. The personal officer scheme was not effective, and fewer prisoners than at the last inspection said that they had a member of staff they could turn to for help.

- S14 The quarterly diversity and race equality team meeting was not given sufficient priority by senior managers. Attendance was poor and there had been no prisoner representatives at the previous three meetings. Few meaningful actions resulted from the meeting. Discrimination complaint investigations were managed well and included clear written feedback to complainants. Identification of new arrivals with protected characteristics was effective but there was little systematic support for the different groups. In our survey, prisoners from protected characteristic groups were more negative in some key areas of prison life, but poor consultation arrangements affected the prison's understanding of the reasons for these perceptions or how to address them.
- S15 The chaplaincy was well integrated and attended a wide range of strategic meetings. The team provided an appropriate range of services, groups and classes to meet faith needs, as well as good individual support to prisoners.
- S16 Prisoners were less positive about the complaints system than at the last inspection. We found the quality of responses to complaints to be variable but mostly adequate. Too many responses were not timely.
- S17 Prisoners were generally dissatisfied with the access to and quality of health services. The management of the ban on smoking had been poorly coordinated between the prison and health care department and led to frustration for prisoners. The waiting rooms were the worst we have seen and did not promote well-being. Although 80 officers were trained to use a defibrillator, those we spoke to could not locate one. Primary care services were generally good despite shortages of staff. Health waiting lists were generally short but the non-attendance rate of around 30% was too high, with patients deterred by some excessive waiting times of up to two hours before and after appointments. Pharmacy services and dental services had improved and were good. More medication was now supplied to prisoners in possession. Mental health needs were not always identified or addressed, and staff shortages had led to limited treatment options for these patients. Waiting times for transfer to a hospital under the Mental Health Act were too long.
- S18 The prison food was not popular and the quality and quantity provided at some meals were inadequate. Purchases from the prison shop were well managed.

Purposeful activity

S19 *Time out of cell was insufficient for a category C prison and was made worse by the frequent regime slippage and cumbersome unlock procedures. Good partnership working between the prison and the college provider had led to an increase in vocational and work places and there were now sufficient activity spaces for most prisoners, but the regime frequently hindered access, punctuality and attendance. The quality of provision was mostly good, and prisoners behaved well in activities when they got there. Achievements in training and education were good. Library facilities were good but access was poor. The PE department offered vocational qualifications, but some prisoners had limited access to recreational gym. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S20 *At the last inspection in July 2014 we found that outcomes for prisoners in Portland were poor against this healthy prison test. We made 18 recommendations in the area of purposeful activity. At this follow-up inspection we found that 12 of the recommendations had been achieved, one partially achieved, four not achieved and one no longer relevant.*

S21 We found almost a third of prisoners locked in their cells during our roll checks, which was unacceptable. Time out of cell for most was limited to around eight hours a day. Most prisoners had daily exercise and association periods but too many were isolated with no access to a purposeful regime. There was too much regime slippage, and activity time was affected by excessively controlled unlock procedures.

S22 The prison had developed effective partnerships with Weston College and had successfully improved the range of vocational training and work activities. These offered very good employability skills development, although not all work activities were formally accredited. There were sufficient activities for most of the population, the majority part time. It was positive that 25 prisoners were accessing distance learning courses.

S23 Teaching and learning in most educational and vocational training sessions met prisoner need and was stimulating and motivating. Peer mentors were used very effectively to support teaching. Outreach provision was good.

S24 Prisoners behaved very well and were respectful to staff and other prisoners in all areas of learning, skills and work. However, attendance and punctuality required improvement, and there was insufficient attention to developing a strong work ethic, particularly in the industrial workshops.

S25 Prisoners who were able to complete educational and vocational training programmes achieved consistently well. However, achievements of important English functional skills at level 2 were too low. Too few prisoners achieved relevant accredited qualifications in the industrial workshops.

S26 The library was a good resource but prisoner access was affected by regime restrictions. PE staff delivered successful and relevant vocational training courses. Too few prisoners attended the gym three or more times a week.

Resettlement

- S27** *The strategic management of resettlement had improved and appropriate structures were in place. However, there was a lack of effective management in the offender management unit (OMU). The significant backlog of OASys (offender assessment system) assessments affected many aspects of resettlement work. Offender supervisor contact and support for prisoners was hindered by frequent cross-deployment. There was an unacceptable backlog of home detention curfew (HDC) applications. Significant weaknesses in the management of public protection meant that we could not be sure if risk was managed safely. The community rehabilitation company (CRC)² provided a good resettlement service, although there was not enough joint working with the OMU. Resettlement pathways work was variable. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S28** *At the last inspection in July 2014 we found that outcomes for prisoners in Portland were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of resettlement. At this follow-up inspection we found that four of the recommendations had been achieved, one had been partially achieved and nine had not been achieved.*
- S29** Strategic and operational links between the OMU and resettlement pathways work had been strengthened since the last inspection. There was an adequate reducing reoffending strategy and an up-to-date pathways action plan, which was informed by a detailed quarterly needs analysis and incorporated available OASys data. However, too many prisoners continued to arrive at the prison without an up-to-date OASys assessment. Quarterly strategy meetings and partnership meetings were usually well attended and well informed.
- S30** There was a lack of effective management in the OMU. In our survey, prisoners reported poor contact with offender managers and less than half said they had a sentence plan. The level of contact between offender supervisors and prisoners on their caseload was too variable, caused at least in part by the frequent cross-deployment of offender supervisors. The considerable OASys backlog and lack of assessment hindered prisoner access to some interventions. Too many HDC decisions were unacceptably overdue.
- S31** There were some significant weaknesses in the management oversight of public protection, including multi-agency public protection arrangements (MAPPAs) cases. As a result, we were not assured that prisoners were released in the safest way possible following consideration of all relevant risk factors.
- S32** Prisoner transfers to other establishments were usually prompt, and categorisation reviews were usually well informed, although not always timely.
- S33** The CRC engaged with all prisoners and developed resettlement plans that were generally detailed and appropriate. Joint working between the OMU and CRC was underdeveloped. The pre-release reintegration planning board was well attended and provided an opportunity to ratify prisoner information.
- S34** The dedicated CRC accommodation staff had good links with a range of housing providers and provided intensive support to those requiring it. Given the high number of out-of-area releases, the CRC had done well to ensure that 84% of prisoner had gone to secure

² Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The national probation service has maintained responsibility for high- and very high-risk offenders.

accommodation on release in the last six months. However, 46 prisoners had been released with no fixed accommodation.

- S35 There was a range of vocational training and commercial work in the prison, and some effective support with job search and release planning. However, there were insufficient career advisers to ensure that all prisoners' needs were met, and too few entered education, training and employment on release.
- S36 The prison had good links with community agencies to provide help and support for prisoners leaving the prison with health and substance misuse needs.
- S37 Prisoners received appropriate help to manage previous debts, but there was no specific support for those who had incurred debt to other prisoners or to look at the links between this type of debt and offending behaviour. Pre-discharge arrangements included help with opening a bank account, benefits advice, and basic budgeting and money management.
- S38 There was some support for prisoners with children, and plans to improve transport to the prison for family visitors, many of whom had travelled long distances. Visits staff were welcoming to visitors but there were some unacceptable delays to visit sessions.
- S39 Some prisoners were hindered in accessing the limited range of offending behaviour programmes by the lack of an up-to-date OASys assessment.

Main concerns and recommendations

S40 Concern: The prison's response to the causes of bullying and violence was disjointed and ineffective. Investigations into incidents were often delayed and processes designed to challenge the perpetrators of violence were underused.

Recommendation: There should be a clear strategy to identify and understand the causes of bullying and violence. Investigations should be carried out promptly and actions identified to reduce the risks should be tangible and swift. There should be more positive interventions to help perpetrators change their behaviour.

S41 Concern: There was poor management oversight of vulnerable prisoners: too many were self-isolating and the victims of violence and bullying received little support. The number of incidents of self-harm was high and there was no quality assurance of assessment, care in custody and teamwork (ACCT) processes or practices. Previously good arrangements for adult safeguarding had lapsed.

Recommendation: The prison should develop a strategy to identify, protect and support victims of bullying and violence, and those at risk of self-harm. Oversight should be at a senior level to ensure that appropriate processes are in place and prompt action is taken to reduce risks to vulnerable prisoners.

S42 Concern: Oversight of the high number of use of force incidents was weak with missing paperwork, inadequate training, underuse of body-worn cameras and a failure to review all planned incidents.

Recommendation: All staff should be properly trained in control and restraint techniques, and required to use available body-worn video cameras. Staff should complete accurate and detailed use of force reports promptly. All planned incidents and baton use should be recorded and reviewed. Managers should address any concerns raised and share learning points with staff.

S43 Concern: The regime limited prisoners' time out of cell and affected their access to education, training and work. Time out of cell was too variable, and some unemployed prisoners received just two hours a day out of their cells.

Recommendation: Delivery of the regime should be effectively managed at a senior level to maximise prisoner time out of cell with a focus on better access to learning, skills and work.

S44 Concern: The offender management unit lacked effective management oversight, with little cohesive monitoring or understanding of cases, systems and processes; in areas such as public protection, this was potentially dangerous.

Recommendation: Management of the offender management unit should be tightened and the quality assurance of cases, systems and processes should be robust. Managers should do more to understand the needs and risks of the population, and provide better support for staff supervising prisoners.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 The prison received around 20 new arrivals a week, who had routinely travelled for over two hours. The escort vans we inspected were in good condition and suitably equipped. Relationships between escorting staff and prisoners were good, and in our survey, prisoners were generally positive about their treatment under escort. Most prisoners we spoke to had been told they were coming to Portland at least two days in advance. During the inspection, we observed prisoners who waited on the escort van for an hour during the staff lunch break before they could disembark, which was too long. Many prisoners reported problems with their property not arriving from sending prisons. This caused some disruption to the prison and was a regular subject of prisoner complaints.
- I.2 The prison used a court video link effectively to reduce the need to transport prisoners to courts.

Recommendations

- I.3 **Prisoners should have all their permitted property with them when they are transferred between prisons.**
- I.4 **Prisoners should be taken off the escort vans promptly.**

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 In our survey, most prisoners were positive about their treatment on reception, and we observed staff-prisoner interactions that were friendly and welcoming. New arrivals were held in a clean but very bare holding room with nothing to occupy them. This was a missed opportunity to communicate some key information to prisoners, and did little to distract those who arrived feeling anxious.
- I.6 All arrivals had an initial health screen in private. The reception prisoner orderly could chat to new arrivals to help settle them, although this was not a formal part of the process. Reception processes were thorough but prisoners had to wait until all those who arrived with them had been processed before they were taken to the first night centre; this could take up to four hours. Prisoners were not offered free telephone calls, but were given £2 telephone credit to contact their family.
- I.7 All new arrivals were located on to Collingwood wing (first night and induction unit) where they were greeted by unit staff and peer supporters. The unit was calm and welcoming, and

cells were clean, well prepared and generally adequately equipped. Prisoners had initial safety screening interviews in private, which explored their feelings and general welfare well. The unit was also used to accommodate some prisoners who were difficult to locate elsewhere because of mental health issues or previous poor behaviour, which could increase the risks to new arrivals who needed time to adjust to the prison. Although these prisoners were not usually held for long periods, there were no individual management plans to inform their progress from the induction unit. Staff-prisoner relationships on the unit were very good, and peer supporters worked with staff to deliver a useful initial induction. However, the extended induction, often delivered by peer workers, was not tracked and so the prison did not know if all prisoners received the full programme.

Recommendation

- 1.8 New arrivals should be taken to the first night centre at the earliest opportunity. Those who have to wait in reception for prolonged periods should be provided with useful information and appropriate distraction materials, such as a daily newspaper and a TV.**

Bullying and violence reduction

Expected outcomes:

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

- 1.9** Prisoner perceptions of safety had deteriorated since the previous inspection and were worse than the comparators; half of respondents to our survey said they had felt unsafe at Portland, and a quarter felt unsafe at the time of the inspection. More prisoners than the comparators said they had been assaulted or victimised because of drugs. However, fewer prisoners than the comparator said they had reported victimisation to staff.
- 1.10** The prison had recorded 118 assaults and 73 fights in the previous six months, which was high for the type of establishments. Violence against staff was particularly high. The response to violent incidents was inadequate. The frequent redeployment of the violence reduction officer meant that many investigations were delayed and prevented effective support for victims. Much of the violence was driven by widespread use of illicit substances and associated debt, bullying and self-harm (see paragraph 1.16). The prison did not have a coordinated response to address this problem, and the work done by safer custody and security staff was undermined by staff shortages and redeployment. (See main recommendation S40)
- 1.11** Prisoners suspected of bullying were subject to monitoring, and a second report of bullying led to them being placed on the basic regime of the incentives and earned privileges (IEP) scheme for 14 days. Despite the high number of violent incidents, intelligence reports and regular entries about bullying in wing observation books, only eight prisoners had been placed on monitoring for bullying in 2017 to date, with just one prisoner downgraded to basic. The safer custody team presented some useful data on violence to the monthly violence reduction meetings, but attendance was inconsistent and the meeting resulted in too few actions to address the issues raised.

- I.12** Support plans for victims of violence or bullying were poor and offered little more than monitoring. A complex case meeting discussed the individual's progress during the previous week, but for most prisoners this did not result in meaningful actions.
- I.13** There was no vulnerable prisoner wing but we found many prisoners self-isolating, with little coordinated support from staff, apart from on an individual basis. Poor oversight of their management meant that these vulnerable prisoners were subjected to a poor daily regime. (See main recommendation S41.)

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.14** There had been two self-inflicted deaths since the previous inspection. Recommendations from the Prisons and Probation Ombudsman (PPO) reports on deaths in custody had been implemented, and the improvements made were sustainable.
- I.15** The number of recorded incidents of self-harm had significantly increased since the previous inspection and was very high for the type of prison. There was insufficient strategic work to tackle this trend. The quarterly suicide and self-harm prevention meetings largely just reviewed the previous three months, with no tangible actions identified to reduce self-harm. (See main recommendation S40)
- I.16** The prison had managed some particularly troubled prisoners exceptionally well – in one case, helping a prisoner previously on constant watch because of his determination to end his own life to become a peer supporter providing help to other prisoners. There were between 22 and 28 at-risk prisoners on assessment, care in custody and teamwork (ACCT) case management at the time of the inspection, many with problems related to debt and bullying from other prisoners. Staff care of and involvement with prisoners on open ACCTs varied widely. Some prisoners, particularly those who were self-isolating, reported little contact with staff and were left locked up for most of the day. The vast majority of prisoners on ACCTs were not engaged in activities during the day.
- I.17** We observed some excellent case conferences attended by key personnel. However, the ACCT documents we reviewed showed this was not always the case and important providers of support, such as mental health and substance misuse services staff, often did not attend or were not invited to reviews. Some aspects of ACCT case management had improved but too many care maps were either weak or missing, reviews were not sufficiently multidisciplinary and observational entries by staff in documents were minimal. This was especially the case for night time entries, which were largely repetitive and predictable. There was no quality assurance of ACCT processes or practices.
- I.18** A specific weekly complex case meeting discussed the most critical at-risk prisoners, but there was little evidence of any tangible actions to manage and reduce the levels of risk.
- I.19** Prisoners no longer had good access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and there was only one active Listener at the time of the inspection. Observation books indicated that officers were unable or unwilling to call the Listener when requested. The Listener care suite was in a very poor

state and had fallen into disuse, but this was rectified quickly once we had brought this to the prison's attention.

Recommendations

- I.20 The suicide and self-harm prevention meeting should be sufficiently frequent to enable appropriate analysis, oversight and action, and have links to other key areas, such as violence reduction, activities and security.**
- I.21 There should be sufficient quality assurance of assessment, care in custody and teamwork (ACCT) case management to ensure it provides adequate support for prisoners at risk of self-harm, and all relevant personnel should attend ACCT 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.³

- I.22** The previously good arrangements for adult safeguarding had lapsed, and the prison did not have a presence on important local safeguarding forums. Apart from some consideration of the most at-risk prisoners at a weekly meeting (see paragraph I.18) there was no coordinated review of potentially vulnerable prisoners, such as the many self-isolators across the prison (see paragraph I.16). Staff were unaware of what to do if a prisoner reported abuse.

Recommendation

- I.23 The governor should contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes.**

Security

Expected outcomes:

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

- I.24** Despite improvements, some security arrangements continued to be too restrictive for a category C prison. These included the controlled unlock arrangements for meal times, and the lack of trust in prisoners to attend appointments during the day without an escort.

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

- I.25** The prison had received good security information, including 2,552 reports, during the previous six months. These were processed efficiently and communicated well to other teams. However, most resulting actions, such as suspicion drug testing and intelligence-led searching, did not take place promptly, which was a concern given the widespread use of illicit substances driving debt, bullying and violence (see main recommendation S40).
- I.26** The monthly security meeting was well attended but generated few actions. Although the security objectives were relevant, any additional measures taken to achieve them were not clear. The security team had good internal relationships with other departments and externally with the police.
- I.27** In our survey, almost two-thirds of prisoners said it was easy to get illegal drugs and almost half said that alcohol was available, which were higher than the comparators and at the last inspection; 20% said they had developed a drug problem while at the prison. The random mandatory drug testing (MDT) positive rate had averaged 12.5% in the previous six months against a target of 6%, but this figure did not include the large number of prisoners testing positive for the synthetic cannabinoid 'spice'. We were told that following the prison's smoking ban in February 2017, spice was now cheaper than tobacco for prisoners.
- I.28** Despite the high level of drug-related intelligence reports, the prison only requested suspicion drug tests when they could be carried out (14 in the previous six months, of which 71% were positive). The drug testing suite was a poor environment. Supply reduction measures were discussed at drug strategy meetings, but there was no detailed or closely monitored supply reduction action plan.
- I.29** At the time of the inspection, there were five prisoners on closed visits, all imposed appropriately in response to the trafficking of illicit items during visits.

Recommendations

- I.30** **Security arrangements, including those for prisoner movement and meal service, should be appropriate for a category C prison.**
- I.31** **The prison should develop, implement and monitor a drugs and alcohol supply reduction action plan, and ensure there are effective measures to tackle drug and alcohol availability.**

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.32** In our survey, only just over a third of prisoners said that the IEP scheme had encouraged them to change their behaviour. We found that staff used the scheme inconsistently.
- I.33** The basic regime, while limited for those who did not work, did facilitate exercise and a daily shower. Prisoners demoted to the basic level were not set individual targets to encourage them to change their behaviour, and they received no additional support or intervention. Reviews of prisoners on the basic level were inconsistent, which meant that prisoners spent varying time on basic for similar acts of poor behaviour.

