

Report on an unannounced inspection of

HMP Erlestoke

by HM Chief Inspector of Prisons

26–27 June, 3–7 July 2017

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Victory House
6th floor
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WC2B 6EX
England

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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.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Introduction

HMP Erlestoke is a category C training prison in Wiltshire that holds just over 500 adult male prisoners. The vast majority of those held were serving lengthy sentences, often for serious offences, and nearly half were serving indeterminate or life sentences. Despite this, the prison did release about 10 prisoners a month, although the fact that it was not a designated resettlement prison limited the resources that could be allocated to support this aspect of the prison's work.

It had been four years since we last visited Erlestoke. When we inspected the prison on this occasion, our findings were a disappointment. Deterioration was clearly evident and outcomes were now judged to be insufficiently good in three of our four tests of a healthy prison.

Safety in the prison was not good enough. Most prisoners suggested to us they felt safe but violence had increased and more of it was serious. Much of the violence and bullying that did exist was, in our view, linked to a significant drug problem, and yet the prison lacked an effective drug strategy. Work to confront and reduce violence was weak and uncoordinated, and staff confidence and competence in ensuring reasonable challenge and supervision needed improvement. Staff-prisoner relationships were superficially positive and staff were very busy, but rules and boundaries were not supervised with sufficient rigour.

Incidents of prisoners self-harming had doubled since we last inspected but, while some care was provided, many aspects of the prison's support for those in crisis were partial and inconsistent. Governance of security, use of force and segregation similarly required improvement.

It was telling that upon arrival most new prisoners faced considerable stays at Erlestoke. Early days and induction arrangements provided an important opportunity to set a tone, build relationships and structure expectations concerning important work to be done by serious offenders. Yet we describe in our report the early days experience of most new arrivals as chaotic.

Erlestoke remained a reasonably respectful prison. The external environment was good, although standards of accommodation varied greatly, with much in disrepair or dirty. There was a commendable use of peer support, but too much of it lacked accountable supervision. Despite the settled nature of the population, consultation with prisoners was weak. Both these criticisms represent missed opportunities. Some recent corrective action had helped improve matters but, in general, the promotion of equality was poor. Health care provision was, however, improving and prisoners were more positive about the food.

During our spot checks we found 23% of prisoners locked in cell during the working day, with significant numbers of others not doing anything purposeful. Residential staff did not always know the whereabouts of their prisoners, routines were not reliable and not enough was done to address the unacceptably poor punctuality or non-attendance of those meant to be at work or training. There were sufficient activity places for most and, for those who attended, our colleagues in Ofsted judged the overall effectiveness of learning, skills and work provision to be 'good'.

The main purpose of the prison was to address the offending behaviour and reduce the risk of long-term offenders. Access to offending behaviour work was reasonably good but much offender management work was undermined by the lack of an up-to-date assessment of need or by the re-deployment of staff away from offending behaviour work. Many prisoners arrived without an up-to-date offender assessment system (OASys) assessment and public protection work had deteriorated. Resettlement work for those being released was limited. Visits arrangements were also poor.

Overall, and despite our criticisms, we do report on much that was positive in the prison. The management team was relatively new and evidenced an enthusiasm to make improvements. There was a sense that with a little more organisation and consistency, and with a determination to ensure policies and rules are complied with, the prison could become much better quite quickly. Many told

us of the potential they saw in the institution. Improved structures of accountability and supervision would also help in sustaining improvement. In our main recommendations we list a number of issues we consider to be priorities for the prison. These include making better arrangements for prisoners on arrival, tackling the drug problem, the better promotion of equality, and ensuring prisoners attend activity.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

September 2017

Fact page

Task of the establishment

Category C adult male training prison

Prison status

Public

Region

South West

Number held

512

Certified normal accommodation

494

Operational capacity

524

Date of last full inspection

30 September – 11 October 2013

Brief history

HMP Erlestoke was built on the former grounds of Erlestoke Manor House. The site was taken over by the then Prison Commissioners in 1960 for use as a detention centre. In 1977 it became a young prisoners' centre, and was converted to its current role as a category C adult male training prison in 1988. Life-sentenced prisoners were first received in the 1990s.

Short description of residential units

Marlborough	-	60-bed induction unit
Alfred, Wessex and Silbury	-	hold up to 288 prisoners of all regime levels
Avebury, Imber, Kennet and Sarum	-	hold up to 176 enhanced level prisoners
Care and separation unit	-	eight single cells and one special accommodation cell.

Name of governor

Chris Simpson (acting governor)

Escort contractor

GEOAmey

Health service provider

Inspire Better Health

Learning and skills provider

Weston College

Independent Monitoring Board chair

Sheila Kimmins

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, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations 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** *There were significant weaknesses in aspects of early days work, with a chaotic first night centre that did not meet prisoners' needs. Most prisoners said they felt safe, but violence had increased and the prison's response lacked focus. Incidents of self-harm had doubled. Support for at-risk prisoners subject to assessment, care in custody and teamwork (ACCT) case management was reasonable. Security was broadly proportionate but was threatened by a lack of control in some areas. The incentives and earned privileges (IEP) scheme was ineffective, and there was an overreliance on adjudications. Use of force was low. The segregation unit was a poor environment but staff-prisoner relationships were good. Drug misuse was widespread and there had been no strategy to tackle the problem. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S2** *At the last inspection in 2013 we found that outcomes for prisoners in Erlestoke were reasonably good against this healthy prison test. We made 14 recommendations in the area of safety. At this follow-up inspection we found that three of the recommendations had been achieved and 11 had not been achieved.*
- S3** After long journeys to the prison many new arrivals endured unjustified waits of up to 90 minutes on escort vehicles outside the prison gate. Reception staff were welcoming and a prison orderly provided good additional support to new arrivals. Staff had to escort prisoners to the health care unit due to inadequate health screening facilities in reception. Support for new arrivals was compromised as staff tried to manage the chaotic first night unit, which was not reserved solely for prisoners on induction. First night interviews did not always take place in private or face to face. Some new prisoners did not get basic items, such as clothing, kettles and pillows, and first night cells were dirty and in a poor state of repair. Induction was delivered by voluntary sector workers and prisoner peer supporters, but there was little staff oversight and some key information was omitted.
- S4** In our survey, most prisoners said they felt safe at Erlestoke. The number of reported violent incidents, some serious, had increased, and we also found evidence of underreporting. A significant proportion of bullying was linked to the use of illicit substances and the associated debt. The response to bullying and violence was uncoordinated and did not reflect the prison's own policy. There were some prisoners who did not feel safe but who received poor support from the prison. The safer custody team was not aware of all vulnerable individuals, and violent incidents were not always investigated.
- S5** Prisoner self-harming had doubled since the last inspection, and too many ACCT documents for prisoners at risk of suicide or self-harm were opened and closed at the first review. The quality of support for prisoners subject to ACCT monitoring was mostly reasonable; care plans were updated and health staff attendance at reviews had improved. However, serious acts of self-harm were not always investigated. Progress had been made in implementing recommendations following a self-inflicted death in custody that happened since the last inspection. Prisoners had good access to a team of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and there had been some useful meetings that contributed to the safety of some vulnerable individuals. Staff did not know how to make a referral to the local safeguarding adults board.

- S6 Although most aspects of security were proportionate, the lack of challenge and control in some areas created risk. There was clear evidence of the widespread use of alcohol and drugs. Security intelligence was good but there was often a failure to act upon it: too few requested searches and suspicion drug tests were carried out. The prison could not produce an action plan to show its follow up to a serious incident of concerted indiscipline the previous year.
- S7 The IEP scheme was not implemented effectively and we saw many examples of poor prisoner behaviour that was not challenged. The number of adjudications remained high and oversight was weak. Most hearings were conducted fairly, although many cases could have been better dealt with through the IEP scheme.
- S8 Use of force was low for the type of establishment. However, governance was poor and nearly all use of force reports were incomplete, planned incidents were not routinely filmed or reviewed, and there was no use of force committee. Use of segregation was higher than comparable establishments although most stays were reasonably short. Cells and holding rooms were dirty and contained graffiti. The segregation regime was limited. The unit was often used to house prisoners who felt unsafe on normal location, and half of segregated prisoners were transferred to other prisons. Management oversight of the segregation unit was underdeveloped, but relationships between staff and prisoners were good, and it was encouraging that special accommodation was not used.
- S9 Integrated substance misuse services were good. However, despite the significant level of serious drug misuse, the prison lacked a prison-wide strategy to reduce drug-related demand and associated harm. The use of Spice, a synthetic cannabis, had led to frequent medical emergencies, some of which were very serious. The valuable high intensity substance misuse recovery programme had been suspended.

Respect

S10 *The grounds of the prison were pleasant and well maintained. The enhanced wings offered the best accommodation. Many of the general wings were dilapidated and dirty, and there was a shortage of some basic items. Staff-prisoner relationships remained good, and prisoners spoke positively about staff. However, some staff lacked authority and there was insufficient control of some prisoner behaviour. The promotion of equality and diversity remained weak, and consultation with minority prisoners required development. A well-integrated chaplaincy provided good religious and pastoral support. Health services were very good. Prisoners were generally positive about the food.*
Outcomes for prisoners were reasonably good against this healthy prison test.

S11 *At the last inspection in 2013 we found that outcomes for prisoners in Erlestoke were reasonably good against this healthy prison test. We made 25 recommendations in the area of respect. At this follow-up inspection we found that 11 of the recommendations had been achieved and 14 had not been achieved*

S12 External areas were attractive and well maintained. The standards of residential accommodation varied widely. The enhanced units offered the best accommodation and several cells had internal showers. However, too many residential buildings were run down and in need of repair, and many cells on the general wings showed signs of vandalism. There were few shower curtains and some privacy screening was inadequate. Poor control of cleaning equipment and a failure to manage wing cleaners had resulted in dirty living conditions for many prisoners. Prisoners could exchange their clothing and bedding weekly, although there had been a shortage of socks for several weeks. Staff did not always respond

to cell bells promptly and the system was not monitored. Too many prisoner applications remained unanswered for long periods.

- S13 In our survey, more prisoners than the comparator said that staff treated them with respect. Relationships were mostly positive and we saw many responsive and caring interactions between staff and prisoners. However, too many managers and staff tolerated poor behaviour and did not enforce rules effectively. There was insufficient use of prisoners' electronic case notes to record their progress. The extensive use of prisoner peer mentors was commendable but there was insufficient management oversight of their work. There was no effective prisoner consultation.
- S14 Despite recent corrective action the management of equality work and monitoring of outcomes for prisoners from diverse groups remained poor. There was a significant backlog in the investigation of discrimination complaints. Provision to meet the needs of prisoners with protected characteristics was not well planned or directed, although prisoner equality representatives did deliver some services. The most negative perceptions in our survey were held by disabled prisoners and prisoners from a black and minority ethnic background; this required investigation. Consultation was not used effectively to develop services for protected groups. There were evacuation plans for prisoners with disabilities but the absence of residential care plans meant their needs were not fully met. There was a range of activities for older prisoners.
- S15 Chaplaincy provision for prisoners from all faiths was good. Chaplains were represented on all key prison management groups and offered welcome support to segregated prisoners and those in crisis. Links with community faith groups were also good.
- S16 Prisoners lacked confidence in complaints procedures and we found too some weaknesses in the system. However, the quality of responses to complaints was reasonable overall, and responses were quality assured.
- S17 The provision of health services had deteriorated greatly since the last inspection but, since recently taking over the provision, the current consortium of providers had made significant improvements. Primary care was very good although some waits for routine GP appointments were too long. Health care assistants provided additional support to prisoners on residential wings, including daily care to those who self-isolated, which was impressive. Management of medicines was effective and prescribing was appropriate. However, the health centre waiting area was unsafe and compromised patient confidentiality. The prison had failed to develop social care in agreement with the local authority. The mental health service was limited by staffing but of good quality and included support for men with complex and dual-diagnosis (mental health and substance misuse) needs.
- S18 In our survey, prisoners were much more positive about food than at the last inspection and the comparator. All wings had microwaves and toasters that prisoners could use, and they could dine communally. However, meals were served too early and supervision at serveries was inadequate. Prisoners were positive about the range of items available from the prison shop.

Purposeful activity

S19 *Time out of cell had deteriorated and not all prisoners who were unlocked were purposefully occupied. Managers failed to ensure adequate attendance at activities and punctuality was poor. There was a wide range of activity places for all prisoners but allocation to them was uncoordinated. With the exception of English and mathematics, outcomes for learners were good. Teaching, learning and assessment were also good and there was effective use of peer support in education. Prisoners behaved well in sessions, and they had good access to the library and gym. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S20 *At the last inspection in 2013 we found that outcomes for prisoners in Erlestoke were reasonably good against this healthy prison test. We made seven recommendations in the area of purposeful activity. At this follow-up inspection we found that one recommendation had been achieved, three had been partially achieved, one had not been achieved and two were no longer relevant.*

S21 Prisoners now had less time out of their cell. In our roll checks, we found 23% of prisoners locked up and a significant number of others unlocked but not engaged in any purposeful activity. Residential staff did not always know the location of all prisoners during the core day. Too many prisoners failed to attend their designated activity without sufficient challenge by staff or managers. Staff often did not unlock according to the published core day, and weekend activities and association were often curtailed.

S22 Prison and college managers had failed to improve the unacceptably poor punctuality and attendance of prisoners at activities. There had also been no formal curriculum needs analysis to ensure that provision met the prison's primary goal of rehabilitation. The college's performance management arrangements were rigorous; recently appointed teaching staff were well qualified, enthusiastic and highly effective.

S23 There were sufficient full-time and part-time activity places to meet the needs of the population and a wide range of learning, skills and work provision. However, the departments responsible for allocating prisoners to activities and offending behaviour programmes did not work together to plan and sequence allocations effectively.

S24 Teaching, learning and assessment in education and vocational training were good. Learners who attended sessions were well motivated and made good progress. Well-trained peer mentors provided good in-class support.

S25 Prisoner behaviour during sessions was good, and those who regularly attended vocational training sessions developed useful employability skills and a good work ethic. Achievement of vocational qualifications was good, but required improvement in English and mathematics.

S26 The library was well resourced and most prisoners were registered as users. The prison provided a range of well-attended gym activities, but PE staffing had reduced and no gym qualifications were currently offered. Library and PE staff did not analyse data on use of their facilities in sufficient detail.

Resettlement

S27 *Many prisoners could access offending behaviour programmes to help reduce their risk, which was one of the prison's key strategic purposes. However, prisoner needs were not sufficiently identified or analysed, which affected progression for some. Significant staff cross-deployment undermined offender management work, and officer contact with prisoner was too limited. Parole dates and recategorisation were prioritised appropriately. Public protection work had deteriorated, although management of multi-agency public protection arrangements (MAPPA) was good. There had been some good reintegration planning for the few prisoners released from Erlestoke. Resettlement pathways work was variable, and access to visits was inadequate. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S28 *At the last inspection in 2013 we found that outcomes for prisoners in Erlestoke were reasonably good against this healthy prison test. We made 11 recommendations in the area of resettlement. At this follow-up inspection we found that none of the recommendations had been achieved, two had been partially achieved, eight had not been achieved and one was no longer relevant.*

S29 The prison's key strategic aim was to ensure that prisoners attended offending behaviour programmes to reduce their risk, and for many this was achieved. However, the prison lacked the resources to meet the needs of short-sentenced men who were released from Erlestoke. In addition, the prison lacked an effective prisoner needs analysis, which limited progression for some as a result. Links between public protection, offender management and reducing reoffending were inadequate.

S30 Offender management work had been significantly undermined by high levels of staff redeployment, and there was limited contact between offender supervisors and prisoners. Too many prisoners arrived from other prisons without an up-to-date OASys (offender assessment system) assessment, and the prison struggled to identify critical risk information. Appropriate priority was given to meeting prisoners' parole hearing dates and recategorisation boards.

S31 Public protection work had deteriorated since the last inspection, and was hindered by a lack of detailed information and assessment. Some risk of harm issues were not identified quickly enough, and risk management planning was ineffective. MAPPA was well managed with effective joint work between the prison and partner agencies.

S32 The prison released around 10 prisoners a month, including those who posed a high risk of harm to others. Despite limited resettlement services, there had been some effective joint work with offender managers before prisoners were released. However, in other cases, work started too late, leaving some prisoners ill equipped for release.

S33 High risk prisoners were released appropriately to approved premises. There was limited accommodation information for low and medium risk prisoners because there was limited contact with the community rehabilitation company (CRC).²

S34 The National Careers Service had failed to adapt its services to meet the needs of a rehabilitation prison, and the prison's links with employers were minimal.

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.

- S35 Most prisoners had no structured pre-release health care process, although those with mental health and substance misuse problems were linked with local services.
- S36 The provision for family visits was woefully inadequate and had become a source of serious frustration and anger for prisoners. There were not enough sessions for the number of prisoners, and booking arrangements led to inequity. Volunteers laid on transport for visitors between the prison and the local rail stations, and the visits room itself was a positive environment to maintain family contact. Barnardo's delivered good support to prisoners in maintaining family links, and the library facilitated Storybook Dads for prisoners to record stories for their children.
- S37 The range of offending behaviour programmes had been extended, but the intensive 12-step programme intended to support men to become drug free had been suspended due to drugs being readily available. Assessment and selection for programmes was managed appropriately.

Main concerns and recommendations

- S38** Concern: The first night centre did not sufficiently fulfil its purpose to support new prisoners and focus on progression and rehabilitation. First night interviews did not always take place in private, which meant that some risks were not identified. First night processes were hampered by the inappropriate location of other prisoners on the induction unit. New arrivals were placed in dirty cells that lacked basic items. There was inadequate staff oversight of induction processes.

Recommendation: New prisoners should be inducted in a safe and calm environment with a positive focus on progression and rehabilitation. All new arrivals should have a first night risk assessment by staff in private. Cell sharing risk assessments should assess the prisoner's current level of risk. The induction unit should be reserved for new prisoners. Staff should oversee the induction programme.

- S39** Concern: The widespread availability of illicit substances had significantly contributed to a large increase in violence. Too few searches and suspicion drug tests were carried out. There were frequent medical emergencies resulting from the use of Spice. The high intensity substance misuse recovery programme had been suspended. The prison had no effective strategy to address its drug problem.

Recommendation: The prison should give strategic and operational priority to addressing the serious problems caused by illicit substances at Erlestoke.

- S40** Concern: Too little attention had been paid to prisoner equality and staff were not allocated to equality duties. Protected characteristics had not been monitored, there was no analysis of prisoner representation in important aspects of the regime, and outcomes for some prisoners with protected characteristics were poor. There was no action plan or coordinated strategy to improve support for prisoners with identified characteristics.

Recommendation: All prison departments should demonstrate a commitment to the work of the equality action team, and there should be regular analysis of outcomes for prisoners from all backgrounds and an equality strategy and action plan to address disadvantage and provide appropriate support.

S41 Concern: Prisoner attendance at activities and punctuality was poor. There was insufficient challenge from staff to ensure that prisoners attended activities or focus from managers to establish the reasons why prisoners remained on wings.

Recommendation: Attendance at learning, skills and work activities should be given greater priority. The prison should ensure that prisoners arrive punctually at their allocated activities. Allocation to programmes and appointments should be better sequenced to avoid disrupting activities.

S42 Concern: There was insufficient visits capacity for the population, leading to prisoner frustration and anger. Booking arrangements did not make the best or most equitable use of the spaces available.

Recommendation: The prison should provide more visits sessions as soon as possible, and ensure the visits booking system allows all prisoners to have equitable access to the sessions available.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 Although some journeys for prisoners to reach the prison could be as short as 45 minutes, many prisoners had to travel for over three hours. Some prisoners who arrived in the late morning just before the staff lunch break had to wait up to 90 minutes on escort vehicles outside the prison gate before they could disembark. This was disappointing given that the prison only had to manage 15 prisoner movements a week.
- I.2 In our survey, fewer prisoners than the comparator said that their property arrived with them. We were told that the escort contractor restricted the number of property bags they allowed on vehicles. This resulted in large volumes of parcels arriving after the prisoner had transferred in, which affected the key work of reception staff as they handled prisoner requests to access their property (see paragraphs 2.7 and 2.46).

Recommendations

- I.3 **Reception should be open to receive and process prisoners over the lunch period.**
- I.4 **Prisoners' property should arrive with them when they are transferred into the prison.**

Early days in custody

Expected outcomes:

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

- I.5 The reception area was small but adequate for the low number of transfers in and out of the prison. Reception was on the first floor without a lift or stairlift, although we were assured that money had been secured to address this. We observed staff who were welcoming and treated new arrivals with courtesy. This was reflected in our survey where 87% of prisoners said that they were treated well in reception, against the comparator of 76%. It was positive that prisoners were no longer routinely strip searched.
- I.6 Reception processes were swift. Interviews with new prisoners lacked privacy and staff gathered only limited information to assess first night risks. Those we observed involved a short discussion with arrivals, primarily to check their identity and property. There was no attempt to check the current accuracy of their cell sharing risk assessments, some of which were over four years old, even though all arrivals were allocated to double cells. (See also paragraph 4.18 and main recommendation S38.)

