

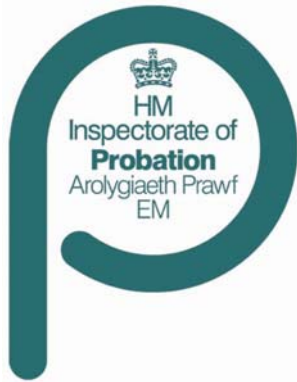
Report on an announced inspection of

HMP Wormwood Scrubs

by HM Chief Inspector of Prisons

31 July–11 August 2017

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



Crown copyright 2017

This publication, excluding logos, is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3 or write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Any enquiries regarding this publication should be sent to us at the address below or: hmiprisons.enquiries@hmiprisons.gsi.gov.uk

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

Printed and published by:
Her Majesty's Inspectorate of Prisons
Clive House
5th floor
70 Petty France
London
SW1H 9EX
England

Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	21
Section 2. Respect	29
Section 3. Purposeful activity	41
Section 4. Resettlement	47
Section 5. Summary of recommendations and good practice	55
Section 6. Appendices	59
Appendix I: Inspection team	59
Appendix II: Progress on recommendations from the last report	61
Appendix III: Care Quality Commission Requirement Notice	71
Appendix IV: Photographs	73
Appendix V: Prison population profile	75
Appendix VI: Summary of prisoner questionnaires and interviews	79

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

Wormwood Scrubs is an iconic local prison serving communities in London. A key responsibility of the prison is the resettlement and reintegration of the 1,227 men it holds, with many recently remanded or sentenced and others reaching the end of their sentences. Reflecting its catchment area, the population is diverse, with over half being from a black and minority ethnic background, a third being foreign nationals, and 83 being young adults under the age of 21. It was also the case that the population presented with significant personal needs and vulnerabilities.

This announced inspection followed our previous visits in December 2015 and May 2014, and on both occasions we raised very serious concerns across our healthy prison assessments and commented on the lack of progress in improving outcomes for those detained. Following this inspection we report again on the intractability and persistence of failure at this prison, notwithstanding the hard work of the governor and his staff to try to make some difference. As we have reported before, outcomes for prisoners were not good enough in any of our assessments, and in two assessments outcomes remained poor.

The prison was still not safe enough, with high levels of often serious violence. It would be wrong to say that there had been no work to try to improve the situation, yet in our survey prisoners told us they felt less safe than at our last visit. There had also been three self-inflicted deaths since our last visit, but care for men vulnerable to self-harm was poor. Despite some efforts to improve the physical environment and offer more purposeful activity, prisoners faced real daily frustrations and the prison struggled to provide decent conditions. Equality and diversity work was poor, and too many men were locked up for significant periods of the day, often as long as 23 hours. Resettlement and offender management work was fundamentally failing and the prison was not meeting one of its key aims of supporting men to understand and address their offending behaviour and risk. The quality of public protection work was also not good enough.

Some progress had been made. Early days support had improved, and first night substance misuse support was now appropriate and safe. Oversight of the use of force was better and, while use of force was high, what we saw was proportionate. The segregation unit did reasonably well with some very challenging men. Staff–prisoner relationships remained basically sound and, in our judgement, staff were remarkably stoic despite the pressures they were under. Health care provision was reasonably good, and effort had been made to make daily routines more predictable. There were now more purposeful activity places, and leadership and management and learning outcomes had improved somewhat, although from a very low base. That said, we found 44% of prisoners locked in cell during the working day.

Some key themes were evident in the problems we saw. Staffing shortages were pervasive, and resulted in significant staff redeployment and a failure to deliver even basic services. We were told of chronic problems experienced in recruiting new staff, and a large number of more experienced staff had left. We saw large, challenging wings being run by groups of relatively junior staff, some of whom lacked the confidence to challenge the men in their care adequately. Some key contracted providers were not delivering services effectively. There were long delays in Carillion carrying out maintenance tasks, and the prison stores had not been open for many weeks, leaving staff to scavenge for many basic items needed by prisoners. The community rehabilitation company (CRC) contract had not delivered the appropriate level of resettlement work required, which meant that many men left the prison without support. It was particularly concerning that men posing high risks of harm were not being adequately managed by probation officers.

Overall, this was an extremely concerning picture, and we could see no justification as to why this poor situation had persisted since 2014. The governor and his team were, to their credit, working tirelessly to address the problems faced. Managers understood the challenges and had made some tough choices about what they could and could not do, given the multitude of problems. This was

commendable. But we were not confident that they could deliver improvement to outcomes without considerable additional external support. Her Majesty's Prison and Probation Service (HMPPS) must, in our view, engage with the governor and his team to develop a recovery plan, addressing issues of resources and contractual provision, as well as areas where the current management team and staff at Wormwood Scrubs can do better. We fear that if this does not happen, the poor picture we found at this and the previous two inspections will persist.

For our part, we have made far fewer recommendations in this report than normal, to ensure that the priority actions we have identified are clear and unambiguous.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

September 2017

Fact page

Task of the establishment

HMP Wormwood Scrubs is a local prison serving the courts of West London, and is a designated resettlement prison for London prisoners. It holds young adults on remand and is a hub prison for foreign national prisoners subject to immigration enforcement.

Prison status

Public

Region/Department

London Thames Valley

Number held

1,227

Certified normal accommodation

1,171

Operational capacity

1,279

Date of last full inspection

30 November – 4 December 2015

Brief history

HMP Wormwood Scrubs was built by prisoners from Millbank Gaol between 1875 and 1891. In 1902, the last female prisoner was transferred to HMP Holloway. In 1922, one wing became a borstal. During World War II, the prison was used by the War Department. In 1994, a new hospital wing was completed and in 1996 two of the four existing wings were refurbished to modern standards while a new fifth wing was completed.

Short description of residential units

A wing holds 290 prisoners; two of the four landings are for prisoners in full-time activities

B wing holds 176 prisoners and operates as the induction wing.

C wing holds 317 prisoners

D wing has single-cell accommodation for 244 prisoners, and holds most prisoners whose cell-sharing risk has been assessed as high

E wing has 146 single cells; two of the three landings are for prisoners in full-time activities. The other landing, E4, has recently been given a new function as a mentoring and support unit.

The first night centre has spaces for 34 new arrivals.

The Jan Wilcox unit, which is used as an extension of B wing, has 17 spaces for peer workers and enhanced prisoners.

The Conibeere unit has 55 spaces for new arrivals requiring substance misuse stabilisation.

H3 is the 17-bed inpatient unit.

The segregation unit has 19 cells.

Name of governor

Steven Bradford

Escort contractor

Serco

Health service provider

Care UK

Learning and skills providers

Novus

Independent Monitoring Board chair

Robert Foreman

Community rehabilitation company (CRC)

London CRC

About this inspection and report

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

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

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

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

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by 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 IV respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

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

Summary

Safety

- S1** *Prisoners experienced frequent delays in court cells before movement to the prison. Early days support at the prison had improved overall but significant gaps remained. Levels of violence were still too high and many incidents were serious. More prisoners than at the time of the previous inspection reported feeling unsafe, and there was insufficient attention to addressing poor behaviour and violence. Support for those at risk of self-harm was poor. Security staff understood the challenges faced by the prison but intelligence was rarely responded to. An almost exclusively punitive approach was taken to managing poor behaviour. Levels of use of force were high. Segregation arrangements were reasonable, given some very challenging prisoners held. Some aspects of substance misuse support needed to be improved. **Outcomes for prisoners were poor against this healthy prison test.***
- S2** *At the last inspection in 2015 we found that outcomes for prisoners in Wormwood Scrubs were poor against this healthy prison test. We made 21 recommendations in the area of safety. At this follow-up inspection we found that nine of the recommendations had been achieved, one had been partially achieved and 11 had not been achieved.*
- S3** Too many prisoners were still held in court cells for too long before being taken to the prison. Reception was extremely busy and, although processes had been speeded up, there could still be considerable delays. Facilities were functional and clean, and staff dealt well with the large number of prisoners moving through the area. The initial safety interview we observed did not fully explore potential risks or concerns, and professional telephone interpreting services were not always used when needed. Good peer support was provided on arrival and on the induction wing, although there was insufficient oversight of this. There were now sufficient spaces on the first night centre to enable all new arrivals to be located there or on the detoxification wing. Conditions in first night cells were reasonably good but some new arrivals did not have all the basic items, such as a pillow. The induction programme was comprehensive but, owing to staff shortages, most of the sessions were cancelled.
- S4** Too many prisoners did not feel safe. In our survey, around two-thirds of prisoners said that they had felt unsafe at the prison at some time, and over a third that they currently felt unsafe, both of which were worse than at similar prisons and at the previous inspection. Levels of violence were high, and much of it was serious, including a dramatic increase in assaults against staff. Attendance at the violence reduction meeting was often poor. The monitoring of data was comprehensive and identified emerging hotspots, but not enough was done to respond to the safety concerns being identified. Assistance for victims was lacking and an almost exclusively punitive approach was taken to managing poor behaviour. The use of E4 as a support landing for men who were particularly vulnerable or self-isolating was a promising initiative but it was not yet functioning as intended.
- S5** There had been three self-inflicted deaths in the previous 18 months. The number of self-harm incidents was high but similar to that at other local prisons. Prisons and Probation Ombudsman recommendations had recently been reviewed but elements of the local action plan were not up to date, and serious self-harm incidents had not been investigated. The strategic oversight of self-harm and suicide prevention was superficial, and cross-deployment of safer custody staff hindered the effectiveness of the team. The management of prisoners in crisis was poor and in too many cases insufficient action was taken to promote their safety.