Recommendation

- I.34 The incentives and earned privileges scheme should be applied fairly, and improvement targets and support should be in place for each individual prisoner.**

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.35** There had been 1,583 adjudications in the previous six months, which was very high and more than double that at the previous inspection. The volume of adjudications put significant pressure on the system, with over 170 remanded and some unlikely to be heard. A similar number, including many for most serious incidents, had been not proceeded with by the independent adjudicator.
- I.36** While most charges were laid for good reasons, some adjudications could have been better dealt with through the IEP scheme. Too many records of hearings were still poor and indicated insufficient enquiry before a finding of guilt.

Recommendation

- I.37 The number of adjudications should be reduced to enable all charges to be heard, and adjudication records should be quality assured to ensure sufficient inquiry before a finding of guilt.**

The use of force

- I.38** The use of force had been recorded 170 times in the previous six months, which was high for the type of prison. Oversight of use of force was inadequate; nearly all the records submitted for the previous two months were incomplete. As a consequence, managers could not be assured about the levels of force used or proportionality in all instances. Many of those reports that were submitted lacked detail about the incident. Only seven out of 30 planned incidents in the previous six months had been filmed.
- I.39** Although the prison had enough body-worn video cameras for all operational staff, not all chose to wear them, and we found many staff working on residential units without cameras. Managers did not routinely review the footage of incidents recorded on the cameras.
- I.40** Baton use had increased and was very high. Batons had been drawn 20 times and used to strike prisoners on five occasions in the previous six months, which was very high for the type of prison. The lack of body-worn video footage, CCTV footage and detailed written accounts meant there was insufficient evidence to assure us that baton use was always proportionate.
- I.41** The use of the unfurnished cell in the segregation unit was not excessive. Records showed that it had been used twice in the previous six months.

- I.42 Not all staff had received control and restraint refresher training in the previous year, and we found examples of staff without up-to-date training who were involved in high level incidents, including the use of batons.
- I.43 The safer custody team used a database on the use of force to collate an informative report for the use of force meeting. However, this meeting had not addressed the issues of incomplete paperwork, very high use of batons and underuse of body-worn video cameras, which we identified above. (See main recommendation S42).

Segregation

- I.44 Use of segregation had increased since the previous inspection and was high. However, the average stay was less than two weeks, and most prisoners returned to normal location at Portland.
- I.45 There were eight prisoners on the unit during the inspection. Although the prison reported that no one had been segregated for their own protection in the previous six months, we found several prisoners who were refusing to move to normal location because of concerns for their safety.
- I.46 Communal areas in the unit were clean and well maintained, but the cells, where prisoners spent nearly all of their time, were unacceptably poor. Some prisoners had been placed in cells without sinks or a water supply; this was only rectified during the inspection, although it had been frequently reported by segregation unit staff and managers during the previous two weeks. Other cells were covered in graffiti and lacked basic furniture. Toilets were scaled and dirty, and the communal shower lacked ventilation and was mouldy. Although small and cage-like, the two exercise yards did contain benches and exercise equipment.
- I.47 The regime in the segregation unit was basic; exercise periods were too short and prisoners could only make a telephone call every other day. Prisoners told us that segregation staff were respectful, and the interaction we observed was reasonable. However, staff were far too accepting of the poor conditions that prisoners lived in.
- I.48 Segregation reviews were held on time but they were poorly attended, did not always have input from health care staff and many targets for prisoners did not address the reasons for their segregation. Reintegration plans were also poor and for many only covered access to exercise, showers and telephones only three times a week, which was inadequate and not always consistent.

Recommendations

- I.49 **Prisoners should never be located in cells without running water, sinks or other basic equipment.**
- I.50 **The regime in the care and separation unit should provide more opportunities for prisoners to access amenities and activities.**
- I.51 **Segregation reviews should involve relevant staff and set appropriate targets.**

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.52** A multiagency drug strategy group, chaired by the head of reducing reoffending, monitored performance, and a strategy action plan focused appropriately on psychoactive substances,⁴ but not all available data were used to establish substance misuse need and emerging trends.
- I.53** The integrated substance misuse service now consisted of clinical input from Care UK and psychosocial support from EDP. Service provision had improved and was now good. In our survey, significantly more prisoners than at our previous inspection (67% compared with 48%) said they had received support with their drug problem, and 75%, against 47%, found the support helpful.
- I.54** The EDP team saw all new arrivals within 72 hours, and peer mentors assisted with induction. Currently 187 prisoners (40% of the population) were engaged in one-to-one or groupwork interventions, which ranged in intensity from psychoactive substances awareness sessions and SMART (self-management and recovery training) to the 10-session 'first steps' recovery programme. An active peer mentor scheme, Alcoholics Anonymous and Narcotics Anonymous self-help groups and monthly service user forums offered additional support.
- I.55** There were 31 prisoners on methadone treatment, but it was inappropriate that the prison still did not accept prisoners prescribed buprenorphine for security rather than clinical reasons. A non-medical prescriber ran two clinics a week jointly with recovery workers to review treatment, and 77% of prisoners were reducing their dosage, which was positive. Methadone administration in the health care building was well supervised by officers, but the lack of officer cover at the medications hatch on Raleigh wing created opportunities for bullying and diversion (see paragraph 2.66).
- I.56** Mental health support for prisoners with substance-related problems was currently limited to those on methadone maintenance prescriptions and those who were abstinent, which was unacceptable.
- I.57** There was good information sharing between primary health and substance misuse services about incidents involving psychoactive substances, and all prisoners found under the influence were offered support.

Recommendations

- I.58** **The full range of prescribing options should be available, and prescribing decisions should be made on clinical need.** (Repeated recommendation I.82)
- I.59** **There should be sufficient provision for prisoners with both mental health and substance-related problems.**

⁴ New drugs that mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1 The quality and cleanliness of accommodation had not improved significantly since the last inspection, and prison managers and staff were too accepting of the poor conditions. During the inspection, 30 cells were out of commission due to the installation of a new fire alarm system.
- 2.2 Too many cells were cramped, especially the single cells holding two prisoners. These cells provided no privacy, and the proximity of the unscreened toilets to the beds was unacceptable, particularly as prisoners also ate their food in cell. Prisoners used torn sheets to provide basic screening around toilets and on windows. On Beaufort wing, the doors to the in-cell showers in double cells had been cut in half size, which was a disproportionate measure and reduced privacy unnecessarily. Many cells lacked curtains, kettles or suitable furniture, and access to cleaning materials for those who wanted to clean their cells was sometimes restricted.
- 2.3 The refurbished showers on Benbow wing offered little privacy and had not been well maintained. Older showers were also poorly maintained, had limited ventilation, poor water pressure or were not working at all. In our survey, only 66% of prisoners said they could have a shower every day, against the 90% comparator.
- 2.4 Many cells had inappropriate images on display. Staff did not routinely apply the offensive display policy and prisoners told us that they were rarely challenged.
- 2.5 Prisoners were dissatisfied with the provision of clothing, bedding and towels. Prisoners were able to wear their own clothes, and many did so. Few prisoners had coats or waterproof jackets for wet weather. During our inspection, we watched prisoners walking between buildings dripping wet; some were using bin bags to keep dry. When we checked the main stores, there were hundreds of coats that could have been issued. Prisoners could access their stored property, although there were often delays in its receipt at the prison (see paragraphs 1.1 and 2.36 and recommendation 1.3).
- 2.6 Some external areas were attractive and well maintained. Internally, graffiti was widespread and some communal areas were run down. There had been efforts to brighten up some areas with useful notices explaining the roles of different departments. There was nothing displayed to explain the regime and core day timings.
- 2.7 Most wings had working telephones, although access was limited for some prisoners. Mail was processed quickly. Legally privileged mail was rarely opened in error, and when it was the prisoner was notified.
- 2.8 The application system had been revised and there was effective monitoring to ensure that responses were prompt. The senior management team also reviewed responses. However, more needed to be done to understand the poor perception of the fairness of the system.

Recommendations

- 2.9** Cells designed for one should not be used to accommodate two prisoners. Cells should be clean, well maintained and properly ventilated, and contain sufficient furniture. Graffiti and displays of offensive materials should be removed. Toilets should be clean and appropriately screened.
- 2.10** Prisoners should be able to access clean showers daily.
- 2.11** Clean bedding, towels and clothing (including coats) should be consistently available to prisoners.

Staff-prisoner relationships

Expected outcomes:

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

- 2.12** We observed many positive and helpful interactions between prisoners and staff from all disciplines. We also saw some good examples of care and support for prisoners who self-harmed or who had received bad news. However, some staff expressed low expectations of prisoners and allowed too much unruly behaviour to go unchallenged: cells were covered in graffiti and inappropriate pictures, and prisoners were clearly still smoking despite the ban. It was easy to see how some prisoners could feel that staff were not looking out for them when there was so little control at the servery and the distribution of food was unequal.
- 2.13** In our survey, fewer prisoners than at the last inspection knew who their personal officer was (59% against 67%), and fewer than the comparator and at the last inspection said there was someone to turn to if they needed help. The personal officer scheme was not consistent or effective. Prisoners said that staff were often too busy to help, and staff expressed concern about the lack of time they had to develop relationships and provide targeted support. Very little information about prisoners' day-to-day life or key events was recorded on the electronic prisoner case note (P-Nomis) system.
- 2.14** There had been some limited prisoner consultation, but this had not resulted in improved outcomes for prisoners.

Recommendations

- 2.15** Managers should set minimum standards of expected behaviour, and ensure that staff understand and enforce them.
- 2.16** The personal officer system, or an equivalent, should be implemented to ensure that prisoners have someone they can approach who understands them and can provide support.

Equality and diversity

Expected outcomes:

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

Strategic management

- 2.17** The safer custody team led on equality and diversity work, but the frequent redeployment of team officers often diminished the time given to this important area. Managers similarly had a range of competing priorities and had given insufficient attention to equality work. However, there had been work to revise the overarching equality policy and policies for protected characteristics, and there was an action plan that was reviewed quarterly.
- 2.18** Some aspects of the policy were not implemented - for example, the quarterly diversity and race equality action team (DREAT) meeting was not chaired by a senior manager, and attendance at the meeting was variable. Staff with responsibility for protected characteristics did not routinely attend the meeting or submit updates, and there had been no prisoner representative at the previous three meetings. There was little use of the centrally produced equality monitoring data, in part because it was so out of date when made available; this data showed some patterns over time that could have been usefully investigated further. The prison produced its own monitoring data and had identified some anomalies that were being addressed, such as the underrepresentation of prisoners from a black and minority ethnic background on one unit. However, in general there was too little evidence of action taken following the meetings to drive improvement in equality and diversity.
- 2.19** Fourteen discrimination incident reporting forms (DIRFs) had been submitted in the previous six months, which was lower than in similar prisons. The quality of investigation complaints was appropriate and documented well. Complainants received a clear written response setting out how the issue had been investigated, the outcome and any further action to be taken. Arrangements for external quality assurance were in place.
- 2.20** There was effective identification of new arrivals with protected characteristics, but there was no regular consultation with prisoners from minority groups and there had been no focus groups for some months. Only one wing had a prisoner diversity representative, and prisoners raised the lack of representatives with us.

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

Recommendations

- 2.21** The profile of diversity work in the prison should be raised, and the diversity and race equality action team (DREAT) meeting should drive multidisciplinary work to support all minority groups of prisoners.
- 2.22** The prison should promptly address evidence of possible discrimination highlighted by equality monitoring data, and should regularly consult prisoners with protected characteristics to ensure that their needs are identified, assessed and met.

Protected characteristics

- 2.23** Around a quarter of the population were from a black or minority ethnic background. In our survey, responses from these prisoners showed a disparity with white prisoners across a range of indicators. While prisoners from a black and minority ethnic background were more positive about feeling safe and respect for their religious beliefs, they were more negative about their experience of reception, food and purchases, the incentives and earned privileges (IEP) scheme and victimisation by staff. Recommendations following a health care department clinical audit of black and minority ethnic prisoners' use of mental health services had not been shared with the prison (see paragraph 2.75).
- 2.24** The prison had identified 23 prisoners from a Gypsy, Romany or Traveller background. They (and foreign national prisoners) were able to spend more of their private cash on telephone credit than other prisoners due to difficulties for their families to visit, and one prisoner was choosing to do. This was the only specific support for this group. HMPPS monitoring data indicated that this group was overrepresented in formal disciplinary processes, but this had not been investigated.
- 2.25** The prison had identified 23 foreign national prisoners. Visits from the Home Office Immigration service took place periodically, with two visits so far in 2017. There was no independent legal advice for foreign nationals – those who needed legal support with their immigration status were advised to consult the prisoner newspaper *Inside Times* to find a solicitor. No prisoners were held solely on immigration grounds, although this did sometimes happen. Telephone interpreting services were not used with non-English speakers as often as they could have been. One new arrival had another prisoner interpret for him during his induction, which included discussion of sensitive confidential issues such as self-harm. He was at the prison for two weeks before there was any attempt to use telephone interpreting with him. The library held a reasonable range of foreign language books and dictionaries. A monthly overseas telephone call was available to all foreign prisoners, and any other prisoner who had close family living overseas. Only nine prisoners were using this entitlement, and we were not assured that all who were eligible were aware of it.
- 2.26** Thirteen per cent of prisoners were Muslim. In our survey, they were more negative than non-Muslims in several areas. We heard concerns about how halal food was served on wing serveries, despite the efforts by chaplains to ensure the correct processes were followed. Arrangements for the forthcoming observance of Ramadan were well advanced, with two Muslim prisoners involved in the planning.
- 2.27** There were 143 prisoners recorded as having a disability, most of which were learning disabilities or related to mental health. We were told there were three prisoners with personal emergency evacuation plans (PEEPs), but not all the staff we spoke to knew which prisoners had such a plan or where to find details of the assistance they would require. One

cell was adapted for use by a prisoner with a mobility disability, and Beaufort wing held equipment to adapt cells on the ground floor temporarily if required.

- 2.28** Fourteen prisoners were aged over 50, the oldest being 58. A support group run by an external organisation had not taken place for a while as the facilitator had not been available. About a quarter of the population were under 21. Although two wings, Drake and Nelson, were described as being for the younger population, they were actually spread across all the wings, with nothing to differentiate their care and management from other prisoners.
- 2.29** Three prisoners had identified themselves as gay or bisexual, but there was no specific support for them. The prison had a policy for the management of transgender prisoners but had no experience of applying this.

Recommendations

- 2.30 Foreign national prisoners should have access to independent immigration advice.** (Repeated recommendation 2.27)
- 2.31 All staff should be aware of where to find personal emergency evacuation plans and be familiar with their contents for prisoners they are responsible for.**

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.

- 2.32** In our survey, prisoners were less positive than the comparator about support for their faith observance, although we found appropriate faith and pastoral support, indicating a need for the establishment to consult prisoners about their negative perceptions. The chaplaincy included several volunteers and was more integrated into prison life than we found previously. Chaplains attended a range of strategic meetings and forums that discussed support to individual prisoners; this included a group that planned the management of prisoners susceptible to radicalisation.
- 2.33** There was a suitable range of faith-based groups and classes. Arrangements for prisoner access to groups and services were reasonably good, and the managing chaplain and head of residence had jointly addressed the problem of some prisoners missing services they had expected to attend.
- 2.34** Chaplaincy staff saw new arrivals promptly. They offered one-to-one support to any prisoner in crisis. Chaplains attended assessment, care in custody and teamwork (ACCT) reviews and took the lead when bad news had to be given to a prisoner. Support for prisoners dealing with bereavement was available, and there were volunteer visitors for 11 prisoners. The chaplaincy visited prisoners in the segregation unit daily, and one segregated prisoner had been approved to attend group worship following risk assessment, which was unusual. Prisoners could buy religious items that they needed.
- 2.35** There was one large space used by the main faith groups, and some smaller rooms for smaller groups of worshippers or one-to-one sessions, although their use was limited by the lack of electrical power supply. Washing facilities were available. Two prisoner orderlies kept the facilities clean and ready for use.

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.

- 2.36** There had been 488 complaints in the previous six months, which was low for the type of establishments. The loss of personal items following transfer from another prison was the main complaint (see paragraph 1.1 and recommendation 1.3). Prisoners were negative about the complaints process in our survey and during the inspection. The prison was not certain if all complaints submitted at the end of 2016 had received responses. There had been steps to remedy this and ensure that all complaints submitted during that period had an appropriate response.
- 2.37** The prison's statistics showed between 60% and 70% of complaints were replied to on time, which was too low. Responses were generally satisfactory, although some were terse or demonstrated superficial investigation of the issue. Ten per cent of complaints were subject to detailed quality assurance, which was identifying and beginning to address these issues,

Recommendation

- 2.38 All prisoner complaints should be dealt with promptly, and they should be subject to appropriate investigation to enable a full and helpful response.**

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.

- 2.39** In our survey, prisoner perceptions of support for their legal rights were poor. There were no dedicated trained staff to provide legal support, and prisoners had limited support from offender supervisors. There was a reasonable supply of legal texts and up-to-date Prison Service orders in the library, but prisoners had limited access to the facility (see paragraph 3.30).
- 2.40** Legal visits took place three times a week but there were no private legal visits facilities. The main visits hall continued to be used for legal visits, which did not offer sufficient confidentiality.

Recommendation

- 2.41 Legal visits should take place in privacy.** (Repeated recommendation 2.42)

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.

2.42 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁶ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

Governance arrangements

2.43 NHS England commissioned Care UK to provide health services. Care UK had inherited a relatively poor service with around 50% staff vacancies. Although the contract was only six weeks old, governance arrangements were generally satisfactory and there was a commitment to continue existing partnerships. An informative prisoner health needs assessment from April 2016 had an accompanying action plan, and all actions had been achieved, except for one.

2.44 A temporary service manager provided clear clinical leadership, but there had been a loss of several staff when the contract changed, which had significantly affected service delivery. This was offset by use of agency staff and a recruitment campaign. Existing staff were working hard to drive effective service delivery and improvement.

2.45 It was too soon for managerial and clinical supervision systems to have become embedded, but there was a process for this and staff felt supported. Professional development was encouraged and most health staff had completed their mandatory training. There was an appropriate range of policies, including management of communicable diseases, control of infection and safeguarding.

2.46 In our survey, only 26% of prisoners said the overall quality of health services was good, against the comparator of 43%. Health care staff were clearly identifiable, and the interactions with patients we observed were good.

2.47 The health centre was separated from the rest of prison by a large fence, which was unwelcoming. Most clinical rooms met infection control requirements and were clean. The health centre waiting area had three holding rooms, which were stark, cold and unwelcoming. The wooden bench seats were a safety risk, graffiti had recently been painted over but a swastika was still clearly visible, the smoke alarms and televisions had been removed, and yet patients were locked in these rooms for hours at a time. This was the worst health centre waiting area we have seen in a category C prison.