- I.7** A prisoner orderly in reception provided additional welfare support for new arrivals. While no longer formally trained as a Listener (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), he was able to signpost new arrivals to relevant peer support workers.
- I.8** Health care assessments no longer took place in reception due to inadequate facilities. As a result, a member of reception staff had to escort prisoners to and from the health care department, which affected their ability to carry out other important reception tasks, such as processing property requests (see paragraph 2.7).
- I.9** Most new arrivals were located on the Marlborough unit, which was noisy and chaotic. The purpose of the unit should have been to support new prisoners, with a focus on their progression and rehabilitation, but we found little evidence of such a culture. Reception staff prepared first night paperwork for Marlborough staff to use to interview prisoners in private. This should have mitigated our concerns about inadequate reception interviews (see paragraph 1.6), but in practice first night staff gave the paperwork to prisoners and asked them to read through it themselves without explanation or adequate oversight. We found two prisoners who spent their first night at Erlestoke without having had a confidential interview with a member of the first night team. (See main recommendation S38.) Night staff received notification of new arrivals and provided some additional checks.
- I.10** The quality of cells on Marlborough was variable (see section on residential units) and new arrivals were often left without basic items, such as a kettle or pillow. Prisoners had to request to be taken to a separate clothing store for basic items like socks, only to find there were none available. We found that Marlborough unit was also used to accommodate prisoners for purposes other than first night and induction. This meant that new prisoners shared the unit with prisoners who had been bullied or assaulted, or who had been involved in illicit activity and were in debt. This created an allocation bottleneck, as some of these prisoners then refused to move off the unit and some new prisoners had to be located on other wings. The unit was chaotic and not conducive to creating a calm environment for new arrivals.
- I.11** Induction was coordinated by peer support workers, who saw all new arrivals individually and gave them an induction booklet. The short modular induction programme did not start until the Tuesday following reception. This meant that some prisoners waited for several weeks before they were allocated to work, and new arrivals spent too much time without activity in their cells. The induction programme included a short presentation by peer support workers on aspects such as safer custody and equality, as well as talks with staff from Barnardo's and Citizens Advice. Although the information presented was good quality, there was no involvement or oversight from induction wing staff and the programme omitted some key points. The equality peer worker completed a questionnaire with new arrivals but, given the sensitive nature of the information involved, this should have been completed by staff to ensure confidentiality. Most staff were unaware of what the induction orderlies were delivering, and staff we spoke to had little knowledge of the prison's early days policy. (See main recommendation S38.)

Bullying and violence reduction

Expected outcomes:

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

- I.12** In our survey, although most prisoners felt safe (87%), the proportion who said they had been hit, kicked or punched or experienced insulting remarks had increased since the previous inspection and was higher than the comparators. The number of reported violent incidents had tripled since the previous inspection, and we also found evidence of underreporting of bullying and violence. Many of these incidents related to the widespread availability of illicit substances (see paragraph I.55 and main recommendation S39).
- I.13** Under the prison's 'zero tolerance to violence' policy, suspected victims and perpetrators of bullying and violence were monitored with support logs opened for victims and behavioural compacts for perpetrators. However, implementation of these processes was inadequate; monitoring documents were not always opened, and when they were, wing staff did not monitor routinely, and in many cases there was no evidence of investigations or reviews. The purpose of the monitoring was unclear as no prisoner had been placed on a victim support log or behavioural compact since the policy had been implemented in April 2017.
- I.14** Oversight of bullying and victimisation work by the safer custody team was also underdeveloped and was undermined by frequent redeployment of the violence reduction coordinator. Residential units did not consistently inform the safer custody team of bullying incidents. We found that 20 prisoners were being monitored on the units following reports of violence and bullying but only 12 had been reported to safer custody. As a consequence, we did not have confidence in the data provided on the scale of bullying and violence. In contrast, the prison was aware of the small number of prisoners who were too scared to come out of their cells. Their names appeared on the daily briefing for staff and they received some good support from health care staff, but the prison was unable to provide them with an adequate regime.
- I.15** The prison had two violence reduction peer supporters, but their role was not defined and one of them had minimal contact with the violence reduction coordinator. The lack of staff in the safer custody team also undermined consultation with prisoners about bullying and violence. Although there had been a prisoner survey about violence in the previous month, it had not yet been analysed.
- I.16** Monthly safer custody meetings continued to focus on relevant issues of violence and bullying but had not been able to address the issues reported above.

Recommendations

- I.17** **The prison should investigate all incidents of bullying and violence, and routinely challenge perpetrators and provide support to victims.**
- I.18** **The prison should maintain an accurate log of all incidents of bullying and violence.**
- I.19** **Prisoners should be consulted about their experience of bullying and violence and the prison should take action to address their responses.**

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.20** Recorded incidents of self-harm had more than doubled since the last inspection. In the previous six months, there had been 59 incidents compared with 26 in a similar period last time. The number of assessment, care in custody and teamwork (ACCT) case management documents opened for at-risk prisoners was high for the type of prison, with 96 opened in the previous six months. However, about half were opened and closed after an assessment and initial review, which was potentially a waste of resources and could detract from focusing on the prisoners most at risk.
- I.21** The overall quality of ACCT support was reasonable. The contribution of the mental health team had improved, assessments were mostly comprehensive and most care plans were appropriate and updated from reviews. Prisoners subject to ACCT felt well cared for but in many cases continued to feel frustrated by unresolved issues, especially medicine prescribing (see paragraph 2.72).
- I.22** Since the last inspection, there had been four deaths in custody, one of which was self-inflicted. The prison had developed action plans in response to Prisons and Probation Ombudsman (PPO) reports, and had embedded some improvements in practice. However, despite a PPO recommendation that staff should ensure a response from prisoners when unlocking them, some staff said they did not, which risked delay in providing help when a prisoner was unconscious.
- I.23** Residential managers were assigned investigations of serious incidents of self-harm but these were often not completed. Lessons learned from serious incidents should have been discussed at the monthly safer custody meeting but none had been recorded. The weekly meeting to discuss prisoners most at risk of self-harm was well attended, and it was a useful forum for information sharing and planning to meet the needs of prisoners.
- I.24** There was a large group of Listeners, who were well trained and supported by the local Samaritans, and they said they had no problem with access to prisoners who wanted to see them.
- I.25** The monthly safer custody meeting was well attended and considered a reasonable range of information, but there was no action plan to improve the care of prisoners at risk. Training of all staff in suicide and self-harm prevention was due for completion by the end of 2017.

Recommendations

- I.26** The prison should explore the reasons for the large proportion of assessment, care in custody and teamwork (ACCT) documents that are opened and closed after the initial review, and take action to ensure that they are not opened unless justified.
- I.27** Officers should ensure that prisoners are conscious and responsive when they are unlocking them.
- I.28** All incidents of serious self-harm should be investigated to identify any lessons to be learned for the management of prisoners, and these should be shared to improve practice.

Safeguarding (protection of adults at risk)

Expected outcomes:

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

- I.29** The prison had a new policy on adult safeguarding but it was not yet fully operational. Staff had not been trained in identifying and referring prisoners of concern. There were no agreements with local safeguarding services to enable the referral of relevant prisoners to local authority social services for assessment and support.

Recommendation

- I.30** The safeguarding policy should be fully implemented as soon as possible.
(Repeated recommendation I.32)

Security

Expected outcomes:

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

- I.31** Most aspects of security were proportionate but we had concerns about a lack of control and challenge in some areas, and the prison's response to a significant substance misuse problem was uncoordinated. We were also concerned to find prisoners in a cell with a significant hole in the exterior wall, particularly as the prisoners and a wing officer had reported it to managers some weeks earlier (see photograph in Appendix V). The prisoners in these cells were only relocated when we highlighted the issue during our inspection.
- I.32** Prisoner movement was poorly managed. Movement at the beginning and end of planned regime activities was chaotic, and as a result many officers did not know how many prisoners

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).

were on their wing during the working day. We also saw prisoners who had refused to move during main movement demanding and being moved late to activity outside these times.

- I.33** There was a significant incident of concerted indiscipline during the previous year. This resulted in the closure of two wings (Alfred and Wessex). We were concerned that the prison could not produce an action plan outlining its follow-up and the lessons learned from the incident.
- I.34** The security department received a large amount of good intelligence from staff across the prison. This was swiftly analysed and categorised by a trained security analyst. Much of this intelligence related to the use of illicit substances. Searching and drug tests were often successful, and nearly two-thirds of suspicion drug tests were positive. However, less than a third of searches and a fifth of suspicion tests requested by the security team were carried out. (See main recommendation S39.)
- I.35** The positive random mandatory drug testing (MDT) rate for the previous six months was 14.3%, which was relatively high for a category C establishment. The MDT suite had been relocated since the last inspection and, while in need of cleaning, was tidy and appropriately equipped.

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.36** The incentives and earned privileges (IEP) scheme was not used effectively to encourage positive behaviour or challenge poor behaviour. At the time of the inspection, around 60% of prisoners were on the enhanced level of the scheme with only 2% on basic. We found many examples of prisoners remaining on the enhanced level despite refusing to attend activity or choosing not to work when they did. As a consequence, attendance in activity was poor, as was the cleanliness of some residential units ((see paragraph 3.6 and main recommendation S41). In addition, IEP reviews following serious incidents, including violence, were not always carried out.
- I.37** The scheme offered the usual differentials between the standard and enhanced levels in access to private cash and visits. However, the lack of visits slots negated the impact of this (see paragraph 4.44 and main recommendation S42). In contrast, the four enhanced units with better accommodation and more time out of cell were meaningful incentives. Prisoners on the basic level were reviewed every seven days and could attend purposeful activity.

Recommendation

- I.38 The incentives and earned privileges scheme should be used consistently to address poor prisoner behaviour.**

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.39** The number of formal adjudications had increased since the previous inspection and was high for a category C prison. The records of hearings we reviewed showed that they were conducted fairly and that prisoners were given the opportunity to present their case. Punishments were generally fair, and cases when there was a lack of evidence or anomalies in process were dismissed. However, many charges were for behaviour that could have been better dealt with through the IEP scheme.
- I.40** Oversight of adjudications had lapsed since the previous inspection; there was no quality assurance and no forum where statistics on the number and nature of adjudications were analysed to understand bad behaviour at Erlestoke.

Recommendation

- I.41 Adjudications should be subject to quality assurance, and trends analysed to understand and improve prisoner behaviour.**

The use of force

- I.42** The number of incidents involving the use of force had risen but was lower for the type of establishment. The use of force log showed 35 incidents where force had been used in the previous six months, with around one in five being planned. Batons had been drawn in two incidents, including one where a prisoner was struck on the leg. Incidents involving batons were not subject to any additional oversight.
- I.43** Governance of use of force had lapsed since the previous inspection. There was no use of force committee, nearly all use of force reports were incomplete, planned incidents were not routinely filmed and, when they were, footage was not reviewed. This meant that it was not possible for us to assess the nature and proportionality of use of force at Erlestoke. In addition, there was no analysis of data to identify and deal with any emerging patterns and trends. However, it was positive that unfurnished accommodation in the segregation unit had not been used in the previous nine months.

Recommendation

- I.44 Oversight of use of force should ensure that all use of force reports are completed and that planned incidents are recorded and reviewed. Managers should monitor patterns and trends to address any disproportionality.**

Segregation

- I.45** The segregation unit had 10 cells, including two for orderlies, as well as a constant watch cell, adjudication holding room and an unfurnished cell. Communal areas remained clean but cells had toilets that were stained, and graffiti on walls and etched into windows. The adjudication holding room was particularly poor; it was covered with graffiti and had spots of blood on the wall.
- I.46** The number of prisoners segregated was high, although most stays were relatively short. Many prisoners were held in the segregation unit seeking protection because they did not feel safe elsewhere in the prison, which meant that the unit was often full and some perpetrators of violence and bullying had to be segregated on the wings. Data, which were only available for the previous three months, showed that half of all segregated prisoners had been transferred to other establishments, which was too many.
- I.47** The regime on the unit was inadequate and restricted to a daily shower, 30-minute exercise period and access to a telephone. Relationships between staff and prisoners on the unit were good, and all the current residents spoke highly of unit staff, which partly offset some of the unit's other shortcomings. Segregation reviews were completed on time but they were poorly attended, did not set meaningful behaviour targets and were not focused on formal reintegration planning.
- I.48** There had been no recent segregation management meetings, and managers had only started collecting monitoring data on segregation three months beforehand.

Recommendations

- I.49** **The regime on the segregation unit should be extended to facilitate an hour of outside exercise a day.**
- I.50** **Oversight of the segregation unit should address the poor accommodation, and focus on successfully reintegrating prisoners back to normal location at Erlestoke.**

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.51** Drug and alcohol treatment services were delivered by a partnership of the Avon and Wiltshire Partnership and Bristol Community Health, operating a locally integrated clinical and psychosocial service - 'Inspire Better Health'.
- I.52** Despite a long period of serious problems caused by prisoners using synthetic cannabis (Spice), the establishment had only just reconvened a drug strategy committee following a break of nearly 12 months. Although there had been a supply reduction committee, there had been no prison-wide strategy to address the reduction of harm and the demand for drugs. (See main recommendation S39.)
- I.53** There were 16 prisoners receiving opiate substitution therapy (OST), of whom 15 were on reducing doses and just one was on a maintenance dose. Controlled drugs for OST were administered in a suitably confidential secure gated hatch area, which prisoners entered one

at a time under good officer supervision. Regular clinical reviews involved a nurse and psychosocial worker with the patient and prescriber. All the prisoners we spoke to said their clinical care was good.

- I.54** There were 165 prisoners (12.7% of the population) on the psychosocial caseload, including the 16 on OST. This was a relatively low percentage for a category C prison, and more so given the high incidence of drugs availability. All the recovery staff were highly skilled and experienced, and they had done a great deal of work to improve prisoners' motivation. Nevertheless, various other factors had contributed to the low level of prisoner engagement. Many prisoners we spoke to said that the availability of drugs, coupled with the recent smoking ban, had contributed to a widespread sense of hopelessness, and that it was difficult to maintain recovery in an atmosphere where so many other prisoners were regularly under the influence of Spice. Prisoners also told us that the price of Spice was around half of that for illicit tobacco, which encouraged more Spice use than we have seen in similar prisons recently. There were frequent medical emergencies, some very serious, resulting from Spice use, partly due to prisoners smoking Spice without diluting it with tobacco, as is common practice elsewhere.
- I.55** Prisoners and staff also told us that prisoners had been affected by the closure of the high-intensity 12-step recovery programme, which had previously been delivered successfully at Erlestoke. The closure was largely due to the negative behaviour of some prisoners placed on the programme, and unsuitable placements on the programme's residential unit.

Recommendation

- I.56** **The high-intensity substance misuse recovery programme should be reintroduced in an appropriate location to ensure that only prisoners who are positive about recovery are placed on the unit.**

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1 The outside areas of the prison were well maintained and pleasant. The majority of prisoners had good access to outside areas when on movement to activities or during exercise periods (see photograph, Appendix III).
- 2.2 The standard of residential units varied widely. Some of the older and more dilapidated units were used to house enhanced-level prisoners. However, in our survey, prisoners on these units were more positive than those elsewhere about several residential services, such as access to cleaning materials and clothing. Prisoners located on Alfred, Wessex, Silbury and Marlborough units reported difficulties in getting cleaning materials and basic items of clothing. Some wing staff were not in control of cleanliness and wing cleaners were simply not managed, which resulted in a number of dirty wings.
- 2.3 The older Alfred and Wessex units had recently reopened following a disturbance in 2016, and housed prisoners on all privilege levels. Even though they had had some minor refurbishment and had only been opened for a short time, both units were unkempt, showed signs of vandalism and were poorly maintained (see photographs, Appendix III). For example, on Wessex unit we found two prisoners in a cell with a large hole in the wall (see paragraph 1.31 and photograph in Appendix III), which was both a security and decency concern. Although staff had reported this issue some weeks earlier, the prisoners were only relocated after we raised our concerns during the inspection.
- 2.4 The quality of in-cell sanitation remained variable. The showers on Silbury, Kennet and Marlborough units were in cell, although some did not have adequate shower curtains or privacy screens. Eleven cells with integral showers on Kennet were out of use, and one cell was used as a shared facility for prisoners to access a shower. Communal showers on Sarum were in poor repair, those on Wessex had poor drainage and Alfred still had a bath that prisoners chose not to use despite the recent refurbishments.
- 2.5 A shortage of kettles or a water boiler on Marlborough resulted in a member of staff having to repeatedly boil one domestic kettle in a 30-minute period before lock up to provide some hot water for prisoners. Prisoners still had poor access to private lockers to store in-possession medication, although most prisoners, except on Marlborough, had privacy keys for their doors.
- 2.6 The majority of prisoners chose to wear their own clothes, and there were laundry facilities in all areas. Prisoners could also hand in prison laundry once per week, but there were shortages of some key prison-issue clothing and there had been no socks available for almost three weeks.
- 2.7 Prisoners had reasonable access to most of their stored property, although some new arrivals had to wait several weeks for this (see paragraph 1.2). We found a pile of disorganised property and mail in reception with some postmarks dating back to December 2016, which were yet to be sorted, stored or collected (see paragraph 1.2).

- 2.8** In our survey, only 35% of prisoners said that their cell bell was answered within five minutes. During our observations, some calls remained unanswered for much longer, and there was no current system for monitoring this or providing management assurance.
- 2.9** Prisoners had good access to telephones across the site, although there was still a telephone in the kitchen in Sarum that lacked privacy (see photograph, Appendix III).
- 2.10** In our survey, fewer prisoners than at the previous inspection said that it was easy to make an application or that they were dealt with promptly. All units had a system to monitor outgoing applications but not all areas tracked responses. We found several applications across the prison that had not been answered or where evidence of a reply could not be provided due to poor tracking of returned applications.

Recommendations

- 2.11 Communal areas and cells on residential units should be clean and maintained in a good state of repair.**
- 2.12 All prisoners should have access to basic items, such as clean bedding, clothes and cleaning materials.**
- 2.13 Staff should answer cell calls promptly, and response times should be monitored appropriately.**
- 2.14 All telephones for prisoners should enable calls to be made in private.**
- 2.15 All returned prisoner applications should be monitored and tracked on all residential areas.**

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.

- 2.16** In our survey, prisoners were more positive than the comparator about staff treating them with respect. However, with the exception of older prisoners and those serving an indeterminate sentence, prisoners' perceptions of the personal officer scheme were worse than the comparator and than at the previous inspection.
- 2.17** Staff relationships with prisoners were mostly positive on the surface. We saw many who were responsive and helpful, but they were often too busy to handle anything other than routine requests. As a result, they spent much of their time in unit offices, rather than actively engaging with prisoners on the units. Rules were often not enforced effectively, and residential staff and their managers were too accepting of some poor prisoner behaviour. Several prisoners raised this as an issue with us, appealing for more order and control (see paragraph 3.3 and main recommendation S41). Many residential staff were relatively new to the role, and some lacked confidence in their ability to challenge prisoners. Often these staff had been allocated to work on the busier more challenging units in isolation from more experienced colleagues who could have offered support and guidance.
- 2.18** Staff entries in prisoner electronic case notes varied in quality and frequency, and management checks were intermittent. Although named officers were allocated to prisoners

on each unit, they did not actively engage with them, and there was generally little evidence that residential officers took any interest in the prisoner's sentence plan.

- 2.19** Prisoner mentors were used well to support their peers. While it was commendable that prisoners were given the opportunity to take an active part in their community, their work was not subject to sufficient oversight by prison staff. This potentially presented the risks of exceeding boundaries or breaching confidentiality.
- 2.20** There was no formal prisoner council supported by the governor and used to drive improvement. There had been some consultation meetings with representatives from each unit but attendance by prisoners was poor, which diminished their effectiveness.

Recommendations

- 2.21 Staff should be supported to challenge poor prisoner behaviour.**
- 2.22 Peer supporters and orderlies should be subject to appropriate supervision, support and governance.**
- 2.23 Prisoner consultation should represent the whole prison, and provide a regular forum for prisoners' issues and suggestions for improvement to be raised and addressed.**

Equality and diversity

Expected outcomes:

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

Strategic management

- 2.24** The prison's attention to equality work had significantly faltered and had only recently been revived with an equality action team (EAT) meeting two months before the inspection. An appropriate range of departments had been represented at the inaugural meeting, and prisoner equality representatives had attended. There was no equality action plan, although the meeting had organised some activity. The EAT did not consider data about representation of different groups of prisoners in key aspects of the regime so could not identify disadvantage as a basis for planning action. (See main recommendation S40.)
- 2.25** The prison had a poor understanding of the needs and perceptions of prisoners from minority groups. Although there was some dialogue with the prisoner equality representatives, there was no regular consultation with prisoners with protected characteristics to explore their perceptions and concerns. Representatives for protected characteristics groups used their own initiative to improve conditions for the prisoners they represented, but they lacked adequate support or direction from prison managers. They had

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

devised an induction questionnaire to identify protected characteristics and were building a database to provide information for equality work, but it did not include all the population. The prison did not provide staff training in prisoner equality issues. (See main recommendation S40.)

- 2.26** There had been 15 discrimination incident report forms submitted in the previous six months, which was low for the type of establishment. They were not investigated promptly because staff had not been assigned to the task, and at the time of the inspection 12 dating back three months were awaiting investigation.

Protected characteristics

- 2.27** Almost a quarter of prisoners were from a black and minority ethnic background. There was no apparent direct discrimination, and black prisoners did not complain to us of unfair treatment. However in our survey, as at the last inspection, black prisoners were more negative than white prisoners in some important areas - 77%, compared with 90%, said most staff treated them with respect, and 77%, compared with 89%, that they were treated well in reception. The prison had not investigated these differences or planned action to improve the perceptions held by black and minority ethnic prisoners.
- 2.28** In our survey, 7% of prisoners identified as Gipsy, Romany or Traveller. There had been some engagement with this group through meetings and celebrations of appropriate events.
- 2.29** There were 16 foreign national prisoners, who had little structured support. Although some prisoners from the same country were accommodated together to provide mutual support, we found some who were not. The prison did not use the professional interpreting service available, and we were told that prisoners or staff with the relevant language were used instead, although there was no formal list of those willing to assist. Foreign national prisoners we spoke to did not know of any facility for exchanging unused visits for telephone calls.
- 2.30** In our survey, almost a quarter of prisoners considered themselves to have a disability. They felt less safe than other prisoners - 28% said they felt unsafe, compared with only 8% of prisoners without a disability, and only 57%, against 71%, said there was a member of staff they could turn to for help. On activities, only 7%, compared with 20%, said they were in vocational training and only 43%, against 61%, that they were working. Health care for prisoners with disabilities was reasonable, and there were evacuation plans on every unit. However, there were no care plans for residential areas and we met prisoners with severe disabilities who were not adequately cared for. There were two adapted cells but these were not adequately equipped. The prisoner disability representative met new arrivals who declared a disability and provided what support he could, such as pushing wheelchairs, but there was no structured process for ensuring that disabled prisoners received adequate support on their residential wings.
- 2.31** The number of prisoners over 50 had increased to 95 from 77 at the last inspection, and care for this group was much better. Social activities were provided by the prisoner representative, and the RECOOP (Resettlement and Care for Older ex-Offenders and Prisoners) organisation provided a monthly activity. Retired prisoners were unlocked during the working day.
- 2.32** In our survey, only 1% of prisoners identified as gay or bisexual, which was low. A prisoner had recently been appointed as a representative for this group but had not yet developed support. There were no transgender prisoners; equality staff said they would apply the Prison Service guidance for such prisoners but there was no local policy.