- There was an enthusiastic team of Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), and access to them was being improved. Adult safeguarding arrangements were weak.
- S6 Security arrangements were proportionate. The key threats were violence, drugs and mobile phones. There was an appropriate focus on gangs and also the risks posed from extremism and radicalisation. There was an excellent partnership with the police, including on-site staffing and liaison arrangements with local London boroughs. There was a healthy flow of information reports but regular staff redeployment meant that they rarely resulted in action being taken. Despite an improved strategic approach to drug and alcohol supply reduction, the random mandatory drug testing positive rate remained high at 16.3%, and was even worse if synthetic cannabis results were included.
- S7 Despite recent efforts to revive the incentives and earned privileges (IEP) scheme, it was still not used effectively to manage prisoner behaviour. There was too little differential between IEP levels to encourage good behaviour.
- S8 The number of adjudications had increased. The process was not well managed and many adjudications were not proceeded with.
- S9 Levels of use of force were very high and almost all recorded uses involved the use of full restraint. Managerial oversight had improved, although data analysis was limited and too many dossiers remained incomplete. All planned incidents were video-recorded and there was regular review and quality assurance of incidents. The recordings we viewed were well managed and demonstrated a focus on de-escalation. The number of incidents involving the drawing of batons was high, although most related to a few potentially serious incidents. They had all been investigated, and we were satisfied that uses were justified. The use of special accommodation was high. This was not reviewed at the use of force meetings and none of the records we reviewed had been completed correctly.
- S10 The number of prisoners segregated was similar to that at the time of the previous inspection, and the average length of stay was nine days. Managerial oversight had improved very recently but there had been only one segregation monitoring and review group meeting in the previous year. Segregation staff had to manage some very problematic prisoners. Most cells on the unit were clean and in reasonably good order, and staff worked hard to deal with the incessant graffiti and damage caused by prisoners located there. Prisoners on the unit spoke positively about their treatment by staff and we observed skilful management of some particularly poor behaviour. Reintegration planning was poor but most prisoners returned to normal location.
- S11 A new substance misuse strategy and regular meetings supported a developing whole-prison approach. However, there was no current needs assessment or cohesive action plan. Clinical and psychosocial support for newly arrived prisoners had improved, and was now good. However, ongoing psychosocial support for many prisoners was inadequate due to staffing shortages and regime restrictions. Clinical treatment was flexible. Prisoners with substance misuse and mental health issues could access excellent support, including a specialist psychological therapy service.

Respect

S12 *Despite efforts to improve conditions, prisoners faced daily challenges and frustrations in living decently, and both the lived and external environment were poor. Problems with the maintenance services contract were also contributing to the challenges faced. Staff–prisoner relationships were generally good but staff were extremely stretched, which meant that they had limited capacity to get to know prisoners or provide support when needed. Equality and diversity work was weak, and outcomes for the protected characteristic groups varied greatly. The chaplaincy was excellent. Responses to complaints were inconsistent and not all replies were appropriate. Legal services needed to be improved. Health care provision was reasonably good overall. The food provided was poor and there were delays in getting a shop order on arrival. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S13 *At the last inspection in 2015 we found that outcomes for prisoners in Wormwood Scrubs were not sufficiently good against this healthy prison test. We made 33 recommendations in the area of respect. At this follow-up inspection we found that nine of the recommendations had been achieved, two had been partially achieved and 22 had not been achieved.*

S14 In our survey, prisoners were more negative than at similar prisons about virtually every aspect of daily life. Efforts had been made to paint the wings and cells since the previous inspection but there was still too much grime in communal areas and a lot of graffiti in cells, and many toilets were filthy. Showers were dilapidated and lacked privacy. There were problems with the maintenance services contract and many repairs were outstanding, and numerous cell windows, showers and telephones had been broken for many months. Outside areas were strewn with litter, and despite efforts to address the vermin problem, rats and cockroaches persisted. The prison's stores were not staffed by Carillion, the contracted provider, and had to be accessed on an ad hoc basis by prison managers, so the supply of essential daily items to the wings was haphazard. Prisoners were frustrated about their inability to get simple things done. They had difficulty in accessing their property and the applications process was inconsistent and unreliable.

S15 In our survey, fewer prisoners than at similar prisons said that staff treated them respectfully, checked on their welfare or spoke to them on association. Our own observations, however, suggested many good interactions between staff and prisoners, and most respondents to our survey also said that they had a member of staff who would help them if they had a problem. Staff were clearly resilient but too stretched to support prisoners or address their frustrations properly. Many wing staff were new and some lacked the confidence to challenge prisoners and enforce the regime.

S16 The strategic management of equality and diversity work was weak. The diversity and equalities action team (DEAT) meetings did not take place regularly, monitoring was weak and there was insufficient consultation with key groups of prisoners. Investigations of discrimination incident report forms were reasonably good. Prisoner diversity representatives provided some support and their work was clearly appreciated, but they did not receive sufficient supervision. In our survey, more black and minority ethnic and Muslim prisoners than their respective counterparts reported negatively about some important aspect of safety and respectful treatment, and we found little to suggest that the prison had done enough to understand these perceptions. Support for foreign national prisoners had improved, and immigration surgeries were held on all wings at least once a week. Gypsy, Romany and Traveller prisoners had access to good support, including a monthly group. However, there was insufficient support for prisoners with disabilities, older prisoners and young adults.

- S17 The chaplaincy was effective, and met the needs of all faith groups for worship, instruction and pastoral care. They saw all those on assessment, care in custody and teamwork (ACCT) case management procedures for prisoners at risk of suicide or self-harm, and were fully engaged with the broader life of the prison. Links with community faith groups were excellent and resettlement support was very good.
- S18 Although the quality of replies to many complaints was reasonably good, some were superficial, dismissive and did not evidence sufficient investigation. Many complaints were about low-level issues that should have been dealt with through the applications system. Complaints about staff were not always investigated thoroughly.
- S19 There were not enough private rooms for legal visits, and in our survey too many prisoners reported negatively about access to legal services.
- S20 Overall, we found the quality of health services to be reasonably good, although the restricted prison regime had an impact on the effective delivery of some services. Partnership working and clinical governance were generally effective, with the exception of health care complaints. Regular use of agency staff and an ongoing recruitment campaign had begun to mitigate the staffing difficulties, other than in pharmacy. There was an appropriate range of primary care services, with acceptable waiting times, and the management of long-term conditions was reasonable. Staff on the inpatient unit provided good care for patients with complex health needs. Too many external hospital appointments were rescheduled, mainly because of a lack of escort staff. Many aspects of medicines management were poor, including the lack of supervision of medicine queues by custody staff, which compromised patient confidentiality and increased the risk of diversion. Dental provision was good. Mental health provision was comprehensive, including improved access to a developing range of therapeutic groups and counselling. Systems to ensure prompt identification, assessment and management of social care needs were inadequate.
- S21 The quality and quantity of the food provided were poor. There were delays in prisoners receiving their first prison shop order after arrival.

Purposeful activity

S22 *Considerable effort had gone into stabilising the regime. However, for a large number of prisoners, the amount of time out of cell was still inadequate and many were locked in cell during the working day. The leadership and management of learning and skills had improved and the number of activity places had increased. More prisoners were engaged in activities than at the time of the previous inspection, but still too many were not encouraged into activities, and attendance and punctuality were not good enough. The quality of much that was offered, and prisoners' achievements, were good, although our partners in Ofsted judged overall effectiveness of provision as 'requires improvement' in their assessment. Access to the library and gym was poor. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S23 *At the last inspection in 2015 we found that outcomes for prisoners in Wormwood Scrubs were poor against this healthy prison test. We made 15 recommendations in the area of purposeful activity. At this follow-up inspection we found that nine of the recommendations had been achieved and six had not been achieved.*

S24 There had been a determined effort, from what had been a very low base, to improve the regime. During our roll checks, 41% of prisoners were locked behind their doors during the working day, which, although an improvement, remained very poor. Full-time workers, about

a quarter of the prison population, had about seven and a half hours a day out of their cell from Monday to Thursday, but the majority had considerably less. The 134 unemployed prisoners on the largest wing were often locked up for about 23 hours a day.

- S25 The leadership and management of learning and skills had improved but was still judged by our partners in Ofsted as 'requires improvement' in their assessment. Partnership working between the prison and Novus, the education and training provider, was particularly effective, and there was an appropriate emphasis on developing prisoners' English and mathematics skills. A small number of prisoners were undertaking distance learning courses. Prisoners' participation in purposeful activities had increased since the previous inspection. However, the frequent restrictions to the prison regime had had a negative impact on attendance at learning and skills sessions and work, and prisoners were not being encouraged to participate.
- S26 Senior managers had increased the number of activity places, and the level of unemployment had reduced. There were sufficient full- and part-time activity places for nearly all of the population to be occupied. However, places were too often underutilised.
- S27 Education and training provision was good. Education classes were well planned and delivered. In most sessions, teachers and trainers used a wide variety of activities that motivated and interested prisoners, met their needs and supported them to make good progress. The provision of English for speakers of other languages was good.
- S28 Prisoners generally behaved well but attendance and punctuality required improvement. Prisoners working as peer mentors were highly motivated and valued the opportunities to develop their skills. Prisoner representatives on the wings running the prisoner information point were particularly valuable and useful for promoting learning and skills.
- S29 Prisoners achieved consistently well on most education and vocational training programmes. More work was needed to improve functional skills achievements in English at level 2, and qualifications in industrial cleaning and gardening.
- S30 The library was a good resource but access for prisoners who were not in education or training was poor, and stock loss was high. Our survey was negative about prisoners' access to the library.
- S31 PE staff were too often redeployed to operational duties, and sessions were regularly cancelled. In our survey, only 8% of respondents said that they used the gym more than three times a week, compared with 25% at similar prisons.

Resettlement

- S32** *Resettlement provision was not meeting prisoners' needs. Offender management work was **very poor**, and prisoners were not adequately supported in understanding and reducing their risk of harm to others. There were some serious deficiencies in public protection work. Much release preparation work was not effective, and there were some particularly poor outcomes in releasing prisoners to sustainable accommodation. The social visits experience was poor, but some good work was being done more broadly to support contact with children and families. **Outcomes for prisoners were poor against this healthy prison test.***
- S33** *At the last inspection in 2015 we found that outcomes for prisoners in Wormwood Scrubs were poor against this healthy prison test. We made 16 recommendations in the area of resettlement. At this follow-up inspection we found that three of the recommendations had been achieved, three had been partially achieved and 10 had not been achieved.*
- S34** Although the prison was effective in servicing the local courts, it was fundamentally failing to meet its other key role as a resettlement prison. Some aspects of the strategic approach to resettlement had improved, with regular meetings and a reasonable needs assessment. However, the partnership relationships between the prison and the community rehabilitation company (CRC), and the prison and the National Probation Service had been poor for many months. Although there were signs of improvement in both cases, significant work was required to cement this new start.
- S35** The offender management unit (OMU) now incorporated both the population management of the prison and 'offender management' functions but many of the administrative staff were unable to complete the full range of tasks. There were only 4.5 full-time-equivalent uniformed offender supervisors (against a target of 12), and even these were frequently cross-deployed. Around 28 weeks of work had been lost to redeployment in the previous six months. At the time of the inspection, at least 174 prisoners did not have an offender assessment system (OASys) assessment, and many were moved on to training prisons without one. Prisoners were not routinely allocated an offender supervisor and had little face-to-face contact with OMU staff. In our survey, of the few prisoners who said that they had a sentence plan, 68% said that no one was working with them to achieve their targets. Overall offender management and sentence planning outcomes were extremely poor and some of the worst we have seen in any prison we have inspected.
- S36** Home detention curfew (HDC) assessments were good, and decision-making was reasonable and appropriately documented. Despite some long delays in receiving home circumstances reports, 49% of those approved for HDC were released on their eligibility date.
- S37** Public protection work was poor. The prison was unable to provide us with a comprehensive list of high or very high risk of harm cases, and we found that most high risk cases that were identified were not being managed actively at all.
- S38** Initial categorisation decisions were reasonable and were generally made promptly. However, most transfers were driven by operational need rather than by sentence plan objectives. There was a shortage of category B places in training prisons. A large backlog of recategorisation assessments had been reduced but some had been significantly overdue.
- S39** Many prisoners on indeterminate sentences received insufficient support.