2.48 Other than for minor issues, there had been no recorded serious incidents in the last year. Automated external defibrillators (AEDs) and resuscitation equipment were sited in several places in the prison and checked regularly. Some of the more populated wings, such as Nelson and Grenville, did not have equipment. When we raised this, the health manager agreed to review the deployment of the kit. There were 80 prison officers trained in the use

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

of AEDs, which was commendable, but officers we spoke with could not locate the kit. Health and prison staff said the ambulance service was very responsive in an emergency.

- 2.49** The health complaints system did not guarantee medical confidentiality, although there was action to rectify this during our visit. There had been 12 complaints in the previous six weeks. The responses were clear, polite, dealt directly with the concerns raised and were thoroughly investigated. Lessons learned from complaints were used to inform service delivery.
- 2.50** There was no health service user forum, although feedback was collected from patients. Initial results were more positive than the response to our survey. There was one prisoner health champion in post who provided a valuable service in assisting patients in the health centre. The prison had recently stopped health champion escorts of patients to and from the health centre, which compounded the waiting time for some patients.
- 2.51** Health promotion and campaigning were good but lacked impact on the wings, and there was no prison-wide approach to promoting prisoner well-being. The Smoke Stop programme offered smoking cessation support to patients, but the reduction of the course from 12 weeks to six was a source of aggravation for patients. Health screening and immunisation programmes were age appropriate, but there was no health lead for older prisoners. Barrier protection was available and advertised.

Recommendations

- 2.52** **There should be sufficient health staffing and skill mix to provide all required health services consistently.** (Repeated recommendation 2.51)
- 2.53** **The health centre holding rooms should be remodelled and used to promote health and well-being.**
- 2.54** **There should be a regular health service user forum to inform service delivery and development.** (Repeated recommendation 2.53)

Delivery of care (physical health)

- 2.55** New arrivals received appropriate health screening in a dedicated room in reception. Secondary health assessment took place as necessary in follow-up clinics. Links with community agencies were established if needed, and referrals for further assessment and treatment were made.
- 2.56** Health staff were on site from 7.30am to 6pm daily. In our survey, only 22% of prisoners said it was easy to see a doctor, against the comparator of 29%, and only 32%, against 49%, to see a nurse. However, we observed that a routine appointment with a nurse was available within two days and an urgent one in two hours. The health care applications system worked well, although too many prisoners were frustrated by the system and lacked confidence in it. Patients complained of waiting up to two hours before and after their appointments because of lack of escorts.
- 2.57** There was an appropriate range of primary care services, including physiotherapy and podiatry, with acceptable waiting times. Weekday GP services were provided by a regular doctor. Prisoners requiring access to urgent 'on the day' GP appointments were facilitated, and routine appointments were available within two days. Out-of-hours emergency GP cover was provided to the same level as in the community.

- 2.58** The primary care team offered some nurse-led clinics, including wound care, but there were no nurse-led long-term conditions clinics, which were currently managed through the GP.
- 2.59** There was an unacceptably high rate of 'failure to attend' health appointments, at around 30%. The health care department was in discussion with the prison on how this could be improved. The lack of a free-flow appointment slip system, which is common in similar prisons, contributed to the problem but could be resolved. There were now processes to communicate the health service's performance to prisoners, and to encourage them to act responsibly to help reduce the high non-attendance rate.
- 2.60** External hospital appointments were well managed. Patients were referred promptly to secondary health services and very few appointments were cancelled due to lack of prison escort staff.

Recommendation

- 2.61** **The local delivery board should take sustained action to reduce the prisoner failure to attend rate, and waiting times before and after health care appointments.**

Pharmacy

- 2.62** There had been 15 separate suppliers of medicines since April 2017, which was needlessly complex. The supply chain was not sufficiently secure in the gate lodge, where any member of staff working there could access a locked storage cupboard containing controlled drugs in transit. Action was taken to improve security during our visit. Patients complained of delays in receiving medicines but, other than for a few problems in April, we observed an efficient system with repeat prescribing signed one week before medicines ran out.
- 2.63** The proportion of patients who had their medicines in possession had improved since the last inspection from 58% to 85%. The policy was correctly used and patients had in-cell or on-wing medicine storage facilities.
- 2.64** The on-site pharmacy technician was overworked, but a second pharmacy technician had been recruited and was due to start. The technician had established contact with the senior Care UK pharmacist but, at the time of inspection, there was insufficient professional oversight, no pharmacist-led clinics and no medicine use reviews.
- 2.65** Medicines were prescribed and administered through the SystmOne clinical IT system, but we did not see a prison formulary. Medicines were administered at 8am and 4pm., which meant that some supervised medicines were not given at clinically indicated times. For example, night sedating medication was given too early at 4pm, and medicines were changed to twice daily instead of three to four times. Medicine administration records were generally well completed.
- 2.66** Medicines were administered in the health centre and on Raleigh wing. Supervision of medicine queues on Raleigh had improved, but we saw unsupervised groups of patients congregating near the hatch. The clinical rooms were well organised and medicines were stored securely and were meticulously organised, a great improvement since our last inspection. Fridge temperatures were recorded daily and checked by the pharmacy technician. Administration of methadone was done manually, which was very time consuming. Computerised methadone dispensing equipment was due to be deployed.

- 2.67** There had been no medicines management meeting since February 2017, but this was to be reconvened by Care UK. Care UK standard operating procedures and patient group directions (authorising appropriate health care professionals to supply and administer prescription-only medicine) were being signed by relevant staff.

Recommendations

- 2.68** A pharmacist should ensure that the medicines supply chain is secure, and provide assurance to the health partnership board.
- 2.69** There should be professional oversight of the pharmacy service and patients should have access to pharmacy-led clinics, including medicine use reviews.
- 2.70** All prescribed medicines should be administered at the appropriate times to ensure effective patient care.

Dentistry

- 2.71** Time for Teeth Ltd provided a full range of NHS-equivalent services. Patients had access to external orthodontic treatment when necessary. The average wait for routine appointments was satisfactory at under six weeks. Prisoners with urgent dental care needs were seen at the next dental clinic. The importance of oral health was promoted during consultations, which was good.
- 2.72** The dental suite was spacious, met infection control standards and was suitably equipped. Dental equipment was well maintained and serviced regularly. There were appropriate arrangements for decontamination of dental equipment and for disposal of dental waste.

Delivery of care (mental health)

- 2.73** In our survey, more prisoners than the comparator, 43% against 35%, said they had emotional well-being or mental health problems, but only 33%, against 50%, said they were being helped at the prison.
- 2.74** Care UK provided primary mental health and secondary mental health services. A new pathway document explained a stepped approach to care. There were several staff vacancies in psychology and psychiatric nursing. Despite this, the team had a rich mix of skills in psychiatry, psychology and nursing, as well as a well-being practitioner on the staff. Mental health services were well integrated into the prison, although mental health practitioners could not support all meetings due to staff shortages.
- 2.75** The relatively low prescribing of anti-psychotic medication (about 38 patients) indicated that not all need was identified. Only around a fifth of custodial officers had received mental health awareness training in the last three years to enable them to identify prisoners in need of referral, but there were plans to offer face-to-face and computer-assisted learning. A clinical audit in 2016 showed that only 6.9% of the black and minority ethnic population had accessed mental health services while they comprised 22% of the prison population. Recommendations to assist staff in identifying prisoners in need and to encourage more black and minority ethnic prisoners to come forward were being considered.
- 2.76** There were five to 10 referrals a week through an open referral system. These were promptly screened by the nurse practitioner and then presented at the weekly

multidisciplinary referral meeting. The mental health team was supporting around 75 patients. Despite staff shortages, waiting times for mental health assessments were less than a week, although therapeutic options for patients with mild to moderate problems were limited to short, solution-based approaches. There were no group therapies. Bereavement and loss counselling were available through the chaplaincy.

- 2.77** Patients with complex psychological problems were offered cognitive therapies and other psychological therapies for abuse and trauma, although capacity was limited. The associate psychiatrist offered prescribing and therapy for patients with severe mental illnesses, and coordinated the care of the team. Clinical records on SystmOne were very good and the care planning approach was used appropriately. Community liaison was good but hampered by the prison's location.
- 2.78** None of the patients transferred to external mental health facilities in the 12 months to the end of March 2017 left the prison within the guideline of 14 days. One patient had waited for 105 days, which was unacceptable.

Recommendations

- 2.79 Prisoners should have prompt access to a full range of care-planned support for mild to moderate mental health problems.** (Repeated recommendation 2.83)
- 2.80 Patients requiring a transfer under the Mental Health Act should be assessed promptly and be transferred within the current transfer guidelines.** (Repeated recommendation 2.85)

Social care

- 2.81** There were links with Dorset County Council to undertake social care assessments. Two prisoners had been assessed in the last year, although neither met the threshold for social care. There were no prisoners currently who required assistance with their social care needs. There was to be further work to raise awareness of the referral process in the prison. Access to mobility and health aids, when required, was satisfactory.

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.

- 2.82** Prisoner perception of the food was poor; in our survey only 21%, against the comparator of 32%, said the food was good. There were some grounds for prisoner concerns about the food, and the prison had done very little since the previous inspection to address prisoners' poor perceptions.
- 2.83** The only hot meal of the day was served at lunchtime, which was unpopular with prisoners. Despite the prison's own survey confirming this view, there had been no action to address the issue. We were told that this was because an evening hot meal service would affect association time. However, given that other similar establishments manage this better, a review of the cumbersome unlock procedures could facilitate prisoners having their hot meal at the end of the working day. The serving of the main lunchtime meal was poorly

supervised, with little portion control. We saw prisoners being served sloppy food on overflowing plates with no trays to help carry their meals safely back to their cells. Vegan prisoners were also poorly catered for. Two of the items on the default vegan menu were not in fact vegan. The three vegan prisoners in Portland at the time of our inspection were provided with inadequate quantities of food.

- 2.84** Breakfast packs were served with the evening food and portions were small. The evening food packs were eaten at around 5pm, and were also small. Many prisoners told us that they had to supplement the prison food with purchases from the prison shop.
- 2.85** There were no opportunities for prisoners to eat together. Standards on the serveries varied; some were dirty and the serveries on Beaufort had graffiti on the walls. The main kitchen was generally clean. Prisoners working there were not currently able to gain qualifications, although there were plans to introduce training programmes (see paragraph 3.11).

Recommendations

- 2.86** **The prison should investigate and address prisoners' views on the quality and quantity of food, and prisoners should be able to carry their meals back to their cells safely.**
- 2.87** **All serveries should all be clean and well maintained.**

Purchases

Expected outcomes:

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

- 2.88** The system for prison shop purchases was effective. New arrivals could now receive their first shop order more promptly than previously. We found a suitable range of reasonably priced items, and prisoners could buy newspapers and magazines through a local newsagent. However, there had been little prisoner consultation about the shop and there should be further exploration of their negative views, particularly those of prisoners from a black and ethnic minority background who were particularly negative about the provision. Some prisoners also complained about the range, price and quality of the e-cigarettes they could buy since the smoking ban came in.

Recommendation

- 2.89** **The prison should investigate and address prisoners' dissatisfaction with the shop provision, including the e-cigarettes on sale.**

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

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

- 3.1** The restricted regime affected time out of cell for many prisoners. A few prisoners in trusted positions could have 10 hours a day unlocked, which was good, and the vast majority of full-time workers had around eight and a quarter hours. However, unemployed prisoners could be unlocked for as little as two hours a day. During our roll checks we found almost a third of prisoners locked in their cells, which was too many for a category C training prison. The core day routine was regularly delayed by an overcontrolled unlocking process for mealtimes, long and poorly supervised medication queues, and generally slow procedures. In the previous month, the regime had been routinely delayed by up to 30 minutes at the start of the afternoon. (See main recommendation S43.)
- 3.2** Association periods were regular and mostly predictable, although some were curtailed. Exercise periods were too short, at around 30 minutes, but were available daily to nearly all prisoners.

Learning and skills and work activities

Expected outcomes:

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

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

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

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

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

Management of learning and skills and work

- 3.4** The management of learning, skills and work had improved, and prison senior managers had continued to focus on developing prisoners' employability skills. Partnership working with Weston College had improved significantly and was now very effective in providing education and vocational training to meet prisoners' employability and resettlement needs. There was a good range of vocational training and relevant industry work, and plans to increase further the range of accredited qualifications in training and work activities. In our survey, over half of prisoners said that their prison work would help them to get jobs on release, which was much higher than at the previous inspection and the comparator. The education and training provision from Weston College was good.
- 3.5** Although the number of activity places had increased, restrictive regimes meant that not all prisoners were able to attend activities and they did not always arrive on time. Prisoner allocation to activities was generally well managed, but too many new prisoners were not allocated quickly enough and remained on the wings, and prisoner attendance required improvement in a few education sessions. (See main recommendation S43.)
- 3.6** Observations of teaching and learning sessions were used well to identify positive aspects of teaching practice and areas for improvement. The quality of teaching and learning and assessment in education, vocational training and industry workshops had improved and was good. Prison instructors in industry workshops were highly motivated to support prisoners, and 14 were working towards recognised teaching and training qualifications.
- 3.7** Self-assessment was well-established and the judgements were reasonably accurate. Prison managers had identified some key strengths and areas for improvement, which accorded with those we found. However, targets in the quality improvement plan did not sufficiently identify all the areas for improvement needed to raise the quality of provision further. Managers used the quality improvement group meetings effectively to monitor activities, and discuss and identify options to improve prisoners' experiences, reduce reoffending and increase their employment opportunities.

Recommendation

- 3.8 Learning, skills and work quality improvement planning should be developed further to identify and target effectively all areas for improvement across the prison.**

Provision of activities

- 3.9** The number of activity places had been increased and provided at least enough part-time occupation for the whole population. However, more full-time places were needed. Most of the vocational training places were full time. The education provision was primarily part time, and timetables ensured that prisoners in the industry workshops could access education during their working day. Classrooms had been constructed in workshops, and education staff were successfully providing support for prisoners in the workshops and on the residential units. In our survey, almost a quarter of prisoners said they were involved in vocational or skills training, which was more than the previous inspection and the comparator. On average, approximately two-thirds of prisoners were engaged in an activity.
- 3.10** Prisoner induction into purposeful activity was well planned and effective, and prisoners engaged well. New arrivals' learning support needs were clearly identified and were considered during allocation meetings. The meetings were attended by offender management

unit (OMU) supervisors to ensure that support needs were linked to prisoners' sentence plans.

- 3.11** Weston College provided approximately 100 education places and courses, including: English, mathematics, information and communications technology, art, horticulture and gardening, personal and social development, home cooking and self-employment. The range of vocational training provided by Weston College and the prison had increased since the previous inspection. Approximately 100 places were now provided, and included brickwork, carpentry, painting, cycle maintenance, lift truck operations, industrial cleaning and physical education courses. Accredited kitchen training was due to be introduced, and railway track training was planned to recommence. Most of the provision offered qualifications up to level 2.
- 3.12** At the time of inspection, no qualifications were offered in cycle maintenance, recycling or laundry work. Prisoners in the industry workshops on high quality Ministry of Defence work gained very useful employability skills in work such as making camouflage nets, crates and refurbishing tank jacks. A few prisoners were following a nationally accredited qualification in performing manufacturing operations. Approximately 25 prisoners were successfully engaged in Open University and distance learning programmes.

Recommendation

- 3.13** **Recognised employment-related qualifications should be provided for all vocational training and industry work to equip prisoners to find employment on their release.**

Quality of provision

- 3.14** The quality of teaching, learning and assessment in education and vocational training had improved through strong performance management, and was now good. Learning was well planned and tutors used a wide range of teaching methods and activities that motivated and interested prisoners. In the industry workshops, prison instructors coached prisoners effectively and used good demonstration techniques that reinforced learning. There were well-designed teaching displays in the workshops, such as photos showing parts of cycles and how they were assembled. Trainers used these displays to discuss the mathematical principles associated with gear ratios, tyre sizes and the importance of correct inflation pressures.
- 3.15** The vast majority of prisoners made good progress. Tutors and trainers provided good support for prisoners with identified additional learning support needs to ensure they made progress and achieved their learning aim. Peer mentors were used effectively in education, training and the industry workshops, and worked very well with staff to help plan and deliver support. Many prisoners we spoke with were reluctant to engage in formal education, and Weston College and prison staff provided good support for prisoners' English and mathematics skills development in the work areas. Prisoners appreciated this and were motivated to improve their skills. Weston College staff also supported prisoners on the residential units.
- 3.16** In the absence of national recognised qualifications, trainers and workshop instructors used prisoners' prison training records well, and most contained detailed records of skills gained. However, they were seldom used to provide prisoners with a formal record for potential employment. Tutors corrected most spelling and grammar errors effectively on most marked work, but did not always identify how prisoners could improve their grammar and

spelling skills. There had been insufficient progress since the previous inspection to improve the use of individual learning plans, which tutors and trainers still used inconsistently to plan learning and help prisoners identify targets.

Recommendations

- 3.17 The standard of teaching and learning in education and vocational training should be maintained and raised further to ensure that all prisoners continue to make good progress throughout their learning and achieve their learning aim.**
- 3.18 Individual learning plans should include personalised and challenging targets to help prisoners make better progress.**

Personal development and behaviour

- 3.19** Many prisoners were keen to attend education and training sessions but the restricted regime prevented attendance for some (see paragraph 3.1). Prisoner attendance at training programmes, industry workshops and most education sessions was good, but was low in a small minority of education sessions.
- 3.20** The majority of prisoners we talked with were very positive about education and training and behaved extremely well. They showed respect towards prison, teaching and training staff and to each other. Prisoners were proud of their role as peer mentors, which they said had increased their self-confidence and self-esteem. Prisoners working as health and safety representatives in the industry workshops were also motivated and valued their role.
- 3.21** Standards of work were at a level expected for the qualifications and training provided. Standards were high in the MoD workshops and cycle maintenance activities.
- 3.22** Punctuality was variable and depended on the management of regimes and keeping prisoners secure and apart when required. Consequently, not all prisoners arrived at activities on time.

Recommendation

- 3.23 Prison managers should ensure that all prisoners arrive on time at their allocated activity to reinforce a work ethic.**

Education and vocational achievements

- 3.24** Prisoners achieved consistently well on most education and training programmes, and achievements were high. Most prisoners who started on courses completed and achieved them. A minority of prisoners taking English functional skills qualifications at level 2 failed to pass first time because they failed the reading aspect, but all achieved the qualification at the second attempt. Too few prisoners were enrolled on qualifications in the industry workshops and so were unable to develop their potential to gain employment on release. There was good advice and guidance for prisoners who wanted to progress to higher learning.
- 3.25** Achievements on the small number of PE lifestyle management and fitness programmes were high but the number of prisoners taking these qualifications was low.