Recommendations

- 2.33** The prison should assess the individual needs of foreign national prisoners on their arrival and provide appropriate support so they can understand and participate in the prison regime.
- 2.34** All residential units should have care plans for prisoners with disabilities that specify support to assist their daily living needs and access to the regime.
- 2.35** The prison should consult with gay and bisexual prisoners to develop appropriate support, including promotion and access to community groups.
- 2.36** The prison should develop a local policy for meeting the needs of transgender prisoners.

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.

- 2.37** In our survey, more prisoners than at the last inspection said their religious beliefs were respected and that it was easy to attend religious services. Chaplains were available for nearly all religious groups, and prisoners had free access to regular services or faith meetings. Since the last inspection, a pagan chaplain had been appointed and the Rastafarian group was prisoner led while a new chaplain for this group was being security cleared. Significant religious festivals were celebrated. The chapel and multi-faith room provided good facilities and adequate space for religious observance. There was a range of classes covering faith instruction, discussion and music, and pastoral support, including liaison during bereavement, was provided daily.
- 2.38** The managing chaplain was a member of the prison senior management team. The chaplaincy was well integrated into the life of the prison through a duty system to support segregated or isolated prisoners, new arrivals and those in distress. The chaplaincy participated in all management groups, including safer custody, complex needs, security and the equality team.
- 2.39** The chaplaincy had good links with community faith groups, with more than 30 external volunteers supporting its work. A community group was available to visit prisoners due for release who had anxieties about their return to the community.

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.

- 2.40** In our survey, fewer prisoners than at the previous inspection thought that it was easy to make a complaint or that they were dealt with quickly. Complaint forms were not readily available on all units during the inspection.
- 2.41** There had been 289 complaints submitted in the previous six months, which was low for the type of prison. The prison's records indicated that 46% of these complaints had been upheld. New complaints were collected daily from the complaint boxes by uniformed night staff, which some prisoners felt compromised confidentiality.
- 2.42** Most complaints were responded to appropriately, although we identified some weaknesses in the sample we looked at. The timeliness of final responses was not monitored. Responses to complaints known to be late were followed up well. Many complaints were about property awaited from other prisons (see paragraphs 1.2 and 2.7). Useful management information was provided for the senior management team, with some evidence of follow-up actions when required on complaints that were subject to quality assurance checks.

Recommendation

- 2.43** Complaint forms should be readily available to all prisoners, and the prison should monitor the timeliness of final responses.

Legal rights

Expected outcomes:

Prisoners are fully aware of, and understand their sentence or remand, both on arrival and release. Prisoners are supported by the prison staff to freely exercise their legal rights.

- 2.44** In our survey, many prisoners were negative about support for their legal rights. There were no trained legal services officers, although some limited support was available from offender supervisors. The library held a suitable range of legal texts and Prison Service orders, and information about how to contact the Prisoners' Advice Service. There was no information about how prisoners could use 'Access to Justice' computers to allow them to exercise their legal rights and pursue cases.
- 2.45** Fewer prisoners than at the previous inspection said it was easy to attend legal visits. Legal visits took place twice weekly and booking arrangements were adequate. However, visits took place in the main visits room and the lack of private facilities compromised confidentiality.

Recommendation

- 2.46** Legal visits should be easy to book and take place in private. (Repeated recommendation 2.62)

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.

2.47 The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁵ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

Governance arrangements

2.48 Inspire Better Health, a partnership of eight health providers led by Bristol Community Health, had provided all health and substance misuse services since 1 April 2016. The consortium had worked hard to achieve a much improved service following a previous period of deterioration. Joint working between the prison, health providers and commissioners was good. There was an effective strategic and operational governance structure with appropriate representation and attendance at local delivery board and clinical governance meetings. The working relationship with the prison was developing. A health needs assessment had been completed in 2014 with a plan to update this during 2017.

2.49 The head of health care supported a strong professional team with excellent leadership; this had helped transform the service from a very low base. We observed a committed clinical team who provided compassionate and effective care. A daily handover meeting was attended by representatives from all teams and supported good communication, including identification of clinical concerns. Despite two key vacancies and some long-term sickness, staffing was consistent with no agency staff used in the previous six months and limited use of one regular bank nurse. Nursing cover had been extended and was available on weekdays between 7.30am and 6pm and weekends between 7.30am and 3pm.

2.50 Clinical and managerial supervision was firmly embedded and was to be improved further. Mandatory training was well managed and professional development opportunities were excellent. There was a sound plan to train nurses to lead care of patients with long-term conditions. A multidisciplinary complex case meeting helped ensure that care was appropriately focused and patients kept safe. Health staff routinely sought patient consent to share medical information.

2.51 In our survey, more prisoners than the comparator (54% against 42%) said that the overall quality of health care was good. Patients we spoke to were largely negative about health care but we found no justification for these perceptions. Regular patient surveys gathered service user feedback, and patient forums were to be restarted to further improve service delivery.

2.52 Prisoners could make health care complaints through a secure health care complaints system. The responses we sampled were timely, courteous and addressed the issues raised. The head of health care often met prisoners to discuss their complaints, but this was not documented.

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

- 2.53** Health staff demonstrated good awareness of their safeguarding responsibilities and had raised several alerts about vulnerable patients. There was good reporting of clinical incidents and regular infection control audits. Learning was shared with staff at monthly team meetings.
- 2.54** The clinical records we reviewed were accurate and suitably detailed. Use of care plans was developing and included some excellent patient-centred plans for dementia and wound care. Staff had access to a suitable range of local policies, including infection control and communicable diseases.
- 2.55** The health care centre was clean and, although small, was used efficiently. Clinical rooms complied with infection control requirements. The main waiting area was too small for the number of waiting patients and created an unsafe environment. We observed two occasions when individual patients were extremely challenging, which resulted in a high level of risk for both staff and other patients.
- 2.56** Suitable emergency equipment, including automated external defibrillators (AEDs) and oxygen, was kept in the main health care department with regular documented checks. There was no suction equipment included in the kits. Three further AEDs across the prison were checked by the custodial managers; there was no AED in the gym.
- 2.57** A 'health passport' (a patient-held record enabling patients and clinicians to record key health issues) had recently been introduced but it was too early to assess its effectiveness. Prisoners were given a detailed information leaflet explaining how to use health services. A suitable range of health promotion information was displayed in the waiting area and could be quickly obtained in other languages. Access to immunisations and screening for blood-borne viruses was good. Barrier protection was advertised and available from health staff. Smoking cessation services offered support and access to nicotine replacement for prisoners transferring in with a current prescription.

Recommendations

- 2.58** **The health care waiting area should provide a safe environment for both patients and staff.**
- 2.59** **Suction equipment should be part of the emergency equipment, in line with national guidance for resuscitation equipment in a primary care setting.**

Delivery of care (physical health)

- 2.60** New arrivals received a comprehensive initial health screening. This took place in the health care centre as there was still no suitable room in the main reception area - this resulted in the need for additional escorts, which presented difficulties for the prison (see paragraph 1.8). Prisoners were given a shorter follow-up secondary assessment within seven days. There was excellent follow up of identified risks.
- 2.61** Prisoners could see nurses in daily nurse-led clinics, including a triage clinic. Care of patients with long-term conditions was reasonable with effective liaison between nurses and GPs, but nurse-led care for long-term conditions needed to mirror community practice.
- 2.62** A consistent group of general practitioners (GPs) provided a high standard of clinical care that reflected professional and national guidance, and we observed consultations that

provided patients with clear explanations and evidence-based treatment. A few patients had waited too long for routine appointments. Out-of-hours services were provided by Medvivo.

- 2.63** There was an appropriate range of primary care services, including physiotherapy, podiatry and visiting pain management specialists. Waiting times for most appointments were short, but non-attendance rates were high and actively monitored to help reduce wasted clinical time.
- 2.64** Two health care assistants provided a twice-daily outreach service by for patients who were self-isolating, on assessment, care in custody and teamwork (ACCT) case management and those with dementia; this ensured that vulnerable men were well monitored.
- 2.65** There were not enough planned external appointment escorts to meet need. As a result, there were regular short-notice cancellations and some appointments were rescheduled several times. All patients going to external appointments were routinely handcuffed, except where health professionals indicated a 'medical objection'. We spoke to one prisoner who had had to provide a urine specimen while handcuffed at a hospital appointment.

Recommendations

- 2.66** **A dedicated suitable room in reception should be available for health care screening of newly arrived prisoners.** (Repeated recommendation 2.78)
- 2.67** **Non-urgent external hospital appointments should not be repeatedly rescheduled.**
- 2.68** **Risk assessments of patients going to external appointments should be proportionate and reflect the real assessed risk of escape and/or violence, and should not compromise confidentiality and/or patient dignity.**

Good practice

- 2.69** *Two health care assistants made twice-daily visits to prisoners who self-isolated and/or were on at-risk case management and those living with dementia, which provided excellent support and monitoring of vulnerable patients.*

Pharmacy

- 2.70** Management of medicines was very good. The drugs and therapeutics committee met regularly, and was well attended and appropriately focused.
- 2.71** Medicines were supplied from a local pharmacy promptly. A lead pharmacist and non-medical prescriber provided clinical oversight and worked closely with prescribers to provide an evidence-based safe service. Two dedicated pharmacy technicians managed the day-to-day administration and collection of medicines.
- 2.72** Prescribing of tradable and multiple medicines was closely monitored, although patients could still benefit if a specific medicine was the preferred clinical option. Many patients complained about being taken off medicines, but in all the cases we reviewed, the prescribing decision reflected the clinical evidence base. Local and national formularies were used to inform prescribing, and there were effective regular medicine use reviews.

- 2.73** There was robust risk assessment for in-possession medicines and almost all patients could keep their own medicines, although many cells did not have lockable cabinets. Health care and prison staff made spot checks of prescribed medicines, which addressed any variance between prescription and medicines held. Arrangements for administration and collection of medicines were sound and promoted the prisoner's individual responsibility for their medicines.
- 2.74** The medicines storage facility was too limited for the large amounts of in-possession medicines required. There was suitable separation of the small quantity of stock medicines, with regular checking of drug fridge temperatures. There were good arrangements for the storage and reconciliation of controlled drugs, and we were assured by the audit trail for the controlled drug keys that we saw.

Dentistry

- 2.75** The dental service provided by 'Time for Teeth' was good. Appointments were prioritised appropriately on clinical need, and the range of treatment was equivalent to that in the community. Urgent referrals were seen promptly within three days, and most patients could see a dentist within two weeks for a routine appointment. Patients had access to external orthodontic treatment when necessary. Oral health promotion advice was provided during consultations.
- 2.76** Governance of the dental service. was good and ensured it was safe. Dental equipment was well maintained and serviced regularly. The separate decontamination room and the dental suite complied with national infection control standards.

Delivery of care (mental health)

- 2.77** Avon and Wiltshire Mental Health Partnership Trust provided integrated mental health and substance misuse services, which operated Monday to Friday. The joint leadership and integration between mental health and substance misuse services enabled prisoners with complex dual-diagnosis (mental health and substance misuse) needs to be suitably managed and safely challenged.
- 2.78** A team leader and one community psychiatric nurse (CPN) had been in post for approximately six months and had started to develop a good service from a very low base. Their caseload was approximately 100 patients. A visiting psychiatrist provided one session a month. A third CPN was to be appointed.
- 2.79** There was a high level of prisoner need for these services, including a complex mix of chronic need, with some prisoners displaying regular serious and prolific self-harming. Referrals were accepted from all staff and prisoners, with an initial routine appointment within seven days. All referrals were discussed at the weekly 'single point of contact' meeting. Urgent referrals could be seen within 24 hours, and often sooner. The mental health team was actively engaged with the ACCT process.
- 2.80** Individual casework was now starting to be complemented by a range of closed and open group work - focusing on the brain, stabilisation, relaxation and sleep - designed to support patients with common difficulties. There were plans for the wider integrated team to lead some of these groups. Although in the early stages, these groups showed promise in supporting patients with complex and multiple needs. There was currently no psychology or occupational therapy input to meet the wider needs of this population, including men with learning disabilities or on the autistic disorder spectrum.

- 2.81** Only 10 staff from the segregation unit and reception had received mental health awareness training, and there was none planned for prison staff. This was a significant gap in supporting identification of need and wider care of prisoners.
- 2.82** There had been one transfer to hospital under the Mental Health Act 1983 in the last six months, which had been completed within two weeks.

Recommendations

- 2.83** **There should be a wider range of clinical interventions, such as psychology and occupational therapy, to support prisoners with complex behavioural and resettlement challenges.**
- 2.84** **Mental health awareness training should be available to all prison staff.** (Repeated recommendation 2.101)

Social care

- 2.85** The prison had no firm links or a signed memorandum of understanding with Wiltshire County Council for social care assessments. Communication with the local authority was still in its infancy, and as a result we were not assured that prisoners with social care needs had been identified or appropriately assessed. Identification of need for mobility and health aids and access to this equipment was satisfactory.

Recommendation

- 2.86** **The prison should develop a memorandum of understanding with the local authority for social care assessments and social care provision.**

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.

- 2.87** Catering had improved since the last inspection. In our survey, 62% of prisoners said the food was good, against 18% at the last inspection and the comparator of 32%. The catering team and manager were active in engaging with prisoners. There were monthly focus groups, and prisoners could also make comments on the weekly food order form, which the catering team reviewed individually.
- 2.88** Following feedback from prisoners, the menu now offered a hot snack for lunch and a hot meal in the evening. All residential units had some self-catering equipment for prisoners, such as toasters and microwaves, although some of these were in areas that were not clean. In addition to breakfast cereal, prisoners had bread to make toast or sandwiches. This was a much better provision than the breakfast packs we usually see in other prisons, even though the daily budget was comparable. Prisoners were able to dine communally on all units.
- 2.89** Meals were served far too early, with lunch starting at 11.15am and the evening meal at 4.15pm, and we saw some meals served up to 15 minutes earlier than these times. In several

servery areas, prisoners were serving meals without adequate protective clothing or supervision from staff. Where staff were present, they were also not wearing protective clothing, even though we raised this during the inspection.

- 2.90** The main kitchen was well equipped, although it often took the national maintenance contractor too long to repair essential equipment.

Recommendations

- 2.91** All meals should be served at appropriate times.
- 2.92** The prison should ensure that there is better supervision of the serving of meals, and that all those involved in the preparation and serving of food wear the appropriate protective clothing.

Good practice

- 2.93** *The option for prisoners to give feedback on their weekly food orders was a simple and effective way of addressing any issues and allowed all prisoners to raise concerns.*

Purchases

Expected outcomes:

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

- 2.94** In our survey, 80% of prisoners said that the shop sold a wide enough range of goods to meet their needs, against the comparator of 49% and 37% at the previous inspection. Prisoners had access to a range of goods available in all prisons in the region, which had doubled the choices offered.
- 2.95** New arrivals could wait up to 10 days to receive their first full shop order, although they could buy a reception pack with groceries or an e-cigarette for those who smoked. Additional reception packs could be bought with a manager's authorisation.
- 2.96** Prisoners could shop from a range of catalogues, although they were charged an administration fee for orders and there were some delays in obtaining their goods when they arrived (see paragraph 1.2). Newspapers and magazines could be ordered for delivery to the prison.

Recommendations

- 2.97** Prisoners should be able to place their first shop order on the day after arrival. (Repeated recommendation 2.115)
- 2.98** Prisoners should not be charged an administration fee on catalogue orders.

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

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

- 3.1** Prisoners located on the enhanced units had no lock-up periods, and were only required to remain on landings behind a secure gate between approximately 9pm and 8am. For others, time out of cell had deteriorated since our previous inspection and ranged from three hours a day for those who were unemployed to between eight and 10 hours for employed prisoners. Access to exercise in the open air was reasonable, although it was occasionally curtailed to address staffing shortfalls (see paragraph 3.4).
- 3.2** In our roll checks, we found 23% of prisoners locked up in their cells. In addition, there were several prisoners who remained on the unit unlocked but not in purposeful activity, which brought the figure closer to a third. During our roll checks, staff were not always aware of the location of prisoners, which also caused problems for staff trying to locate prisoners for appointments or activity. Prisoners often failed to attend activity without sufficient challenge by staff. Even when they did arrive at work, too many would find a reason to return to their unit, often with no follow-up. (See also paragraph 2.17 and main recommendation S41.)
- 3.3** Staff did not always follow the timings listed in the published timetable. For example, during our observations of an evening association period, one emergency escort led to the closure of all units. On some units, this early lock up was not managed well with some prisoners being locked up by 5.15pm and others not returning to their cells until 6.45pm. Prisoners complained about the consistency and inequality of these regime restrictions.
- 3.4** Due to staffing shortages, the regime was curtailed at weekends, although managers ensured that these changes were publicised in advance and that all areas received some association.

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

Learning and skills and work activities

Expected outcomes:

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

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

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

Management of learning and skills and work

- 3.6** The leadership and management of learning, skills and work required improvement. Prison and college managers had taken measures to improve prisoner attendance and punctuality at activity sessions; however, these had not been effective. Although managers collaborated well to monitor and track learners who failed to attend activities, this task was hampered because prison wing officers did not always unlock men from their cells sufficiently promptly and escort them to activities. In many cases, officers accepted without challenge excuses from prisoners about why they could not attend activities, and rarely applied sanctions for those who did not attend or recorded their reasons for non-attendance, especially for those prisoners who chose not to leave their cell. (See also paragraphs 2.18 and 3.2 and main recommendation S41.)
- 3.7** Although college managers had taken effective measures to raise the standards of teaching, these were often weakened by the practice of scheduling prisoners to attend appointments, such as health care, in the middle of the core day when purposeful activities were taking place. This led to regular and avoidable disruptions to learning sessions, though teachers managed this situation well. (See main recommendation S41.)
- 3.8** Prison and college managers had sought the views of prisoners on the curriculum to ensure that the provision met their needs, and the curriculum was generally appropriate as a result. However, there had been no formal curriculum needs analysis to ensure that the learning, skills and work offered fully met the prison's function to rehabilitate prisoners rather than to resettle them.

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

- 3.9** Despite these deficiencies in leadership and management, the education and vocational training provision from Weston College was good. This was largely because college managers had set very high expectations of teaching and support staff, and successfully ensured the highest standards for the learning and skills provided to those who attended.
- 3.10** Robust performance management of ineffective teaching staff in the last 18 months had removed the weakest practitioners and replaced them with highly qualified, enthusiastic and committed teachers, especially in English and mathematics. The very few weaker teachers had received high quality individual support, and carefully selected continuing professional development. At the time of the inspection, all teachers were working to the college's high standards.
- 3.11** Managers used regular learner forums and focus groups, as well as surveys, to gauge learners' views and took prompt and effective action to develop provision, which learners valued.
- 3.12** The self-assessment process was inclusive and rigorous. Prison and college managers had a very clear view about the key strengths and areas for improvement. The quality improvement plan provided a clear timescale for a range of actions that were proportionate to the identified weaknesses.

Recommendation

- 3.13** **Prison and college managers should carry out a comprehensive curriculum needs analysis to ensure that the activities offered fully contribute to the prison's core purpose of rehabilitating prisoners.**

Provision of activities

- 3.14** The number of vocational training, education and work places had declined since the last inspection, but there were sufficient to provide at least a part-time regime for most of the population. The 410 activity places included around 93 full-time in workshops, 40 full-time in vocational training and 56 in part-time education.
- 3.15** The range of vocational training was good and included brickwork, horticulture, bicycle repair and maintenance, carpentry and mentoring. Opportunities for prisoners to gain accredited vocational qualifications in prison industries were particularly good. Prisoners could also study distance learning courses, including with the Open University, with around 38 men enrolled on these courses.
- 3.16** Prisoner attendance at the induction for activities and education was good, with almost all completing it. The induction was comprehensive and helpful in supporting prisoners with their choice of purposeful activity.
- 3.17** The allocation of prisoners to activities took appropriate account of their previous attainment, interests and security risks, as well as the mandatory education assessment that they had completed. However, the team that allocated prisoners to purposeful activity did not work with the team making allocations to the wide range of prisoner rehabilitation programmes. As a result, some prisoners were withdrawn from an education course to attend an offending behaviour programme, which was disruptive and unsettling for the prisoner.

- 3.18** The relatively minor pay disparities between attendance at purposeful activity and work in the commercially-run workshops was not a significant disincentive to prisoners attending education or vocational training.

Recommendation

- 3.19** **The allocation of prisoners to purposeful activity and to offending behaviour programmes should be coordinated to ensure they receive a coherent and structured programme that minimises disruption and meets their needs.**

Quality of provision

- 3.20** The college's skilled and motivated tutors set high expectations for all prisoners and helped them to make progress and develop new skills and knowledge. In vocational training, tutors were knowledgeable and used their considerable industrial experience and skills to ensure that learners made good progress.
- 3.21** Teaching accommodation and resources were good, with imaginative wall displays that helped create a positive learning environment that celebrated learners' work and achievements. Tutors developed useful additional learning resources that reinforced practical skills well.
- 3.22** College managers provided additional support for learners through the use of well-trained peer mentors as teaching assistants, as well as qualified specialist educational staff. The contribution of some peer mentors was exemplary.
- 3.23** Tutors knew their prisoners well. They made good use of initial induction assessments of English and mathematics skills, previous qualifications and motivation to plan learning activities that met individual prisoner needs.
- 3.24** Individual coaching in education and vocational training by tutors and peer mentors supported learners to make good progress, and stretch and challenge the most able. Tutors and instructors gave clear verbal feedback to help prisoners improve and understand how to succeed. However, written feedback on assessed work did not provide sufficient information to help learners understand what they had done well or how they could improve their work further.
- 3.25** Learners were highly motivated and engaged. They enjoyed learning and recognised the employability and technical skills that they had developed and how they could use these to find work after release. Their progress was recorded well and most prisoners could explain how much progress they had made and what they needed to do to achieve. However, the development of English and mathematics skills in vocational training and in work required improvement (see recommendation 3.40).
- 3.26** Tutors provided good oral feedback to learners, although written feedback was often less helpful. Individual learning plans were used well to record progress, but target setting was less effective.
- 3.27** There were additional programmes to support prisoners' wider learning. For example, in a collaborative project with staff at the nearby Salisbury Cathedral to celebrate the 800th anniversary of the signing of the Magna Carta, prisoners worked on ceramics and stonemasonry to depict images related to justice and the rule of law; these were then displayed in the cathedral for visitors. In another project, prisoners with dyslexia and those

lacking confidence in writing participated in a successful creative writing programme led by visiting guest writers.