- S40 The CRC was not meeting its targets to see prisoners during induction and then again before release. In our survey, fewer prisoners than at comparator prisons said that they knew who could help them with resettlement issues.
- S41 Data on accommodation on release was inconclusive, but it was clear that many prisoners had no stable accommodation on discharge. The national careers service provision required improvement and there was no structured pre-release programme.
- S42 Prisoners on medication were given a week's supply on a risk-assessed basis, and a discharge summary. Patients with enduring mental health problems were managed using the care programme approach, with appropriate liaison with community mental health teams. Release planning for prisoners with substance misuse issues was effective, supported by strong community links.
- S43 There was insufficient finance, benefit and debt provision to meet the needs of prisoners.
- S44 Social visits routinely started late and prisoners had to wait for long periods in poorly ventilated holding rooms for their visitors to arrive. Processing visitors took too long, and they often had to wait for long periods in cramped conditions because of delays caused by staffing issues. Broader work on the children and families resettlement pathway was developing well, and the provision of family and child-centred visits, alongside parenting and relationship courses, was very good.

Main concerns and recommendations

S45 Concern: Levels of violence were far too high, and much of it was serious. The number of assaults against staff had increased since the previous inspection. In our survey, prisoners were more negative than at comparator prisons and than at the time of the previous inspection about feelings of safety. The strategic response to this was weak, and insufficient staff were allocated to safer custody work and other key tasks such as intelligence-led cell searching. The response was almost entirely punitive, with only a limited focus on addressing the underlying causes of the violence or encouraging more positive behaviour.

Recommendation: The strategic response to managing and reducing violence should be strengthened. Sufficient staff should be allocated to safer custody and other key tasks to ensure a proactive approach to keeping prisoners safe. The success of this approach should be measured by reduced levels of violence.

S46 Concern: Care for prisoners who were vulnerable to self-harm was inadequate. The quality of many ACCTs was poor and did not provide assurance that men were being well cared for. Many prisoners we spoke to on an ACCT did not feel supported. Serious near-misses were not investigated, to learn lessons.

Recommendation: Levels of self-harm must be reduced. Prisoners who are vulnerable to self-harm should be supported effectively; staff should help them to manage their problems and improve their coping strategies.

S47 Concern: Prisoners faced many frustrations in daily living. The provision of basic kit and other materials was inconsistent and the applications process was unresponsive, which compounded the frustration. Staff were extremely stretched and often unable to assist. Physical conditions were poor overall, with many showers and toilets being dirty, windows broken and the general environment grubby and strewn with litter. The Carillion maintenance services contract was ineffective in enabling the prison to ensure that prisoners lived in decent conditions.

Recommendation: The prison governor, staff and HMPPS should ensure that prisoners live in clean, properly equipped and respectful conditions. Prisoners must be provided with the equipment and kit as well as other requirements to live a decent life.

S48 Concern: Equality and diversity work had been neglected, which meant that the needs of many prisoners with protected characteristics were not being met. Consultation arrangements with prisoners with some of the protected characteristics were inadequate. The negative perceptions of black and minority ethnic and Muslim prisoners had not been explored and data were not interrogated sufficiently to rectify potential inequality. Identification of some protected characteristics needed to be better, and support for older prisoners, young prisoners, gay and bisexual prisoners and those with disabilities was inadequate.

Recommendation: Diversity and equality must be respected and promoted. Equality and diversity work should ensure outcomes and perceptions are measured and that the needs of prisoners with protected characteristics are understood and, where possible, met.

S49 Concern: Too many prisoners were locked up for long periods during the working day. The activity places available were too often underutilised, and prisoners were not proactively encouraged to participate. Delays in the regime meant that men attending activities often arrived late.

Recommendation: Maximum use should be made of the available activity places. Staff should actively encourage prisoners to attend, and the regime should ensure that men can do so consistently and punctually.

S50 Concern: Offender management arrangements were very poor. Many prisoners did not have an assessment of their risks and needs, and there was limited ongoing work with them to help them to reduce their risk of harm to others, and to make progress. Many prisoners were moved to training prisons without the requisite work having taken place at the establishment.

Recommendation: Managers should implement offender management arrangements which ensure that prisoners have an up-to-date and adequate assessment of their risks and needs, a sentence plan and ongoing support to achieve their sentence plan objectives.

S51 Concern: Public protection screening on arrival at the prison was not always timely. There was no inter-departmental risk management meeting to ensure that existing and emerging risks were identified, and multi-agency public protection arrangements (MAPPA) levels were not identified at least six months before release from the prison. The prison was unable to identify all high or very high risk of harm prisoners, and these cases were not given priority in allocating offender supervisors. In our case sample, some important aspects of public protection work had not been done, potentially leaving some serious issues unmanaged.

Recommendation: Prison and probation managers should urgently review their public protection arrangements and ensure that robust multi-agency arrangements to identify and manage risk are implemented correctly and consistently.

S52 Concern: Work to support prisoners before release and 'through the gate' was weak overall. The CRC contract was ineffective, and many prisoners who should have had a resettlement plan did not have one. Relatively few prisoners knew who to approach for help with resettlement issues.

Recommendation: All prisoners within 12 weeks of release should have a realistic resettlement plan which ensures that they receive the support they require and which is shared with offender managers.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1 In our survey, fewer prisoners than at other local prisons and when we last inspected said that they had felt safe during their journey to the prison, and that they had been treated well by escort staff. The establishment now covered more courts across London, which meant that more men had longer journeys to the prison than when we last inspected. In addition, some waited too long in court cells before departing for the prison. Too few prisoners said that they had been told where they were going from court, and hardly any had received written information about Wormwood Scrubs.
- I.2 The escort vehicles we inspected were grubby and contained graffiti but were adequately equipped. Prisoners disembarked quickly after arrival at the prison and were not handcuffed.
- I.3 Court video-link at the prison was used daily, which reduced the need for prisoners to travel to and from court.

Early days in custody

Expected outcomes:

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

- I.4 Reception was very busy, particularly during the early evening. Reception staff and orderlies ensured that late arrivals had good access to first night provision.
- I.5 Reception facilities were functional and clean. Some improvements had been made; for example, holding rooms now contained a box of books and a television to keep prisoners occupied. New arrivals were offered a telephone call, a meal and a 'decency pack', containing toiletries and eating utensils. We observed staff dealing with newly arrived prisoners with respect and professionalism. In our survey, however, less than half of prisoners said they had been treated well in reception, which was much worse than the comparator for local prisons.
- I.6 Although there had been attention to trying to speed up the process, too many prisoners spent over two hours in reception, due partly to the large numbers arriving in the early evening, but also to the lack of staff to escort prisoners onwards to the first night wing.
- I.7 All the necessary interviews were conducted on arrival, including health care screening, first night safety checks and property checks. However, the initial safety interviews we observed were rushed and did not fully explore potential risks or concerns, undermining their effectiveness. One prisoner, who was in custody for the first time, spoke little English but was not offered the use of professional telephone interpreting services when staff were trying to explore safety and other potential risk factors.

- I.8** In our survey, far fewer prisoners than at other local prisons and at the time of the previous inspection said that they had felt safe on their first night at the prison. The reasons for this were unclear but may have related to the fact that, until shortly before this inspection, new prisoners were located anywhere in the prison where there was a space, leading to inconsistency in the care and support being offered. This problem had been addressed, and all new arrivals now went to the first night centre or the detoxification wing. Staff on these units were better able to manage new arrivals, which had improved the level of care offered.
- I.9** Conditions on the first night centre were reasonably good and one of the dormitories had been redecorated to a good standard. Other cells and dormitories were less well maintained, with some new arrivals not having basic items such as a pillow or a kettle, and some had only one set of prison-issue clothing.
- I.10** There was a wide range of good peer support during the first few days at the establishment. Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and orderlies worked in reception and on the first night centre, and trained Insiders (prisoners who introduce new arrivals to prison life) worked on the induction wing (see below). However, there was a lack of staff oversight of these sessions (see also paragraph 2.7).
- I.11** Prisoner induction started on the first working day after arrival with the completion of a basic custody screening, a talk from Citizens Advice and further health care checks. Prisoners moved to the induction wing (B wing) that afternoon, to continue their induction. This included a comprehensive 'introduction to prison life' presentation made by the Insiders, a gym induction and an education assessment. However, owing to staff shortages, most of the sessions led by Insiders were cancelled.

Recommendation

- I.12** Peer workers should be actively managed and overseen by a member of staff.

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.13** In our survey, 65% of prisoners said that they had felt unsafe at the prison at some time, and 36% that they currently felt unsafe, both of which were worse than at similar prisons and than at the time of the previous inspection.
- I.14** Levels of violence were very high, and much of it was serious, resulting in some significant injuries. There had been over 90 assaults on staff in the six months prior to our inspection, and well over 200 assaults in total, and both figures were much higher than we usually see. The frequency of assaults on staff had increased dramatically, and was far higher than at the time of the previous inspection.
- I.15** Safer custody staff were routinely deployed to other duties, which meant that measures to address violence were far too limited, and investigations into incidents almost non-existent.

- I.16** Data collection identified areas and people of concern, but was not yet resulting in significant inroads being made into the safety challenges faced by the prison. The governor chaired the violence reduction meetings but, as at the time of the previous inspection, attendance was often poor, with some key departments not represented and few discernible outcomes to discussions.
- I.17** There was a violence reduction strategy, which reflected the challenges faced, but not all actions had been implemented, and the action plan had not been reviewed or updated in 2017. A violence reduction survey had been undertaken to gain prisoners' views but the number of returns had been very low and provided little insight into the causes of incidents (see main recommendation S45).
- I.18** Perpetrators of violence were managed using the incentives and earned privileges (IEP) scheme or by adjudication, with little investigation into the reasons for the poor behaviour and no interventions to reduce antisocial behaviour (see main recommendation S45).
- I.19** There had been some consideration of the needs of victims of violence and antisocial behaviour. Our previous concern about prisoners self-isolating had begun to be addressed with the introduction of a mentoring and support unit on E4 landing. This was an interesting initiative but it was not yet functioning effectively, leading to some long periods of lock-up for prisoners on the unit. The staff and prisoners we spoke to were unsure about its role, with too little mentoring and support offered, and many mistakenly assumed that it was a vulnerable prisoner unit.