- 3.26** Weston College and the prison monitored prisoners' participation and achievement well, and data showed that there was no discernible difference in achievements of different groups of prisoners.

Recommendations

- 3.27** Prisoners' achievements in English functional skills at level 2 should be improved.
- 3.28** All prisoners should have the opportunity for and be encouraged to gain qualifications in the industry workshops.

Library

- 3.29** Dorset Library Service managed the library at the time of the inspection, but there were plans for Weston College to take it over. The library continued to maintain a reasonable range and volume of stock to meet prisoners' needs, including fiction, non-fiction, Prison Service Instructions, CDs, DVDs and reference books. We were disappointed to find that the Shannon Trust reading scheme for prisoners with reading difficulties had not been reinstated, and there was no equivalent peer reading scheme offered. There was sufficient provision for the small number of non-English speakers. Library stock loss at 20% was far too high.
- 3.30** Library staff had adapted opening hours to accommodate the needs of prisoners, including opening on Saturday mornings. However, there were still limited opportunities for prisoners to visit the library due to restricted regimes and insufficient escort staff, and many scheduled visits did not take place. In our survey, only 21% of prisoners said that they went to the library at least once a week, half the comparator of 42%, which was unacceptably low.

Recommendations

- 3.31** Prisoners should be offered a peer-led reading initiative.
- 3.32** The library should control its stock effectively to reduce the amount of loss.
- 3.33** All prisoners should be able to access the library as scheduled.

Physical education and healthy living

Expected outcomes:

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

- 3.34** The physical education provision continued to be well managed for prisoners able to access it. There was an adequate range of recreational and structured sport and games. The large sports hall was used effectively for games, circuit training and coaching. The weight training and cardiovascular facilities were heavily used during recreational sessions. There were six well-qualified and capable physical training staff who were rarely deployed to other activities.
- 3.35** All prisoners completed an appropriate induction to the gym, and they were given good advice on diet, nutrition and healthy living. PE staff liaised well with health care to provide relevant remedial PE to prisoners requiring support. There were scheduled sessions to help

prisoners stop smoking, specific PE sessions for prisoners over 45, and evening, daytime and weekend sessions for those in full-time work and education. Prison data showed that an average of 36% of prisoners regularly used the facilities; although this was double the proportion of prisoners in our survey who said they went to the gym three or more times a week, it was still too low. There was no data to identify how many prisoners in full-time work or education used the facilities.

- 3.36** Prisoners employed as gym orderlies provided useful support for staff and could take a national vocational qualification (NVQ) level 2 award in instructing exercise and fitness. Prisoners on YMCA-accredited awards in lifestyle management at level 1 achieved well. These awards had been introduced following our previous inspection.
- 3.37** Most gym equipment was well maintained and in good order. Isometric training equipment in the exercise yards was used extensively and was very popular. The outside all-weather surface had been replaced and was used regularly for team games. Changing rooms and showers were clean and well maintained.

Recommendation

- 3.38 PE staff should routinely collect and analyse data on use of the PE facilities to identify the prisoners using them and ensure equality of access.**

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** Strategic and operational links between the offender management unit (OMU) and resettlement pathways work had strengthened since the last inspection, closer working between senior managers was evident and new operational structures had been very recently developed (see paragraph 4.25).
- 4.2** There was an adequate reducing reoffending strategy and an up-to-date pathways action plan, which was informed by a detailed quarterly needs analysis and incorporated OASys (offender assessment system) data. Quarterly strategy meetings and partnership meetings were usually well attended and well informed. However, too many prisoners continued to arrive at the prison without an up-to-date OASys assessment, which caused problems as Portland was not resourced to make initial assessments. In the previous six months, 232 of the 485 new arrivals had no OASys assessment.

Recommendation

- 4.3 All prisoners arriving from other establishments should have an up-to-date OASys (offender assessment system) assessment, where relevant.**

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.

- 4.4** Virtually all prisoners were subject to offender management. In our survey, 72% of prisoners said they had a named offender supervisor, but only 48% said they had a sentence plan, against the comparator of 61% and 60% at the last inspection. Just over half of prisoners with an offender manager in the community said they had no contact with them, and fewer than the comparators said they had had no contact by letter, telephone or visit. There was a lack of effective management oversight in the OMU with little cohesive monitoring or understanding of cases, systems and processes by the management team. (See main recommendation S44.)
- 4.5** The unit had six probation offender supervisor posts, three of which were filled, and eight prison offender supervisors. The latter were routinely cross-deployed to other duties; in January and February 2017, around 43% of their offender supervisor hours were lost to other operational pressures. As a result, offender supervisors' contact with prisoners on their caseload was too variable.

- 4.6** Probation staff tended to hold the more complex cases, although not exclusively, and caseloads were usually no more than 45 each. In addition, four residential senior officers also carried a very small caseload of around five prisoners each. Offender supervisors still received little supervision and limited training.
- 4.7** There was an OASys backlog of just over 100, of which 70 were the responsibility of the prison to complete and 31 the responsibility of external offender managers. Although the new head of OMU had a clear strategic plan to address and reduce the backlog, the problem was continually compounded by the number of new arrivals with no up-to-date OASys assessment (see paragraph 4.2 and recommendation 4.3). The absence of a current assessment hindered some prisoners from accessing interventions to address their offending behaviour (see paragraph 4.41).
- 4.8** We had concerns about the medium risk of harm cases that were the prison's responsibility. We saw some such prisoners within 14 days of their release whose risk of harm had not been reviewed, despite routine pre-release checks at this stage. One prisoner without an up-to-date OASys assessment due for imminent release posed a risk to a named adult that had not been picked up by the OMU or the external community rehabilitation company (CRC).⁹ An exclusion order relating to a more recent partner had also been missed. As a result, he was set only standard licence conditions. As there were no management quality assurance processes, errors such as these were not identified. (See main recommendation S44.)
- 4.9** The prison had considered 124 applications for release on home detention curfew (HDC) in the previous six months, of which only 54 had been successful. The quality of the risk assessments we inspected was reasonable and most decisions were well informed, but timeliness was not good enough. Although there had been some improvement since 2016, there were still 33 decisions beyond HDC eligibility date waiting a decision; some dated back five months to the beginning of 2017, which was unacceptable. Managers were also not readily aware of how out of date some of these cases were.
- 4.10** Use of release on temporary licence (ROTL) had been cut since the last inspection, when we had found 1,179 separate ROTL events for 109 different prisoners, and eight to 10 prisoners out on ROTL on most weekdays. It was concerning that ROTL was no longer used to promote resettlement.

⁹ Since May 2015, rehabilitation services, both in custody and after release, have been organised through CRCs which are responsible for work with medium- and low-risk offenders. The national probation service has maintained responsibility for high- and very high-risk offenders.

Recommendations

- 4.11 All offender supervisors should have effective, regular and meaningful contact with their prisoners, focused on supporting them to meet sentence planning targets and reduce the risk of harm and reoffending.** (Repeated recommendation 4.21)
- 4.12 All offender supervisors should have effective supervision, training and support to ensure that they can meet the offender management needs of prisoners.** (Repeated recommendation 4.22)
- 4.13 Pre-release checks of prisoners should incorporate an accurate review of their risk.**
- 4.14 Home detention curfew decisions should be timely, and HDC releases should be as close to the prisoner's eligibility date as possible.**
- 4.15 Release on temporary licence should be used to support resettlement for relevant prisoners, subject to appropriate risk assessment.**

Public protection

- 4.16** Case administrators screened new arrivals for public protection concerns, and the procedures were generally robust. Relevant prisoners were made subject to restrictions, usually for an initial one-month period followed by a review. At the time of the inspection, 16 prisoners were on mail and/or telephone monitoring.
- 4.17** There were some significant weaknesses in the management oversight of public protection, including multi-agency public protection arrangements (MAPPA) cases. There was no overarching record or monitoring of public protection; managers did not know the number of MAPPA cases in the prison, for example, without printing off records on the P-Nomis Prison Service IT system. Furthermore, the list of about a dozen level 2 MAPPA offenders on P-Nomis bore no resemblance to the names on the eight MAPPA reports prepared for the release of level 2 offenders in the following three months. (See main recommendation S44.)
- 4.18** The prison had also stopped notifying external probation services of forthcoming MAPPA releases. As a result, we found cases of prisoners coming up for release, some very imminently, where external probation had not confirmed the correct MAPPA level. Minutes of the interdepartmental risk management team meeting did not cover all the relevant MAPPA cases due to be released in the following three months. We could not, therefore, be assured that prisoners were released in the safest way possible following consideration of all relevant risk factors.

Recommendation

- 4.19 The interdepartmental risk management team should discuss in detail all prisoners covered by multi-agency public protection arrangements (MAPPA) due for release to ensure that their release arrangements are as robust and safe as possible.**

Categorisation

- 4.20** The prison held 344 category C and eight category D prisoners; the remainder were predominantly young adults. Categorisation reviews were generally well informed and signed off at a sufficiently senior level, but not all of those we looked at were sufficiently timely. There were 19 overdue, the longest dating from March 2017.
- 4.21** There were 40 prisoners on the transfer list, who were generally waiting to transfer to HMP Erlestoke to complete a programme or had submitted an application to transfer. Almost all transfers, including those to the open estate, were prompt. The only delays we saw had been caused by transport issues or by prisoners applying to transfer outside the designated contract area for the prison.

Recommendation

- 4.22 All categorisation reviews should be timely.**

Indeterminate sentence prisoners

- 4.23** There were only two prisoners serving an indeterminate sentence at the prison, as they did not usually fit the admissions criteria. As a result, there were no lifer forums or other specific provision for this group. This was not unreasonable given the low numbers.

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 Dorset, Devon and Cornwall CRC, Working Links, had subcontracted Catch 22 to deliver services in the prison. There were three CRC staff. A senior worker completed all reviews of resettlement plans and delivered a resettlement programme that covered finance, families and relationships, employability and healthy living. The other two staff worked on accommodation. In the previous six months, the CRC had seen almost all the 293 prisoners released from the prison. The resettlement plans we looked at were generally detailed and appropriate.
- 4.25** There was a new weekly reintegration planning board, which was a positive initiative. This multidisciplinary board was attended by staff from Catch 22, National Careers Service, chaplaincy, education and others and discussed the review resettlement plan; it was an opportunity for the information reported by prisoners to the CRC to be challenged and ratified by other departments. The OMU also attended to establish how it could best make an input, which helped overcome the lack of joint operational work with the CRC.

Accommodation

- 4.26** The two dedicated CRC accommodation staff had links with a range of housing providers and provided intensive help to prisoners requiring it, including complex assessment and support. They had also visited housing providers in areas outside of the prison contract area to help forge relationships.

- 4.27** Given that half the prisoners released were out of area, the CRC had done well to ensure that 84% of prisoners had gone to secure accommodation in the previous six months. Secure accommodation was defined as attainable on the day of release and secure for at least three months. However, 46 prisoners had still been released with no fixed accommodation.

Recommendation

- 4.28 All prisoners should be discharged into secure accommodation.**

Education, training and employment

- 4.29** The quality of the careers advice and guidance provided by the National Careers Service and contracted to the Centre for British Teachers (CfBT) required improvement. A dedicated and experienced member of staff worked effectively with most prisoners at induction and throughout their stay. However, not all prisoners were seen and additional staff were needed; recruitment plans were under way. Prisoners used the 'virtual campus' effectively to access community education, training and employment opportunities through the internet.
- 4.30** The CfBT member of staff had links with external agencies and ensured that prisoners were supported well into the community on release. Links with employers were underdeveloped. A range of information about jobs in release areas was provided, although future planning and potential job opportunities needed to be researched. CfBT provided informative skills action plans to help prisoner allocation to activities, and entered prisoner information on to the electronic case note system so that OMU supervisors could ensure that prisoners were allocated to appropriate and relevant activities.
- 4.31** The increased range of training and better quality work in the industry workshops contributed significantly to the development of prisoners' employability skills. However, release on temporary licence was not used to prepare prisoners for work or training in the community, and there was no structured pre-release course. The number of prisoners entering education or training on release was very low. The prison had no reliable data on prisoners entering employment on release.

Recommendation

- 4.32 The number of CfBT advisers should be increased to ensure that all prisoners receive careers support at induction and throughout their time at Portland.**

Health care

- 4.33** Pre-release or transfer planning for prisoners with health care needs was good. Patients were offered appointments for pre-release health checks and were given take-home medication and assistance to find a GP in the community. Discharge planning for patients with complex mental health problems included effective communication with relevant community services. There were appropriate arrangements for palliative care.

Drugs and alcohol

- 4.34** Joint working between substance misuse and offender management services had improved. Case notes confirming engagement and summarising interventions were entered on to

P-Nomis (the Prison Service IT system), and the substance misuse team contributed to sentence planning boards and was represented at the reintegration boards that met 12 weeks before the prisoner's release. The team's designated family worker engaged with 40 prisoners on a one-to-one and a groupwork basis, and attended visits to meet families and signpost them to community support services.

- 4.35** Prisoners were given harm reduction and overdose prevention information before release, and training in and provision of naloxone (a drug to manage substance misuse overdose) was due to start. The substance misuse team had good links with community support services, including residential rehabilitation centres. Recovery workers coordinated community appointments to ensure treatment continuation for prisoners prescribed methadone, and could arrange bridging prescriptions if required.

Finance, benefit and debt

- 4.36** Prisoners were able to open bank accounts and get support from Catch 22 for financial management, including managing debt incurred before custody. Jobcentre Plus staff provided advice and support on benefits. There was no provision to address the problem of debts incurred to other prisoners while in custody, or any link between this and the offending behaviour that had led to custody.

Children, families and contact with the outside world

- 4.37** Visitors had often travelled long distances, and visitors and prisoners raised the problem of the very poor transport from the main train station to the prison. This visitors' centre was a reasonable size, with a large well-stocked play room.
- 4.38** There were still routine delays in getting prisoners to the visits hall in time for the start of their visit, often because of delays in completing the prisoner roll call. During the inspection, some visits started up to 25 minutes late. Visits staff were welcoming and put visitors at ease. The play area was unstaffed but had a suitable range of toys and was clean. The tea bar offered snacks and drink, and visitors could buy a snack pack that prisoners could take back to their wings. The prison had recognised the need to improve some aspects of visits, including transport and facilities for visitors, and make the visits hall more welcoming and child friendly.
- 4.39** The prison offered Storybook Dads, enabling prisoners to record a story for their children, as well as twice-yearly family visits. The prison was currently reviewing its children and families pathway document, outlining how prisoners could maintain meaningful contact with their families.

Recommendation

- 4.40 All prisoners and visitors should be able to take part in the full visits session.**
(Repeated recommendation 4.50)

Attitudes, thinking and behaviour

- 4.41** The prison delivered three accredited programmes: the Alcohol Related Violence programme, completed by 36 prisoners in the last year; the Thinking Skills Programme, also completed by 36 prisoners; and the Resolve cognitive-behavioural intervention for violent

offenders, completed by 18 since July 2016. The quarterly need analysis had also identified a need for a domestic violence intervention. The considerable OASys backlog and lack of assessment (see paragraph 4.7) hindered prisoner access to some interventions, and so not all were able to address their offending behaviour needs.

Recommendation

- 4.42 The prison should ensure that the offending behaviour needs of prisoners are addressed.** (Repeated recommendation 4.56)

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 There should be a clear strategy to identify and understand the causes of bullying and violence. Investigations should be carried out promptly and actions identified to reduce the risks should be tangible and swift. There should be more positive interventions to help perpetrators change their behaviour. (S40)
- 5.2 The prison should develop a strategy to identify, protect and support victims of bullying and violence, and those at risk of self-harm. Oversight should be at a senior level to ensure that appropriate processes are in place and prompt action is taken to reduce risks to vulnerable prisoners. (S41)
- 5.3 All staff should be properly trained in control and restraint techniques, and required to use available body-worn video cameras. Staff should complete accurate and detailed use of force reports promptly. All planned incidents and baton use should be recorded and reviewed. Managers should address any concerns raised and share learning points with staff. (S42)
- 5.4 Delivery of the regime should be effectively managed at a senior level to maximise prisoner time out of cell with a focus on better access to learning, skills and work. (S43)
- 5.5 Management of the offender management unit should be tightened and the quality assurance of cases, systems and processes should be robust. Managers should do more to understand the needs and risks of the population, and provide better support for staff supervising prisoners. (S44)

Recommendations

To HMPPS

- 5.6 Prisoners should have all their permitted property with them when they are transferred between prisons. (I.3)
- 5.7 All prisoners arriving from other establishments should have an up-to-date OASys (offender assessment system) assessment, where relevant. (4.3)

Recommendations

To the governor

Courts, escort and transfers

- 5.8 Prisoners should be taken off the escort vans promptly. (I.4)

Early days in custody

- 5.9** New arrivals should be taken to the first night centre at the earliest opportunity. Those who have to wait in reception for prolonged periods should be provided with useful information and appropriate distraction materials, such as a daily newspaper and a TV. (1.8)

Self-harm and suicide

- 5.10** The suicide and self-harm prevention meeting should be sufficiently frequent to enable appropriate analysis, oversight and action, and have links to other key areas, such as violence reduction, activities and security. (1.20)
- 5.11** There should be sufficient quality assurance of assessment, care in custody and teamwork (ACCT) case management to ensure it provides adequate support for prisoners at risk of self-harm, and all relevant personnel should attend ACCT reviews. (1.21)

Safeguarding

- 5.12** The governor should contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.23)

Security

- 5.13** Security arrangements, including those for prisoner movement and meal service, should be appropriate for a category C prison. (1.30)
- 5.14** The prison should develop, implement and monitor a drugs and alcohol supply reduction action plan, and ensure there are effective measures to tackle drug and alcohol availability. (1.31)

Incentives and earned privileges

- 5.15** The incentives and earned privileges scheme should be applied fairly, and improvement targets and support should be in place for each individual prisoner. (1.34)

Discipline

- 5.16** The number of adjudications should be reduced to enable all charges to be heard, and adjudication records should be quality assured to ensure sufficient inquiry before a finding of guilt. (1.37)
- 5.17** Prisoners should never be located in cells without running water, sinks or other basic equipment. (1.49)
- 5.18** The regime in the care and separation unit should provide more opportunities for prisoners to access amenities and activities. (1.50)
- 5.19** Segregation reviews should involve relevant staff and set appropriate targets. (1.51)

Substance misuse

- 5.20** The full range of prescribing options should be available, and prescribing decisions should be made on clinical need. (1.58, repeated recommendation 1.82)

- 5.21** There should be sufficient provision for prisoners with both mental health and substance-related problems. (1.59)