- 3.28** Prisoners could work in a wide range of commercially-run prison industries. However, many of these jobs were mundane and repetitive, and failed to serve any useful learning, skills or employability purpose.

Recommendations

- 3.29** **Tutors and instructors should provide sufficient information to prisoners about their work to help them understand what they have done well and how they can make further improvement.**
- 3.30** **Prisoners should have greater opportunities to participate in meaningful and challenging prison work that enhances their prospects of gaining useful employability skills.**

Personal development and behaviour

- 3.31** Prisoners who attended training and education enjoyed their sessions. Most were engaged, participated in discussions and were motivated to achieve. Their behaviour in sessions was good, and tutors managed the few instances of poor behaviour well. Learners were respectful of their tutors and each other.
- 3.32** Learners' written work was generally presented neatly. Standards of practical work in vocational training were appropriate for the qualification and length of course. Workers in the prison's commercial workshops worked well to complete contractual targets.
- 3.33** Prisoners valued the opportunity to work as peer mentors and took their roles very seriously. They participated actively in the college-run learner forum and were vocal in providing feedback on the quality of education offered (see paragraph 3.11).

Education and vocational achievements

- 3.34** There had been high achievement rates in 2015/16 for the majority of vocational qualifications taught by college staff, especially in information technology, bricklaying, carpentry and cleaning skills. There were good qualification achievements on courses in customer service and cleaning and support services run by the college subcontractor, and the number of learners who stayed to the end of their studies was high.
- 3.35** Learner achievement in external functional skills English tests in 2015/16 was good in the speaking and listening components but poor in writing and reading. Achievements in mathematics required improvement. In-year data suggested a slight improvement, but college managers acknowledged that they were likely to remain too low overall.
- 3.36** Prisoners developed a range of vocational skills, especially in carpentry, horticulture and bicycle repair and maintenance. Many also developed useful self-employment skills, such as how to estimate labour and materials costs for basic painting and decorating jobs.
- 3.37** There were good opportunities for prisoners to develop occupational skills in the wide range of prison training workshops. Teachers and trainers helped to develop learners' English and mathematics skills but this was not always done well.

- 3.38** There were no significant differences in performance between different groups of learners. Current learners on college courses were making the appropriate progress, although too many withdrew before they had completed their studies, especially in English and mathematics. Learners produced work of a standard consistent with the level of programme they were studying.
- 3.39** Prisoners in prison employment developed valuable transferability skills but these were not recorded or acknowledged to improve their personal development and enhance resettlement opportunities.

Recommendations

- 3.40** **Prison and college managers should continue to develop strategies to help prisoners achieve better outcomes in English and mathematics, and to reinforce these essential skills during learning sessions.**
- 3.41** **Prison staff should record the development and acquisition of transferable skills by prisoners working in prison industries to ensure they have a useful record of the skills they have gained.**

Library

- 3.42** Wiltshire County Council provided the well-run library service. Two part-time librarians managed the library, supported by four prison orderlies. The library was well resourced and had a range of books, audio resources, periodicals and newspapers. It provided a conducive learning environment, including a dedicated space for independent and group study. A spacious computer study room was a potentially useful resource but the computers were not linked to a network, which limited their usefulness.
- 3.43** Prisoners received an induction to the library in their first week. Almost all prisoners were registered to use the library, and about three-quarters regularly took part in their twice-weekly scheduled visits. In our survey, 63% of prisoners said they had at least weekly access to the library, which was better than the comparator of 41%. There was no library provision on the wings. Library staff provided an appropriate inter-loan library service that was reasonably well used.
- 3.44** Library staff offered a range of initiatives to promote reading, such as the 'reading book challenge', Storybook Dads (enabling prisoners to record a story for their children) and a monthly book club. The library orderlies helped to run the library effectively and supported prisoners to find books or other reading material.
- 3.45** Data analysis by library staff was not sufficiently detailed to enable them to target prisoners not attending, and they did not know if particular groups, such as prisoners from a minority ethnic background or older prisoners, used the library as often as their peers

Recommendation

- 3.46** **Library staff should collect data on library use so that they can identify and address any low participation from particular groups of prisoners.**

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.

- 3.47** A team of four physical education officers with a range of specialist sport qualifications and experience managed the gymnasium and sports facility. They were well supported by a small team of orderlies, some of whom had completed appropriate gym instructor qualifications. At the time of inspection, the gym was understaffed due to the secondment elsewhere of one PE officer. Despite our previous recommendation, gym staff were still deployed at short notice to other duties, although less frequently. As a consequence of staff shortages, the gym had ceased to deliver any accredited qualifications in health or sport and fitness
- 3.48** All prisoners had a mandatory induction to the sports facilities, which included a detailed assessment of their health and fitness level and provided information on healthy living, fitness and well-being. Prisoners could use the gym facilities at least once a week. Gym staff worked effectively with the prison's health care team to offer specific activities for older men and those recovering from injuries.
- 3.49** Gym sessions were well attended and valued by prisoners. However, the regime enabled too many prisoners to leave their purposeful activity session to visit the gym, and it was not clear why prison managers allowed this to happen so frequently (see main recommendation S41). Data analysis by gym staff lacked sufficient detail to identify how many prisoners visited it regularly or the participation by particular groups, such as men from minority ethnic groups or older prisoners, in health and fitness activities.
- 3.50** The PE facilities and equipment were in good condition and comprised a sports hall, cardiovascular equipment and weights room. However, there was no outdoor activity provision. The changing areas were clean and appropriately maintained, but the communal showers had no privacy screens.

Recommendations

- 3.51 Physical education staff should not be redeployed to other regime activities.**
(Repeated recommendation 3.32)
- 3.52 Prisoners should have an opportunity to study and achieve sports and health and fitness qualifications.**
- 3.53 Gym staff should monitor participation in PE by different groups of prisoners to ensure equity of access.**
- 3.54 Privacy screens should be fitted in communal PE showers.**

Section 4. Resettlement

Strategic management of resettlement

Expected outcomes:

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

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

Good planning ensures a seamless transition into the community.

- 4.1 The prison's policies on reducing reoffending, offender management and public protection were out of date. The offender needs analysis, dating from 2015, was based on a response to a survey from only approximately 20% of prisoners, and it did not differentiate between the needs of long-term and shorter-term prisoners.
- 4.2 The reducing reoffending meeting covered all aspects of offender management and resettlement. The head of the offender management unit (OMU) and the head of resettlement had both been appointed recently and were beginning to identify current strengths and weaknesses in resettlement work, and implement actions to ensure that core resettlement work was undertaken.
- 4.3 The OMU had been understaffed for some time. Some new probation officers were in post, but the continued cross-deployment of uniformed offender supervisors had affected the team's ability to carry out assessments and reviews.
- 4.4 As the prison had a designated national role to provide offending behaviour programmes, it was not resourced to provide resettlement support and services. However, when two units were reopened, prisoners serving short-term sentences were placed at Erlestoke despite this being outside of the prison's remit. As a result the prison had struggled to meet the needs of this group of prisoners and we were not assured that all men who had been released were released in the safest way, or with the support they needed to live law-abiding lives. We spoke to men due to be released who were very anxious about what would happen. We remained concerned that prisoners continued to arrive without an up-to-date OASys (offender assessment system) assessment (see paragraph 4.9).

Recommendations

- 4.5 **There should be a detailed analysis of all prisoners' needs based on risk, and sufficient offender management and resettlement provision to meet identified needs.**
- 4.6 **Prisoners should not be transferred to Erlestoke without an initial or up-to-date offender assessment system (OASys) assessment and sentence plan.**

Offender management and planning

Expected outcomes:

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

- 4.7** Over 80% prisoners were serving over four years and therefore subject to offender management. Around two-thirds of all cases were assessed as high or very high risk of harm and were the responsibility of the community offender manager, with the remaining low or medium risk of harm cases the responsibility of the prison. Where new arrivals had no risk classification, it was difficult for the prison to identify who was responsible for the assessment, as it did not have access to the Delius community probation information system.
- 4.8** The OMU consisted of 2.8 probation and seven uniformed offender supervisors, which was slightly short of the 10 offender supervisors it should have had. There were also shortages of case administrators. Offender management work had been significantly undermined by the extensive redeployment of uniformed offender supervisors, and managers were often left with little time to carry out critical tasks. The head of OMU was currently reviewing the allocation of cases across the staff team.
- 4.9** There was a backlog of OASys assessments. The full extent of this was unknown, as monitoring had stopped some months previously. Our analysis of the 49 new arrivals in June 2017 showed that 20 had no risk classification and 24 had no OASys assessment. The lack of up-to-date assessments affected the ability of prisoners to progress through recategorisation, home detention curfew (HDC) release, and release on temporary licence (ROTL).
- 4.10** During the inspection, we considered 17 cases in detail and a further 10 in less detail, including six prisoners due to be released in the following fortnight. We found that some risk levels were underestimated. There were gaps in the arrangements for risk management. Only five of the 17 cases we looked at in detail had a sufficient risk management plan, only three were sufficiently oriented to the custodial part of the sentence, and just four identified actions required during the community supervision portion. In half the cases we reviewed that were managed by offender managers, and all but one of those managed by offender supervisors, we assessed the quality of OASys assessment as insufficient. In many cases, information was simply copied from previous assessments or sections were left blank.
- 4.11** In our survey, fewer prisoners than at the last inspection said they had a sentence plan, and of those who had one, fewer than the comparator said that they were involved in its development. The sentence plans we looked at were often vague or too general, and many targets were set routinely rather than addressing specific individual need. Too few sentence plans were outcome-focused and/or included timescales. Although offending behaviour programmes, where required, were usually included in plans, some offender supervisors told us that if a required programme was not available in the prison they would not include it in the prisoner's plan.
- 4.12** Too few prisoners had regular and frequent contact with their offender supervisors, and the target of at least quarterly contact was rare. Contact was usually made ahead of parole and recategorisation boards. Prisoners told us that when offender supervisors were redeployed elsewhere they were then often too busy to deal with offender manager tasks. In our survey, more prisoners than at the last inspection, 43% against 23%, said that nobody was working with them to achieve their sentence plan targets.

- 4.13** When there was contact between prisoners and offender supervisors and managers, records were full and informative, and some work we saw was good. Two of the probation officers were establishing good community links and beginning to influence the work of uniformed offender supervisors.
- 4.14** Offender supervisors had not received regular supervision, and as a result the quality of work was variable; the new head of OMU was beginning to address this through quality assurance of the work. Suitable training, including in multi-agency public protection arrangements (MAPPAs) and risk assessment, had been arranged. Although there was no formal OMU performance improvement plan, there was focus on developing systems and processes to ensure core work was completed. Minutes of the reducing reoffending meetings provided evidence of an improving staff understanding of issues, and subsequent initial planning to resolve difficulties.
- 4.15** The prison was not using ROTL to progress resettlement. There had been three applications for HDC in the previous six months, with two being approved.

Recommendation

- 4.16 All offender supervisors should have effective and regular contact with their prisoners on their caseload, focused on supporting them to meet sentence planning targets and reduce the risk of harm and reoffending, and this work should be subject to quality assurance.**

Public protection

- 4.17** A new public protection policy had just been launched. Prisoners who posed the highest risk were well managed, but some other areas of public protection were not effective.
- 4.18** Offender supervisors were responsible for initial screening of cases for key risk information, although there were delays in this when they were redeployed (see paragraph 4.8). Some offender supervisors were not familiar enough with MAPPAs to screen eligible offences. We examined a selection of cases of prisoners who arrived in June 2017, and found that some critical risk assessment information had not been checked or shared. For example, in one case, although the police had requested no contact between a prisoner and a named person, this person was still listed as his emergency contact - nobody knew the circumstances of the police request and could not judge the suitability of the contact arrangements.
- 4.19** At the time of the inspection, the prison held one MAPPAs level three (highest risk) case, 52 level 2 and 286 level one cases. For the level two and three cases, there had been effective contribution from the OMU to MAPPAs. In these cases, the prisoner's MAPPAs level had been confirmed before their release. In level one cases, levels had not always been determined before release.
- 4.20** The interdepartmental risk management team (IRMT) monthly meetings were well attended and covered a range of relevant issues. Cases reviewed included those managed through IRMT, mail and telephone monitoring, harassment and child contact restriction cases. The meeting also discussed MAPPAs prisoners due for release. The minutes for the May 2017 meeting indicated that three cases managed by the IRMT could not be reviewed as there was no report from the offender supervisor. Also, important actions related to child contact cases had not been followed up. This had occurred in all the three IRMT meetings for which we saw full minutes. However, the IRMT was due to review these cases to check that arrangements were appropriate and effective.

Recommendations

- 4.21 All MAPPA eligible prisoners should have their MAPPA management level set before release.**
- 4.22 Assessment of risks by all departments should be comprehensive and inform other assessments.**
- 4.23 Arrangements to identify and protect children and victims of harassment should be effective and clear, including information held by both the offender management unit and security department.**

Categorisation

- 4.24** The prison held 30 category D prisoners. There were some difficulties in transferring prisoners once they had been recategorised from C to D, including finding suitable places and transport. Arrangements for reviewing prisoners for category D conditions were timely but too many prisoners missed their opportunity to progress because there was no up-to-date OASys assessment. We also identified difficulties for some men who had completed offending behaviour assessments and courses but who could not then return to their previous prison. This resulted in frustration for individual prisoners and disruption of family ties.

Recommendation

- 4.25 Prisoners should be transferred to suitable establishments once they are recategorised or on completion of offending behaviour work.**

Indeterminate sentence prisoners

- 4.26** There were 159 indeterminate and life sentence prisoners, just over 30% of the population. Almost half of these, 70, were on indeterminate sentence, with 62 over tariff, ranging from two months to 10 years. Although there was some data on these prisoners this had not informed a specific part of the overall resettlement strategy and there was little information or provision specifically for them. The prison had recognised that it was difficult for these men to demonstrate any progression, and there were some very early plans to develop a progression unit.

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.

4.27 Although not a resettlement prison, around 10 prisoners a month were released into the community, including those who posed a high risk of harm to others. There was a limited resettlement service for those who were due to be released. There was some effective joint work by offender supervisors with offender managers before release, but in some cases work started too late, which left some prisoners ill equipped to settle into the community.

Recommendation

4.28 All prisoners should have their resettlement needs assessed at least 12 weeks before release, and any outstanding issues should be addressed.

Accommodation

4.29 As the prison had not been designated as a resettlement prison, there was no specialist on-site accommodation support. However, prisoners were released from Erlestoke back to the community. In our survey, only 18% of respondents said that they knew anyone in the prison who could help them with accommodation, against 42% at the last inspection and the comparator of 35%.

4.30 Prisoners who posed the highest risk were released to approved premises, and this was arranged between the offender supervisors and offender managers. Notification of the exact release address was sometimes provided close to the release date, due to demand for approved premises accommodation in the community.

4.31 The prison could access some resettlement advice from Bristol, Gloucestershire, Somerset and Wiltshire community rehabilitation company (CRC),⁸ and offender supervisors could make referrals for the resettlement worker based at Guys Marsh prison to see prisoners before their release. However, few men were aware of this service, which was not publicised on residential units, and two prisoners were released during our inspection with no accommodation arranged.

Recommendation

4.32 Offender supervisors should ensure that relevant prisoners are able to contact the community rehabilitation company worker early enough to help them find accommodation on release.

⁸ 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.

Education, training and employment

- 4.33** The quality of the National Careers Service provided by Adviza required improvement. It did not adequately reflect the prison's change in designation from a resettlement establishment to one focused on prisoner rehabilitation. The careers advisers focused narrowly on short-term goals and gave insufficient attention to prisoners' long-term career aspirations or how they might plan their learning and skills to achieve their goals.
- 4.34** Adviza staff helped prisoners to research work opportunities within the prison and outside, as well as write appropriate CV disclosure letters and search and apply for jobs. The staff provided effective support for the very few prisoners released each month to identify employment and training opportunities in the area where they were likely to be released. They also used their links with external resettlement agencies to help prisoners after their release. Prisoners could attend a pre-release interview, although very few took this up.
- 4.35** The 'virtual campus' – giving prisoners internet access to community education, training and employment opportunities – was faulty and so it was not used for job search or to support learning. The prison had limited links with external employers. There was no accurate data on whether any of the few prisoners released went into education, training or employment.

Recommendations

- 4.36** **The prison should work with the National Careers Service to ensure there is a clear focus on supporting prisoners to develop meaningful career aspirations that connect to their learning and skills and long-term rehabilitation programme.**
- 4.37** **The technical difficulties with the virtual campus should be resolved promptly to enable prisoners to use this resource for job search and to support learning.**
- 4.38** **The education, training and employment destinations of prisoners released into the community should be analysed to assess the effectiveness of careers advice and guidance.**

Health care

- 4.39** The health care department was developing a structured pre-release process for the few prisoners released into the community. There were links with community mental health teams for prisoners subject to the care programme approach.

Recommendation

- 4.40** **All prisoners due for release should be offered a structured pre-release health appointment giving relevant advice and information on local community services.**

Drugs and alcohol

- 4.41** Workers from the Inspire Better Health psychosocial case management team worked with the few prisoners due for release to devise resettlement plans, including arranging post-release support from community drug and alcohol services. Release plans were shared with the OMU. The team had good links with local drug intervention programmes, but none came

into the prison to see prisoners before their release date. In addition to individual plans, the team gave all prisoners being released excellent packs with a wide range of useful information on avoiding problems associated with drugs and alcohol.

Finance, benefit and debt

- 4.42** There were some limited services for prisoners with finance, benefit and debt problems, and Citizens Advice could be contacted via the education department. The use of this service was not effectively monitored. A money management course was offered by the education provider, prisoners could open bank accounts, and advice from Jobcentre Plus was available.

Children, families and contact with the outside world

- 4.43** Throughout the inspection, prisoners raised the issue of poor access to visits as their main concern. In our survey they were more negative about being supported to maintain contact with family and friends than at the previous inspection.
- 4.44** There were only four visit sessions available each week, which was inadequate. The visits hall could accommodate only 27 visits at each session, which had to be shared between over 500 men. There was insufficient visits capacity for each prisoner to have even one visit a month. Over half the population were on the enhanced level, and should have been eligible to have up to four visits a month, which they could not achieve in the existing provision. The strain on the inadequate visits arrangements was immense, and was a major frustration for prisoners and their families. (See main recommendation S42.)
- 4.45** A consequence of the limited capacity was that prisoners and their families booked visits as soon as the slots became available 28 days before the date of the visit. Unsurprisingly, some prisoners and visitors booked more slots than they needed to ensure they got a visit, and then failed to cancel visits they did not need. Prisoners and visits staff were frustrated that some sessions had empty tables that could have been used by other visitors if cancelled in good time. Prison managers were aware of the problems and had started to address them. This included adding two extra visits sessions on Sundays, revising the booking arrangements to give greater equity, and not allowing prisoners to reuse a visits booking if they had not used a session without good reason. The prison had obtained funding for some replacement visits furniture that would provide a few extra visits on each session. However, these measures would not fully resolve the problem and more needed to be done to provide adequate access to all prisoners. (See main recommendation S42.)
- 4.46** Visitors checked in for their visit at a pleasant visits centre staffed jointly by the prison and Barnardo's, which was open before and after visits. The centre included a supervised play area, hot and cold drinks, toilets and information about the prison and support available to families. Volunteers from the Friends of Erlestoke Prison (a local charity supporting prisoners with their resettlement and rehabilitation and keeping in touch with their families) provided bookable transport to and from the prison from Devizes and Westbury stations. The Friends had also recently arranged the refurbishment of a large portakabin just outside the prison gate for visitors to wait in before going into the prison for their visit. A new building to replace the existing inadequate search area was due to be installed.
- 4.47** The visits area itself was well furnished and benefited from a play area staffed by Barnardo's and a snack bar. Prisoners wore their own clothes with a yellow sash for identification, staff supervision was unobtrusive and the atmosphere was relaxed on the visit session we observed. Prisoners were positive about their experience of visits when they had one, although some reported delays in start times. Closed visits facilities were adequate. Two

prisoners and one visitor were on closed visits for security concerns related to trafficking and visits.

- 4.48** The prison received good support from Barnardo's for its family work. A new six-week course on supporting parenting and maintaining relationships was due to start the week after our visit. One-to-one support for prisoners with family or domestic issues was available, and Barnardo's organised up to seven family days a year for prisoners who were fathers. These included a workshop ahead of the visit to support prisoners to interact and play with their children during the visit. The Storybook Dads recording project was available through the library (see paragraph 3.44), and now included the option for prisoners to record a story on to DVD, which enhanced contact with their children. The chaplaincy coordinated a prison visitor scheme for men who did not have anyone to visit them.

Good practice

- 4.49** *The local charity scheme providing transport for visitors to and from the prison helped maintain important family ties.*
- 4.50** *The option for prisoners to record stories for their children on DVD enabled them to maintain their relationship with their family and be a visible presence in their children's lives.*

Attitudes, thinking and behaviour

- 4.51** In our survey, more prisoners than the comparator said that it was easy to access offending behaviour programmes and that they were currently taking part in one. Almost two-thirds of prisoners who had participated in a programme (63%) thought it would help them on release, which was better than the comparator of 48%. The prison did not have any internal measures to track change in prisoners who completed programmes, other than the post-programme review to determine how the prisoner would progress in his sentence.
- 4.52** The range of accredited programmes had been extended since the previous inspection, and prisoners continued to be transferred to Erlestoke to undertake specific offending behaviour programmes. Selection was based appropriately on key dates in a prisoner's sentence, including tariff dates for prisoners with indeterminate sentences. Allocation to programmes was not sequenced effectively with the allocation of prisoners to other activities (see paragraph 3.17 and recommendation 3.19).
- 4.53** The prison was contracted to deliver a specific number of programmes a year, with some flexibility to vary the number on each programme in the light of prisoner need. Just over 150 prisoners were due to commence a programme in the current year. Programmes available included thinking skills (TSP), alcohol-related violence (ARV), Resolve (a violence management course), the self-change programme (SCP), which addressed violence management for higher risk prisoners, and the healthy relationships programme (HRP) and building better relationships programme (BBR), which addressed violence in relationships. It was a concern that the 12-step high intensity recovery programme, which addressed substance misuse, had been suspended (see paragraph 1.55 and recommendation 1.56).
- 4.54** Prisoners on offending behaviour programme no longer had to live together on one unit. Programme 'graduates' acted as prisoner mentors for subsequent groups. Links between programme facilitators and residential units required strengthening to ensure that learning was consistently reinforced, and that other staff working with prisoners understood the aims of the programmes and supported participants to achieve these.