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** In the previous 18 months, there had been five deaths due to natural causes and three that had been self-inflicted. The number of self-harm incidents was high, although not dissimilar to what we have seen at other local prisons.
- I.21** There were two death in custody action plans in place. One related to Prisons and Probation Ombudsman recommendations, and had recently been reviewed. The second was a local action plan but this had not been updated and it was unclear why there was a need for two plans which were managed differently.
- I.22** Significant cross-deployment of safer custody staff was undermining suicide and self-harm prevention work. Although the safer custody committee meeting was reasonably well attended, strategic oversight was underdeveloped. For example, analysis of data was too limited and some serious incidents of self-harm had not been investigated to identify learning (see main recommendation S46).
- I.23** Pressures caused by frequent staff shortages limited the amount of time that staff could devote to supporting prisoners in crisis, so their day-to-day management was poor. Few of the men we spoke to who were under assessment, care in custody and teamwork (ACCT) case management monitoring spoke positively about the support they received, with most suggesting that the main focus was on enhanced observations rather than constructive interventions. The review we observed was poor, as a result of constant interruptions and the lack of attendance by staff other than the case manager (see main recommendation S46).

- I.24** All of the ACCT documents we reviewed demonstrated significant weaknesses, including late reviews, poor care maps that were not updated or delivered as planned, and in some cases an underestimation of the risks posed, given the evidence from recent self-harming behaviour (see main recommendation S46).
- I.25** There was an enthusiastic team of Listeners, and access to them was being improved, but the care suites were in a poor condition.

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.²

- I.26** The management of safeguarding was weak. There was no single manager with responsibility for this area of work. No one from the prison (except Care UK staff) attended the local safeguarding adults board. Staff on the wings did not understand the term 'safeguarding' and were not aware of what it entailed. They were not aware of whom to contact for advice, referral or assessment, and none of the staff we spoke to had received any specific training.

Recommendation

- I.27** **Comprehensive adult safeguarding procedures should be embedded across the prison, and the prison should be represented on the local safeguarding adults board.**

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.28** Access around the site was well managed and supervision of prisoners during free-flow was good. Far too many windows facing the perimeter wall were broken, which enabled prisoners to retrieve contraband thrown over the wall. Netting had been installed to try to prevent this but there were many holes in it, reducing its effectiveness.
- I.29** There was a reasonable flow of intelligence, with an average of 500 intelligence reports submitted each month. Over a quarter were violence related, with drugs and mobile phones also featuring regularly. Gang-related activity continued to affect the stability of the prison, although prisoners were moved and relocated around the wings to disrupt associations and to keep rival groups apart. Analysis of information was prompt but, because of staff shortages, few intelligence-led searches were undertaken. The prison's response to the intelligence received did not adequately address the ongoing risks.

² We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

- I.30** Partnership working with the police was excellent, and on-site and regional police staff provided effective support to the prison. There was an appropriate focus on the risks presented by extremism and radicalisation, with regular reviews of potential perpetrators and those who were potentially vulnerable.
- I.31** The monthly security meeting focused on the threats to the prison but attendance was often poor and too many key departments were not represented. Data was presented and discussed, clear objectives were set, but, fundamentally, concerns and priorities identified were not resulting in action being taken that was sufficiently effective.
- I.32** Despite a better approach to drug and alcohol supply reduction since the previous inspection, drug finds, positive mandatory drug testing (MDT) results and intelligence indicated that illicit drugs, particularly cannabis and synthetic cannabis, remained very accessible.
- I.33** In our survey, 14% of prisoners said that they had developed a problem with illicit drugs at the establishment, which was more than at similar prisons (11%) and than at the time of the previous inspection (8%). The random MDT positive rate for the six months to June 2017 was high, at 16.3% (against a target of 10.8%). This increased to 24.36% if synthetic cannabis positive results were included. Over half of all scheduled MDT testing had been cancelled in the same period owing to staff redeployment, which meant that few suspicion tests were completed, and in June and July 2017 not all of the required random tests had been completed. MDT facilities were satisfactory and the necessary referrals to drug services were made consistently.

Recommendation

- I.34** **Actions identified from intelligence reports should be routinely completed and monitored, and the outcomes analysed.**

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.35** Despite recent efforts to revive the IEP scheme, including a new policy, it was still not used effectively or consistently to manage prisoners' behaviour. Staff too often used the adjudications process when the IEP scheme would have been more appropriate (see also paragraph I.38). We found a few documented warnings on case notes but too often poor behaviour was not tackled, and reviews for those on the basic regime did not record any targets to encourage good behaviour (see main recommendation S45).
- I.36** There was too little differential between IEP levels to motivate prisoners, and for prisoners on C wing, the basic regime had little impact as time out of cell was already so limited (see paragraph 3.2). There was too little incentive to be an enhanced prisoner.
- I.37** In our survey, black and minority ethnic, Muslim and foreign national prisoners all reported more negatively about the fairness of the IEP scheme. Staff were aware that some of these groups were over-represented on the basic regime but no further action had been taken (see also section on equality and diversity).

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

- 1.38** The number of adjudications had increased, at 1,699 in the previous six months, and was higher than at similar prisons. Many charges could have been better dealt with using an effective IEP system (see also paragraph 1.35). The large number of adjudications often adversely affected the regime on the segregation unit.
- 1.39** The adjudications process was not well managed, which was resulting in many adjudications not being proceeded with, or being dismissed. This undermined the impact of adjudications as a deterrent to poor behaviour.
- 1.40** Governance was infrequent and weak, although there was now some internal quality assurance. There had only been one adjudications standardisation meeting so far in 2017 and there was insufficient ongoing analysis. The few data that had been produced showed that young adults, and black and minority ethnic and Muslim prisoners were all over-represented among adjudications, both charged and proven, but this apparent inequality had not been addressed. The tariff was several years out of date and needed urgent revision.

Recommendation

- 1.41** **There should be robust management and oversight of the adjudications process, to ensure that it provides proper safeguards and an effective deterrent.**

The use of force

- 1.42** Levels of use of force were far higher than at similar prisons and almost all recorded uses involved the use of full restraint. Young adults (18–20 years of age; 7% of the prison population) were still over-represented, accounting for 20% of incidents, while prisoners aged under 25 accounted for almost 60% of all incidents. However, there was no discernible action to understand and address this overrepresentation. Some aspects of managerial oversight had improved, with a bimonthly meeting, but this frequency was still insufficient given the high incidence of use of force overall and with some specific groups, and the meeting did not review the use of special accommodation (see paragraph 1.45, recommendation 1.46 and paragraph 2.19). There was limited data analysis and far too many use of force dossiers remained incomplete.
- 1.43** All planned incidents were video-recorded, there was regular review and the quality assurance process was better than we normally see. The recordings we viewed were well managed and demonstrated a focus on de-escalation, but some learning points were not disseminated to the wider staff group.
- 1.44** Batons had been drawn 25 times in the previous six months, which was high. All of these incidents had been investigated, and we found that most related to a few potentially serious situations. There had been four actual baton strikes, and records indicated that they had all been proportionate responses to some serious acts of violence.

- I.45** The use of special accommodation was extremely high. All of the records we reviewed were incomplete, and we came across some unauthorised uses which had not been logged.

Recommendation

- I.46** **There should be sufficient managerial oversight of all use of force and special accommodation, to ensure that it is used proportionately and only as a last resort.**

Segregation

- I.47** The number of prisoners segregated was similar to that at other local prisons, and to that at the time of the previous inspection. The unit was generally clean and in reasonably good order, and segregation staff worked hard to deal with the incessant, often offensive, graffiti in the cells. However, almost a third of all cells were damaged, as a result of some destructive behaviour from prisoners located on the unit. Prisoners we spoke to reported good treatment by segregation staff and we observed skilful management of some challenging behaviour. The average length of stay on the unit was nine days.
- I.48** Managerial oversight had begun to improve but there had been only one segregation monitoring and review group meeting in the previous year. There were no formal reintegration plans but records showed that most prisoners returned to the main population.
- I.49** The regime on the unit was poor, particularly for the few prisoners who stayed for long periods, with no opportunity for any activity either on or off the unit. Segregated prisoners were allowed to exercise together but exercise periods were too short, at around 30 minutes.

Recommendation

- I.50** **The regime on the segregation unit should include purposeful activity and at least 60 minutes in the open air daily.**

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** The monthly substance misuse strategy meetings were reasonably well attended and a drug strategy was in place, although it lacked an underpinning needs assessment and cohesive action plan. Care UK provided clinical substance misuse services and The Forward Trust (formerly RAPt) provided psychosocial support. There was good partnership working between the services and with the wider prison.
- I.52** In our survey, only 38% of prisoners said that they had received help with their drug problems, and 31% help with alcohol problems, both of which were worse than the comparator and at the time of the previous inspection. Overall, access to ongoing individual psychosocial support was inadequate due to low staffing levels and regime restrictions. The Forward Trust (the provider) did not routinely see all new arrivals. They were supporting

225 prisoners during the inspection (18% of the population), and these men could attend a small selection of workshops, weekly mutual aid groups (Narcotics Anonymous and Alcoholics Anonymous) and a two-week medium intensity programme, although waiting times were relatively long for most and were excessive for E wing prisoners. Attendance at all interventions run by the Forward Trust was low due to regime restrictions and prisoners choosing alternative activities. There were too few prisoner peer supporters for the population and no proper drug recovery wing.

- I.53** Clinical and psychosocial support for newly arrived prisoners who required prescribing for alcohol or drug problems had improved, and was now good; these patients were identified promptly, prioritised for the doctor and admitted to the Conibeere unit for stabilisation, monitoring and support. During the inspection, around half of the 194 prisoners on opiate substitution treatment were maintained, which was appropriate. Prescribing was flexible, although alcohol withdrawal medication was administered three, rather than four, times daily, which was not clinically appropriate (see recommendation 2.68). Five-day, 13-week and additional individual reviews were completed jointly with staff from The Forward Trust. There were plans to introduce joint 28-day reviews when clinical staffing stabilised. Officer supervision of methadone administration remained inconsistent (see also paragraph 2.60 and recommendation 2.68).
- I.54** Prisoners with substance misuse and mental health issues received excellent support from individual and group psychological therapies run by The Forward Trust and a specialist secondary mental health nurse.