Residential units

- 5.22** Cells designed for one should not be used to accommodate two prisoners. Cells should be clean, well maintained and properly ventilated, and contain sufficient furniture. Graffiti and displays of offensive materials should be removed. Toilets should be clean and appropriately screened. (2.9)
- 5.23** Prisoners should be able to access clean showers daily. (2.10)
- 5.24** Clean bedding, towels and clothing (including coats) should be consistently available to prisoners. (2.11)

Staff-prisoner relationships

- 5.25** Managers should set minimum standards of expected behaviour, and ensure that staff understand and enforce them. (2.15)
- 5.26** The personal officer system, or an equivalent, should be implemented to ensure that prisoners have someone they can approach who understands them and can provide support. (2.16)

Equality and diversity

- 5.27** The profile of diversity work in the prison should be raised, and the diversity and race equality action team (DREAT) meeting should drive multidisciplinary work to support all minority groups of prisoners. (2.21)
- 5.28** The prison should promptly address evidence of possible discrimination highlighted by equality monitoring data, and should regularly consult prisoners with protected characteristics to ensure that their needs are identified, assessed and met. (2.22)
- 5.29** Foreign national prisoners should have access to independent immigration advice. (2.30, repeated recommendation 2.27)
- 5.30** All staff should be aware of where to find personal emergency evacuation plans and be familiar with their contents for prisoners they are responsible for. (2.31)

Complaints

- 5.31** All prisoner complaints should be dealt with promptly, and they should be subject to appropriate investigation to enable a full and helpful response. (2.38)

Legal rights

- 5.32** Legal visits should take place in privacy. (2.41, repeated recommendation 2.42)

Health services

- 5.33** There should be sufficient health staffing and skill mix to provide all required health services consistently. (2.52, repeated recommendation 2.51)

- 5.34** The health centre holding rooms should be remodelled and used to promote health and well-being. (2.53)
- 5.35** There should be a regular health service user forum to inform service delivery and development. (2.54, repeated recommendation 2.53)
- 5.36** The local delivery board should take sustained action to reduce the prisoner failure to attend rate, and waiting times before and after health care appointments. (2.61)
- 5.37** A pharmacist should ensure that the medicines supply chain is secure, and provide assurance to the health partnership board. (2.68)
- 5.38** There should be professional oversight of the pharmacy service and patients should have access to pharmacy-led clinics, including medicine use reviews. (2.69)
- 5.39** All prescribed medicines should be administered at the appropriate times to ensure effective patient care. (2.70)
- 5.40** Prisoners should have prompt access to a full range of care-planned support for mild to moderate mental health problems. (2.79, repeated recommendation 2.83)
- 5.41** Patients requiring a transfer under the Mental Health Act should be assessed promptly and be transferred within the current transfer guidelines. (2.80, repeated recommendation 2.85)

Catering

- 5.42** The prison should investigate and address prisoners' views on the quality and quantity of food, and prisoners should be able to carry their meals back to their cells safely. (2.86)
- 5.43** All serveries should all be clean and well maintained. (2.87)

Purchases

- 5.44** The prison should investigate and address prisoners' dissatisfaction with the shop provision, including the e-cigarettes on sale. (2.89)

Learning and skills and work activities

- 5.45** Learning, skills and work quality improvement planning should be developed further to identify and target effectively all areas for improvement across the prison. (3.8)
- 5.46** Recognised employment-related qualifications should be provided for all vocational training and industry work to equip prisoners to find employment on their release. (3.13)
- 5.47** The standard of teaching and learning in education and vocational training should be maintained and raised further to ensure that all prisoners continue to make good progress throughout their learning and achieve their learning aim. (3.17)
- 5.48** Individual learning plans should include personalised and challenging targets to help prisoners make better progress. (3.18)
- 5.49** Prison managers should ensure that all prisoners arrive on time at their allocated activity to reinforce a work ethic. (3.23)

- 5.50** Prisoners' achievements in English functional skills at level 2 should be improved. (3.27)
- 5.51** All prisoners should have the opportunity for and be encouraged to gain qualifications in the industry workshops. (3.28)
- 5.52** Prisoners should be offered a peer-led reading initiative. (3.31)
- 5.53** The library should control its stock effectively to reduce the amount of loss. (3.32)
- 5.54** All prisoners should be able to access the library as scheduled. (3.33)

Physical education and healthy living

- 5.55** PE staff should routinely collect and analyse data on use of the PE facilities to identify the prisoners using them and ensure equality of access. (3.38)

Offender management and planning

- 5.56** All offender supervisors should have effective, regular and meaningful contact with their prisoners, focused on supporting them to meet sentence planning targets and reduce the risk of harm and reoffending. (4.11, repeated recommendation 4.21)
- 5.57** All offender supervisors should have effective supervision, training and support to ensure that they can meet the offender management needs of prisoners. (4.12, repeated recommendation 4.22)
- 5.58** Pre-release checks of prisoners should incorporate an accurate review of their risk. (4.13)
- 5.59** Home detention curfew decisions should be timely, and HDC releases should be as close to the prisoner's eligibility date as possible. (4.14)
- 5.60** Release on temporary licence should be used to support resettlement for relevant prisoners, subject to appropriate risk assessment. (4.15)
- 5.61** The interdepartmental risk management team should discuss in detail all prisoners covered by multi-agency public protection arrangements (MAPPA) due for release to ensure that their release arrangements are as robust and safe as possible. (4.19)
- 5.62** All categorisation reviews should be timely. (4.22)

Reintegration planning

- 5.63** All prisoners should be discharged into secure accommodation. (4.28)
- 5.64** The number of CfBT advisers should be increased to ensure that all prisoners receive careers support at induction and throughout their time at Portland. (4.32)
- 5.65** All prisoners and visitors should be able to take part in the full visits session. (4.40, repeated recommendation 4.50)
- 5.66** The prison should ensure that the offending behaviour needs of prisoners are addressed. (4.42, repeated recommendation 4.56)

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Deborah Butler	Team leader
Beverly Alden	Inspector
Angela Johnson	Inspector
Yvonne McGuckian	Inspector
Angus Mulready-Jones	Inspector
Paul Rowlands	Inspector
Anna Fenton	Researcher
Laura Green	Researcher
Natalie Hall	Researcher
Sigrid Engelen	Substance misuse inspector
Paul Tarbuck	Health services inspector
Gary Turney	Care Quality Commission inspector
Bob Cowdrey	Ofsted inspector
Katie Hill	Ofsted inspector
Diane Koppit	Ofsted inspector
Paul Lelliott	Observer
Alex Dawe	Observer

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2014, Portland was a fundamentally safe prison. Early days arrangements were good overall with a positive first night experience for most new arrivals, but we were not assured that all prisoners received a full induction. There had been three self-inflicted deaths since our last full inspection and the prison's response to investigations following these incidents needed to be more thorough. The care and case management of those at risk of self-harm was inconsistent. Despite a challenging population the number of violent incidents was not high and most incidents were low level, but support for victims of bullying and vulnerable young adults required improvement. Some aspects of security were disproportionate and the application of the incentives and earned privileges scheme was inconsistent. Prisoners in segregation were offered caring support but the regime was impoverished and facilities underused. Substance misuse services were inadequate, and many staff and prisoners believed that psychoactive substances were too readily available. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Before prisoners are transferred to Portland, their future court appearances, medical appointments and distances from their families should be considered, and prisoners should be given advance notice of planned transfers. (1.4)

Achieved

New arrivals should be given a free telephone call. (1.11)

Not achieved

All prisoners should receive a full and comprehensive induction programme that keeps them occupied constructively. (1.12)

Not achieved

There should be a coherent approach to reducing violence, bullying and managing vulnerable prisoners. This should include meaningful analysis of data, a comprehensive action plan and adequate governance. (1.18)

Achieved

All allegations of bullying should be investigated and subsequent action taken where required. (1.19)

Not achieved

The prison should implement learning points from recommendations in Prisons and Probation Ombudsman death in custody reports, and review them regularly. (1.27)

Achieved

The quality of assessment, care in custody and teamwork (ACCT) case management documents and support for those in crisis should be improved. (1.28)

Not achieved

Prisoners subject to ACCT case management should only be located in the segregation unit or in strip clothing in exceptional circumstances. (1.29)

Achieved

The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (1.33)

Not achieved

Security arrangements, including those on prisoner movement and wearing of prisoners' own clothes, should be relaxed to be conducive to a category C prison. (1.40)

Partially achieved

The mandatory drug testing programme should be adequately resourced to undertake the required level of testing without any gaps in provision. (1.41)

Not achieved

Prisoners should only be placed on and remain on closed visits when this is supported by intelligence related directly to the trafficking of items through visits. (1.42)

Achieved

The incentives and earned privileges scheme should be applied fairly, and improvement targets should be tailored for the individual prisoner. (1.50)

Not achieved

The quality of adjudication records should be improved, and adjudications should be subject to formal quality assurance. (1.54)

Not achieved

The joint adjudication standardisation, use of force and segregation monitoring meeting should better analyse data to identify trends and patterns, and take action to address identified shortfalls. (1.55)

Partially achieved

Governance of the use of force, particularly the completion of documentation, planned interventions and use of batons, should be improved. (1.60)

Not achieved

The use of the care and separation unit (CASU) for the 'regulated' regime should be reviewed and subject to appropriate oversight. (1.69)

Not achieved

The regime in the care and separation unit should be improved. (1.70)

Not achieved

The drug strategy should be updated annually to include a detailed action plan with up-to-date performance measures informed by an annual needs analysis. (1.80)

Partially achieved

There should be sufficient staffing to provide a full range of relevant integrated psychosocial and clinical support, including regular joint prescribing reviews. (1.81)

Achieved

The full range of clinical prescribing options should be available, and prescribing decisions should be made on clinical need. (1.82)

Not achieved (recommendation repeated, 1.58)

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2014, most accommodation was old and poorly maintained, and many cells were too cramped and had graffiti and offensive displays. Most shower areas were dirty. Staff-prisoner engagement was mostly positive with some impressive examples of genuine care and support. Equality and diversity work was weak and formal support across all the protected characteristics was very limited. Faith provision was good. The handling of complaints required some improvement. Health services met basic needs but service delivery was undermined by staff shortages and the need to improve the management of medications and the provision of primary mental health services. Prisoners were dissatisfied with the food. The prison shop was adequate. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Cells designed for one prisoner should not accommodate two, and all cells should be clean and well maintained, properly ventilated. Graffiti or displays of offensive material should be removed, and cells should contain sufficient furniture. Toilets should be clean and appropriately screened. (S38)

Not achieved

Recommendations

All showers should be adequately screened, clean and maintained. (2.8)

Not achieved

Cell call bells should be answered within five minutes. (2.9)

Not achieved

Prisoners should have access to clean prison clothing of an acceptable quality. (2.10)

Not achieved

There should be adequate support for the needs of prisoners from all the protected characteristics. (2.21)

Not achieved

Foreign national prisoners should have access to independent immigration advice. (2.27)

Not achieved (recommendation repeated, 2.30)

All staff should be familiar with the personal emergency evacuation plan process, and those who need to know should be aware of specific cases. (2.28)

Not achieved

The multi-faith area should be upgraded to make it a more suitable place for worship. (2.34)

Partially achieved

Responses to all prisoner complaints should be within time, polite and helpful. (2.38)

Not achieved

Legal visits should take place in privacy. (2.42)

Not achieved (recommendation repeated, 2.41)

There should be sufficient health staffing and skill mix to provide all required health services consistently. (2.51)

Not achieved (recommendation repeated, 2.52)

All clinical areas should comply fully with infection control guidelines and provide facilities that are equivalent to those in the community. (2.52)

Achieved

There should be a regular health service user forum to inform service delivery and development. (2.53)

Not achieved (recommendation repeated, 2.54)

Barrier protection should be well advertised and easily accessible. (2.54)

Achieved

New arrivals should receive separate primary and secondary health screens completed by appropriately trained staff. (2.61)

Achieved

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

Partially achieved

Clinics should start on time and prisoners should be seen at their allotted time without long waits. (2.63)

Not achieved

All required medicines should be ordered and received promptly, with adequate contingency plans if this is not possible. (2.69)

Achieved

The in-possession policy should be followed, including individual risk assessment before it is provided, and prisoners should be able to store their in-possession medicines securely. (2.70)

Achieved

Prisoners should have easy access to pharmacy-led clinics, including medicine use reviews. (2.71)

Not achieved

All prescribed medicines should be administered at times appropriate for their dosage regime to ensure effective patient care. (2.72)

Not achieved

Prisoners should not wait more than six weeks for a routine dental assessment. (2.77)

Achieved

The dental surgery should fully comply with the relevant infection control requirements. (2.78)

Achieved

Prisoners should have prompt access to a full range of care-planned support for mild and moderate mental health problems. (2.83)

Partially achieved (recommendation repeated, 2.79)

Prisoners should have access to specialist abuse counselling. (2.84)

Partially achieved

Patients requiring a transfer under the Mental Health Act should be assessed promptly and be transferred within the current transfer guidelines. (2.85)

Not achieved (recommendation repeated, 2.80)

The prison should acknowledge and address prisoners' views about the food. (2.90)

Not achieved

New arrivals should be able to receive their shop orders soon after they are admitted. (2.94)

Achieved

Purposeful activity

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

At the last inspection, in 2014, time out of cell was insufficient and there were not enough activity places, particularly as this is a training prison. As a result, many prisoners were locked up for too long with nothing to do. The available activity provision was underused, compounded by poor punctuality and attendance. Strategic management of learning, skills and work was underdeveloped and judged inadequate. The quality of provision and achievement of outcomes required improvement. Library provision was barely adequate with limited access. Gym facilities were satisfactory but access was limited for prisoners in full-time work. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

Time out of cell opportunities need to improve for all prisoners. (S39)

Achieved

The prison should substantially increase the number of purposeful activity places so that all prisoners are fully occupied, and ensure that these places are filled and that all prisoners arrive and leave at the scheduled times. (S40)

Partially achieved

Recommendations

The new education curriculum should be implemented as a matter of urgency. (3.13)

Achieved

The prison should produce a succinct and evaluative self-assessment covering all learning, skills and work, which provides a clear overview of fully evidenced key strengths and areas for improvement, and use this to focus on improving learners' outcomes and achievements through better teaching, learning and assessment. (3.14)

Achieved

Data on participation and learners' achievements should be routinely collated, analysed and evaluated to set accurate and realistic targets for improvement. (3.15)

Achieved

There should be more English and mathematics courses to meet prisoners' learning needs and ensure they can progress and develop their skills. (3.21)

No longer relevant

There should be effective and more extensive observation of teaching and learning and planned staff development to raise the standard of teaching and learning in education and vocational training. (3.30)

Achieved

Peer mentoring should be extended and applied consistently throughout the learning, skills and work provision to support teaching and learning. (3.31)

Achieved

The use of individual learning plans in education should be improved significantly so that they provide clear, incremental and individual targets that are monitored closely and which reflect learners' identified goals and aspirations. (3.32)

Not achieved

There should be formal diagnostic testing and specialist support staff for additional learning needs, and all teaching and training staff should be aware of practical strategies to support learners with dyslexia and other learning needs effectively. (3.33)

Achieved

Teaching staff should have refresher training in promoting equality and diversity effectively in teaching and learning sessions. (3.34)

Not achieved

Managers should maintain and further raise learners' pass rates on all education and vocational training programmes. (3.38)

Achieved

The overall standard of learners' work in education should be improved from satisfactory to at least good overall. (3.39)

Achieved

Library opening times should be increased to ensure that all prisoners can access it, especially those in work, and escort staff should be provided to enable prisoners to use their scheduled visiting times. (3.43)

Not achieved

The prison should provide a range of accredited PE vocational training qualifications, including for gym orderlies, to meet prisoners' resettlement needs. (3.49)

Achieved

Prisoners in full-time work should have better access to PE. (3.50)

Not achieved

There should be a rolling programme for the replacement of older gym equipment. (3.51)

Achieved

The prison should replace the surface of the all-weather pitch. (3.52)

Achieved

Resettlement

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

At the last inspection, in 2014, the offender management and resettlement policies were up to date but most aspects of the current delivery were fragmented. Offender supervisors had insufficient regular contact with prisoners, and it was mostly too superficial. There was a significant backlog in offender assessment system (OASys) assessments. Public protection arrangements were sound. Resettlement pathway provision was generally good but offender supervisor involvement was again, minimal. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Recommendations

The prison should undertake a regular analysis of prisoner resettlement needs, and ensure that offender management and resettlement provision is sufficient to meet what is required. (4. 6)

Partially achieved

Prisoners should not be transferred to Portland without an initial, or up-to-date, offender assessment system (OASys) assessment and sentence plan. (4.7)

Not achieved

Prisoners should be meaningfully involved in sentence planning. (4.20)

Not achieved

All offender supervisors should have effective, regular and meaningful contact with their prisoners, focused on supporting them to meet sentence planning targets and reduce the risk of harm and reoffending. (4.21)

Not achieved (recommendation repeated, 4.11)

All offender supervisors should have effective supervision, training and support to ensure that they can meet the offender management needs of prisoners. (4.22)

Not achieved (recommendation repeated, 4.12)

Quality assurance in the offender management unit should incorporate the quality of engagement and work undertaken. (4.23)

Not achieved

All prisoners should have their resettlement needs assessed at least six weeks before release, and any outstanding concerns should be met. (4.32)

Achieved

All resettlement work should be integrated to complete one pre-release resettlement plan for each prisoner, which incorporates the work of offender supervisors and resettlement services, and which is shared with community offender managers to structure effective post-release supervision. (4.33)

Achieved

The prison should develop a pre-release course that provides prisoners with the skills and tools to gain employment or access education and training on release. (4.39)

Not achieved

The clinical and psychosocial substance misuse workers should consistently record relevant information on prisoners' core records. (4.43)

Achieved

There should be formal coordinated integration of work between the offender management unit and the substance misuse service to ensure effective joint prisoner care. (4.44)

Achieved

All prisoners and visitors should be able to take part in the full visits session. (4.50)

Not achieved (recommendation repeated, 4.40)

The children's play area in visits should be well equipped and staffed for each visits session. (4.51)

Not achieved

The prison should ensure that the offending behaviour needs of prisoners are addressed. (4.56)

Not achieved (recommendation repeated, 4.42)

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	110	307	89.1
Recall	2	47	10.5
Indeterminate sentence		2	0.4
Total			

Sentence	18–20 yr olds	21 and over	%
Less than six months	2	3	1.1
Six months to less than 12 months	3	25	6.0
12 months to less than 2 years	15	35	10.7
2 years to less than 4 years	65	171	50.4
4 years to less than 10 years	27	115	30.3
10 years and over (not life)		5	1.1
ISPP (indeterminate sentence for public protection)		2	0.4
Total			

Age	Number of prisoners	%
Under 21 years	112	23.9
21 years to 29 years	196	41.9
30 years to 39 years	98	20.9
40 years to 49 years	47	10.0
50 years to 59 years: <i>maximum age=58</i>	15	3.2
Total		

Nationality	18–20 yr olds	21 and over	%
British	99	346	95.1
Foreign nationals	13	10	4.9
Total			

Security category	18–20 yr olds	21 and over	%
Category C	2	342	73.5
Category D		8	1.7
Other	110	6	24.8
Total			

Ethnicity	18–20 yr olds	21 and over	%
White	73	287	76.9
British	67	262	70.3
Irish	1	2	0.6
Gypsy/Irish Traveller	3	20	4.9
Other white	2	3	1.1
Mixed	14	15	6.2
White and black Caribbean	5	12	3.6
White and black African	1	2	0.6
White and Asian	1	0	0.2
Other mixed	7	1	1.7
Asian or Asian British	4	3	1.5
Indian	1	0	0.2
Pakistani	2	1	0.6
Other Asian	1	2	0.6
Black or black British	19	50	14.7
Caribbean	9	21	6.4
African	5	18	4.9
Other black	5	11	3.4
Other ethnic group	2	1	0.6
Total	112	356	100

Religion	18–20 yr olds	21 and over	%
Baptist	0	2	0.4
Church of England	12	53	13.9
Roman Catholic	22	70	19.7
Other Christian denominations	18	51	14.7
Muslim	25	34	12.6
Sikh	0	1	0.2
Buddhist	2	3	1.1
Other	0	11	2.4
No religion	33	131	35
Total	112	356	100

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	0	6	
Total			

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	25	5.3	39	8.3
1 month to 3 months	18	3.8	71	15.2
3 months to six months	33	7.1	116	24.8
Six months to 1 year	23	4.9	95	20.3
1 year to 2 years	13	2.8	32	6.8
2 years to 4 years			3	0.6
Total				

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. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 8 May 2017, the prisoner population at HMP/YOI Portland was 473. Using the method described above, questionnaires were distributed to a sample of 197 prisoners.