Recommendation

- 4.55 All staff should be aware of the aims of the programmes offered, and reinforce and consolidate learning from programmes with the individual prisoners with whom they work.**

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** New prisoners should be inducted in a safe and calm environment with a positive focus on progression and rehabilitation. All new arrivals should have a first night risk assessment by staff in private. Cell sharing risk assessments should assess the prisoner's current level of risk. The induction unit should be reserved for new prisoners. Staff should oversee the induction programme. (S38)
- 5.2** The prison should give strategic and operational priority to addressing the serious problems caused by illicit substances at Erlestoke. (S39)
- 5.3** All prison departments should demonstrate a commitment to the work of the equality action team, and there should be regular analysis of outcomes for prisoners from all backgrounds and an equality strategy and action plan to address disadvantage and provide appropriate support. (S40)
- 5.4** Attendance at learning, skills and work activities should be given greater priority. The prison should ensure that prisoners arrive punctually at their allocated activities. Allocation to programmes and appointments should be better sequenced to avoid disrupting activities. (S41)
- 5.5** The prison should provide more visits sessions as soon as possible, and ensure the visits booking system allows all prisoners to have equitable access to the sessions available. (S42)

Recommendations

To HMPPS

- 5.6** Prisoners should not be transferred to Erlestoke without an initial or up-to-date offender assessment system (OASys) assessment and sentence plan. (4.6)
- 5.7** Prisoners should be transferred to suitable establishments once they are recategorised or on completion of offending behaviour work. (4.25)

Recommendation

To Prisoner Escort and Custody Services

- 5.8** Prisoners' property should arrive with them when they are transferred into the prison. (1.4)

Recommendations

To the governor

Courts, escort and transfers

- 5.9** Reception should be open to receive and process prisoners over the lunch period. (1.3)

Bullying and violence reduction

- 5.10** The prison should investigate all incidents of bullying and violence, and routinely challenge perpetrators and provide support to victims. (1.17)
- 5.11** The prison should maintain an accurate log of all incidents of bullying and violence. (1.18)
- 5.12** Prisoners should be consulted about their experience of bullying and violence, and the prison should take action to address their responses. (1.19)

Self-harm and suicide

- 5.13** The prison should explore the reasons for the large proportion of assessment, care in custody and teamwork (ACCT) documents that are opened and closed after the initial review, and take action to ensure that they are not opened unless justified. (1.26)
- 5.14** Officers should ensure that prisoners are conscious and responsive when they are unlocking them. (1.27)
- 5.15** All incidents of serious self-harm should be investigated to identify any lessons to be learned for the management of prisoners, and these should be shared to improve practice. (1.28)

Safeguarding

- 5.16** The safeguarding policy should be fully implemented as soon as possible. (1.30, repeated recommendation 1.32)

Incentives and earned privileges

- 5.17** The incentives and earned privileges scheme should be used consistently to address poor prisoner behaviour. (1.38)

Discipline

- 5.18** Adjudications should be subject to quality assurance, and trends analysed to understand and improve prisoner behaviour. (1.41)
- 5.19** Oversight of use of force should ensure that all use of force reports are completed and that planned incidents are recorded and reviewed. Managers should monitor patterns and trends to address any disproportionality. (1.44)
- 5.20** The regime on the segregation unit should be extended to facilitate an hour of outside exercise a day. (1.49)
- 5.21** Oversight of the segregation unit should address the poor accommodation, and focus on successfully reintegrating prisoners back to normal location at Erlestoke. (1.50)

Substance misuse

- 5.22** The high-intensity substance misuse recovery programme should be reintroduced in an appropriate location to ensure that only prisoners who are positive about recovery are placed on the unit. (1.56)

Residential units

- 5.23** Communal areas and cells on residential units should be clean and maintained in a good state of repair. (2.11)
- 5.24** All prisoners should have access to basic items, such as clean bedding, clothes and cleaning materials. (2.12)
- 5.25** Staff should answer cell calls promptly, and response times should be monitored appropriately. (2.13)
- 5.26** All telephones for prisoners should enable calls to be made in private. (2.14)
- 5.27** All returned prisoner applications should be monitored and tracked on all residential areas. (2.15)

Staff-prisoner relationships

- 5.28** Staff should be supported to challenge poor prisoner behaviour. (2.21)
- 5.29** Peer supporters and orderlies should be subject to appropriate supervision, support and governance. (2.22)
- 5.30** Prisoner consultation should represent the whole prison, and provide a regular forum for prisoners' issues and suggestions for improvement to be raised and addressed. (2.23)

Equality and diversity

- 5.31** The prison should assess the individual needs of foreign national prisoners on their arrival and provide appropriate support so they can understand and participate in the prison regime. (2.33)
- 5.32** All residential units should have care plans for prisoners with disabilities that specify support to assist their daily living needs and access to the regime. (2.34)
- 5.33** The prison should consult with gay and bisexual prisoners to develop appropriate support, including promotion and access to community groups. (2.35)
- 5.34** The prison should develop a local policy for meeting the needs of transgender prisoners. (2.36)

Complaints

- 5.35** Complaint forms should be readily available to all prisoners, and the prison should monitor the timeliness of final responses. (2.43)

Legal rights

- 5.36** Legal visits should be easy to book and take place in private. (2.46, repeated recommendation 2.62)

Health services

- 5.37** The health care waiting area should provide a safe environment for both patients and staff. (2.58)
- 5.38** Suction equipment should be part of the emergency equipment, in line with national guidance for resuscitation equipment in a primary care setting. (2.59)
- 5.39** A dedicated suitable room in reception should be available for health care screening of newly arrived prisoners. (2.66, repeated recommendation 2.78)
- 5.40** Non-urgent external hospital appointments should not be repeatedly rescheduled. (2.67)
- 5.41** Risk assessments of patients going to external appointments should be proportionate and reflect the real assessed risk of escape and/or violence, and should not compromise confidentiality and/or patient dignity. (2.68)
- 5.42** There should be a wider range of clinical interventions, such as psychology and occupational therapy, to support prisoners with complex behavioural and resettlement challenges. (2.83)
- 5.43** Mental health awareness training should be available to all prison staff. (2.84, repeated recommendation 2.101)
- 5.44** The prison should develop a memorandum of understanding with the local authority for social care assessments and social care provision. (2.86)

Catering

- 5.45** All meals should be served at appropriate times. (2.91)
- 5.46** The prison should ensure that there is better supervision of the serving of meals, and that all those involved in the preparation and serving of food wear the appropriate protective clothing. (2.92)

Purchases

- 5.47** Prisoners should be able to place their first shop order on the day after arrival. (2.97, repeated recommendation 2.115)
- 5.48** Prisoners should not be charged an administration fee on catalogue orders. (2.98)

Learning and skills and work activities

- 5.49** Prison and college managers should carry out a comprehensive curriculum needs analysis to ensure that the activities offered fully contribute to the prison's core purpose of rehabilitating prisoners. (3.13)

- 5.50** The allocation of prisoners to purposeful activity and to offending behaviour programmes should be coordinated to ensure they receive a coherent and structured programme that minimises disruption and meets their needs. (3.19)
- 5.51** Tutors and instructors should provide sufficient information to prisoners about their work to help them understand what they have done well and how they can make further improvement. (3.29)
- 5.52** Prisoners should have greater opportunities to participate in meaningful and challenging prison work that enhances their prospects of gaining useful employability skills. (3.30)
- 5.53** Prison and college managers should continue to develop strategies to help prisoners achieve better outcomes in English and mathematics, and to reinforce these essential skills during learning sessions. (3.40)
- 5.54** Prison staff should record the development and acquisition of transferable skills by prisoners working in prison industries to ensure they have a useful record of the skills they have gained. (3.41)
- 5.55** Library staff should collect data on library use so that they can identify and address any low participation from particular groups of prisoners. (3.46)

Physical education and healthy living

- 5.56** Physical education staff should not be redeployed to other regime activities. (3.51, repeated recommendation 3.32)
- 5.57** Prisoners should have an opportunity to study and achieve sports and health and fitness qualifications. (3.52)
- 5.58** Gym staff should monitor participation in PE by different groups of prisoners to ensure equity of access. (3.53)
- 5.59** Privacy screens should be fitted in communal PE showers. (3.54)

Strategic management of resettlement

- 5.60** There should be a detailed analysis of all prisoners' needs based on risk, and sufficient offender management and resettlement provision to meet identified needs. (4.5)

Offender management and planning

- 5.61** All offender supervisors should have effective and regular contact with their prisoners on their caseload, focused on supporting them to meet sentence planning targets and reduce the risk of harm and reoffending, and this work should be subject to quality assurance. (4.16)
- 5.62** All MAPPA eligible prisoners should have their MAPPA management level set before release. (4.21)
- 5.63** Assessment of risks by all departments should be comprehensive and inform other assessments. (4.22)

- 5.64** Arrangements to identify and protect children and victims of harassment should be effective and clear, including information held by both the offender management unit and security department. (4.23)

Reintegration planning

- 5.65** All prisoners should have their resettlement needs assessed at least 12 weeks before release, and any outstanding issues should be addressed. (4.28)
- 5.66** Offender supervisors should ensure that relevant prisoners are able to contact the community rehabilitation company worker early enough to help them find accommodation on release. (4.32)
- 5.67** The prison should work with the National Careers Service to ensure there is a clear focus on supporting prisoners to develop meaningful career aspirations that connect to their learning and skills and long-term rehabilitation programme. (4.36)
- 5.68** The technical difficulties with the virtual campus should be resolved promptly to enable prisoners to use this resource for job search and to support learning. (4.37)
- 5.69** The education, training and employment destinations of prisoners released into the community should be analysed to assess the effectiveness of careers advice and guidance. (4.38)
- 5.70** All prisoners due for release should be offered a structured pre-release health appointment giving relevant advice and information on local community services. (4.40)
- 5.71** All staff should be aware of the aims of the programmes offered, and reinforce and consolidate learning from programmes with the individual prisoners with whom they work. (4.55)

Examples of good practice

- 5.72** Two health care assistants made twice-daily visits to prisoners who self-isolated and/or were on at-risk case management and those living with dementia, which provided excellent support and monitoring of vulnerable patients. (2.69)
- 5.73** The option for prisoners to give feedback on their weekly food orders was a simple and effective way of addressing any issues and allowed all prisoners to raise concerns. (2.93)
- 5.74** The local charity scheme providing transport for visitors to and from the prison helped maintain important family ties. (4.49)
- 5.75** The option for prisoners to record stories for their children on DVD enabled them to maintain their relationship with their family and be a visible presence in their children's lives. (4.50)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Deborah Butler	Team leader
Ian Dickens	Inspector
Jeanette Hall	Inspector
Angela Johnson	Inspector
Angus Mulready-Jones	Inspector
Yvonne McGuckian	Inspector
Andy Rooke	Inspector
Helen Ranns	Researcher
Emma Seymour	Researcher
Sophie Skinner	Researcher
Patricia Taflan	Researcher
Paul Roberts	Substance misuse inspector
Nicola Rabjohns	Health services inspector
Gary Turney	Care Quality Commission inspector
Dayni Johnson	Care Quality Commission inspector (shadowing)
Chris Dearnley	Ofsted inspector
Darryl Jones	Ofsted inspector
Jai Sharda	Ofsted inspector
Martyn Griffiths	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, there were weaknesses in reception and induction processes. There was little violence and most prisoners reported feeling safe. Violence reduction work was good. People at risk of self-harm were well cared for. Security was well managed and effective. There was a rigorous approach to drug use though prisoners reported high availability of drugs. The incentives and earned privileges scheme worked reasonably well. Adjudications were conducted fairly. There was little use of force but governance was weak. Segregation was not used excessively but the environment was inadequate and reintegration planning was underdeveloped. Substance use services were generally good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

All prisoners should have a first night risk assessment carried out in private by staff. Cell sharing risk assessments should include a conversation with the prisoner to discuss the current level of risk posed. (S42)

Not achieved

Recommendations

Reception orderlies should not have access to other prisoners' property or be required to gather confidential information. (1.12)

Not achieved

Staff should understand the induction process and provide sufficient and effective oversight of induction orderlies. (1.13)

Not achieved

Induction should start on the next working day after arrival and prisoners should be allocated quickly to work. (1.14)

Not achieved

Managers should investigate why prisoners, especially older prisoner and those with disabilities, report being victimised, using means such as a prisoner safety survey. (1.22)

Not achieved

The safeguarding policy should be fully implemented as soon as possible. (1.32)

Not achieved (recommendation repeated, 1.30)

Strip-searching should be intelligence-led (1.47)

Achieved

The mandatory drug testing suite should have adequate waiting and holding facilities. (1.48)

Achieved

Data related to the use of force, such as ethnicity, location, reasons for use and the staff involved, should be monitored for emerging patterns and trends, and appropriate action taken to address identified issues. (1.67)

Achieved

All segregation unit cells should be clean and properly furnished, and conditions in the exercise yard should be improved. (1.75)

Not achieved

There should be a clear strategy for the management of the segregation unit, overseen by an active management group which monitors the use of segregation and has links with other relevant areas of the prison. (1.76)

Not achieved

Prisoners should have a purposeful daily regime while in the segregation unit. (1.77)

Not achieved

Planning to return segregated prisoners to normal location should be developed. (1.78)

Not achieved

The substance dependency treatment programme should be relocated to a self-contained and dedicated drug recovery unit. (1.84)

Not achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, the residential units were generally clean but the standard of repair was variable and some were in poor condition. Staff–prisoner relationships were good. The strategic management of diversity was weak and there were some gaps in provision, but outcomes were reasonable for most. Faith provision was good. Complaints were well managed and legal services were adequate. Health services were good. Prisoners were critical of the food, and there were no opportunities for dining in association. Prisoners were negative about the range of goods available in the prison shop. Outcomes for prisoners were reasonably good against this healthy prison test.

Recommendations

Residential units should be maintained in a good state of repair. (2.10)

Not achieved (recommendation repeated, 2.11)

All communal shower areas should be clean, well ventilated and provide a decent level of privacy. (2.11)

Not achieved

Prisoners should have access to lockable cabinets for valuable items and medication. (2.12)

Not achieved

Prisoners should have weekly access to laundry facilities. (2.13)

Achieved

The telephones on Sarum unit should be relocated, to afford a reasonable level of privacy. (2.14)

Not achieved

The equality management team should be actively engaged in the strategic oversight of diversity, and information on protected characteristics should be reviewed at equality management team meetings. (2.29)

Not achieved

There should be regular forums for prisoners with protected characteristics. (2.30)

Not achieved

Staff should receive training in all aspects of diversity. (2.31)

Not achieved

The negative perceptions of specific groups, including prisoners from black and minority ethnic and Gypsy/Roma/Traveller backgrounds and those with disabilities, should be explored and addressed by the prison. (2.42)

Not achieved

Information about levels and types of disability should be centrally collated and reviewed by the equality management team. (2.43)

Not achieved

Legal visits should be easy to book and take place in private. (2.62)

Not achieved (recommendation repeated, 2.46)

The pharmacist should conduct medication use reviews, provide one-to-one counselling and oversee the supply of medicines. (2.73)

Achieved

Prisoners should have wider access to health care information and health promotion material, and this should also be available in a range of languages. (2.74)

Achieved

A dedicated room in reception should be available for the primary health care screening of prisoners. (2.78)

Not achieved (recommendation repeated, 2.66)

Outside hospital appointments should not be cancelled for non-medical reasons. (2.79)

Not achieved

There should be a 'special sick' policy pertinent to the prison population which allows the legal provision of medicines to all prisoners in a safe and appropriate manner. (2.84)

Achieved

A prescribing formulary should be introduced. (2.85)

Achieved

There should be a dedicated medicines and therapeutics committee for the prison which is attended by representatives from the health care centre, the pharmacy provider and the substance misuse unit, and all procedures adopted by the prison should be ratified by this committee. (2.86)

Achieved

The in-possession policy should be reviewed after consultation with the ‘Safer Prescribing in Prisons’ document, and the amount of tradeable medicines prescribed in the prison should be reduced. (2.87)
Achieved

Legally compliant controlled drugs registers, recording all supplies received by the prison, should be used and the controlled drugs cabinets should be secured according to the regulations. (2.88)
Achieved

Mental health awareness training should be available to all prison staff. (2.101)
Not achieved (recommendation repeated, 2.84)

Prisoners should be able to dine together out of their cells. (2.108)
Achieved

Prisoners should be offered a varied menu which includes sufficient fruit and vegetables, and portion sizes should be adequate. (2.109)
Achieved

Prisoner consultation about food should be meaningful and take place consistently. (2.110)
Achieved

Prisoners should be able to place their first shop order on the day after arrival. (2.115)
Not achieved (recommendation repeated, 2.97)

Purposeful activity

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

At the last inspection, in 2013, the amount of time out of cell was good and association and exercise took place as advertised. The leadership and management of activities were reasonably good and focused on employability. There was some good vocational training and most prisoners could obtain relevant qualifications. Education provision was inconsistent and required significant improvement. The quality of teaching was variable. The library and PE provision were both generally good. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

The Offender Learning and Skills Service (OLASS) provider should ensure that teaching sessions are delivered as scheduled and that provision of English and mathematics teaching is substantially increased and integrated into all aspects of education and work. (S43)
Partially achieved

Recommendations

There should be enough purposeful activity to occupy prisoners fully. (3.15)
Partially achieved

Prisoners’ National Vocational Qualifications in catering should be assessed and verified before they leave the prison. (3.16)
No longer relevant

The prison should make more effective use of individual learning plans that clearly state individual personal, educational and training needs, and systematically monitor progress and achievements. (3.20)

Partially achieved

The quality of teaching and learning should be improved. (3.21)

Achieved

The ventilation in some of the fitness areas on the units should be improved. (3.31)

No longer relevant

PE staff should not be deployed to other regime activities. (3.32)

Not achieved (recommendation repeated, 3.51)

Resettlement

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

At the last inspection, in 2013, the strategic management of resettlement was good. The offender management unit appropriately prioritised work but needed more dedicated resource. Offender management was not yet sufficiently central to the work of the prison, although most prisoners were positive about resettlement provision. Too many indeterminate-sentenced prisoners (ISPs) did not progress through the system in a timely fashion. Public protection work was generally good. There was some effective resettlement pathway support. Work with families was good. An upgrade to the uncomfortable visits area was planned. There was good provision of accredited offending behaviour programmes but ISPs generally could not access them until they were past tariff. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

There should be sufficient places on appropriate programmes to ensure that indeterminate-sentenced prisoners can complete all required interventions before their tariff date. (S44)

Partially achieved

Recommendations

Offender assessment system (OASys) information about offending and risk should be incorporated into the resettlement needs analysis. (4.6)

Not achieved

Monitoring of resettlement outcomes should be developed further. (4.7)

Not achieved

Release on temporary licence opportunities should be extended to suitable category C prisoners. (4.8)

Not achieved

Every prisoner should be contacted by his offender supervisor within 10 days of arrival and should have regular planned contact thereafter with a member of staff who can motivate him and monitor his progress. (4.17)

Not achieved

All prisoners requiring one should have an up-to-date OASys assessment and sentence plan. (4.18)

Not achieved

The offender management unit should direct each prisoner's progress and be fully informed of important developments. (4.19)

Not achieved

Facilities for indeterminate-sentenced prisoners should be developed, including consultation and the opportunity to develop independent living skills. (4.32)

Not achieved

Newly arrived prisoners should have a prompt assessment of their resettlement needs, and referrals to relevant services should be made where appropriate and the outcomes monitored. (4.36)

Not achieved

The prison should take action to reduce the high rate of prisoners released without a settled address. (4.39)

Partially achieved

The Tribal service should be adequately staffed and effective measures should be introduced to monitor and improve its quality and impact. Any deficiencies should be swiftly addressed. (4.43)

No longer relevant

Appendix III: Photographs

A well maintained external area



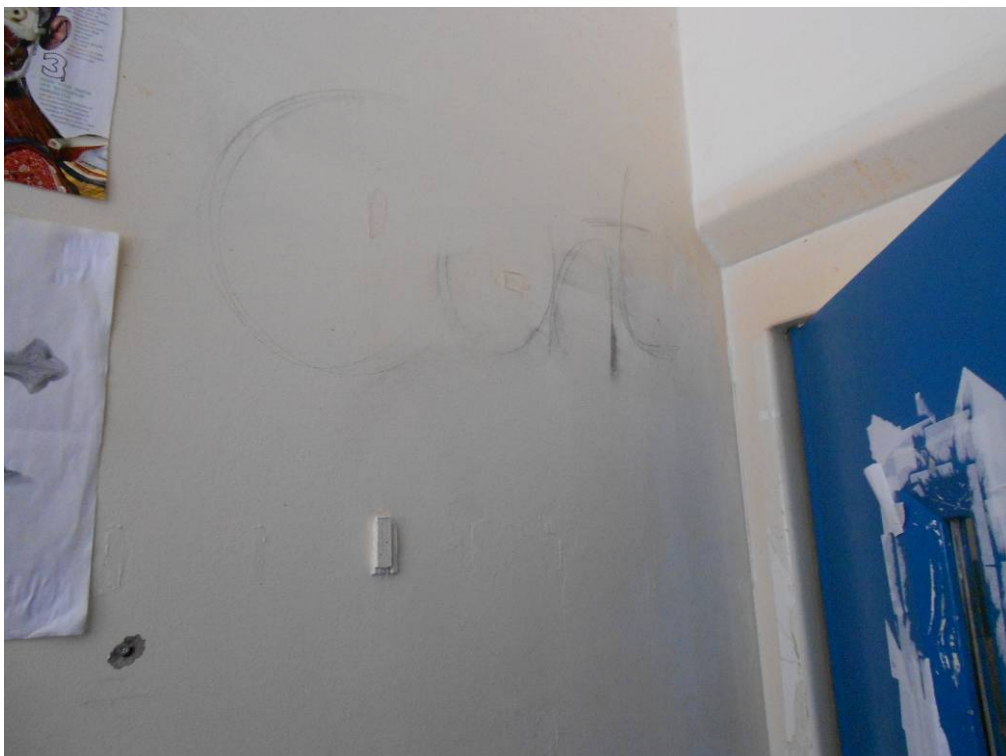
Hole to the outside in the wall of an occupied cell