Recommendation

- I.55 All prisoners with substance misuse issues should have prompt access to a comprehensive range of psychosocial support which meet their identified needs throughout their stay.**

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** In our survey, prisoners were more negative than at similar prisons about virtually every aspect of daily life, and in many cases they were more negative than at the time of the previous inspection. Efforts had been made to paint the wings and cells since the previous inspection but there was still too much grime in communal areas and a lot of graffiti in cells, and many toilets were filthy. Communal showers were dilapidated and lacked privacy, with mouldy windows and rusty ventilation grilles. A repair programme had so far tackled only two shower rooms, and this work had been superficial, leaving the ageing shower units in place (see main recommendation S47).
- 2.2** Many repairs were outstanding, often for many months. Numerous cell windows were broken, affecting security (see also paragraph 1.28). Many showers and telephones were out of action, which caused considerable frustration to prisoners, who often had only limited time on association to wash and make calls (see section on time out of cell). These delays were caused by the maintenance services team, managed by Carillion, not being fully staffed, and also by difficulties with prison staff reporting repair jobs and allowing access to cells.
- 2.3** Outside areas between the wings were strewn with litter dropped from broken windows. Despite significant efforts to address the vermin problem, rats and cockroaches persisted. The volume of litter on yards continued to attract them, as did the food debris left around wing serveries at night (see also paragraph 2.85, main recommendation S47 and Appendix VI).
- 2.4** The prison's main stores were locked up during the inspection and were not currently staffed by Carillion, the remaining employees having left many weeks before. They had to be accessed on an ad hoc basis by prison managers, who left already-overstretched residential units to fetch essential daily items, which meant that supply was haphazard. Most cells had televisions and kettles, and some store rooms had been replenished before the inspection, but there was no reliable, weekly flow of these items to the wings (see main recommendation S47).
- 2.5** In our survey, only 31% of respondents said that they normally got clean sheets every week, against 63% at similar prisons and 67% at the time of the previous inspection. Similarly, only 33% said that they got enough clean clothes, against 49% elsewhere and 42% at the time of the previous inspection. Prisoners did not always get a weekly change of bedding and prison-issue clothing, and men on some of the larger wings had recently gone without a kit change for three weeks (see main recommendation S47).
- 2.6** Basic processes did not function, and prisoners were frustrated about their inability to get simple things done. For example, there were not enough staff available to escort men to reception to collect their property, and only 13% of respondents to our survey said that they could access stored property, against 50% at similar prisons. We found examples of men arriving late at night and still not having retrieved any of their bagged property six weeks later. About 15% of parcels sent in by family members were refused by mailroom staff and returned to sender. Owing to the number of cross-deployed staff working in the mailroom

for short periods with no experience, we were not confident that refusal was always justified (see main recommendation S47).

- 2.7** As a result of staff shortages, officers relied too heavily on peer workers without having sufficient oversight of them (see also paragraph 1.10 and recommendation 1.12). Prisoner information points on each wing were a helpful addition to daily life, and the orderlies who ran them seemed well chosen. However, the applications process was inconsistent and unreliable, and only a minority of responses were tracked by applications orderlies. In addition, it was inappropriate that orderlies had access to the applications post box, which held outgoing personal mail from prisoners, and one even kept the key in his cell.

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.

- 2.8** In our survey, fewer prisoners than at similar prisons said that staff treated them respectfully (62% versus 72%), checked on their welfare (21% versus 27%) or spoke to them on association (13% versus 17%). However, we observed many good interactions between staff and prisoners, and 64% of respondents to our survey said that there was a member of staff who would help them if they had a problem, which was similar to elsewhere.
- 2.9** Although chronic staffing shortages undermined any qualitative work that they might have hoped to do, staff, to their credit, seemed resilient, even stoic; however, they were too stretched to support prisoners properly, have meaningful conversations with them or address their frustrations (see section on residential units). Many wing staff were new and some lacked the confidence to challenge prisoners and enforce the regime. We saw prisoners jumping between landings to avoid being locked up, and delaying the already tight regime.
- 2.10** There was no personal officer scheme and we found virtually no entries in case notes to reflect ongoing support for prisoners. Prisoner consultation meetings were chaired by the governor but these were still underdeveloped. Often, more staff than prisoners attended the meetings, and not all wings were routinely represented.

Recommendation

- 2.11 Wing-based staff should have enough capacity to be able to manage prisoners safely and provide them with ongoing support.**

Equality and diversity

Expected outcomes:

The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic³ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

Strategic management

- 2.12** The strategic management of equality and diversity work was weak. Although a local policy and strategy document had been published, some of the structures it described were not in place and many interventions to help to support protected characteristic groups had not been implemented (see main recommendation S48).
- 2.13** The diversity and equalities action team (DEAT) had met only once in the previous six months, so important equality data had not been monitored. There had been no survey of prisoners, visitors or staff to assess current need. The equality action plan was not being managed and actions had not been completed. There had been a few equality impact assessments but, in the absence of a needs analysis, there was no formal programme (see main recommendation S48).
- 2.14** The equalities officer and an administrator undertook equality work. Owing to staff shortages in the safer custody team and on the residential wings, the equalities officer was often deployed to other duties. They could not complete their core work while also dealing with the high levels of violence and daily unlocking of prisoners.
- 2.15** Prisoner diversity representatives on each wing provided good support, particularly for foreign national men, and their work was clearly appreciated. However, their meetings with the equality team were nearly always cancelled and although there was some individual contact between the equality officer and prisoner representatives, it was insufficient to direct or monitor their work.
- 2.16** Although allegations of discrimination were investigated adequately, the number of discrimination incident report forms (DIRFs) submitted was lower than we usually see at similar prisons. There had been 20 in the previous six months, and about half had been from officers about prisoners. In our survey, only 37% of prisoners from a black and minority ethnic background said that it was easy to make a complaint, against 47% of white prisoners. DIRFs were not readily available on the residential units; prisoners had to ask staff or prisoner representatives if they wanted one, and managers were not aware of this (see main recommendation S48).
- 2.17** Support forums for foreign national prisoners had been organised by the chaplaincy but these were too ad hoc and usually not attended by prison staff, so did not address all the concerns that were raised and resulted in few outcomes for the men.

³ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Recommendation

- 2.18** The diversity and equality team should meet regularly, to provide strategic oversight of equality work and ensure that equality monitoring tool (EMT) data and other evidence suggesting the disproportionate treatment of a protected group is investigated promptly. (Repeated recommendation, 2.24)

Protected characteristics

- 2.19** At the time of the inspection, about 60% of prisoners came from a black and minority ethnic background and nearly 30% were Muslim. More prisoners from these groups than their respective counterparts reported negatively about some important aspects of safety and respectful treatment. For example, 41% of men from a black and minority ethnic background said that they currently felt unsafe, against 29% of other respondents. Only 32% of Muslim prisoners said that staff treated them respectfully, against 69% of other respondents. We found little to suggest that the prison had done enough to understand these perceptions; staff had not conducted their own survey, and there had been no black and minority ethnic forums or specific consultation (see main recommendation S48 and paragraph 1.42). However, the Muslim prisoners we spoke to said that they received good support from the Muslim chaplain.
- 2.20** Gypsy, Romany and Traveller prisoners had access to good support, including a monthly support group.
- 2.21** In our survey, 73% of foreign national prisoners said that there was a member of staff they could turn to if they had a problem, which was far higher than for other prisoners. This group made up 34% of the prison population, and some aspects of support for them had improved since the previous inspection. Five full-time immigration officers conducted surgeries on all wings at least once a week, and saw prisoners quickly. Equality representatives distributed lists of solicitors to these prisoners and also provided a useful signposting service, as well as advice about how to apply for bail and early release. However, there was poor access to free independent immigration advice, even for prisoners and detainees who were entitled to legal aid. At the time of the inspection, there were 34 foreign nationals being held under immigration powers, and many had only been told at the end of their sentence that they were going to be detained.
- 2.22** The identification of prisoners with disabilities was inadequate and we were not assured that important information collected by health services staff about prisoners with disabilities was communicated effectively to the equality team. Not all prisoners who needed a personal emergency evacuation plan had one, and the standard of plans was poor. No prisoners with disabilities had a care plan and we found some examples of unmet need (see main recommendation S48).
- 2.23** With the exception of a discussion group, there was little support for older prisoners and the prison did not account for their particular needs (see main recommendation S48).
- 2.24** There was little provision for young adults (there were 83 young adults, which was 6.8% of the prison's population). A young adult policy and strategy document had been recently published but had not been implemented. Data continued to show that young adults received disproportionate treatment in areas such as adjudications but this had not been fully investigated. Staff had not been trained to work with young adults and there were no regular forums for this group.

- 2.25** There was no formal support for gay and bisexual prisoners. The lack of any links to community organisations was disappointing, given the prison's location in a busy capital city.

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.

- 2.26** The chaplaincy was active, visible and well integrated in the prison, delivering excellent provision for all faiths; aspects of this provision mitigated some of the deficiencies in equality and diversity work (see section on equality and diversity). There was a full-time managing chaplain, supported by a cohort of full- and part-time chaplains and volunteers who covered all the main religions. There was a well-equipped chapel for Christian services and a good multi-faith room.
- 2.27** All the main religious and cultural festivals were celebrated. Chaplains saw all prisoners subject to assessment, care in custody and teamwork (ACCT) monitoring, regularly attended key meetings and were actively involved in segregation and safer custody reviews. Prisoners had good access to corporate worship each week, and to chaplains of their faith in private. Timings for corporate worship services were well advertised and prisoners could usually attend without making applications in advance. There was a wide range of other faith-related activities, such as a Catholic group, Bible and Quran studies, the Sycamore Tree victim awareness course and the Alpha course
- 2.28** Community faith contacts were well developed, with Muslim and Christian groups providing support for prisoners in the prison and after release. The chaplaincy also managed the Inside Out group, which mentored prisoners and supported them on release. At the time of the inspection, they were mentoring nine prisoners and supporting 19 men in 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.

- 2.29** In our survey, only 21% of respondents said that the complaints system operated fairly. Although the quality of replies to many complaints was reasonably good, some were superficial and did not evidence sufficient investigation, and a few were dismissive.
- 2.30** Many complaints were about low-level issues that should have been dealt with through the applications system. There were many examples of complaint forms on which prisoners expressed anger and frustration about not being able to get simple problems resolved quickly. We were not confident that complaints about staff were always dealt with properly, and there were examples of replies from custodial managers to such complaints that did not reflect a full investigation of the facts. We also saw replies that promised a full investigation of a complaint but were not followed through.