We received a total of 167 completed questionnaires, a response rate of 85%. Nine respondents refused to complete a questionnaire and 21 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
Benbow	26
Collingwood	11
Drake	27
Grenville	24
Nelson	15
Raleigh	28
Beaufort	33
Care and separation unit	3

Presentation of survey results and analyses

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

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/YOI Portland in 2017 compared with responses from prisoners surveyed in all other category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 38 category C training prisons since April 2013.
- The current survey responses from HMP/YOI Portland in 2017 compared with the responses of prisoners surveyed at HMP/YOI Portland in 2014.
- 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 the responses of Muslim prisoners and non-Muslim prisoners.
- 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 those who are aged 21 and under and those over 21.

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.

- A comparison within the 2017 survey between the responses of prisoners on Nelson and Grenville wings and the responses of prisoners on Benbow, Collingwood, Drake, Raleigh and Beaufort wings.

Survey summary

Section I: About you

Q1.2	How old are you?	
	<i>Under 21</i>	37 (22%)
	<i>21 - 29</i>	67 (40%)
	<i>30 - 39</i>	39 (23%)
	<i>40 - 49</i>	19 (11%)
	<i>50 - 59</i>	4 (2%)
	<i>60 - 69</i>	0 (0%)
	<i>70 and over</i>	0 (0%)
Q1.3	Are you sentenced?	
	<i>Yes</i>	140 (85%)
	<i>Yes - on recall</i>	25 (15%)
	<i>No - awaiting trial</i>	0 (0%)
	<i>No - awaiting sentence</i>	0 (0%)
	<i>No - awaiting deportation</i>	0 (0%)
Q1.4	How long is your sentence?	
	<i>Not sentenced</i>	0 (0%)
	<i>Less than 6 months</i>	5 (3%)
	<i>6 months to less than 1 year</i>	15 (9%)
	<i>1 year to less than 2 years</i>	23 (14%)
	<i>2 years to less than 4 years</i>	68 (41%)
	<i>4 years to less than 10 years</i>	52 (31%)
	<i>10 years or more</i>	2 (1%)
	<i>IPP (indeterminate sentence for public protection)</i>	1 (1%)
	<i>Life</i>	0 (0%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	<i>Yes</i>	15 (9%)
	<i>No</i>	150 (91%)
Q1.6	Do you understand spoken English?	
	<i>Yes</i>	167(100%)
	<i>No</i>	0 (0%)
Q1.7	Do you understand written English?	
	<i>Yes</i>	164 (98%)
	<i>No</i>	3 (2%)

Q1.8 What is your ethnic origin?

White - British (English/ Welsh/ Scottish/ Northern Irish)	117 (71%)	Asian or Asian British - Chinese	0 (0%)
White - Irish	1 (1%)	Asian or Asian British - other	1 (1%)
White - other	7 (4%)	Mixed race - white and black Caribbean ..	6 (4%)
Black or black British - Caribbean	12 (7%)	Mixed race - white and black African	2 (1%)
Black or black British - African	10 (6%)	Mixed race - white and Asian	1 (1%)
Black or black British - other	1 (1%)	Mixed race - other	1 (1%)
Asian or Asian British - Indian	1 (1%)	Arab	1 (1%)
Asian or Asian British - Pakistani	1 (1%)	Other ethnic group	3 (2%)
Asian or Asian British - Bangladeshi	0 (0%)		

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

Yes	8 (5%)
No	156 (95%)

Q1.10 What is your religion?

None	71 (43%)	Hindu	0 (0%)
Church of England	31 (19%)	Jewish	0 (0%)
Catholic	18 (11%)	Muslim	22 (13%)
Protestant	0 (0%)	Sikh	1 (1%)
Other Christian denomination	10 (6%)	Other	8 (5%)
Buddhist	3 (2%)		

Q1.11 How would you describe your sexual orientation?

Heterosexual/ Straight	163 (99%)
Homosexual/Gay	0 (0%)
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	43 (26%)
No	121 (74%)

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

Yes	6 (4%)
No	157 (96%)

Q1.14 Is this your first time in prison?

Yes	57 (35%)
No	108 (65%)

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

Yes	66 (41%)
No	96 (59%)

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	27 (16%)
2 hours or longer	135 (81%)
Don't remember	4 (2%)

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>	27 (17%)
	<i>Yes</i>	114 (70%)
	<i>No</i>	15 (9%)
	<i>Don't remember</i>	6 (4%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	27 (16%)
	<i>Yes</i>	14 (8%)
	<i>No</i>	121 (73%)
	<i>Don't remember</i>	4 (2%)
Q2.4	On your most recent journey here, was the van clean?	
	<i>Yes</i>	88 (55%)
	<i>No</i>	56 (35%)
	<i>Don't remember</i>	17 (11%)
Q2.5	On your most recent journey here, did you feel safe?	
	<i>Yes</i>	123 (74%)
	<i>No</i>	36 (22%)
	<i>Don't remember</i>	7 (4%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	38 (23%)
	<i>Well</i>	75 (45%)
	<i>Neither</i>	39 (24%)
	<i>Badly</i>	7 (4%)
	<i>Very badly</i>	2 (1%)
	<i>Don't remember</i>	4 (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>	94 (57%)
	<i>Yes, I received written information</i>	15 (9%)
	<i>No, I was not told anything</i>	57 (35%)
	<i>Don't remember</i>	6 (4%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	<i>Yes</i>	130 (78%)
	<i>No</i>	34 (20%)
	<i>Don't remember</i>	2 (1%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	111 (67%)
	<i>2 hours or longer</i>	41 (25%)
	<i>Don't remember</i>	13 (8%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	<i>Yes</i>	137 (84%)
	<i>No</i>	16 (10%)
	<i>Don't remember</i>	10 (6%)

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

Very well.....	40 (24%)
Well.....	83 (50%)
Neither.....	29 (18%)
Badly.....	3 (2%)
Very badly.....	3 (2%)
Don't remember.....	7 (4%)

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.....	37 (23%)	Physical health.....	25 (15%)
Housing problems.....	34 (21%)	Mental health.....	43 (27%)
Contacting employers.....	5 (3%)	Needing protection from other prisoners	10 (6%)
Contacting family.....	23 (14%)	Getting phone numbers.....	25 (15%)
Childcare.....	2 (1%)	Other.....	9 (6%)
Money worries.....	22 (14%)	Did not have any problems.....	57 (35%)
Feeling depressed or suicidal.....	34 (21%)		

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

Yes.....	38 (23%)
No.....	67 (41%)
Did not have any problems.....	57 (35%)

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

Tobacco.....	82 (51%)
A shower.....	76 (47%)
A free telephone call.....	79 (49%)
Something to eat.....	116 (72%)
PIN phone credit.....	99 (61%)
Toiletries/ basic items.....	96 (59%)
Did not receive anything.....	16 (10%)

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.....	90 (56%)
Someone from health services.....	112 (69%)
A Listener/Samaritans.....	39 (24%)
Prison shop/ canteen.....	57 (35%)
Did not have access to any of these.....	28 (17%)

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.....	76 (49%)
What support was available for people feeling depressed or suicidal.....	58 (38%)
How to make routine requests (applications).....	66 (43%)
Your entitlement to visits.....	66 (43%)
Health services.....	81 (53%)
Chaplaincy.....	81 (53%)
Not offered any information.....	44 (29%)

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

Yes.....	126 (78%)
No.....	23 (14%)
Don't remember.....	12 (7%)

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	37 (23%)
	<i>Within the first week</i>	59 (36%)
	<i>More than a week</i>	50 (30%)
	<i>Don't remember</i>	18 (11%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	37 (23%)
	<i>Yes</i>	59 (36%)
	<i>No</i>	45 (28%)
	<i>Don't remember</i>	21 (13%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	27 (17%)
	<i>Within the first week</i>	18 (11%)
	<i>More than a week</i>	91 (57%)
	<i>Don't remember</i>	25 (16%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....						
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	12 (8%)	27 (17%)	31 (20%)	27 (17%)	31 (20%)	29 (18%)
	<i>Attend legal visits?</i>	13 (9%)	38 (26%)	29 (20%)	15 (10%)	12 (8%)	39 (27%)
	<i>Get bail information?</i>	5 (4%)	13 (9%)	32 (23%)	18 (13%)	23 (16%)	49 (35%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?						
	<i>Not had any letters</i>						40 (25%)
	<i>Yes</i>						57 (36%)
	<i>No</i>						63 (39%)
Q4.3	Can you get legal books in the library?						
	<i>Yes</i>						39 (25%)
	<i>No</i>						25 (16%)
	<i>Don't know</i>						93 (59%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:						
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>			
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	77 (48%)	80 (50%)	4 (2%)			
	<i>Are you normally able to have a shower every day?</i>	105 (66%)	54 (34%)	1 (1%)			
	<i>Do you normally receive clean sheets every week?</i>	96 (61%)	53 (34%)	9 (6%)			
	<i>Do you normally get cell cleaning materials every week?</i>	62 (40%)	89 (57%)	5 (3%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	40 (25%)	110 (69%)	10 (6%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	91 (58%)	62 (39%)	4 (3%)			
	<i>If you need to, can you normally get your stored property?</i>	22 (14%)	94 (61%)	39 (25%)			
Q4.5	What is the food like here?						
	<i>Very good</i>						2 (1%)
	<i>Good</i>						32 (20%)
	<i>Neither</i>						45 (28%)
	<i>Bad</i>						39 (24%)
	<i>Very bad</i>						45 (28%)

Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	
	<i>Have not bought anything yet/ don't know</i>	6 (4%)
	Yes	64 (40%)
	No.....	91 (57%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	58 (36%)
	No.....	20 (12%)
	<i>Don't know</i>	84 (52%)
Q4.8	Are your religious beliefs respected?	
	Yes	60 (38%)
	No.....	25 (16%)
	<i>Don't know/ N/A</i>	72 (46%)
Q4.9	Are you able to speak to a chaplain of your faith in private if you want to?	
	Yes	80 (50%)
	No.....	14 (9%)
	<i>Don't know/ N/A</i>	65 (41%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	33 (20%)
	<i>Very easy</i>	32 (20%)
	<i>Easy</i>	32 (20%)
	<i>Neither</i>	18 (11%)
	<i>Difficult</i>	10 (6%)
	<i>Very difficult</i>	7 (4%)
	<i>Don't know</i>	29 (18%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?		
	Yes	115 (71%)	
	No	39 (24%)	
	<i>Don't know</i>	7 (4%)	
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)		
		<i>Not made one</i>	Yes
		No	
	Are applications dealt with fairly?	8 (5%)	70 (48%)
	Are applications dealt with quickly (within seven days)?	8 (5%)	38 (25%)
		68 (47%)	105 (70%)
Q5.3	Is it easy to make a complaint?		
	Yes	63 (40%)	
	No	49 (31%)	
	<i>Don't know</i>	46 (29%)	
Q5.4	Please answer the following questions about complaints. (If you have not made a complaint please tick the 'not made one' option.)		
		<i>Not made one</i>	Yes
		No	
	Are complaints dealt with fairly?	65 (42%)	18 (12%)
	Are complaints dealt with quickly (within seven days)?	65 (44%)	10 (7%)
		72 (46%)	74 (50%)

Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	34 (22%)
	No.....	120 (78%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?	
	<i>Don't know who they are</i>	50 (32%)
	<i>Very easy</i>	11 (7%)
	<i>Easy</i>	16 (10%)
	<i>Neither</i>	27 (17%)
	<i>Difficult</i>	32 (21%)
	<i>Very difficult</i>	19 (12%)

Section 6: Incentive and earned privileges scheme

Q6.1	Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)	
	<i>Don't know what the IEP scheme is</i>	6 (4%)
	Yes	72 (45%)
	No	63 (40%)
	<i>Don't know</i>	18 (11%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)	
	<i>Don't know what the IEP scheme is</i>	6 (4%)
	Yes	57 (36%)
	No.....	88 (55%)
	<i>Don't know</i>	8 (5%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	35 (22%)
	No.....	124 (78%)
Q6.4	If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?	
	<i>I have not been to segregation in the last 6 months</i>	124 (78%)
	<i>Very well</i>	5 (3%)
	<i>Well</i>	9 (6%)
	<i>Neither</i>	5 (3%)
	<i>Badly</i>	6 (4%)
	<i>Very badly</i>	9 (6%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	119 (75%)
	No.....	39 (25%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	100 (65%)
	No.....	54 (35%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	36 (23%)
	No.....	123 (77%)

Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	7 (4%)
	<i>Never</i>	31 (19%)
	<i>Rarely</i>	41 (26%)
	<i>Some of the time</i>	45 (28%)
	<i>Most of the time</i>	23 (14%)
	<i>All of the time</i>	12 (8%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	65 (41%)
	<i>In the first week</i>	27 (17%)
	<i>More than a week</i>	41 (26%)
	<i>Don't remember</i>	24 (15%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	65 (43%)
	<i>Very helpful</i>	19 (13%)
	<i>Helpful</i>	24 (16%)
	<i>Neither</i>	17 (11%)
	<i>Not very helpful</i>	16 (11%)
	<i>Not at all helpful</i>	9 (6%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	<i>Yes</i>	78 (50%)
	<i>No</i>	79 (50%)
Q8.2	Do you feel unsafe now?	
	<i>Yes</i>	37 (24%)
	<i>No</i>	119 (76%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	<i>Never felt unsafe</i>	79 (52%)
	<i>Everywhere</i>	37 (25%)
	<i>Segregation unit</i>	8 (5%)
	<i>Association areas</i>	19 (13%)
	<i>Reception area</i>	2 (1%)
	<i>At the gym</i>	8 (5%)
	<i>In an exercise yard</i>	12 (8%)
	<i>At work</i>	16 (11%)
	<i>During movement</i>	22 (15%)
	<i>At education</i>	8 (5%)
	<i>At meal times</i>	13 (9%)
	<i>At health services</i>	12 (8%)
	<i>Visits area</i>	8 (5%)
	<i>In wing showers</i>	24 (16%)
	<i>In gym showers</i>	10 (7%)
	<i>In corridors/stairwells</i>	14 (9%)
	<i>On your landing/wing</i>	19 (13%)
	<i>In your cell</i>	16 (11%)
	<i>At religious services</i>	6 (4%)
Q8.4	Have you been victimised by other prisoners here?	
	<i>Yes</i>	45 (29%)
	<i>No</i>	109 (71%)

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>	13 (8%)
	<i>Physical abuse (being hit, kicked or assaulted).....</i>	22 (14%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	22 (14%)
	<i>Having your canteen/property taken.....</i>	15 (10%)
	<i>Medication.....</i>	5 (3%)
	<i>Debt</i>	10 (6%)
	<i>Drugs.....</i>	12 (8%)
	<i>Your race or ethnic origin.....</i>	3 (2%)
	<i>Your religion/religious beliefs</i>	2 (1%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others.....</i>	5 (3%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	1 (1%)
	<i>Your age.....</i>	3 (2%)
	<i>You have a disability</i>	4 (3%)
	<i>You were new here.....</i>	8 (5%)
	<i>Your offence/ crime</i>	1 (1%)
	<i>Gang related issues.....</i>	13 (8%)
Q8.6	Have you been victimised by staff here?	
	Yes	47 (30%)
	No.....	109 (70%)
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>	24 (15%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	9 (6%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	19 (12%)
	<i>Medication.....</i>	4 (3%)
	<i>Debt</i>	1 (1%)
	<i>Drugs.....</i>	4 (3%)
	<i>Your race or ethnic origin.....</i>	5 (3%)
	<i>Your religion/religious beliefs</i>	4 (3%)
	<i>Your nationality</i>	5 (3%)
	<i>You are from a different part of the country than others.....</i>	3 (2%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age.....</i>	3 (2%)
	<i>You have a disability</i>	5 (3%)
	<i>You were new here.....</i>	6 (4%)
	<i>Your offence/ crime</i>	3 (2%)
	<i>Gang related issues.....</i>	6 (4%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	77 (56%)
	Yes	16 (12%)
	No.....	44 (32%)