Cell with broken furniture and a blood handprint on the wall



Offensive graffiti in a cell



Prisoner telephone lacking privacy in a communal kitchen area



Appendix IV: Prison population profile

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

Population breakdown

Status	21 and over	%
Sentenced	296	58.02
Recall	54	10.6
Indeterminate sentence	159	31.2
Total	509	100

Sentence	21 and over	%
Six months to less than 12 months	1	0
12 months to less than 2 years	6	1.2
2 years to less than 3 years	25	4.9
3 years to less than 4 years	33	6.5
4 years to less than 10 years	204	40.1
10 years and over (not life)	53	10.4
ISPP (indeterminate sentence for public protection)	117	36.7
Life	70	13.8
Total	509	100

Age	Number of prisoners	%
21 years to 29 years	147	28.9
30 years to 39 years	164	32.2
40 years to 49 years	103	20.2
50 years to 59 years	69	13.6
60 years to 69 years	18	3.5
70 plus years	8	1.6
Total	509	100

Nationality	21 and over	%
British	493	96.9
Foreign nationals	16	3.1
Total	509	100

Security category	21 and over	%
Category C	479	94.1
Category D	30	5.9
Total	509	100

Ethnicity	21 and over	%
White		
British	356	36.9
Irish	6	1.2
Gypsy/Irish Traveller	17	3.3
Other white	12	2.4
Mixed		
White and black Caribbean	17	3.3
White and black African	2	0.4
White and Asian	2	0.4
Other mixed	5	1.0
Asian or Asian British		
Indian	2	0.6
Pakistani	4	0.8
Bangladeshi	1	0.2
Other Asian	3	0.6
Black or black British		
Caribbean	47	9.2
African	11	2.2
Other black	14	2.8
Other ethnic group		
Arab	2	0.4
Other ethnic group	1	0.2
Not stated	7	1.4
Total	509	100

Religion	21 and over	%
Church of England	93	18.3
Roman Catholic	99	19.4
Other Christian denominations	61	12.0
Muslim	52	10.2
Sikh	3	0.6
Hindu	1	0.2
Buddhist	12	2.4
Jewish	6	1.2
Other	31	6.1
No religion	149	29.3
Total	509	100

Sentenced prisoners only

Length of stay	21 and over	
	Number	%
Less than 1 month	44	8.06
1 month to 3 months	161	31.6
3 months to six months	66	13.0
six months to 1 year	87	17.1
1 year to 2 years	65	12.8
2 years to 4 years	68	13.4
4 years or more	18	3.5
Total	509	100

Main offence	21 and over	%
Violence against the person	283	0.55
Sexual offences	14	0.02
Burglary	49	0.10
Robbery	57	0.11
Theft and handling	1	0.00
Fraud and forgery	9	0.02
Drugs offences	83	0.16
Other offences – firearms	18	0.04
Total	514	100

Appendix V: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

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

Sampling

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

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 26 June 2017, the prisoner population at HMP Erlestoke was 509. Using the method described above, questionnaires were distributed to a sample of 192 prisoners.

We received a total of 149 completed questionnaires, a response rate of 78%. This included two questionnaires completed via interview. Twenty-four respondents refused to complete a questionnaire and 19 questionnaires were not returned.

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

Wing/unit	Number of completed survey returns
Alfred	18
Imber	14
Kennet	13
Marlborough	21
Sarum	12
Silbury A	17
Silbury B	17
Avebury	14
Wessex	20
Segregation unit	3

Presentation of survey results and analyses

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

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

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

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Erlestoke 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 Erlestoke in 2017 compared with the responses of prisoners surveyed at HMP Erlestoke in 2013.
- A comparison within the 2017 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2017 survey between 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 50 and over and those under 50.
- A comparison within the 2017 survey between the responses of indeterminate sentence prisoners and the responses of determinate sentence prisoners.

¹⁰ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.01 which means that there is only a 1% likelihood that the difference is due to chance.

- A comparison within the 2017 survey between the responses of prisoners on K, I, S and V wings and the responses of prisoners on all other wings.

Survey summary

Section I: About you

Q1.2	How old are you?	
	<i>Under 21</i>	0 (0%)
	<i>21 - 29</i>	37 (25%)
	<i>30 - 39</i>	52 (35%)
	<i>40 - 49</i>	30 (20%)
	<i>50 - 59</i>	20 (14%)
	<i>60 - 69</i>	6 (4%)
	<i>70 and over</i>	3 (2%)
Q1.3	Are you sentenced?	
	<i>Yes</i>	134 (91%)
	<i>Yes - on recall</i>	14 (9%)
	<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>	0 (0%)
	<i>6 months to less than 1 year</i>	0 (0%)
	<i>1 year to less than 2 years</i>	5 (3%)
	<i>2 years to less than 4 years</i>	17 (11%)
	<i>4 years to less than 10 years</i>	58 (39%)
	<i>10 years or more</i>	19 (13%)
	<i>IPP (indeterminate sentence for public protection)</i>	20 (14%)
	<i>Life</i>	29 (20%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	<i>Yes</i>	12 (8%)
	<i>No</i>	136 (92%)
Q1.6	Do you understand spoken English?	
	<i>Yes</i>	147 (99%)
	<i>No</i>	1 (1%)
Q1.7	Do you understand written English?	
	<i>Yes</i>	146 (99%)
	<i>No</i>	2 (1%)

Q1.8	What is your ethnic origin?		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	106 (72%)	<i>Asian or Asian British - Chinese</i> 1 (1%)
	<i>White - Irish</i>	4 (3%)	<i>Asian or Asian British - other</i> 1 (1%)
	<i>White - other</i>	5 (3%)	<i>Mixed race - white and black Caribbean</i> 9 (6%)
	<i>Black or black British - Caribbean</i>	11 (7%)	<i>Mixed race - white and black African</i> 0 (0%)
	<i>Black or black British - African</i>	1 (1%)	<i>Mixed race - white and Asian</i> 1 (1%)
	<i>Black or black British - other</i>	4 (3%)	<i>Mixed race - other</i> 1 (1%)
	<i>Asian or Asian British - Indian</i>	0 (0%)	<i>Arab</i> 1 (1%)
	<i>Asian or Asian British - Pakistani</i>	0 (0%)	<i>Other ethnic group</i> 2 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	0 (0%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	<i>Yes</i>		10 (7%)
	<i>No</i>		132 (93%)
Q1.10	What is your religion?		
	<i>None</i>	46 (32%)	<i>Hindu</i> 0 (0%)
	<i>Church of England</i>	36 (25%)	<i>Jewish</i> 4 (3%)
	<i>Catholic</i>	25 (17%)	<i>Muslim</i> 10 (7%)
	<i>Protestant</i>	1 (1%)	<i>Sikh</i> 0 (0%)
	<i>Other Christian denomination</i>	3 (2%)	<i>Other</i> 12 (8%)
	<i>Buddhist</i>	6 (4%)	
Q1.11	How would you describe your sexual orientation?		
	<i>Heterosexual/ Straight</i>		144 (99%)
	<i>Homosexual/Gay</i>		0 (0%)
	<i>Bisexual</i>		2 (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)?		
	<i>Yes</i>		33 (22%)
	<i>No</i>		114 (78%)
Q1.13	Are you a veteran (ex-armed services)?		
	<i>Yes</i>		9 (6%)
	<i>No</i>		137 (94%)
Q1.14	Is this your first time in prison?		
	<i>Yes</i>		50 (34%)
	<i>No</i>		96 (66%)
Q1.15	Do you have children under the age of 18?		
	<i>Yes</i>		72 (49%)
	<i>No</i>		76 (51%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?	
	<i>Less than 2 hours</i>	32 (22%)
	<i>2 hours or longer</i>	109 (75%)
	<i>Don't remember</i>	5 (3%)

Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	32 (22%)
	Yes	96 (66%)
	No	12 (8%)
	Don't remember	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>	32 (22%)
	Yes	10 (7%)
	No	98 (68%)
	Don't remember	5 (3%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	91 (62%)
	No	46 (32%)
	Don't remember	9 (6%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	110 (75%)
	No	35 (24%)
	Don't remember	1 (1%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	Very well	43 (29%)
	Well	64 (44%)
	Neither	29 (20%)
	Badly	8 (5%)
	Very badly	1 (1%)
	Don't remember	1 (1%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	Yes, someone told me	98 (68%)
	Yes, I received written information	19 (13%)
	No, I was not told anything	28 (19%)
	Don't remember	3 (2%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	111 (76%)
	No	35 (24%)
	Don't remember	0 (0%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	112 (77%)
	<i>2 hours or longer</i>	24 (16%)
	Don't remember	10 (7%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	120 (85%)
	No	12 (8%)
	Don't remember	10 (7%)

Q3.3	Overall, how were you treated in reception?		
	<i>Very well</i>		55 (38%)
	<i>Well</i>		70 (49%)
	<i>Neither</i>		10 (7%)
	<i>Badly</i>		6 (4%)
	<i>Very badly</i>		0 (0%)
	<i>Don't remember</i>		3 (2%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply)		
	<i>Loss of property</i>	30 (21%)	<i>Physical health</i> 14 (10%)
	<i>Housing problems</i>	10 (7%)	<i>Mental health</i> 27 (19%)
	<i>Contacting employers</i>	1 (1%)	<i>Needing protection from other prisoners</i> 5 (4%)
	<i>Contacting family</i>	21 (15%)	<i>Getting phone numbers</i> 14 (10%)
	<i>Childcare</i>	2 (1%)	<i>Other</i> 9 (6%)
	<i>Money worries</i>	10 (7%)	<i>Did not have any problems</i> 55 (39%)
	<i>Feeling depressed or suicidal</i>	18 (13%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	<i>Yes</i>		29 (22%)
	<i>No</i>		50 (37%)
	<i>Did not have any problems</i>		55 (41%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply)		
	<i>Tobacco</i>		28 (20%)
	<i>A shower</i>		36 (25%)
	<i>A free telephone call</i>		58 (41%)
	<i>Something to eat</i>		73 (51%)
	<i>PIN phone credit</i>		33 (23%)
	<i>Toiletries/ basic items</i>		54 (38%)
	<i>Did not receive anything</i>		30 (21%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)		
	<i>Chaplain</i>		66 (47%)
	<i>Someone from health services</i>		94 (68%)
	<i>A Listener/Samaritans</i>		45 (32%)
	<i>Prison shop/ canteen</i>		47 (34%)
	<i>Did not have access to any of these</i>		28 (20%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)		
	<i>What was going to happen to you</i>		69 (50%)
	<i>What support was available for people feeling depressed or suicidal</i>		54 (39%)
	<i>How to make routine requests (applications)</i>		54 (39%)
	<i>Your entitlement to visits</i>		43 (31%)
	<i>Health services</i>		63 (45%)
	<i>Chaplaincy</i>		52 (37%)
	<i>Not offered any information</i>		43 (31%)

Q3.9	Did you feel safe on your first night here?	
	Yes	113 (80%)
	No	21 (15%)
	Don't remember	7 (5%)
Q3.10	How soon after you arrived here did you go on an induction course?	
	Have not been on an induction course	16 (11%)
	Within the first week	82 (58%)
	More than a week	37 (26%)
	Don't remember	7 (5%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	Have not been on an induction course	16 (12%)
	Yes	75 (55%)
	No	37 (27%)
	Don't remember	8 (6%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	Did not receive an assessment	19 (13%)
	Within the first week	53 (38%)
	More than a week	54 (38%)
	Don't remember	15 (11%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		Very easy	Easy	Neither	Difficult	Very difficult N/A
	Communicate with your solicitor or legal representative?	26 (19%)	48 (34%)	19 (14%)	14 (10%)	9 (6%) 24 (17%)
	Attend legal visits?	16 (13%)	36 (29%)	12 (10%)	10 (8%)	6 (5%) 44 (35%)
	Get bail information?	7 (6%)	8 (7%)	15 (13%)	7 (6%)	4 (4%) 71 (63%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?					
	Not had any letters					37 (26%)
	Yes					57 (41%)
	No					46 (33%)
Q4.3	Can you get legal books in the library?					
	Yes					85 (61%)
	No					12 (9%)
	Don't know					43 (31%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		Yes	No	Don't know		
	Do you normally have enough clean, suitable clothes for the week?	110 (78%)	27 (19%)	4 (3%)		
	Are you normally able to have a shower every day?	139 (97%)	4 (3%)	1 (1%)		
	Do you normally receive clean sheets every week?	98 (70%)	32 (23%)	11 (8%)		
	Do you normally get cell cleaning materials every week?	90 (63%)	45 (32%)	7 (5%)		
	Is your cell call bell normally answered within five minutes?	47 (35%)	62 (46%)	25 (19%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	106 (75%)	33 (23%)	2 (1%)		
	If you need to, can you normally get your stored property?	43 (32%)	52 (38%)	41 (30%)		

Q4.5	What is the food like here?	
	<i>Very good</i>	19 (13%)
	<i>Good</i>	71 (49%)
	<i>Neither</i>	34 (23%)
	<i>Bad</i>	12 (8%)
	<i>Very bad</i>	9 (6%)
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>	8 (6%)
	<i>Yes</i>	113 (80%)
	<i>No</i>	21 (15%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	<i>Yes</i>	86 (59%)
	<i>No</i>	7 (5%)
	<i>Don't know</i>	53 (36%)
Q4.8	Are your religious beliefs respected?	
	<i>Yes</i>	78 (54%)
	<i>No</i>	16 (11%)
	<i>Don't know/ N/A</i>	50 (35%)
Q4.9	Are you able to speak to a chaplain of your faith in private if you want to?	
	<i>Yes</i>	90 (63%)
	<i>No</i>	11 (8%)
	<i>Don't know/ N/A</i>	42 (29%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	28 (20%)
	<i>Very easy</i>	47 (33%)
	<i>Easy</i>	33 (23%)
	<i>Neither</i>	6 (4%)
	<i>Difficult</i>	8 (6%)
	<i>Very difficult</i>	1 (1%)
	<i>Don't know</i>	19 (13%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?	
	<i>Yes</i>	121 (83%)
	<i>No</i>	18 (12%)
	<i>Don't know</i>	6 (4%)
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)	
		Not made one Yes No
	Are applications dealt with fairly?	12 (9%) 78 (57%) 46 (34%)
	Are applications dealt with quickly (within seven days)?	12 (9%) 51 (38%) 72 (53%)
Q5.3	Is it easy to make a complaint?	
	<i>Yes</i>	78 (54%)
	<i>No</i>	32 (22%)
	<i>Don't know</i>	34 (24%)

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

	Not made one	Yes	No
Are complaints dealt with fairly?	58 (41%)	30 (21%)	54 (38%)
Are complaints dealt with quickly (within seven days)?	58 (42%)	17 (12%)	62 (45%)

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

Yes	31 (22%)
No	107 (78%)

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

Don't know who they are	24 (17%)
Very easy	13 (9%)
Easy	25 (18%)
Neither	50 (36%)
Difficult	21 (15%)
Very difficult	6 (4%)

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

Don't know what the IEP scheme is	3 (2%)
Yes	86 (61%)
No	35 (25%)
Don't know	17 (12%)

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

Don't know what the IEP scheme is	3 (2%)
Yes	56 (40%)
No	73 (52%)
Don't know	8 (6%)

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

Yes	13 (9%)
No	127 (91%)

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

I have not been to segregation in the last 6 months	112 (82%)
Very well	3 (2%)
Well	6 (4%)
Neither	8 (6%)
Badly	5 (4%)
Very badly	2 (1%)

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

Yes	123 (87%)
No	18 (13%)

Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	94 (69%)
	No	43 (31%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	36 (26%)
	No	103 (74%)
Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	5 (4%)
	<i>Never</i>	14 (10%)
	<i>Rarely</i>	47 (33%)
	<i>Some of the time</i>	47 (33%)
	<i>Most of the time</i>	19 (13%)
	<i>All of the time</i>	10 (7%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	78 (55%)
	<i>In the first week</i>	20 (14%)
	<i>More than a week</i>	24 (17%)
	<i>Don't remember</i>	20 (14%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	78 (57%)
	<i>Very helpful</i>	12 (9%)
	<i>Helpful</i>	22 (16%)
	<i>Neither</i>	17 (12%)
	<i>Not very helpful</i>	5 (4%)
	<i>Not at all helpful</i>	4 (3%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	Yes	54 (38%)		
	No	89 (62%)		
Q8.2	Do you feel unsafe now?			
	Yes	19 (13%)		
	No	123 (87%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)			
	<i>Never felt unsafe</i>	89 (62%)	<i>At meal times</i>	5 (3%)
	<i>Everywhere</i>	19 (13%)	<i>At health services</i>	17 (12%)
	<i>Segregation unit</i>	3 (2%)	<i>Visits area</i>	2 (1%)
	<i>Association areas</i>	15 (10%)	<i>In wing showers</i>	6 (4%)
	<i>Reception area</i>	3 (2%)	<i>In gym showers</i>	0 (0%)
	<i>At the gym</i>	3 (2%)	<i>In corridors/stairwells</i>	8 (6%)
	<i>In an exercise yard</i>	8 (6%)	<i>On your landing/wing</i>	16 (11%)
	<i>At work</i>	5 (3%)	<i>In your cell</i>	11 (8%)
	<i>During movement</i>	16 (11%)	<i>At religious services</i>	2 (1%)
	<i>At education</i>	8 (6%)		

Q8.4	Have you been victimised by other prisoners here?	
	Yes	46 (32%)
	No	97 (68%)
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>	29 (20%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	21 (15%)
	<i>Sexual abuse</i>	3 (2%)
	<i>Feeling threatened or intimidated</i>	29 (20%)
	<i>Having your canteen/property taken</i>	8 (6%)
	<i>Medication</i>	5 (3%)
	<i>Debt</i>	10 (7%)
	<i>Drugs</i>	8 (6%)
	<i>Your race or ethnic origin</i>	8 (6%)
	<i>Your religion/religious beliefs</i>	7 (5%)
	<i>Your nationality</i>	11 (8%)
	<i>You are from a different part of the country than others</i>	5 (3%)
	<i>You are from a traveller community</i>	4 (3%)
	<i>Your sexual orientation</i>	4 (3%)
	<i>Your age</i>	7 (5%)
	<i>You have a disability</i>	5 (3%)
	<i>You were new here</i>	3 (2%)
	<i>Your offence/ crime</i>	8 (6%)
	<i>Gang related issues</i>	3 (2%)
Q8.6	Have you been victimised by staff here?	
	Yes	28 (20%)
	No	114 (80%)
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>	11 (8%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	7 (5%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	14 (10%)
	<i>Medication</i>	8 (6%)
	<i>Debt</i>	3 (2%)
	<i>Drugs</i>	2 (1%)
	<i>Your race or ethnic origin</i>	3 (2%)
	<i>Your religion/religious beliefs</i>	5 (4%)
	<i>Your nationality</i>	5 (4%)
	<i>You are from a different part of the country than others</i>	4 (3%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	6 (4%)
	<i>You have a disability</i>	4 (3%)
	<i>You were new here</i>	4 (3%)
	<i>Your offence/ crime</i>	4 (3%)
	<i>Gang related issues</i>	2 (1%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	<i>Not been victimised</i>	83 (64%)
	Yes	18 (14%)
	No	28 (22%)

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	12 (9%)	13 (9%)	45 (32%)	24 (17%)	36 (26%)	9 (6%)
	The nurse	14 (10%)	21 (15%)	58 (42%)	22 (16%)	19 (14%)	3 (2%)
	The dentist	23 (17%)	8 (6%)	36 (26%)	22 (16%)	34 (25%)	13 (10%)
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	19 (13%)	18 (13%)	46 (33%)	29 (21%)	18 (13%)	11 (8%)
	The nurse	11 (8%)	29 (21%)	52 (39%)	25 (19%)	11 (8%)	7 (5%)
	The dentist	32 (24%)	22 (16%)	39 (29%)	27 (20%)	8 (6%)	6 (4%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>					11 (8%)	
	<i>Very good</i>					13 (9%)	
	<i>Good</i>					57 (40%)	
	<i>Neither</i>					28 (20%)	
	<i>Bad</i>					18 (13%)	
	<i>Very bad</i>					14 (10%)	
Q9.4	Are you currently taking medication?						
	Yes					74 (52%)	
	No					68 (48%)	
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?						
	<i>Not taking medication</i>					68 (48%)	
	<i>Yes, all my meds</i>					54 (38%)	
	<i>Yes, some of my meds</i>					18 (13%)	
	<i>No</i>					2 (1%)	
Q9.6	Do you have any emotional or mental health problems?						
	Yes					56 (40%)	
	No					83 (60%)	
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>					83 (60%)	
	Yes					21 (15%)	
	No					35 (25%)	

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	36 (26%)
	No	104 (74%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	24 (17%)
	No	116 (83%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy	56 (41%)
	Easy	25 (18%)
	Neither	8 (6%)
	Difficult	2 (1%)
	Very difficult	6 (4%)
	Don't know	41 (30%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy	30 (22%)
	Easy	28 (20%)
	Neither	17 (12%)
	Difficult	6 (4%)
	Very difficult	5 (4%)
	Don't know	52 (38%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes	24 (17%)
	No	116 (83%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes	15 (11%)
	No	126 (89%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	<i>Did not / do not have a drug problem</i>	96 (73%)
	Yes	18 (14%)
	No	17 (13%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	<i>Did not / do not have an alcohol problem</i>	116 (85%)
	Yes	14 (10%)
	No	7 (5%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	<i>Did not have a problem/ did not receive help</i>	106 (81%)
	Yes	18 (14%)
	No	7 (5%)

Section 11: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	15 (11%)	34 (24%)	56 (40%)	16 (11%)	15 (11%)	4 (3%)
	Vocational or skills training	15 (11%)	29 (22%)	58 (44%)	20 (15%)	9 (7%)	1 (1%)
	Education (including basic skills)	15 (12%)	41 (32%)	54 (42%)	15 (12%)	3 (2%)	1 (1%)
	Offending behaviour programmes	24 (19%)	17 (13%)	28 (22%)	19 (15%)	28 (22%)	13 (10%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				35 (25%)
	Prison job				79 (57%)
	Vocational or skills training				23 (17%)
	Education (including basic skills)				28 (20%)
	Offending behaviour programmes				21 (15%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	Yes	No	Don't know
	Prison job	28 (22%)	58 (46%)	30 (24%)	9 (7%)
	Vocational or skills training	29 (25%)	61 (54%)	15 (13%)	9 (8%)
	Education (including basic skills)	25 (21%)	68 (58%)	17 (15%)	7 (6%)
	Offending behaviour programmes	34 (30%)	49 (44%)	19 (17%)	10 (9%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				11 (8%)
	Never				16 (11%)
	Less than once a week				25 (18%)
	About once a week				55 (39%)
	More than once a week				34 (24%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				21 (15%)
	Yes				89 (64%)
	No				29 (21%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				26 (19%)
	0				28 (20%)
	1 to 2				45 (32%)
	3 to 5				36 (26%)
	More than 5				4 (3%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				2 (1%)
	0				5 (4%)
	1 to 2				27 (19%)
	3 to 5				41 (29%)
	More than 5				64 (46%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				4 (3%)
	0				5 (4%)
	1 to 2				9 (6%)
	3 to 5				46 (33%)
	More than 5				77 (55%)

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>	4 (3%)
<i>2 to less than 4 hours</i>	29 (21%)
<i>4 to less than 6 hours</i>	28 (20%)
<i>6 to less than 8 hours</i>	27 (20%)
<i>8 to less than 10 hours</i>	13 (9%)
<i>10 hours or more</i>	33 (24%)
<i>Don't know</i>	4 (3%)

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?**

Yes	48 (34%)
No	92 (66%)

Q12.2 Have you had any problems with sending or receiving mail (letters or parcels)?