Recommendation

- 2.31 Prisoners' complaints should receive respectful responses that address the issues raised, and all should be investigated thoroughly.**

Legal rights

Expected outcomes:

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

- 2.32** Prisoners representing themselves could work on legal cases in the prison library, although access to these facilities was too restricted (see section on learning and skills and work activities). Remand prisoners had reasonably good access to the Bail Accommodation Support Service.
- 2.33** In our survey, prisoners' responses about legal visits and communication with their legal representatives were more negative than those at similar prisons. Restrictions on time out of cell limited prisoners' opportunities to telephone legal representatives (see section on time out of cell).
- 2.34** Although legal visits were facilitated every weekday, there were not enough private rooms. Many visiting legal representatives we spoke to complained about the complications involved in booking a visit with their clients and the long waits when they arrived.

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.

- 2.35** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁴ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. One area has been identified that requires improvement, with a subsequent notice issued by the CQC which has been detailed within Appendix III of this report.

Governance arrangements

- 2.36** The Care Quality Commission issued one 'requirement to improve' notice following the inspection (see Appendix III).
- 2.37** Care UK had been the primary health provider since April 2016 and subcontracted several services. Joint working between the providers, commissioners and prison was good. Regular,

⁴ 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>.

well-attended partnership board meetings and governance meetings covered most areas. However, the development of social care pathways between the prison and the local authority was inadequate (see paragraph 2.79). A prison health and social care needs assessment, completed in March 2015, mostly informed service delivery.

- 2.38** There was an effective incident reporting system and a good overview of the Prisons and Probation Ombudsman's recommendations from death in custody investigations, and these were shared with staff and informed service development.
- 2.39** Few formal health care complaints were received through the Care UK concerns and complaints policy. A range of concerns were responded to politely and promptly, although the process did not include appropriate clinical review or investigation. Learning from these was not shared with staff.
- 2.40** The 'patient involvement strategy' was a positive initiative, including the development of health care representatives and regular patient involvement forums. However, the governance of prisoners' roles needed attention, to ensure that patient confidentiality was maintained. For example, health care applications included the reason for the appointment, and was visible to the peer worker, which was inappropriate.
- 2.41** Staffing difficulties had begun to reduce, as a result of an ongoing recruitment campaign and use of regular agency staff. However, the pharmacy team was understaffed, which had an impact on the delivery of services. Registered nurses were available 24 hours a day.
- 2.42** Health services were delivered in the health centre and on the wings. Most rooms looked clean but the cleaning and maintenance arrangements did not always ensure that clinical areas were cleaned to NHS standards. Regular infection prevention and control audits were conducted, and progress was being made in addressing some of the issues detected.
- 2.43** The health care interactions we observed were conducted in a professional and caring manner. Staff were aware of policies for preventing communicable diseases and the necessary actions in the event of an outbreak. There were good links with local tuberculosis specialist services and Public Health England.
- 2.44** Most health services staff told us that they felt well supported. Managerial and clinical supervision was developing. Mandatory training was well managed and staff had access to professional development opportunities.
- 2.45** Standardised emergency bags, including oxygen and automated external defibrillators (AEDs), were located in clinical rooms across the prison. Even though staff carried out regular, documented checks, we found some out-of-date items, so the auditing process was not sufficiently robust. All clinical staff had received intermediate life support training. Custody staff we spoke to understood the code system to summon emergency assistance, and 23% had received emergency first-aid training. Ambulances were called promptly when needed.
- 2.46** Health promotion material was displayed in the health centre and on the wings, although limited information was available in languages other than English, including the leaflet given to new arrivals, and this needed to be extended. Waiting times for smoking cessation services were reasonable and access to screening for blood-borne viruses and age-appropriate screening was good. Barrier protection was available from health services staff but this was not well advertised.

Recommendations

- 2.47 Health care complaints should be investigated and used appropriately, to inform service development and learning.**
- 2.48 All clinical areas should meet relevant cleaning and infection control standards.**
(Repeated recommendation 2.79)

Delivery of care (physical health)

- 2.49** Reception health screening arrangements had improved. New arrivals received appropriate triage and a confidential initial health screening by a registered nurse, with suitable referrals made. Professional telephone interpreting services were available for those whose first language was not English. A GP was available during the evening, to see new arrivals. Secondary health checks were not always completed, which meant that opportunities to identify and address wider health needs were missed, and a more consistent approach was required.
- 2.50** Although prisoners could see a nurse each day on the wings, it was for a limited time due to the restricted time out of cell (see section on time out of cell) and sometimes men had to choose between attending an appointment and undertaking other essential activities.
- 2.51** In our survey, only 16% of prisoners said that it was easy to see the GP, which was less than at other prisons (20%) and than at the time of the previous inspection (23%). However, we found that prisoners had good access to routine and urgent on-the-day GP appointments.
- 2.52** An appropriate range of clinics, including physiotherapy, was run by allied health professionals, and waiting times were acceptable.
- 2.53** Prisoners with long-term conditions were managed mainly by the GP, although there was a weekly specialist nurse diabetic clinic. Further work was under way to improve care planning and to address a current gap in respiratory clinic provision. Patients with complex conditions were reviewed regularly by a multidisciplinary team. Entries on the electronic medical record were generally good.
- 2.54** New procedures to improve the monitoring of referrals to secondary care had been implemented. However, the prison was routinely unable to staff the four escorts which were allocated daily, and sometimes no escort staff were available. External hospital appointments were cancelled regularly, which led to unacceptable delays in patients' access to treatment.
- 2.55** The mental health provider managed the 17-bed inpatient unit. Most patients had severe mental health problems, and dedicated prison officers and health services staff provided compassionate care. Twice-weekly multi-professional ward rounds supported effective case management. Demand for spaces was high. The environment was generally satisfactory, with an impressive group room/library, although most cells lacked furniture, so prisoners' belongings were on the floor, which was unacceptable. Despite regular redeployment of discipline staff, the regime was generally good, including interventions from a full-time occupational therapist. A worker from MIND offered advocacy and support services two days a week.

Recommendations

- 2.56** Prisoners should have adequate time to attend health care appointments, including receiving their medication without having to choose between this and other necessary activities. (Repeated recommendation 2.92)
- 2.57** External hospital appointments should not be cancelled and custody escort arrangements should be adequate and effective to meet the health care needs of the prison population. (Repeated recommendation 2.95)

Pharmacy

- 2.58** Medicines were supplied by an in-house pharmacy. This was understaffed, with two technician posts unfilled and two yet to assume duties. There were no medicines use reviews, and there was no pharmacy input into clinics.
- 2.59** A drug formulary (a list of medications used to inform prescribing) had been recently introduced and was mainly adhered to. Most medicines were supplied on a named-patient basis and supervised twice daily. However, there was little provision for other administration times, which meant that antibiotics and pain killers were not given at the recommended dosage schedules for effective care, and night-time medicines were given too early.
- 2.60** There was inconsistent supervision of the medicine queues, some with no prison officer present, which compromised patient confidentiality and increased the likelihood of diversion. Delays caused by the prison regime meant that medicine rounds consistently over-ran and often clashed with other scheduled clinics. We saw prisoners attending GP appointments in the same room as a medicines administration round, separated only by a curtain, which was inappropriate and posed a security risk.
- 2.61** In general, just one nurse supplied medicines, including controlled drugs, which meant that a second check was not always possible unless another member of staff attended. Identification cards were not used and not all patients had their photograph recorded on their electronic record, which posed a risk of misidentification.
- 2.62** Less than 40% of patients received their medicines in-possession. The in-possession policy required that both the patient and the medicine should be assessed. Paracetamol was not allowed in-possession.
- 2.63** There were no lockable storage facilities in cells for in-possession medicines, and insufficient officers to enable cell checks of prisoners who had their medicines in-possession. Prisoners were unable to order their own in-possession medicines, which denied them the responsibility for managing their own health.
- 2.64** There was limited provision for the supply of medicines without the need to see a doctor, both for minor ailments and more potent medicines. There was adequate provision for the supply of medicines out of hours.
- 2.65** The pharmacy was organised adequately but medicines management on the wings was poor. Except for the out-of-hours medicines, there were no stock reconciliation procedures on the wings. Date checking records were not kept. Stock medicines, medicines for minor ailments and named-patient medicines were not well labelled or clearly separated, which increased the likelihood of errors. We found buprenorphine tablets, at all doses, out of their original packaging and placed on a small shelf. The room temperature on the C4 landing and the refrigerator temperature on E wing were both too high for the safe storage of medicines.

- 2.66** The monthly medicines and therapeutics meetings were well attended. Issues raised were escalated and acted on appropriately.

Recommendations

- 2.67** **Prisoners should have access to targeted medicines use reviews and there should be a wider range of patient group directions.** (Repeated recommendation 2.105)
- 2.68** **Medicines should be stored appropriately, including secure in-cell storage for prisoners, administered at required times and intervals, and with adequate supervision to ensure confidentiality and prevent diversion.**

Dentistry

- 2.69** Time for Teeth Limited provided an NHS-equivalent range of treatments. Two dentists, supported by a dental nurse, held eight sessions a week. Waiting times had recently reduced and compared favourably with those in the community. The dentists reviewed all applications and prioritised appointments according to clinical need. Patients with urgent needs were seen within two days. Oral health promotion was provided during consultations.
- 2.70** The dental suite and separate decontamination room were clean and well stocked, and met current infection control standards. An appropriate range of dental equipment was serviced and maintained at the required intervals. Governance processes were generally good, and clinical records were comprehensive.

Delivery of care (mental health)

- 2.71** Barnet, Enfield and Haringey Mental Health NHS Trust (BEH) was the main provider of mental health services. A comprehensive range of mental health services was provided, covering mild-to-moderate, as well as more serious and enduring, mental health problems. There were good working relationships between the services and there was a good integrated mental health service.
- 2.72** The multidisciplinary in-reach team had an impressive skills mix, including experienced mental health nurses, a learning disabilities specialist nurse, a speech and language therapist, comprehensive psychiatric cover, psychology and occupational therapy. At the time of the inspection, the team caseload was around 76, including 52 who were being managed effectively under the care programme approach.
- 2.73** A comprehensive range of groups was offered at the Seacole Day Centre, including relaxation, anger management, a hearing voices group and music groups.
- 2.74** Counselling services were provided by Atrium. The Forward Trust provided a variety of psychology-based support and therapies for prisoners experiencing mild-to-moderate mental health problems, including advice about sleep management, anxiety, low self-esteem and anger management.
- 2.75** There was an open referral system, which was checked daily to ensure that urgent cases were seen promptly. A joint triage meeting took place three times a week, to review and allocate referrals. Urgent referrals were seen promptly and routine referrals were assessed within five days.