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	18 (12%)	6 (4%)	28 (18%)	18 (12%)	58 (38%)	26 (17%)
	The nurse	17 (11%)	7 (5%)	41 (27%)	20 (13%)	48 (32%)	18 (12%)
	The dentist	23 (15%)	0 (0%)	8 (5%)	13 (9%)	50 (33%)	56 (37%)
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	24 (15%)	8 (5%)	41 (26%)	27 (17%)	30 (19%)	26 (17%)
	The nurse	19 (12%)	10 (6%)	44 (28%)	36 (23%)	29 (19%)	18 (12%)
	The dentist	49 (33%)	3 (2%)	25 (17%)	25 (17%)	21 (14%)	27 (18%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						9 (6%)
	<i>Very good</i>						4 (3%)
	<i>Good</i>						34 (22%)
	<i>Neither</i>						38 (24%)
	<i>Bad</i>						39 (25%)
	<i>Very bad</i>						33 (21%)
Q9.4	Are you currently taking medication?						
	Yes						75 (48%)
	No.....						82 (52%)
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>						82 (53%)
	<i>Yes, all my meds</i>						32 (21%)
	<i>Yes, some of my meds</i>						24 (15%)
	<i>No</i>						18 (12%)
Q9.6	Do you have any emotional or mental health problems?						
	Yes						67 (43%)
	No.....						89 (57%)
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>						89 (57%)
	Yes						22 (14%)
	No.....						45 (29%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	74 (47%)
	No.....	84 (53%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	28 (18%)
	No.....	130 (82%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy.....	71 (45%)
	Easy.....	29 (18%)
	Neither.....	6 (4%)
	Difficult.....	5 (3%)
	Very difficult.....	8 (5%)
	Don't know.....	38 (24%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	43 (27%)
	Easy.....	32 (20%)
	Neither.....	13 (8%)
	Difficult.....	10 (6%)
	Very difficult.....	13 (8%)
	Don't know.....	46 (29%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes.....	31 (20%)
	No.....	124 (80%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes.....	9 (6%)
	No.....	148 (94%)
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.....	76 (50%)
	Yes.....	50 (33%)
	No.....	25 (17%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?	
	Did not / do not have an alcohol problem.....	130 (84%)
	Yes.....	15 (10%)
	No.....	10 (6%)
Q10.9	Was the support or help you received, while in this prison, helpful?	
	Did not have a problem/ did not receive help.....	99 (66%)
	Yes.....	38 (25%)
	No.....	13 (9%)

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	13 (8%)	20 (13%)	60 (39%)	26 (17%)	23 (15%)	12 (8%)
	Vocational or skills training	24 (16%)	13 (8%)	50 (33%)	35 (23%)	18 (12%)	13 (8%)
	Education (including basic skills)	16 (11%)	22 (15%)	59 (39%)	27 (18%)	17 (11%)	9 (6%)
	Offending behaviour programmes	32 (21%)	13 (9%)	34 (22%)	30 (20%)	27 (18%)	16 (11%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				28 (20%)
	Prison job				89 (62%)
	Vocational or skills training.....				33 (23%)
	Education (including basic skills).....				30 (21%)
	Offending behaviour programmes				14 (10%)
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	20 (14%)	63 (46%)	45 (33%)	10 (7%)
	Vocational or skills training	28 (23%)	50 (41%)	29 (24%)	14 (12%)
	Education (including basic skills)	26 (21%)	53 (43%)	36 (29%)	8 (7%)
	Offending behaviour programmes	35 (30%)	34 (29%)	35 (30%)	14 (12%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				22 (14%)
	<i>Never</i>				55 (35%)
	<i>Less than once a week</i>				45 (29%)
	<i>About once a week</i>				30 (19%)
	<i>More than once a week</i>				3 (2%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				57 (38%)
	<i>Yes</i>				42 (28%)
	<i>No</i>				51 (34%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				28 (18%)
	<i>0</i>				35 (23%)
	<i>1 to 2</i>				61 (40%)
	<i>3 to 5</i>				25 (16%)
	<i>More than 5</i>				3 (2%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				15 (10%)
	<i>0</i>				14 (9%)
	<i>1 to 2</i>				40 (26%)
	<i>3 to 5</i>				36 (23%)
	<i>More than 5</i>				49 (32%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				8 (5%)
	<i>0</i>				4 (3%)
	<i>1 to 2</i>				2 (1%)
	<i>3 to 5</i>				91 (59%)
	<i>More than 5</i>				49 (32%)

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>	34 (22%)
	<i>2 to less than 4 hours</i>	23 (15%)
	<i>4 to less than 6 hours</i>	42 (27%)
	<i>6 to less than 8 hours</i>	31 (20%)
	<i>8 to less than 10 hours</i>	7 (5%)
	<i>10 hours or more</i>	5 (3%)
	<i>Don't know</i>	11 (7%)

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>	41 (27%)
	<i>No</i>	110 (73%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	71 (47%)
	<i>No</i>	81 (53%)
Q12.3	Have you had any problems getting access to the telephones?	
	<i>Yes</i>	54 (35%)
	<i>No</i>	100 (65%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	27 (17%)
	<i>Very easy</i>	7 (5%)
	<i>Easy</i>	17 (11%)
	<i>Neither</i>	10 (6%)
	<i>Difficult</i>	39 (25%)
	<i>Very difficult</i>	53 (34%)
	<i>Don't know</i>	2 (1%)

Section 13: Preparation for release

Q13.1	Do you have a named offender manager (home probation officer) in the probation service?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	118 (78%)
	<i>No</i>	34 (22%)
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>	34 (22%)
	<i>No contact</i>	60 (39%)
	<i>Letter</i>	26 (17%)
	<i>Phone</i>	21 (14%)
	<i>Visit</i>	20 (13%)
Q13.3	Do you have a named offender supervisor in this prison?	
	<i>Yes</i>	107 (72%)
	<i>No</i>	41 (28%)

Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	<i>Yes</i>	73 (48%)
	<i>No</i>	78 (52%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	78 (51%)
	<i>Very involved</i>	16 (11%)
	<i>Involved</i>	26 (17%)
	<i>Neither</i>	10 (7%)
	<i>Not very involved</i>	7 (5%)
	<i>Not at all involved</i>	15 (10%)
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>	78 (52%)
	<i>Nobody</i>	38 (25%)
	<i>Offender supervisor</i>	23 (15%)
	<i>Offender manager</i>	16 (11%)
	<i>Named/ personal officer</i>	3 (2%)
	<i>Staff from other departments</i>	7 (5%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	78 (51%)
	<i>Yes</i>	43 (28%)
	<i>No</i>	15 (10%)
	<i>Don't know</i>	16 (11%)
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>	78 (52%)
	<i>Yes</i>	14 (9%)
	<i>No</i>	42 (28%)
	<i>Don't know</i>	17 (11%)
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>	78 (51%)
	<i>Yes</i>	15 (10%)
	<i>No</i>	32 (21%)
	<i>Don't know</i>	27 (18%)
Q13.10	Do you have a needs based custody plan?	
	<i>Yes</i>	4 (3%)
	<i>No</i>	68 (45%)
	<i>Don't know</i>	78 (52%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	<i>Yes</i>	20 (14%)
	<i>No</i>	128 (86%)

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

	<i>Do not need help</i>	Yes	No
Employment	28 (20%)	30 (22%)	79 (58%)
Accommodation	28 (20%)	41 (29%)	74 (52%)
Benefits	29 (21%)	34 (25%)	74 (54%)
Finances	30 (22%)	28 (21%)	77 (57%)
Education	34 (25%)	34 (25%)	67 (50%)
Drugs and alcohol	32 (23%)	44 (32%)	63 (45%)

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

<i>Not sentenced</i>	0 (0%)
Yes	64 (43%)
No.....	84 (57%)

Main comparator and comparator to last time



Prisoner survey responses HMP/YOI Portland 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

Key to tables		HMP/YOI Portland 2017	Category C training prisons comparator	HMP/YOI Portland 2017	HMP/YOI Portland 2014
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		167	6,537	167	174
SECTION 1: General information					
1.2	Are you under 21 years of age?	22%	2%	22%	28%
1.3	Are you sentenced?	100%	100%	100%	100%
1.3	Are you on recall?	15%	9%	15%	8%
1.4	Is your sentence less than 12 months?	12%	6%	12%	17%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	8%	1%	2%
1.5	Are you a foreign national?	9%	11%	9%	7%
1.6	Do you understand spoken English?	100%	99%	100%	99%
1.7	Do you understand written English?	98%	98%	98%	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.)	24%	26%	24%	20%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	4%	5%	9%
1.1	Are you Muslim?	13%	14%	13%	9%
1.11	Are you homosexual/gay or bisexual?	1%	4%	1%	2%
1.12	Do you consider yourself to have a disability?	26%	22%	26%	24%
1.13	Are you a veteran (ex-armed services)?	4%	6%	4%	2%
1.14	Is this your first time in prison?	35%	40%	35%	31%
1.15	Do you have any children under the age of 18?	41%	51%	41%	41%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	81%	45%	81%	74%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	85%	74%	85%	76%
2.3	Were you offered a toilet break?	10%	8%	10%	9%
2.4	Was the van clean?	55%	60%	55%	58%
2.5	Did you feel safe?	74%	78%	74%	74%
2.6	Were you treated well/very well by the escort staff?	69%	73%	69%	71%
2.7	Before you arrived here were you told that you were coming here?	57%	60%	57%	45%
2.7	Before you arrived here did you receive any written information about coming here?	9%	12%	9%	27%
2.8	When you first arrived here did your property arrive at the same time as you?	78%	84%	78%	84%

Main comparator and comparator to last time

Key to tables

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	67%	53%	67%	70%
3.2	When you were searched in reception, was this carried out in a respectful way?	84%	85%	84%	89%
3.3	Were you treated well/very well in reception?	75%	76%	75%	76%
	When you first arrived:				
3.4	Did you have any problems?	65%	62%	65%	64%
3.4	Did you have any problems with loss of property?	23%	19%	23%	21%
3.4	Did you have any housing problems?	21%	13%	21%	17%
3.4	Did you have any problems contacting employers?	3%	2%	3%	1%
3.4	Did you have any problems contacting family?	14%	19%	14%	18%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	2%	1%	1%
3.4	Did you have any money worries?	14%	13%	14%	18%
3.4	Did you have any problems with feeling depressed or suicidal?	21%	16%	21%	17%
3.4	Did you have any physical health problems?	16%	13%	16%	10%
3.4	Did you have any mental health problems?	27%	19%	27%	23%
3.4	Did you have any problems with needing protection from other prisoners?	6%	5%	6%	10%
3.4	Did you have problems accessing phone numbers?	16%	15%	16%	19%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	36%	36%	36%	33%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	51%	74%	51%	87%
3.6	A shower?	47%	28%	47%	49%
3.6	A free telephone call?	49%	41%	49%	42%
3.6	Something to eat?	72%	56%	72%	67%
3.6	PIN phone credit?	61%	50%	61%	69%
3.6	Toiletries/ basic items?	59%	48%	59%	54%

Key to tables

Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction continued					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	56%	53%	56%	57%
3.7	Someone from health services?	69%	70%	69%	70%
3.7	A Listener/Samaritans?	24%	34%	24%	37%
3.7	Prison shop/ canteen?	35%	25%	35%	31%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	49%	50%	49%	52%
3.8	Support was available for people feeling depressed or suicidal?	38%	40%	38%	45%
3.8	How to make routine requests?	43%	43%	43%	55%
3.8	Your entitlement to visits?	43%	39%	43%	48%
3.8	Health services?	53%	52%	53%	58%
3.8	The chaplaincy?	53%	48%	53%	51%
3.9	Did you feel safe on your first night here?	78%	79%	78%	87%
3.10	Have you been on an induction course?	77%	90%	77%	89%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	47%	60%	47%	42%
3.12	Did you receive an education (skills for life) assessment?	83%	84%	83%	86%
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?	25%	43%	25%	30%
4.1	Attend legal visits?	35%	44%	35%	34%
4.1	Get bail information?	13%	14%	13%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	36%	38%	36%	47%
4.3	Can you get legal books in the library?	25%	41%	25%	31%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	48%	67%	48%	44%
4.4	Are you normally able to have a shower every day?	66%	90%	66%	84%
4.4	Do you normally receive clean sheets every week?	61%	68%	61%	84%
4.4	Do you normally get cell cleaning materials every week?	40%	64%	40%	42%
4.4	Is your cell call bell normally answered within five minutes?	25%	34%	25%	33%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	58%	69%	58%	57%
4.4	Can you normally get your stored property, if you need to?	14%	23%	14%	17%
4.5	Is the food in this prison good/very good?	21%	32%	21%	18%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	40%	48%	40%	39%
4.7	Are you able to speak to a Listener at any time, if you want to?	36%	56%	36%	58%
4.8	Are your religious beliefs respected?	38%	52%	38%	47%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	58%	50%	54%
4.10	Is it easy/very easy to attend religious services?	40%	49%	40%	48%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	71%	80%	71%	84%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	51%	56%	51%	43%
5.2	Do you feel applications are dealt with quickly (within seven days)?	27%	38%	27%	36%
5.3	Is it easy to make a complaint?	40%	58%	40%	53%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	20%	33%	20%	32%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	12%	28%	12%	16%
5.5	Have you ever been prevented from making a complaint when you wanted to?	22%	19%	22%	24%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	17%	29%	17%	28%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	45%	48%	45%	37%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	36%	45%	36%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	22%	9%	22%	11%
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%	37%	41%	38%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	75%	79%	75%	67%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	65%	73%	65%	75%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	23%	29%	23%	28%
7.4	Do staff normally speak to you most of the time/all of the time during association?	22%	21%	22%	17%
7.5	Do you have a personal officer?	59%	62%	59%	67%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	51%	62%	51%	44%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	50%	40%	50%	30%
8.2	Do you feel unsafe now?	24%	17%	24%	12%
8.4	Have you been victimised by other prisoners here?	29%	28%	29%	25%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	9%	12%	9%	12%
8.5	Hit, kicked or assaulted you?	14%	8%	14%	9%
8.5	Sexually abused you?	1%	1%	1%	1%
8.5	Threatened or intimidated you?	14%	16%	14%	14%
8.5	Taken your canteen/property?	10%	8%	10%	7%
8.5	Victimised you because of medication?	3%	4%	3%	2%
8.5	Victimised you because of debt?	6%	5%	6%	5%
8.5	Victimised you because of drugs?	8%	5%	8%	3%
8.5	Victimised you because of your race or ethnic origin?	2%	4%	2%	1%
8.5	Victimised you because of your religion/religious beliefs?	1%	3%	1%	3%
8.5	Victimised you because of your nationality?	2%	3%	2%	0%
8.5	Victimised you because you were from a different part of the country?	3%	4%	3%	4%
8.5	Victimised you because you are from a Traveller community?	0%	1%	0%	1%
8.5	Victimised you because of your sexual orientation?	1%	2%	1%	1%
8.5	Victimised you because of your age?	2%	3%	2%	2%
8.5	Victimised you because you have a disability?	3%	3%	3%	1%
8.5	Victimised you because you were new here?	5%	5%	5%	5%
8.5	Victimised you because of your offence/crime?	1%	5%	1%	1%
8.5	Victimised you because of gang related issues?	9%	5%	9%	5%

Main comparator and comparator to last time

Key to tables

		HMP/YOI Portland 2017	Category C training prisons comparator	HMP/YOI Portland 2017	HMP/YOI Portland 2014
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	30%	28%	30%	33%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	15%	10%	15%	20%
8.7	Hit, kicked or assaulted you?	6%	4%	6%	8%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	12%	12%	12%	14%
8.7	Victimised you because of medication?	3%	4%	3%	5%
8.7	Victimised you because of debt?	1%	2%	1%	4%
8.7	Victimised you because of drugs?	3%	2%	3%	4%
8.7	Victimised you because of your race or ethnic origin?	3%	4%	3%	5%
8.7	Victimised you because of your religion/religious beliefs?	3%	3%	3%	3%
8.7	Victimised you because of your nationality?	3%	3%	3%	2%
8.7	Victimised you because you were from a different part of the country?	2%	3%	2%	6%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	3%
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	1%
8.7	Victimised you because of your age?	2%	2%	2%	6%
8.7	Victimised you because you have a disability?	3%	3%	3%	4%
8.7	Victimised you because you were new here?	4%	4%	4%	7%
8.7	Victimised you because of your offence/crime?	2%	4%	2%	2%
8.7	Victimised you because of gang related issues?	4%	2%	4%	2%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	27%	40%	27%	30%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP/YOI Portland 2017	Category C training prisons comparator	HMP/YOI Portland 2017	HMP/YOI Portland 2014
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	22%	29%	22%	24%
9.1	Is it easy/very easy to see the nurse?	32%	49%	32%	47%
9.1	Is it easy/very easy to see the dentist?	5%	14%	5%	8%
For those who have been to the following services, do you think the quality of the health service from the following is good/very good:					
9.2	The doctor?	37%	49%	37%	35%
9.2	The nurse?	39%	57%	39%	54%
9.2	The dentist?	28%	44%	28%	40%
9.3	The overall quality of health services?	26%	43%	26%	28%
9.4	Are you currently taking medication?	48%	51%	48%	40%
For those currently taking medication:					
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	76%	83%	76%	58%
9.6	Do you have any emotional well being or mental health problems?	43%	35%	43%	36%
For those who have problems:					
9.7	Are you being helped or supported by anyone in this prison?	33%	50%	33%	47%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	47%	25%	47%	38%
10.2	Did you have a problem with alcohol when you came into this prison?	18%	16%	18%	27%
10.3	Is it easy/very easy to get illegal drugs in this prison?	64%	45%	64%	41%
10.4	Is it easy/very easy to get alcohol in this prison?	48%	25%	48%	25%
10.5	Have you developed a problem with drugs since you have been in this prison?	20%	11%	20%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	6%	7%	6%	7%
For those with drug or alcohol problems:					
10.7	Have you received any support or help with your drug problem while in this prison?	67%	61%	67%	48%
10.8	Have you received any support or help with your alcohol problem while in this prison?	60%	63%	60%	47%
For those who have received help or support with their drug or alcohol problem:					
10.9	Was the support helpful?	75%	76%	75%	47%

Main comparator and comparator to last time

Key to tables

		HMP/YOI Portland 2017	Category C training prisons comparator	HMP/YOI Portland 2017	HMP/YOI Portland 2014
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	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	52%	50%	52%	17%
11.1	Vocational or skills training?	41%	42%	41%	30%
11.1	Education (including basic skills)?	54%	57%	54%	44%
11.1	Offending behaviour programmes?	31%	24%	31%	24%
Are you currently involved in any of the following activities:					
11.2	A prison job?	62%	60%	62%	36%
11.2	Vocational or skills training?	23%	16%	23%	13%
11.2	Education (including basic skills)?	21%	22%	21%	19%
11.2	Offending behaviour programmes?	10%	11%	10%	8%
11.3	Have you had a job while in this prison?	85%	84%	85%	70%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	53%	43%	53%	35%
11.3	Have you been involved in vocational or skills training while in this prison?	77%	75%	77%	69%
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?	54%	56%	54%	52%
11.3	Have you been involved in education while in this prison?	79%	80%	79%	73%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	55%	58%	55%	45%
11.3	Have you been involved in offending behaviour programmes while in this prison?	70%	71%	70%	64%
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?	41%	49%	41%	44%
11.4	Do you go to the library at least once a week?	21%	42%	21%	20%
11.5	Does the library have a wide enough range of materials to meet your needs?	28%	45%	28%	39%
11.6	Do you go to the gym three or more times a week?	18%	34%	18%	13%
11.7	Do you go outside for exercise three or more times a week?	55%	54%	55%	64%
11.8	Do you go on association more than five times each week?	32%	61%	32%	74%
11.9	Do you spend ten or more hours out of your cell on a weekday?	3%	17%	3%	10%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	27%	34%	27%	28%
12.2	Have you had any problems with sending or receiving mail?	47%	43%	47%	42%
12.3	Have you had any problems getting access to the telephones?	35%	21%	35%	40%
12.4	Is it easy/ very easy for your friends and family to get here?	16%	28%	16%	15%