Yes	45 (32%)
No	96 (68%)

Q12.3 Have you had any problems getting access to the telephones?

Yes	16 (11%)
No	126 (89%)

Q12.4 How easy or difficult is it for your family and friends to get here?

<i>I don't get visits</i>	19 (13%)
<i>Very easy</i>	9 (6%)
<i>Easy</i>	20 (14%)
<i>Neither</i>	12 (8%)
<i>Difficult</i>	23 (16%)
<i>Very difficult</i>	55 (39%)
<i>Don't know</i>	4 (3%)

Section 13: Preparation for release**Q13.1 Do you have a named offender manager (home probation officer) in the probation service?**

<i>Not sentenced</i>	0 (0%)
Yes	128 (91%)
No	12 (9%)

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>	12 (9%)
<i>No contact</i>	44 (33%)
<i>Letter</i>	49 (36%)
<i>Phone</i>	39 (30%)
<i>Visit</i>	36 (27%)

Q13.3 Do you have a named offender supervisor in this prison?

Yes	110 (79%)
No	29 (21%)

Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	Yes	87 (63%)
	No	51 (37%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	51 (37%)
	<i>Very involved</i>	16 (12%)
	<i>Involved</i>	22 (16%)
	<i>Neither</i>	15 (11%)
	<i>Not very involved</i>	20 (14%)
	<i>Not at all involved</i>	14 (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>	51 (37%)
	<i>Nobody</i>	37 (28%)
	<i>Offender supervisor</i>	37 (27%)
	<i>Offender manager</i>	32 (23%)
	<i>Named/ personal officer</i>	8 (7%)
	<i>Staff from other departments</i>	15 (11%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	51 (38%)
	Yes	60 (44%)
	No	17 (13%)
	<i>Don't know</i>	8 (6%)
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	51 (38%)
	Yes	17 (13%)
	No	54 (40%)
	<i>Don't know</i>	13 (10%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	51 (38%)
	Yes	18 (13%)
	No	41 (30%)
	<i>Don't know</i>	25 (19%)
Q13.10	Do you have a needs based custody plan?	
	Yes	11 (8%)
	No	64 (46%)
	<i>Don't know</i>	63 (46%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	Yes	26 (19%)
	No	113 (81%)

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

	<i>Do not need help</i>	<i>Yes</i>	<i>No</i>
Employment	30 (23%)	26 (20%)	75 (57%)
Accommodation	30 (22%)	19 (14%)	85 (63%)
Benefits	30 (23%)	18 (14%)	84 (64%)
Finances	29 (22%)	17 (13%)	83 (64%)
Education	30 (23%)	34 (27%)	64 (50%)
Drugs and alcohol	35 (27%)	32 (24%)	65 (49%)

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%)
<i>Yes</i>	80 (59%)
<i>No</i>	56 (41%)

Main comparator and comparator to last time



Prisoner survey responses HMP Erlestoke 2017

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

Key to tables

		HMP Erlestoke 2017	Category C training prisons comparator	HMP Erlestoke 2017	HMP Erlestoke 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		149	6,513	149	140
SECTION 1: General information					
1.2	Are you under 21 years of age?	0%	2%	0%	0%
1.3	Are you sentenced?	100%	100%	100%	100%
1.3	Are you on recall?	10%	9%	10%	11%
1.4	Is your sentence less than 12 months?	0%	6%	0%	2%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	13%	8%	13%	25%
1.5	Are you a foreign national?	8%	11%	8%	4%
1.6	Do you understand spoken English?	99%	99%	99%	100%
1.7	Do you understand written English?	99%	98%	99%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	22%	26%	22%	25%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	7%	4%	7%	7%
1.1	Are you Muslim?	7%	14%	7%	6%
1.11	Are you homosexual/gay or bisexual?	1%	4%	1%	4%
1.12	Do you consider yourself to have a disability?	23%	23%	23%	23%
1.13	Are you a veteran (ex-armed services)?	6%	6%	6%	5%
1.14	Is this your first time in prison?	34%	40%	34%	25%
1.15	Do you have any children under the age of 18?	49%	50%	49%	54%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	75%	44%	75%	64%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	84%	74%	84%	75%
2.3	Were you offered a toilet break?	9%	8%	9%	13%
2.4	Was the van clean?	62%	60%	62%	62%
2.5	Did you feel safe?	75%	78%	75%	79%
2.6	Were you treated well/very well by the escort staff?	73%	72%	73%	75%
2.7	Before you arrived here were you told that you were coming here?	68%	60%	68%	67%
2.7	Before you arrived here did you receive any written information about coming here?	13%	12%	13%	15%
2.8	When you first arrived here did your property arrive at the same time as you?	76%	83%	76%	85%

Main comparator and comparator to last time

Key to tables

		HMP Erlestoke 2017	Category C training prisons comparator	HMP Erlestoke 2017	HMP Erlestoke 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	77%	52%	77%	71%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	85%	85%	87%
3.3	Were you treated well/very well in reception?	87%	76%	87%	79%
	When you first arrived:				
3.4	Did you have any problems?	61%	62%	61%	60%
3.4	Did you have any problems with loss of property?	21%	20%	21%	25%
3.4	Did you have any housing problems?	7%	13%	7%	7%
3.4	Did you have any problems contacting employers?	1%	2%	1%	1%
3.4	Did you have any problems contacting family?	15%	18%	15%	15%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	2%	2%	1%
3.4	Did you have any money worries?	7%	13%	7%	13%
3.4	Did you have any problems with feeling depressed or suicidal?	13%	16%	13%	11%
3.4	Did you have any physical health problems?	10%	14%	10%	12%
3.4	Did you have any mental health problems?	19%	20%	19%	16%
3.4	Did you have any problems with needing protection from other prisoners?	4%	5%	4%	3%
3.4	Did you have problems accessing phone numbers?	10%	15%	10%	10%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	37%	36%	37%	43%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	20%	74%	20%	72%
3.6	A shower?	25%	28%	25%	35%
3.6	A free telephone call?	41%	41%	41%	45%
3.6	Something to eat?	51%	57%	51%	50%
3.6	PIN phone credit?	23%	50%	23%	30%
3.6	Toiletries/ basic items?	38%	48%	38%	40%

Key to tables

Main comparator and comparator to last time

	Any percentage highlighted in green is significantly better	HMP Erestoke 2017	Category C training prisons comparator	HMP Erestoke 2017	HMP Erestoke 2013
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 3: Reception, first night and induction continued					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	48%	53%	48%	53%
3.7	Someone from health services?	68%	70%	68%	70%
3.7	A Listener/Samaritans?	32%	34%	32%	40%
3.7	Prison shop/ canteen?	34%	25%	34%	21%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	50%	50%	50%	56%
3.8	Support was available for people feeling depressed or suicidal?	39%	40%	39%	44%
3.8	How to make routine requests?	39%	43%	39%	45%
3.8	Your entitlement to visits?	31%	39%	31%	44%
3.8	Health services?	45%	52%	45%	60%
3.8	The chaplaincy?	37%	48%	37%	55%
3.9	Did you feel safe on your first night here?	80%	79%	80%	88%
3.10	Have you been on an induction course?	89%	90%	89%	89%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	62%	60%	62%	64%
3.12	Did you receive an education (skills for life) assessment?	87%	85%	87%	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?	53%	42%	53%	66%
4.1	Attend legal visits?	42%	44%	42%	62%
4.1	Get bail information?	13%	14%	13%	20%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	41%	38%	41%	43%
4.3	Can you get legal books in the library?	61%	40%	61%	58%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	78%	66%	78%	83%
4.4	Are you normally able to have a shower every day?	97%	89%	97%	98%
4.4	Do you normally receive clean sheets every week?	70%	66%	70%	83%
4.4	Do you normally get cell cleaning materials every week?	63%	63%	63%	82%
4.4	Is your cell call bell normally answered within five minutes?	35%	33%	35%	41%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	75%	69%	75%	72%
4.4	Can you normally get your stored property, if you need to?	32%	22%	32%	30%
4.5	Is the food in this prison good/very good?	62%	32%	62%	18%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	80%	49%	80%	37%
4.7	Are you able to speak to a Listener at any time, if you want to?	59%	55%	59%	64%
4.8	Are your religious beliefs respected?	54%	52%	54%	43%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	63%	58%	63%	59%
4.10	Is it easy/very easy to attend religious services?	56%	49%	56%	48%

Main comparator and comparator to last time

Key to tables

Any percentage highlighted in green is significantly better	HMP Erlestoke 2017	Category C training prisons comparator	HMP Erlestoke 2017	HMP Erlestoke 2013
Any percentage highlighted in blue is significantly worse				
Any percentage highlighted in orange shows a significant difference in prisoners' background details				
Percentages which are not highlighted show there is no significant difference				
SECTION 5: Applications and complaints				
5.1 Is it easy to make an application?	84%	80%	84%	90%
For those who have made an application:				
5.2 Do you feel applications are dealt with fairly?	63%	55%	63%	66%
5.2 Do you feel applications are dealt with quickly (within seven days)?	41%	37%	41%	53%
5.3 Is it easy to make a complaint?	54%	58%	54%	70%
For those who have made a complaint:				
5.4 Do you feel complaints are dealt with fairly?	36%	32%	36%	35%
5.4 Do you feel complaints are dealt with quickly (within seven days)?	22%	27%	22%	40%
5.5 Have you ever been prevented from making a complaint when you wanted to?	23%	20%	23%	20%
5.6 Is it easy/very easy to see the Independent Monitoring Board?	27%	28%	27%	31%
SECTION 6: Incentives and earned privileges scheme				
6.1 Do you feel you have been treated fairly in your experience of the IEP scheme?	61%	47%	61%	63%
6.2 Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	44%	40%	52%
6.3 In the last six months have any members of staff physically restrained you (C&R)?	9%	9%	9%	5%
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?	38%	36%	38%	47%
SECTION 7: Relationships with staff				
7.1 Do most staff, in this prison, treat you with respect?	87%	79%	87%	84%
7.2 Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	69%	72%	69%	74%
7.3 Has a member of staff checked on you personally in the last week to see how you were getting on?	26%	29%	26%	45%
7.4 Do staff normally speak to you most of the time/all of the time during association?	20%	21%	20%	25%
7.5 Do you have a personal officer?	45%	62%	45%	77%
For those with a personal officer:				
7.6 Do you think your personal officer is helpful/very helpful?	57%	62%	57%	65%

Main comparator and comparator to last time

Key to tables

		HMP Erlestoke 2017	Category C training prisons comparator	HMP Erlestoke 2017	HMP Erlestoke 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	38%	41%	38%	26%
8.2	Do you feel unsafe now?	13%	18%	13%	14%
8.4	Have you been victimised by other prisoners here?	32%	29%	32%	26%
Since you have been here, have other prisoners:					
8.5	Made insulting remarks about you, your family or friends?	20%	12%	20%	10%
8.5	Hit, kicked or assaulted you?	15%	9%	15%	4%
8.5	Sexually abused you?	2%	1%	2%	2%
8.5	Threatened or intimidated you?	20%	17%	20%	16%
8.5	Taken your canteen/property?	6%	8%	6%	4%
8.5	Victimised you because of medication?	4%	4%	4%	4%
8.5	Victimised you because of debt?	7%	5%	7%	6%
8.5	Victimised you because of drugs?	6%	5%	6%	4%
8.5	Victimised you because of your race or ethnic origin?	6%	4%	6%	2%
8.5	Victimised you because of your religion/religious beliefs?	5%	3%	5%	1%
8.5	Victimised you because of your nationality?	8%	3%	8%	3%
8.5	Victimised you because you were from a different part of the country?	4%	4%	4%	4%
8.5	Victimised you because you are from a Traveller community?	3%	1%	3%	4%
8.5	Victimised you because of your sexual orientation?	3%	2%	3%	2%
8.5	Victimised you because of your age?	5%	3%	5%	3%
8.5	Victimised you because you have a disability?	4%	3%	4%	4%
8.5	Victimised you because you were new here?	2%	5%	2%	2%
8.5	Victimised you because of your offence/crime?	6%	5%	6%	5%
8.5	Victimised you because of gang related issues?	2%	5%	2%	2%

Main comparator and comparator to last time

Key to tables

		HMP Erlestoke 2017	Category C training prisons comparator	HMP Erlestoke 2017	HMP Erlestoke 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	20%	28%	20%	33%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	8%	11%	8%	11%
8.7	Hit, kicked or assaulted you?	5%	4%	5%	2%
8.7	Sexually abused you?	1%	1%	1%	2%
8.7	Threatened or intimidated you?	10%	12%	10%	11%
8.7	Victimised you because of medication?	6%	3%	6%	5%
8.7	Victimised you because of debt?	2%	2%	2%	4%
8.7	Victimised you because of drugs?	1%	2%	1%	5%
8.7	Victimised you because of your race or ethnic origin?	2%	4%	2%	5%
8.7	Victimised you because of your religion/religious beliefs?	4%	3%	4%	3%
8.7	Victimised you because of your nationality?	4%	3%	4%	4%
8.7	Victimised you because you were from a different part of the country?	3%	3%	3%	5%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	3%
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.7	Victimised you because of your age?	4%	2%	4%	2%
8.7	Victimised you because you have a disability?	3%	3%	3%	5%
8.7	Victimised you because you were new here?	3%	4%	3%	2%
8.7	Victimised you because of your offence/crime?	3%	4%	3%	5%
8.7	Victimised you because of gang related issues?	1%	2%	1%	4%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	39%	40%	39%	40%

Main comparator and comparator to last time

Key to tables

		HMP Eriestoke 2017	Category C training prisons comparator	HMP Eriestoke 2017	HMP Eriestoke 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	42%	29%	42%	53%
9.1	Is it easy/very easy to see the nurse?	58%	49%	58%	69%
9.1	Is it easy/very easy to see the dentist?	32%	14%	32%	27%
	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?	53%	49%	53%	54%
9.2	The nurse?	65%	57%	65%	64%
9.2	The dentist?	60%	43%	60%	62%
9.3	The overall quality of health services?	54%	42%	54%	55%
9.4	Are you currently taking medication?	52%	51%	52%	49%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	97%	83%	97%	100%
9.6	Do you have any emotional well being or mental health problems?	40%	35%	40%	37%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	38%	49%	38%	45%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	26%	25%	26%	27%
10.2	Did you have a problem with alcohol when you came into this prison?	17%	16%	17%	17%
10.3	Is it easy/very easy to get illegal drugs in this prison?	59%	46%	59%	50%
10.4	Is it easy/very easy to get alcohol in this prison?	42%	27%	42%	24%
10.5	Have you developed a problem with drugs since you have been in this prison?	17%	12%	17%	16%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	11%	7%	11%	10%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	52%	61%	52%	60%
10.8	Have you received any support or help with your alcohol problem while in this prison?	67%	62%	67%	73%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	72%	76%	72%	77%

Main comparator and comparator to last time

Key to tables

		HMP Erlestoke 2017	Category C training prisons comparator	HMP Erlestoke 2017	HMP Erlestoke 2013
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	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	64%	49%	64%	57%
11.1	Vocational or skills training?	66%	42%	66%	43%
11.1	Education (including basic skills)?	74%	57%	74%	52%
11.1	Offending behaviour programmes?	35%	23%	35%	29%
Are you currently involved in any of the following activities:					
11.2	A prison job?	57%	60%	57%	59%
11.2	Vocational or skills training?	17%	16%	17%	12%
11.2	Education (including basic skills)?	20%	22%	20%	10%
11.2	Offending behaviour programmes?	15%	11%	15%	18%
11.3	Have you had a job while in this prison?	78%	84%	78%	86%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	60%	43%	60%	52%
11.3	Have you been involved in vocational or skills training while in this prison?	75%	75%	75%	73%
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?	72%	56%	72%	71%
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?	74%	57%	74%	59%
11.3	Have you been involved in offending behaviour programmes while in this prison?	70%	71%	70%	79%
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?	63%	48%	63%	66%
11.4	Do you go to the library at least once a week?	63%	41%	63%	61%
11.5	Does the library have a wide enough range of materials to meet your needs?	64%	46%	64%	59%
11.6	Do you go to the gym three or more times a week?	29%	33%	29%	30%
11.7	Do you go outside for exercise three or more times a week?	76%	53%	76%	72%
11.8	Do you go on association more than five times each week?	55%	60%	55%	84%
11.9	Do you spend ten or more hours out of your cell on a weekday?	24%	17%	24%	25%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	34%	33%	34%	46%
12.2	Have you had any problems with sending or receiving mail?	32%	43%	32%	33%
12.3	Have you had any problems getting access to the telephones?	11%	21%	11%	15%
12.4	Is it easy/ very easy for your friends and family to get here?	20%	28%	20%	30%

Main comparator and comparator to last time

Key to tables

		HMP Eresstoke 2017	Category C training prisons comparator	HMP Eresstoke 2017	HMP Eresstoke 2013
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 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?	91%	80%	91%	91%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	36%	36%	36%	23%
13.2	Contact by letter?	40%	32%	40%	49%
13.2	Contact by phone?	32%	26%	32%	36%
13.2	Contact by visit?	29%	31%	29%	45%
13.3	Do you have a named offender supervisor in this prison?	79%	75%	79%	87%
For those who are sentenced:					
13.4	Do you have a sentence plan?	63%	61%	63%	80%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	44%	54%	44%	51%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	43%	46%	43%	23%
13.6	Offender supervisor?	43%	38%	43%	61%
13.6	Offender manager?	37%	26%	37%	48%
13.6	Named/ personal officer?	9%	12%	9%	31%
13.6	Staff from other departments?	17%	15%	17%	28%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	70%	61%	70%	73%
13.8	Are there plans for you to achieve any of your targets in another prison?	20%	19%	20%	31%
13.9	Are there plans for you to achieve any of your targets in the community?	22%	28%	22%	43%
13.10	Do you have a needs based custody plan?	8%	6%	8%	15%
13.11	Do you feel that any member of staff has helped you to prepare for release?	19%	16%	19%	17%
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?	26%	33%	26%	39%
13.12	Accommodation?	18%	35%	18%	42%
13.12	Benefits?	18%	36%	18%	39%
13.12	Finances?	17%	27%	17%	31%
13.12	Education?	35%	33%	35%	41%
13.12	Drugs and alcohol?	33%	41%	33%	60%
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?	59%	54%	59%	55%

Diversity analysis



Key question responses (ethnicity) HMP Erlestoke 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
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		32	115
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	13%	7%
1.6	Do you understand spoken English?	97%	100%
1.7	Do you understand written English?	97%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)		
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	7%	7%
1.1	Are you Muslim?	27%	2%
1.12	Do you consider yourself to have a disability?	16%	24%
1.13	Are you a veteran (ex-armed services)?	6%	6%
1.14	Is this your first time in prison?	32%	35%
2.6	Were you treated well/very well by the escort staff?	66%	75%
2.7	Before you arrived here were you told that you were coming here?	66%	68%
3.2	When you were searched in reception, was this carried out in a respectful way?	68%	89%
3.3	Were you treated well/very well in reception?	77%	89%
3.4	Did you have any problems when you first arrived?	62%	62%
3.7	Did you have access to someone from health care when you first arrived here?	61%	69%
3.9	Did you feel safe on your first night here?	71%	82%
3.10	Have you been on an induction course?	93%	87%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	35%	59%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	75%	79%
4.4	Are you normally able to have a shower every day?	94%	97%
4.4	Is your cell call bell normally answered within five minutes?	40%	33%
4.5	Is the food in this prison good/very good?	31%	71%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	75%	81%
4.7	Are you able to speak to a Listener at any time, if you want to?	47%	62%
4.8	Do you feel your religious beliefs are respected?	52%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	59%	65%
5.1	Is it easy to make an application?	78%	85%
5.3	Is it easy to make a complaint?	50%	55%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	52%	63%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	44%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	9%
7.1	Do most staff, in this prison, treat you with respect?	77%	90%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	60%	71%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	13%	23%
7.4	Do you have a personal officer?	48%	44%
8.1	Have you ever felt unsafe here?	29%	39%
8.2	Do you feel unsafe now?	7%	15%
8.3	Have you been victimised by other prisoners?	32%	32%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	16%	22%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	16%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	13%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	20%	5%
8.5	Have you been victimised because you have a disability? (By prisoners)	7%	3%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	26%	18%
8.7	Have you ever felt threatened or intimidated by staff here?	13%	9%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	0%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	9%	2%
8.7	Have you been victimised because of your nationality? (By staff)	13%	1%
8.7	Have you been victimised because you have a disability? (By staff)	7%	2%
9.1	Is it easy/very easy to see the doctor?	31%	44%
9.1	Is it easy/ very easy to see the nurse?	52%	59%
9.4	Are you currently taking medication?	36%	56%
9.6	Do you feel you have any emotional well being/mental health issues?	26%	43%
10.3	Is it easy/very easy to get illegal drugs in this prison?	42%	63%
11.2	Are you currently working in the prison?	49%	59%
11.2	Are you currently undertaking vocational or skills training?	21%	16%
11.2	Are you currently in education (including basic skills)?	21%	20%
11.2	Are you currently taking part in an offending behaviour programme?	14%	15%
11.4	Do you go to the library at least once a week?	61%	65%
11.6	Do you go to the gym three or more times a week?	32%	28%
11.7	Do you go outside for exercise three or more times a week?	63%	80%
11.8	On average, do you go on association more than five times each week?	50%	57%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	14%	27%
12.2	Have you had any problems sending or receiving mail?	26%	34%
12.3	Have you had any problems getting access to the telephones?	9%	11%