- 2.76** The team offered advice to prison officers on individual mental health issues but limited mental health awareness training had been received by officers during the previous three years, which needed to be addressed.
- 2.77** In the eight months to July 2017, there had been 14 transfers under the Mental Health Act to secure mental health units. The 14-day guideline had been exceeded in 12 cases; the longest wait had been 21 weeks, which was excessive. Delays were generally outside of the prison's control due to a lack of beds elsewhere, particularly in medium secure units

Recommendation

- 2.78** **The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales.** (Repeated recommendation 2.115)

Social care

- 2.79** A social care lead from Hammersmith and Fulham local authority attended the quarterly health partnership board. Partnership working on individual cases was satisfactory. However, the overarching strategic approach to social care between the local authority and the prison was inadequate. Referral pathways, response times and the responsibilities of each party were unclear as there was no joint memorandum of understanding. Not all prisoners who needed an assessment were referred, including those with severe mental health problems. The local authority did not have an agreed care provider in place. There was no literature about social care around the prison and prisoners could not self-refer.
- 2.80** Since April 2015, the health provider had referred 10 prisoners with significant mobility and personal care needs. None had received a social care package, although a few had been identified as requiring continuing care, leading to delays pending the completion of further assessments. One prisoner, who had been referred in April 2015 as he needed full personal care, was still not receiving an agreed care package as social care and continuing care providers alike had assessed the other agency as being responsible; his care needs were being met by the inpatient staff.

Recommendation

- 2.81** **All prisoners with social care and continuing care needs should be identified, referred and assessed, and receive the required support promptly, within a robust governance framework.**

Catering

Expected outcomes:

Prisoners are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

- 2.82** In our survey, only 11% of prisoners said that the food was good, which was far less than at similar prisons (22%) and in line with the figure at the time of the previous inspection. We also found the quality and quantity of food to be poor. Meals were served too early, with lunch at 11.30am and the evening meal at 4pm. A cold lunch was served at the cell door and there was no opportunity to dine out on association. Once prisoners collected their

afternoon hot meal, they were immediately locked up to eat it, often near an unscreened toilet. Breakfast packs, served with lunch on the day before intended consumption and therefore likely to be eaten earlier, were far too small to last the 19 hours between meals.

- 2.83** Queues for hot food were badly supervised, due to staffing levels, a lack of challenge and also because serveries were mobile and located in the middle of the wing, which made it difficult for staff to maintain order and hygiene. It took over two hours to serve the food on C wing (the largest residential unit), and temperature logs were not routinely returned to the kitchen, so we were not confident that the food served was always hot enough. Custard was served from a container placed on the floor of the wing, and prisoners working on the serveries did not wear whites.
- 2.84** Portion control was poor on C wing due to the lack of supervision, and food routinely ran out. To ensure that all prisoners had a meal, staff either sourced a half-used tray from another servery or distributed 'mountain survival' dried food packs, which had to be reconstituted with boiling water.
- 2.85** Serveries were regularly left uncleaned overnight because the cleaners were locked up early. Some were in an appalling state (see Appendix VI) and this did not help the ongoing vermin problem. It took several months for some equipment in the serveries and kitchen to be repaired.

Recommendation

- 2.86** **There should be enough food for all prisoners and it should be served hygienically.**

Purchases

Expected outcomes:

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

- 2.87** Access to the prison shop was often delayed for new prisoners, who could wait up to two weeks to receive their first order. This was mitigated slightly by the use of reception packs, which provided basic items in order to reduce the risk of debt.
- 2.88** The range of products available on the shop list was reasonably good and delivery arrangements were secure. Consultation about the shop list was adequate and led to changes being made.
- 2.89** Families and friends could arrange to send money to a prisoner by way of a bank transfer to the prison, which was quick and secure.
- 2.90** Prisoners could order and pay for newspapers and there was an appropriate range of catalogues. However, prisoners were charged an additional administration fee for catalogue orders, which was inappropriate.

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.⁵

- 3.1** Since the previous inspection, improving the regime had been prioritised and daily routines were now, at least, more predictable, with all prisoners getting some time out of their cell each day for exercise and association. However, during our roll checks, we still found 41% of prisoners locked in cell during the working day, which, although better than the 55% at the previous inspection, was still very poor. (see main recommendation S49).
- 3.2** Full-time workers were located together on A and E wings, to allow them regular evening association. These prisoners, about a quarter of the prison population, had around seven and a half hours a day out of their cell from Monday to Thursday. However, for most prisoners, outcomes were often much poorer. In particular, the 134 unemployed prisoners on the largest residential unit, C wing, were often locked up for about 23 hours a day. Frequent staffing shortages meant that each landing was unlocked separately for less than an hour a day. During this time, prisoners had to exercise, make telephone calls, shower or attend the gym, if they chose (see main recommendation S49).
- 3.3** Access to exercise when prisoners were unlocked was reasonable, as most wings had their own yard, which was kept open.

⁵ 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.

3.4 Ofsted⁶ made the following assessments about the learning and skills and work provision:

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

Management of learning and skills and work

3.5 The leadership and management of learning, skills and work had improved since the last inspection. Prison senior managers had continued to focus on developing prisoners' English, mathematics and employability skills. Partnership working with Novus had improved considerably and was now highly effective in providing education and vocational training (VT) to meet the employment and resettlement needs of prisoners. This included expanding and improving the range of accredited VT. There had been good progress, and there were plans for further expansion. In our survey, more prisoners than at the time of the previous inspection said that they had been involved in VT or skills training, although this was still low, at 48%, and less than at similar prisons.

3.6 Senior prison managers had increased the pay for prisoners attending education, VT and work. They had just introduced a new regime but, although attendance at activities had improved, punctuality was poor (see section on personal development and behaviour and main recommendation S49). Prison senior managers managed allocation to activity places well and most took place quickly. However, prisoners who applied to change activities waited too long to be reallocated.

3.7 Novus managers effectively observed teaching and learning sessions, and identified positive aspects of teaching practice and areas for improvement. The observations of training and learning in the non-funded activities, such as laundry work and gardening, required improvement.

3.8 Managers' evaluation of provision and their quality improvement planning provided a realistic and detailed prison-wide assessment, and their judgements were reasonably accurate. Prison

⁶ 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>.

managers had correctly identified the main strengths and areas for improvement, and used quality improvement group meetings effectively. Data analysis provided senior prison staff with a good view of performance but more work was needed to gather and evaluate a wider range of data, particularly for prisoners with additional learning needs.

Recommendation

- 3.9 Managers should collect and evaluate a wider range of data, to ensure that all prisoners' identified needs are met, including the provision of accredited qualifications.**

Provision of activities

- 3.10** Senior prison managers had markedly increased the number of activity places, and provided enough full- and part-time occupation for almost all of the population. The level of unemployment had reduced. Approximately 25% of activities were full time, including most of the VT places. The education provision was primarily part time. Places were too often underutilised: on average, approximately two-thirds of prisoners were allocated to an activity. Furthermore, frequent restrictions to the prison regime had had a negative impact on attendance at learning and skills sessions and work, and not enough was done to encourage prisoners to participate in activities.
- 3.11** Novus provided approximately 130 education places, and courses included English, mathematics, information and communications technology, personal and social development, and support for self-employment. Thirty-one prisoners were following a range of distance learning courses. The range of accredited VT had increased, and now included barbering, painting and decorating, industrial cleaning, horticulture, rail work and waste management. Workshops offered assembly and textile work but not all included opportunities to gain accredited qualifications (see recommendation 3.9).
- 3.12** Prisoners on the E4 landing (the mentoring and support unit) were offered a very narrow range of work and had limited access to education, PE and the library.

Quality of provision

- 3.13** The education and training provision by Novus was good. The quality of teaching, learning and assessment in education and VT had improved owing to strong performance management, and was now good. Lessons were well planned and tutors used a wide range of teaching methods and activities that motivated prisoners. These included games, quizzes and challenges. Trained and enthusiastic peer mentors supported tutors effectively. Tutors also used interactive learning technology resources well to support learning.
- 3.14** Prisoners' induction into purposeful activity was well planned and effective, and prisoners engaged well. Staff identified well the learning support needs of most prisoners, and placed them in appropriate activities, with suitable support. However, not all prisoners with health and dependency issues were assessed at induction. Tutors attempted to assess them subsequently but a small minority did not have their needs identified early enough to ensure that their needs were met.
- 3.15** Tutors' and trainers' backgrounds were diverse, with a good mix of gender, faiths, age and ethnic background. They were skilled at promoting diversity and helped foreign national prisoners to understand British values.

- 3.16** In the industry workshops, prisoners were hard working. Those on VT programmes had a positive attitude to learning and understood clearly the progress they had made and what they needed to do to improve. Those on barbering and painting and decorating courses developed their English and mathematics skills well through well-designed and relevant activities, and demonstrated a good understanding of health and safety.
- 3.17** Tutors contextualised their subjects well – for example, in English for speakers of other languages (ESOL) and mathematics classes. Many prisoners progressed successfully to higher-level courses in ESOL and mathematics.
- 3.18** The turnover of prisoners was high. Tutors and trainers were not always sufficiently aware of prisoners' starting points and specific learning needs, and did not provide sufficiently challenging material for the more able prisoners. Tutors corrected most spelling and grammar errors effectively. Tutors and trainers used individual learning plans inconsistently to plan learning and help prisoners to identify targets to improve.
- 3.19** Short modules were now provided, to match the needs of prisoners serving shorter sentences, and these prisoners' achievements had improved. Staff monitored prisoners' achievements of accredited qualifications well. Trainers' recording of prisoners' non-accredited skills development was good in industrial cleaning, gardening and laundering areas. However, in other areas, such as textiles and waste recycling, the recording of non-accredited skills development was underdeveloped.

Recommendations

- 3.20** **The collection and use of initial assessment results should be improved, to ensure that all prisoners are given appropriate, timely support.**
- 3.21** **Prisoners' skills development in all non-accredited learning should be recorded.**

Personal development and behaviour

- 3.22** Prisoners' attendance and punctuality required improvement. Approximately three-quarters of prisoners attended morning work activities, but this figure dropped to half in the afternoons. Prisoners told us that, despite the new regime providing more association time, they were still anxious that they would miss a hot meal and domestic time, and therefore chose to remain on the residential units. On too many occasions, prisoners were not unlocked on time and were often late for learning sessions. Prisoners in full-time work were more punctual (see main recommendation S49).
- 3.23** Prisoners in education and VT were well motivated, and most valued the learning and skills they developed. Prison staff enforced well the requirements for prisoners to have achieved specific levels of English and mathematics before accessing work, with outreach workers supporting those who were resistant to attending formal education sessions. Managers recognised that there was further work to be done in providing more English and mathematics support.
- 3.24** Most prisoners behaved well when attending work, VT or education, showing good levels of respect towards staff and each other. Those who were peer mentors were proud of their role, stating that it had increased their self-confidence and self-esteem. Prisoner representatives on the wings running the prisoner information points were particularly valuable and useful for promoting learning and skills.