Main comparator and comparator to last time

Key to tables

		HMP/YOI Portland 2017	Category C training prisons comparator	HMP/YOI Portland 2017	HMP/YOI Portland 2014
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	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 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?	78%	80%	78%	83%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	51%	36%	51%	49%
13.2	Contact by letter?	22%	33%	22%	31%
13.2	Contact by phone?	18%	27%	18%	15%
13.2	Contact by visit?	17%	31%	17%	25%
13.3	Do you have a named offender supervisor in this prison?	72%	75%	72%	80%
For those who are sentenced:					
13.4	Do you have a sentence plan?	48%	61%	48%	60%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	57%	54%	57%	48%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	53%	46%	53%	41%
13.6	Offender supervisor?	32%	38%	32%	41%
13.6	Offender manager?	22%	27%	22%	24%
13.6	Named/ personal officer?	4%	12%	4%	9%
13.6	Staff from other departments?	10%	15%	10%	12%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	58%	61%	58%	59%
13.8	Are there plans for you to achieve any of your targets in another prison?	19%	20%	19%	28%
13.9	Are there plans for you to achieve any of your targets in the community?	20%	28%	20%	31%
13.10	Do you have a needs based custody plan?	3%	6%	3%	3%
13.11	Do you feel that any member of staff has helped you to prepare for release?	14%	15%	14%	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?	28%	33%	28%	33%
13.12	Accommodation?	36%	35%	36%	43%
13.12	Benefits?	32%	37%	32%	40%
13.12	Finances?	27%	27%	27%	28%
13.12	Education?	34%	33%	34%	26%
13.12	Drugs and alcohol?	41%	41%	41%	36%
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?	43%	54%	43%	43%

Diversity analysis



Key question responses (ethnicity and religion) HMP/YOI Portland 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	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		40	125	22	142
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	12%	8%	13%	9%
1.6	Do you understand spoken English?	100%	100%	100%	100%
1.7	Do you understand written English?	100%	98%	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			76%	16%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	6%	5%	5%
1.1	Are you Muslim?	41%	4%		
1.12	Do you consider yourself to have a disability?	7%	33%	10%	29%
1.13	Are you a veteran (ex-armed services)?	0%	5%	0%	4%
1.14	Is this your first time in prison?	40%	33%	45%	33%
2.6	Were you treated well/very well by the escort staff?	60%	71%	55%	72%
2.7	Before you arrived here were you told that you were coming here?	50%	59%	40%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	75%	87%	71%	86%
3.3	Were you treated well/very well in reception?	64%	78%	67%	75%
3.4	Did you have any problems when you first arrived?	62%	66%	65%	64%
3.7	Did you have access to someone from health care when you first arrived here?	72%	68%	77%	68%
3.9	Did you feel safe on your first night here?	77%	79%	73%	80%
3.10	Have you been on an induction course?	82%	76%	77%	78%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	21%	27%	24%	25%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	62%	44%	63%	46%
4.4	Are you normally able to have a shower every day?	60%	67%	47%	69%
4.4	Is your cell call bell normally answered within five minutes?	30%	24%	15%	26%
4.5	Is the food in this prison good/very good?	10%	24%	14%	22%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	16%	46%	20%	44%
4.7	Are you able to speak to a Listener at any time, if you want to?	29%	39%	25%	37%
4.8	Do you feel your religious beliefs are respected?	52%	33%	52%	37%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	61%	48%	57%	50%
5.1	Is it easy to make an application?	69%	73%	65%	72%
5.3	Is it easy to make a complaint?	40%	40%	28%	42%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	48%	39%	46%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	25%	40%	50%	35%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	30%	20%	39%	20%
7.1	Do most staff, in this prison, treat you with respect?	69%	78%	61%	77%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	56%	67%	52%	68%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	28%	20%	23%	22%
7.4	Do you have a personal officer?	63%	58%	42%	61%
8.1	Have you ever felt unsafe here?	35%	54%	42%	50%
8.2	Do you feel unsafe now?	14%	27%	17%	24%
8.3	Have you been victimised by other prisoners?	29%	30%	17%	31%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	6%	17%	0%	16%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	2%	0%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	2%	6%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	2%	0%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	2%	0%	3%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	40%	28%	61%	26%
8.7	Have you ever felt threatened or intimidated by staff here?	14%	12%	22%	11%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	1%	16%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	3%	6%	2%
8.7	Have you been victimised because of your nationality? (By staff)	6%	2%	6%	3%
8.7	Have you been victimised because you have a disability? (By staff)	3%	3%	0%	4%
9.1	Is it easy/very easy to see the doctor?	12%	24%	6%	25%
9.1	Is it easy/ very easy to see the nurse?	27%	32%	22%	33%
9.4	Are you currently taking medication?	26%	54%	12%	51%
9.6	Do you feel you have any emotional well being/mental health issues?	15%	51%	28%	45%
10.3	Is it easy/very easy to get illegal drugs in this prison?	39%	71%	45%	66%
11.2	Are you currently working in the prison?	59%	63%	56%	63%
11.2	Are you currently undertaking vocational or skills training?	19%	25%	7%	26%
11.2	Are you currently in education (including basic skills)?	16%	23%	18%	22%
11.2	Are you currently taking part in an offending behaviour programme?	7%	11%	13%	9%
11.4	Do you go to the library at least once a week?	21%	22%	16%	22%
11.6	Do you go to the gym three or more times a week?	22%	18%	29%	17%
11.7	Do you go outside for exercise three or more times a week?	63%	52%	73%	53%
11.8	On average, do you go on association more than five times each week?	39%	29%	58%	28%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	3%	3%	0%	4%
12.2	Have you had any problems sending or receiving mail?	47%	47%	48%	47%
12.3	Have you had any problems getting access to the telephones?	34%	36%	45%	34%

Diversity Analysis



Key question responses (disability and age under 21) HMP/YOI Portland 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

		Consider themselves to have a disability	Do not consider themselves to have a disability		Prisoners under the age of 21	Prisoners aged 21 and over
	Any percentage highlighted in green is significantly better					
	Any percentage highlighted in blue is significantly worse					
	Any percentage highlighted in orange shows a significant difference in prisoners' background details					
	Percentages which are not highlighted show there is no significant difference					
Number of completed questionnaires returned		43	121		37	129
1.3	Are you sentenced?	100%	100%		100%	100%
1.5	Are you a foreign national?	10%	8%		17%	7%
1.6	Do you understand spoken English?	100%	100%		100%	100%
1.7	Do you understand written English?	93%	100%		100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	7%	30%		33%	22%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	7%	3%		6%	5%
1.1	Are you Muslim?	5%	16%		28%	10%
1.12	Do you consider yourself to have a disability?				22%	27%
1.13	Are you a veteran (ex-armed services)?	0%	5%		3%	4%
1.14	Is this your first time in prison?	35%	34%		57%	28%
2.6	Were you treated well/very well by the escort staff?	66%	69%		62%	70%
2.7	Before you arrived here were you told that you were coming here?	56%	58%		60%	57%
3.2	When you were searched in reception, was this carried out in a respectful way?	83%	84%		81%	85%
3.3	Were you treated well/very well in reception?	75%	74%		73%	75%
3.4	Did you have any problems when you first arrived?	93%	55%		58%	66%
3.7	Did you have access to someone from health care when you first arrived here?	70%	68%		62%	71%
3.9	Did you feel safe on your first night here?	68%	82%		84%	76%
3.10	Have you been on an induction course?	59%	83%		78%	77%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	19%	27%		33%	22%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners under the age of 21	Prisoners aged 21 and over
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	36%	52%	53%	47%
4.4	Are you normally able to have a shower every day?	66%	66%	58%	68%
4.4	Is your cell call bell normally answered within five minutes?	24%	26%	20%	26%
4.5	Is the food in this prison good/very good?	12%	23%	30%	18%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	34%	42%	39%	41%
4.7	Are you able to speak to a Listener at any time, if you want to?	44%	33%	23%	39%
4.8	Do you feel your religious beliefs are respected?	33%	40%	44%	36%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	49%	51%	37%	54%
5.1	Is it easy to make an application?	53%	77%	67%	73%
5.3	Is it easy to make a complaint?	49%	37%	33%	42%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	48%	47%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	44%	34%	47%	33%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	18%	23%	33%	19%
7.1	Do most staff, in this prison, treat you with respect?	66%	79%	73%	76%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	75%	61%	58%	67%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	17%	24%	20%	23%
7.4	Do you have a personal officer?	60%	58%	53%	60%
8.1	Have you ever felt unsafe here?	76%	41%	36%	53%
8.2	Do you feel unsafe now?	51%	15%	20%	25%
8.3	Have you been victimised by other prisoners?	59%	19%	23%	31%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	33%	8%	3%	18%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	3%	2%	6%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	5%	0%	3%	1%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	2%	6%	1%
8.5	Have you been victimised because of your age? (By prisoners)	5%	1%	0%	2%
8.5	Have you been victimised because you have a disability? (By prisoners)	10%	0%	0%	3%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners under the age of 21	Prisoners aged 21 and over
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	43%	25%	44%	26%
8.7	Have you ever felt threatened or intimidated by staff here?	22%	9%	17%	11%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	3%	6%	2%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	2%	0%	3%
8.7	Have you been victimised because of your nationality? (By staff)	3%	3%	6%	2%
8.7	Have you been victimised because of your age? (By staff)	3%	2%	6%	1%
8.7	Have you been victimised because you have a disability? (By staff)	10%	1%	0%	4%
9.1	Is it easy/very easy to see the doctor?	22%	22%	20%	22%
9.1	Is it easy/ very easy to see the nurse?	35%	30%	31%	31%
9.4	Are you currently taking medication?	71%	40%	26%	53%
9.6	Do you feel you have any emotional well being/mental health issues?	83%	28%	31%	46%
10.3	Is it easy/very easy to get illegal drugs in this prison?	78%	58%	46%	69%
11.2	Are you currently working in the prison?	46%	67%	55%	64%
11.2	Are you currently undertaking vocational or skills training?	27%	22%	21%	23%
11.2	Are you currently in education (including basic skills)?	27%	19%	18%	21%
11.2	Are you currently taking part in an offending behaviour programme?	16%	8%	6%	10%
11.4	Do you go to the library at least once a week?	18%	22%	17%	22%
11.6	Do you go to the gym three or more times a week?	15%	20%	18%	19%
11.7	Do you go outside for exercise three or more times a week?	40%	60%	60%	54%
11.8	On average, do you go on association more than five times each week?	22%	35%	53%	26%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	3%	4%	0%	4%
12.2	Have you had any problems sending or receiving mail?	67%	40%	56%	44%
12.3	Have you had any problems getting access to the telephones?	41%	33%	25%	37%



Prisoner survey responses HMP/YOI Portland 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.

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Number of completed questionnaires returned		39	125
SECTION 1: General information			
1.2	Are you under 21 years of age?	44%	16%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	18%	15%
1.4	Is your sentence less than 12 months?	21%	9%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	0%	1%
1.5	Are you a foreign national?	13%	8%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	97%	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.)	16%	27%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	7%
1.1	Are you Muslim?	6%	16%
1.11	Are you homosexual/gay or bisexual?	0%	1%
1.12	Do you consider yourself to have a disability?	31%	25%
1.13	Are you a veteran (ex-armed services)?	3%	4%
1.14	Is this your first time in prison?	54%	29%
1.15	Do you have any children under the age of 18?	26%	46%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	75%	83%
2.5	Did you feel safe?	82%	72%
2.6	Were you treated well/very well by the escort staff?	74%	67%
2.7	Before you arrived here were you told that you were coming here?	75%	50%
2.8	When you first arrived here did your property arrive at the same time as you?	72%	80%

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SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	87%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	97%	80%
3.3	Were you treated well/very well in reception?	77%	74%
	When you first arrived:		
3.4	Did you have any problems?	66%	64%
3.4	Did you have any problems with loss of property?	29%	21%
3.4	Did you have any housing problems?	23%	20%
3.4	Did you have any problems contacting employers?	3%	3%
3.4	Did you have any problems contacting family?	10%	15%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%
3.4	Did you have any money worries?	13%	14%
3.4	Did you have any problems with feeling depressed or suicidal?	16%	22%
3.4	Did you have any physical health problems?	13%	17%
3.4	Did you have any mental health problems?	26%	25%
3.4	Did you have any problems with needing protection from other prisoners?	8%	6%
3.4	Did you have problems accessing phone numbers?	13%	16%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	46%	52%
3.6	A shower?	56%	43%
3.6	A free telephone call?	51%	48%
3.6	Something to eat?	82%	68%
3.6	PIN phone credit?	62%	60%
3.6	Toiletries/ basic items?	69%	56%

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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?	46%	58%
3.7	Someone from health services?	62%	72%
3.7	A Listener/Samaritans?	23%	25%
3.7	Prison shop/ canteen?	38%	34%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	61%	46%
3.8	Support was available for people feeling depressed or suicidal?	47%	35%
3.8	How to make routine requests?	44%	42%
3.8	Your entitlement to visits?	47%	42%
3.8	Health services?	53%	53%
3.8	The chaplaincy?	53%	53%
3.9	Did you feel safe on your first night here?	85%	78%
3.10	Have you been on an induction course?	82%	76%
3.12	Did you receive an education (skills for life) assessment?	77%	85%
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?	26%	25%
4.1	Attend legal visits?	43%	32%
4.1	Get bail information?	22%	10%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	21%	40%
4.3	Can you get legal books in the library?	20%	26%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	31%	54%
4.4	Are you normally able to have a shower every day?	59%	67%
4.4	Do you normally receive clean sheets every week?	69%	59%
4.4	Do you normally get cell cleaning materials every week?	23%	45%
4.4	Is your cell call bell normally answered within five minutes?	21%	27%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	49%	63%
4.4	Can you normally get your stored property, if you need to?	6%	18%
4.5	Is the food in this prison good/very good?	23%	21%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	53%	35%
4.7	Are you able to speak to a Listener at any time, if you want to?	21%	42%
4.8	Are your religious beliefs are respected?	31%	41%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	33%	57%
4.10	Is it easy/very easy to attend religious services?	26%	45%

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SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	64%	74%
5.3	Is it easy to make a complaint?	38%	40%
5.5	Have you ever been prevented from making a complaint when you wanted to?	16%	23%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	13%	18%
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%	45%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	45%	34%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	23%	22%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	79%	75%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	71%	64%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	18%	24%
7.4	Do staff normally speak to you most of the time/all of the time during association?	23%	22%
7.5	Do you have a personal officer?	72%	54%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	50%	48%
8.2	Do you feel unsafe now?	26%	23%
8.4	Have you been victimised by other prisoners here?	23%	31%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	6%	9%
8.5	Hit, kicked or assaulted you?	8%	17%
8.5	Sexually abused you?	3%	0%
8.5	Threatened or intimidated you?	13%	15%
8.5	Taken your canteen/property?	10%	10%
8.5	Victimised you because of medication?	3%	3%
8.5	Victimised you because of debt?	8%	6%
8.5	Victimised you because of drugs?	3%	9%
8.5	Victimised you because of your race or ethnic origin?	6%	1%
8.5	Victimised you because of your religion/religious beliefs?	3%	1%
8.5	Victimised you because of your nationality?	6%	1%
8.5	Victimised you because you were from a different part of the country?	3%	3%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	3%	0%
8.5	Victimised you because of your age?	3%	2%
8.5	Victimised you because you have a disability?	6%	2%
8.5	Victimised you because you were new here?	6%	5%
8.5	Victimised you because of your offence/crime?	3%	0%
8.5	Victimised you because of gang related issues?	8%	9%

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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	26%	32%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	13%	17%
8.7	Hit, kicked or assaulted you?	7%	5%
8.7	Sexually abused you?	3%	1%
8.7	Threatened or intimidated you?	13%	12%
8.7	Victimised you because of medication?	0%	3%
8.7	Victimised you because of debt?	0%	1%
8.7	Victimised you because of drugs?	3%	3%
8.7	Victimised you because of your race or ethnic origin?	0%	4%
8.7	Victimised you because of your religion/religious beliefs?	3%	2%
8.7	Victimised you because of your nationality?	3%	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?	0%	1%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	0%	3%
8.7	Victimised you because you have a disability?	3%	3%
8.7	Victimised you because you were new here?	0%	5%
8.7	Victimised you because of your offence/crime?	0%	3%
8.7	Victimised you because of gang related issues?	0%	5%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	30%	19%
9.1	Is it easy/very easy to see the nurse?	35%	31%
9.1	Is it easy/very easy to see the dentist?	6%	6%
9.4	Are you currently taking medication?	38%	51%
9.6	Do you have any emotional well being or mental health problems?	42%	42%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	42%	48%
10.2	Did you have a problem with alcohol when you came into this prison?	16%	18%
10.3	Is it easy/very easy to get illegal drugs in this prison?	66%	62%
10.4	Is it easy/very easy to get alcohol in this prison?	47%	48%
10.5	Have you developed a problem with drugs since you have been in this prison?	17%	21%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	7%

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SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	63%	49%
11.1	Vocational or skills training?	55%	37%
11.1	Education (including basic skills)?	67%	50%
11.1	Offending Behaviour Programmes?	40%	28%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	58%	66%
11.2	Vocational or skills training?	20%	25%
11.2	Education (including basic skills)?	17%	23%
11.2	Offending Behaviour Programmes?	3%	13%
11.4	Do you go to the library at least once a week?	13%	24%
11.5	Does the library have a wide enough range of materials to meet your needs?	28%	29%
11.6	Do you go to the gym three or more times a week?	21%	18%
11.7	Do you go outside for exercise three or more times a week?	71%	50%
11.8	Do you go on association more than five times each week?	32%	33%
11.9	Do you spend ten or more hours out of your cell on a weekday?	0%	4%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	30%	27%
12.2	Have you had any problems with sending or receiving mail?	39%	49%
12.3	Have you had any problems getting access to the telephones?	39%	33%
12.4	Is it easy/ very easy for your friends and family to get here?	21%	14%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	66%	74%
13.10	Do you have a needs based custody plan?	0%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	11%	15%