Diversity Analysis



Key question responses (disability and age over 50) HMP Erlestoke 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 aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better					
	Any percentage highlighted in blue is significantly worse					
	Any percentage highlighted in orange shows a significant difference in prisoners' background details					
	Percentages which are not highlighted show there is no significant difference					
Number of completed questionnaires returned		33	114		29	119
1.3	Are you sentenced?	100%	100%		100%	100%
1.5	Are you a foreign national?	12%	7%		3%	8%
1.6	Do you understand spoken English?	100%	99%		100%	99%
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.)	15%	24%		7%	26%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	7%		3%	8%
1.1	Are you Muslim?	6%	7%		0%	8%
1.12	Do you consider yourself to have a disability?				34%	19%
1.13	Are you a veteran (ex-armed services)?	12%	4%		11%	5%
1.14	Is this your first time in prison?	34%	35%		66%	27%
2.6	Were you treated well/very well by the escort staff?	78%	72%		67%	75%
2.7	Before you arrived here were you told that you were coming here?	56%	71%		67%	68%
3.2	When you were searched in reception, was this carried out in a respectful way?	87%	83%		100%	81%
3.3	Were you treated well/very well in reception?	91%	86%		89%	86%
3.4	Did you have any problems when you first arrived?	87%	55%		54%	62%
3.7	Did you have access to someone from health care when you first arrived here?	80%	63%		73%	66%
3.9	Did you feel safe on your first night here?	78%	80%		77%	81%
3.10	Have you been on an induction course?	87%	89%		97%	88%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	55%	53%		59%	51%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	69%	80%	93%	75%
4.4	Are you normally able to have a shower every day?	100%	95%	97%	96%
4.4	Is your cell call bell normally answered within five minutes?	23%	38%	42%	34%
4.5	Is the food in this prison good/very good?	64%	62%	59%	63%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	81%	79%	84%	78%
4.7	Are you able to speak to a Listener at any time, if you want to?	51%	60%	63%	58%
4.8	Do you feel your religious beliefs are respected?	56%	53%	62%	52%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	67%	70%	61%
5.1	Is it easy to make an application?	94%	80%	97%	80%
5.3	Is it easy to make a complaint?	43%	58%	54%	55%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	66%	59%	77%	58%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	37%	41%	40%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	9%	3%	11%
7.1	Do most staff, in this prison, treat you with respect?	87%	87%	93%	86%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	57%	71%	75%	67%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	13%	23%	30%	18%
7.4	Do you have a personal officer?	47%	44%	70%	40%
8.1	Have you ever felt unsafe here?	44%	35%	43%	37%
8.2	Do you feel unsafe now?	28%	8%	11%	14%
8.3	Have you been victimised by other prisoners?	47%	28%	28%	33%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	35%	17%	18%	21%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	6%	3%	6%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	5%	3%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	8%	3%	9%
8.5	Have you been victimised because of your age? (By prisoners)	13%	3%	10%	4%
8.5	Have you been victimised because you have a disability? (By prisoners)	13%	1%	7%	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 aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	28%	18%	23%	19%
8.7	Have you ever felt threatened or intimidated by staff here?	16%	8%	11%	10%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	3%	2%	0%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	3%	3%	4%
8.7	Have you been victimised because of your nationality? (By staff)	3%	4%	0%	4%
8.7	Have you been victimised because of your age? (By staff)	9%	3%	8%	4%
8.7	Have you been victimised because you have a disability? (By staff)	9%	1%	8%	2%
9.1	Is it easy/very easy to see the doctor?	55%	38%	57%	38%
9.1	Is it easy/ very easy to see the nurse?	64%	56%	82%	52%
9.4	Are you currently taking medication?	78%	44%	75%	46%
9.6	Do you feel you have any emotional well being/mental health issues?	84%	27%	43%	40%
10.3	Is it easy/very easy to get illegal drugs in this prison?	61%	57%	62%	58%
11.2	Are you currently working in the prison?	43%	61%	75%	53%
11.2	Are you currently undertaking vocational or skills training?	7%	20%	3%	20%
11.2	Are you currently in education (including basic skills)?	23%	20%	18%	21%
11.2	Are you currently taking part in an offending behaviour programme?	17%	14%	15%	15%
11.4	Do you go to the library at least once a week?	55%	67%	70%	62%
11.6	Do you go to the gym three or more times a week?	13%	34%	16%	32%
11.7	Do you go outside for exercise three or more times a week?	70%	78%	70%	77%
11.8	On average, do you go on association more than five times each week?	48%	58%	45%	57%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	16%	27%	24%	24%
12.2	Have you had any problems sending or receiving mail?	23%	35%	19%	35%
12.3	Have you had any problems getting access to the telephones?	9%	11%	15%	11%



Prisoner survey responses HMP Erlestoke 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

		Prisoners with IPP and life sentences	Prisoners with determinate sentences
	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		49	99
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	0%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	10%	9%
1.4	Is your sentence less than 12 months?	0%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	41%	0%
1.5	Are you a foreign national?	6%	8%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	24%	21%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	9%	6%
1.1	Are you Muslim?	9%	5%
1.11	Are you homosexual/gay or bisexual?	2%	1%
1.12	Do you consider yourself to have a disability?	26%	20%
1.13	Are you a veteran (ex-armed services)?	6%	6%
1.14	Is this your first time in prison?	37%	33%
1.15	Do you have any children under the age of 18?	35%	56%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	76%	74%
2.5	Did you feel safe?	83%	73%
2.6	Were you treated well/very well by the escort staff?	68%	76%
2.7	Before you arrived here were you told that you were coming here?	75%	64%
2.8	When you first arrived here did your property arrive at the same time as you?	75%	78%

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners with IPP and life sentences	Prisoners with determinate sentences
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	77%	77%
3.2	When you were searched in reception, was this carried out in a respectful way?	90%	82%
3.3	Were you treated well/very well in reception?	85%	87%
	When you first arrived:		
3.4	Did you have any problems?	54%	64%
3.4	Did you have any problems with loss of property?	21%	21%
3.4	Did you have any housing problems?	0%	10%
3.4	Did you have any problems contacting employers?	0%	1%
3.4	Did you have any problems contacting family?	6%	20%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	1%
3.4	Did you have any money worries?	10%	5%
3.4	Did you have any problems with feeling depressed or suicidal?	6%	15%
3.4	Did you have any physical health problems?	15%	8%
3.4	Did you have any mental health problems?	17%	20%
3.4	Did you have any problems with needing protection from other prisoners?	0%	5%
3.4	Did you have problems accessing phone numbers?	10%	10%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	27%	15%
3.6	A shower?	25%	26%
3.6	A free telephone call?	27%	48%
3.6	Something to eat?	60%	47%
3.6	PIN phone credit?	21%	23%
3.6	Toiletries/ basic items?	35%	39%

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners with IPP and life sentences	Prisoners with determinate sentences
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	56%	43%
3.7	Someone from health services?	71%	66%
3.7	A Listener/Samaritans?	40%	29%
3.7	Prison shop/ canteen?	38%	32%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	62%	44%
3.8	Support was available for people feeling depressed or suicidal?	49%	33%
3.8	How to make routine requests?	47%	35%
3.8	Your entitlement to visits?	40%	26%
3.8	Health services?	55%	40%
3.8	The chaplaincy?	49%	32%
3.9	Did you feel safe on your first night here?	87%	76%
3.10	Have you been on an induction course?	87%	90%
3.12	Did you receive an education (skills for life) assessment?	89%	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?	60%	49%
4.1	Attend legal visits?	51%	37%
4.1	Get bail information?	17%	12%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	55%	33%
4.3	Can you get legal books in the library?	68%	57%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	87%	75%
4.4	Are you normally able to have a shower every day?	100%	95%
4.4	Do you normally receive clean sheets every week?	83%	64%
4.4	Do you normally get cell cleaning materials every week?	70%	60%
4.4	Is your cell call bell normally answered within five minutes?	29%	39%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	84%	71%
4.4	Can you normally get your stored property, if you need to?	44%	25%
4.5	Is the food in this prison good/very good?	65%	61%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	87%	76%
4.7	Are you able to speak to a Listener at any time, if you want to?	71%	53%
4.8	Are your religious beliefs are respected?	60%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	69%	60%
4.10	Is it easy/very easy to attend religious services?	63%	53%

Key to tables

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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 5: Applications and complaints			
5.1	Is it easy to make an application?	87%	82%
5.3	Is it easy to make a complaint?	58%	53%
5.5	Have you ever been prevented from making a complaint when you wanted to?	27%	20%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	31%	26%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	73%	56%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	40%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	11%	8%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	91%	85%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	76%	65%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	34%	22%
7.4	Do staff normally speak to you most of the time/all of the time during association?	24%	19%
7.5	Do you have a personal officer?	71%	32%

Key to tables

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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?	40%	37%
8.2	Do you feel unsafe now?	15%	13%
8.4	Have you been victimised by other prisoners here?	36%	30%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	30%	16%
8.5	Hit, kicked or assaulted you?	17%	13%
8.5	Sexually abused you?	0%	3%
8.5	Threatened or intimidated you?	24%	19%
8.5	Taken your canteen/property?	6%	5%
8.5	Victimised you because of medication?	4%	3%
8.5	Victimised you because of debt?	6%	7%
8.5	Victimised you because of drugs?	2%	7%
8.5	Victimised you because of your race or ethnic origin?	6%	5%
8.5	Victimised you because of your religion/religious beliefs?	4%	5%
8.5	Victimised you because of your nationality?	9%	7%
8.5	Victimised you because you were from a different part of the country?	4%	3%
8.5	Victimised you because you are from a traveller community?	4%	2%
8.5	Victimised you because of your sexual orientation?	2%	3%
8.5	Victimised you because of your age?	9%	3%
8.5	Victimised you because you have a disability?	6%	2%
8.5	Victimised you because you were new here?	0%	3%
8.5	Victimised you because of your offence/crime?	6%	5%
8.5	Victimised you because of gang related issues?	0%	3%

Key to tables

	Any percentage highlighted in green is significantly better	Prisoners with IPP and life sentences	Prisoners with determinate sentences
	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?	26%	17%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	15%	4%
8.7	Hit, kicked or assaulted you?	4%	5%
8.7	Sexually abused you?	0%	2%
8.7	Threatened or intimidated you?	13%	8%
8.7	Victimised you because of medication?	4%	7%
8.7	Victimised you because of debt?	0%	3%
8.7	Victimised you because of drugs?	0%	2%
8.7	Victimised you because of your race or ethnic origin?	0%	3%
8.7	Victimised you because of your religion/religious beliefs?	2%	4%
8.7	Victimised you because of your nationality?	0%	5%
8.7	Victimised you because you were from a different part of the country?	0%	4%
8.7	Victimised you because you are from a traveller community?	0%	2%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	4%	4%
8.7	Victimised you because you have a disability?	4%	2%
8.7	Victimised you because you were new here?	4%	2%
8.7	Victimised you because of your offence/crime?	2%	3%
8.7	Victimised you because of gang related issues?	0%	2%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	50%	38%
9.1	Is it easy/very easy to see the nurse?	73%	50%
9.1	Is it easy/very easy to see the dentist?	39%	29%
9.4	Are you currently taking medication?	58%	50%
9.6	Do you have any emotional well being or mental health problems?	27%	46%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	26%	26%
10.2	Did you have a problem with alcohol when you came into this prison?	28%	12%
10.3	Is it easy/very easy to get illegal drugs in this prison?	62%	57%
10.4	Is it easy/very easy to get alcohol in this prison?	42%	42%
10.5	Have you developed a problem with drugs since you have been in this prison?	15%	18%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	9%	12%

Key to tables

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	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	72%	61%
11.1	Vocational or skills training?	72%	63%
11.1	Education (including basic skills)?	78%	71%
11.1	Offending Behaviour Programmes?	43%	31%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	69%	52%
11.2	Vocational or skills training?	16%	17%
11.2	Education (including basic skills)?	18%	21%
11.2	Offending Behaviour Programmes?	20%	13%
11.4	Do you go to the library at least once a week?	59%	65%
11.5	Does the library have a wide enough range of materials to meet your needs?	68%	62%
11.6	Do you go to the gym three or more times a week?	22%	32%
11.7	Do you go outside for exercise three or more times a week?	74%	76%
11.8	Do you go on association more than five times each week?	66%	49%
11.9	Do you spend ten or more hours out of your cell on a weekday?	33%	20%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	33%	35%
12.2	Have you had any problems with sending or receiving mail?	36%	30%
12.3	Have you had any problems getting access to the telephones?	13%	11%
12.4	Is it easy/ very easy for your friends and family to get here?	17%	22%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	91%	73%
13.10	Do you have a needs based custody plan?	16%	4%
13.11	Do you feel that any member of staff has helped you to prepare for release?	36%	11%



Prisoner survey responses HMP Erlestoke 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

	Any percentage highlighted in green is significantly better	K, I, S and V wings	A, M, SYA, SYB and W wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		53	93
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	0%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	8%	11%
1.4	Is your sentence less than 12 months?	0%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	13%	12%
1.5	Are you a foreign national?	8%	9%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	17%	25%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	10%	6%
1.1	Are you Muslim?	4%	9%
1.11	Are you homosexual/gay or bisexual?	4%	0%
1.12	Do you consider yourself to have a disability?	15%	27%
1.13	Are you a veteran (ex-armed services)?	8%	6%
1.14	Is this your first time in prison?	55%	24%
1.15	Do you have any children under the age of 18?	41%	52%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	73%	76%
2.5	Did you feel safe?	75%	75%
2.6	Were you treated well/very well by the escort staff?	75%	72%
2.7	Before you arrived here were you told that you were coming here?	73%	63%
2.8	When you first arrived here did your property arrive at the same time as you?	81%	72%

Key to tables

	Any percentage highlighted in green is significantly better	K, I, S and V wings	A, M, SYA, SYB and W wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	73%	79%
3.2	When you were searched in reception, was this carried out in a respectful way?	94%	78%
3.3	Were you treated well/very well in reception?	92%	83%
	When you first arrived:		
3.4	Did you have any problems?	48%	70%
3.4	Did you have any problems with loss of property?	14%	27%
3.4	Did you have any housing problems?	2%	11%
3.4	Did you have any problems contacting employers?	0%	1%
3.4	Did you have any problems contacting family?	6%	21%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	1%
3.4	Did you have any money worries?	8%	7%
3.4	Did you have any problems with feeling depressed or suicidal?	6%	17%
3.4	Did you have any physical health problems?	10%	9%
3.4	Did you have any mental health problems?	14%	23%
3.4	Did you have any problems with needing protection from other prisoners?	2%	5%
3.4	Did you have problems accessing phone numbers?	8%	12%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	30%	12%
3.6	A shower?	34%	21%
3.6	A free telephone call?	40%	41%
3.6	Something to eat?	62%	45%
3.6	PIN phone credit?	24%	23%
3.6	Toiletries/ basic items?	36%	39%

Key to tables

	Any percentage highlighted in green is significantly better	K, I, S and V wings	A, M, SYA, SYB and W wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	49%	48%
3.7	Someone from health services?	67%	68%
3.7	A Listener/Samaritans?	39%	30%
3.7	Prison shop/ canteen?	35%	35%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	57%	45%
3.8	Support was available for people feeling depressed or suicidal?	47%	33%
3.8	How to make routine requests?	51%	32%
3.8	Your entitlement to visits?	41%	25%
3.8	Health services?	61%	36%
3.8	The chaplaincy?	49%	31%
3.9	Did you feel safe on your first night here?	84%	78%
3.10	Have you been on an induction course?	96%	85%
3.12	Did you receive an education (skills for life) assessment?	96%	81%
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?	60%	48%
4.1	Attend legal visits?	52%	35%
4.1	Get bail information?	11%	12%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	44%	37%
4.3	Can you get legal books in the library?	77%	52%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	98%	65%
4.4	Are you normally able to have a shower every day?	100%	95%
4.4	Do you normally receive clean sheets every week?	90%	60%
4.4	Do you normally get cell cleaning materials every week?	81%	53%
4.4	Is your cell call bell normally answered within five minutes?	40%	32%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	85%	69%
4.4	Can you normally get your stored property, if you need to?	46%	24%
4.5	Is the food in this prison good/very good?	67%	59%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	90%	73%
4.7	Are you able to speak to a Listener at any time, if you want to?	78%	78%
4.8	Are your religious beliefs are respected?	63%	49%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	74%	56%
4.10	Is it easy/very easy to attend religious services?	67%	51%

Key to tables

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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	88%	81%
5.3	Is it easy to make a complaint?	53%	55%
5.5	Have you ever been prevented from making a complaint when you wanted to?	24%	20%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	28%	26%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	74%	55%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	41%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	11%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	94%	84%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	76%	66%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	31%	22%
7.4	Do staff normally speak to you most of the time/all of the time during association?	24%	18%
7.5	Do you have a personal officer?	55%	39%

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SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	40%	35%
8.2	Do you feel unsafe now?	14%	14%
8.4	Have you been victimised by other prisoners here?	37%	30%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	23%	18%
8.5	Hit, kicked or assaulted you?	14%	16%
8.5	Sexually abused you?	0%	3%
8.5	Threatened or intimidated you?	23%	18%
8.5	Taken your canteen/property?	4%	7%
8.5	Victimised you because of medication?	2%	5%
8.5	Victimised you because of debt?	2%	10%
8.5	Victimised you because of drugs?	0%	9%
8.5	Victimised you because of your race or ethnic origin?	8%	3%
8.5	Victimised you because of your religion/religious beliefs?	8%	3%
8.5	Victimised you because of your nationality?	10%	6%
8.5	Victimised you because you were from a different part of the country?	2%	3%
8.5	Victimised you because you are from a traveller community?	2%	3%
8.5	Victimised you because of your sexual orientation?	4%	2%
8.5	Victimised you because of your age?	6%	3%
8.5	Victimised you because you have a disability?	4%	3%
8.5	Victimised you because you were new here?	0%	3%
8.5	Victimised you because of your offence/crime?	6%	5%
8.5	Victimised you because of gang related issues?	0%	3%

Key to tables

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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	16%	21%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	10%	7%
8.7	Hit, kicked or assaulted you?	0%	7%
8.7	Sexually abused you?	0%	2%
8.7	Threatened or intimidated you?	10%	9%
8.7	Victimised you because of medication?	2%	7%
8.7	Victimised you because of debt?	0%	3%
8.7	Victimised you because of drugs?	0%	2%
8.7	Victimised you because of your race or ethnic origin?	2%	2%
8.7	Victimised you because of your religion/religious beliefs?	6%	2%
8.7	Victimised you because of your nationality?	2%	5%
8.7	Victimised you because you were from a different part of the country?	0%	5%
8.7	Victimised you because you are from a traveller community?	0%	2%
8.7	Victimised you because of your sexual orientation?	0%	2%
8.7	Victimised you because of your age?	4%	5%
8.7	Victimised you because you have a disability?	4%	2%
8.7	Victimised you because you were new here?	2%	3%
8.7	Victimised you because of your offence/crime?	2%	2%
8.7	Victimised you because of gang related issues?	0%	2%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	41%	41%
9.1	Is it easy/very easy to see the nurse?	60%	55%
9.1	Is it easy/very easy to see the dentist?	31%	32%
9.4	Are you currently taking medication?	60%	47%
9.6	Do you have any emotional well being or mental health problems?	31%	46%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	12%	34%
10.2	Did you have a problem with alcohol when you came into this prison?	18%	16%
10.3	Is it easy/very easy to get illegal drugs in this prison?	73%	51%
10.4	Is it easy/very easy to get alcohol in this prison?	51%	38%
10.5	Have you developed a problem with drugs since you have been in this prison?	8%	23%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	8%	13%

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SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	82%	55%
11.1	Vocational or skills training?	85%	57%
11.1	Education (including basic skills)?	89%	66%
11.1	Offending Behaviour Programmes?	27%	40%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	84%	42%
11.2	Vocational or skills training?	22%	13%
11.2	Education (including basic skills)?	28%	17%
11.2	Offending Behaviour Programmes?	18%	14%
11.4	Do you go to the library at least once a week?	73%	57%
11.5	Does the library have a wide enough range of materials to meet your needs?	78%	57%
11.6	Do you go to the gym three or more times a week?	24%	31%
11.7	Do you go outside for exercise three or more times a week?	71%	79%
11.8	Do you go on association more than five times each week?	55%	55%
11.9	Do you spend ten or more hours out of your cell on a weekday?	38%	17%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	37%	34%
12.2	Have you had any problems with sending or receiving mail?	39%	25%
12.3	Have you had any problems getting access to the telephones?	14%	9%
12.4	Is it easy/ very easy for your friends and family to get here?	35%	13%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	90%	73%
13.10	Do you have a needs based custody plan?	13%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	32%	12%