Recommendation

- 3.25** There should be more support for prisoners to develop their English and mathematics skills.

Education and vocational achievements

- 3.26** Prisoners achieved consistently well on most education and VT programmes, and achievements were high. Most prisoners who started on courses completed them and achieved. The achievements of a minority of prisoners undertaking English functional skills qualifications at level 2 required improvement. Standards of work were at a level expected for the qualifications and training provided.
- 3.27** Too few prisoners were enrolled on qualifications in the industry workshops. Prisoners' achievements of full qualifications in industrial cleaning and gardening required improvement.
- 3.28** Novus managers and prison staff monitored prisoners' participation and achievement well, and data showed that there was no discernible difference in the achievements of different groups of prisoners.

Library

- 3.29** Hammersmith and Fulham Council managed the library service, which was run by one full-time member of staff and a part-time library assistant, with the support of two full-time prisoner orderlies. The facilities were good, including computers to enable prisoners to carry out research and write letters, and to support their learning.
- 3.30** However, in our survey, prisoners were negative about their access to the library, and it was underused. Access to the facilities was good for those attending education classes but poor for most other prisoners. Not all prisoners were able to visit the library during induction.
- 3.31** The library was not open in the evenings or at weekends and there was no allocated access for specific residential units, including the E4 landing. A book trolley was taken to the segregation unit and Conibeere unit. In addition, each wing had a reading room with a modest stock of reading material.
- 3.32** The library contained a suitable stock of reading material, including a large number of books in languages other than English and an appropriate range of legal textbooks and Prison Service Instructions. The stock loss was too high, at 20%.
- 3.33** There were a limited number of reading initiatives for prisoners, including 'Reading Ahead' (formerly the 'Six-Book Challenge'). Staff did not run specific activities for prisoners with low reading ability. However, prison managers had reinstated the Shannon Trust Reading Scheme, although prisoner numbers on this programme were low.

Recommendation

- 3.34** All prisoners should have weekly access to the library.

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.

- 3.35** The PE department was almost fully staffed but on most days PE staff were redeployed to operational duties, and sessions were cancelled regularly. Staff ensured that PE courses led by external agencies continued, and the most popular facilities were kept open where possible. However, too many prisoners were unable to access recreational PE regularly.
- 3.36** Prisoners on the E4 landing were unable to access any recreational PE. The minority of prisoners who were in full-time work could participate in PE in the evenings and on Friday afternoons. In our survey, only 8% of respondents said that they used the gym more than three times a week, against 25% at similar prisons.
- 3.37** There was a wide range of PE facilities, including a sports hall, weights room and a gym equipped with cardiovascular machines. However, too many pieces of equipment were out of order and needed replacing or servicing. An outside all-weather pitch was used when staffing levels allowed. Trainers from external sports clubs provided a range of personal development courses, which prisoners attended and enjoyed. Prisoners' achievements on these programmes were high, although places were very limited. Links with the health care department were good and staff provided programmes for prisoners aged over 50 and those requiring remedial PE.
- 3.38** Shower and toilet facilities for prisoners using the gym were reasonably clean. However, there were no privacy screens around urinals and showers. PE staff were required to monitor the areas, to ensure that prisoners were protected from any bullying or harassment. Closed-circuit television cameras had been installed and were checked by security staff following any incidents.

Recommendation

- 3.39 Prisoners should have reliable weekly access to PE.**

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 was meeting its obligations to ensure those committed by local courts were held in custody, but it was fundamentally failing to meet its other key role as a resettlement prison. Some aspects of the strategic approach to resettlement had improved. An up-to-date reducing reoffending strategy identified appropriate objectives. It was informed by a useful prisoner needs assessment, which had been completed in October 2016 using basic custody screening tool (BCST) data, labour market information and a prisoner survey. A monthly reducing reoffending meeting existed to try to promote effective communication and partnership working.
- 4.2 There were some long-standing concerns about the poor performance of the community rehabilitation company (CRC), London CRC, which continued to absorb significant management time and effort. The relationship between the prison and MTC Novo (and Novus, to whom the work was subcontracted) had been difficult for over 12 months, partly because of numerous disruptive changes in management. Relationships were currently improving but more work was required (see the reintegration planning section).
- 4.3 Partnership working between the prison and the National Probation Service (NPS) had also been poor. Although there was now a full complement of 5.5 full-time-equivalent probation officers, there had been several vacancies during the previous 12 months and the team had not offered a full offender supervision service. The prison had taken on some public protection work that had previously been completed by probation staff but had not done so effectively. The senior probation officer had just left, with no replacement yet identified. Health and safety concerns raised by the probation team in late 2016 had still not been resolved satisfactorily, and probation staff used legal visits to interview prisoners instead of going onto the wings. There was an urgent need to restore working relationships and properly integrate the probation team into the offender management unit (OMU).
- 4.4 The governor's decision to prioritise staffing the residential units and workplaces had resulted in shortages of prison officer offender supervisors, which fundamentally undermined the offender management model. There was no use of release on temporary licence, even for the 34 prisoners who were suitable for open conditions at the time of the inspection.
- 4.5 The resettlement hub was a useful location for a variety of interventions and for conducting interviews. It was beginning to be used as a 'drop-in' centre for CRC queries during free-flow and for various BCST interviews. This facility needed more development to promote further the various resettlement services to staff and prisoners.

Offender management and planning

Expected outcomes:

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

- 4.6** Offender supervisors and custody administration staff had only begun working in the same part of the prison since late 2016, but the probation team remained separate. The administrative posts in the OMU were nearly all filled but too many of these staff were not yet able to complete the full range of tasks. There were only 4.5 full-time-equivalent prison officer offender supervisors, against a target of 12, and they were often required to work elsewhere in the prison. Around 28 weeks of work had been lost to redeployment in the previous six months.
- 4.7** These shortages, combined with the vacancies in the probation team, meant that there was hardly any routine allocation of cases to individual offender supervisors, although 42 cases (mostly prisoners on indeterminate sentences) had been allocated to probation staff just before the inspection. Instead, work was pooled and offender supervisors prioritised tasks based on urgency. The work of offender supervisors was limited to essential processes and there was little face-to-face contact with prisoners to help to build relationships and reduce risk. In our survey, of the few prisoners who said that they had a sentence plan, 68% said that no one was working with them to achieve their targets, and this was reflected in the electronic case notes. Almost no prisoners saw an offender supervisor. Too many prisoners were not being challenged to think about their offending behaviour or motivated to address it (see main recommendation S50).
- 4.8** Only two of the prison offender supervisors were trained in the offender assessment system (OASys), and there was a backlog of at least 174 OASys assessments. It was unclear how many of these were initial assessments or whether they were the responsibility of the prison or the NPS. We looked in depth at a sample of 12 cases. In four (all of which were the responsibility of the prison), there was no OASys assessment. The other eight assessments which had been completed were all of inadequate quality, with deficiencies in all sections. Too many risk of serious harm assessments were not sufficiently analytical and less than half the cases had an adequate risk management plan (see main recommendation S50).
- 4.9** Home detention curfew (HDC) processes were managed robustly. There were some delays, caused by difficulties in obtaining home circumstances reports, but 49% of those granted HDC went home on their eligibility date. Only around 12 prisoners were released on HDC each month but we considered that the decisions made were reasonable and well documented.

Public protection

- 4.10** A lone administrator screened newly arrived prisoners for public protection concerns but oversight of the work, and arrangements for covering absence were not sufficiently robust. We were not confident that screening was always completed promptly but relevant alerts were recorded. Telephone and correspondence monitoring was proportionate and appropriately authorised, but some reviews were late. Prisoners with child contact restrictions could apply for permission to see named children, and these applications were carefully considered.

- 4.11** Multi-agency public protection work was poor. There was no system for confirming the multi-agency public protection arrangements (MAPPA) management level six months before release, as required, which risked jeopardising appropriate release planning. In addition, there was no interdepartmental risk management team meeting, which meant that emerging risks might have been missed. The prison was unable to tell us which prisoners posed a high or very high risk of harm. This failure to prioritise cases based on risk meant that none of the very high risk of harm cases we identified were allocated an offender supervisor. In our sample, important work remained incomplete in half the cases with public protection issues, including some where release was imminent, potentially leaving significant risks unmanaged (see main recommendation S51).
- 4.12** MAPPA F forms were completed as required by members of the probation team and were of reasonable quality, although in some cases the analysis of prison behaviour was not sufficiently robust.

Categorisation

- 4.13** Initial categorisation was generally prompt. However, most transfers were driven by the availability of spaces or other urgent operational need, rather than by sentence plan objectives, and there was a shortage of category B training places. Most prisoners who moved to training prisons did not have an up-to-date OASys assessment.
- 4.14** The prison had worked hard in recent months to eliminate a backlog of recategorisation reviews, which had included some overdue by more than a year. The process comprised a review of the paper file and information on electronic case notes but did not include the prisoner's views. Many recategorisation reviews were conducted without an up-to-date OASys assessment, and opportunities to engage offender managers and probation staff were missed. Staff worked hard to complete OASys assessments for category D prisoners because open prisons would not accept prisoners without one.

Indeterminate sentence prisoners

- 4.15** Many prisoners on indeterminate sentences received insufficient support. At the time of the inspection, there were 33 prisoners on indeterminate sentences and the intention had been for these men to be managed by probation offender supervisors. However, staff shortages had meant that most men had only just been reallocated an offender supervisor, after a delay of around 12 months. Some prisoners on indeterminate sentences remained at the establishment for too long, partly because they had not had an offender supervisor to pursue a more appropriate allocation. However, all but one parole report had been submitted on time in the previous six months.
- 4.16** Prisoners on indeterminate sentences were invited to monthly consultation and information sharing forums, which were generally well attended. However, men facing charges which might attract indeterminate sentences were not routinely identified or supported.

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.

- 4.17** In our survey, more prisoners than at similar prisons said that they had had resettlement problems on arrival (for example, housing or financial issues) and fewer said that they knew who could help them with resettlement issues. Although prison offender supervisors completed a BCST initial assessment for nearly all new arrivals within 24 hours, the CRC team only managed to follow this up promptly in 71% of cases. This meant that some prisoners did not have their needs fully assessed and were not signposted towards relevant provision. This was particularly concerning because, in our survey, 43% of respondents said that they were in custody for the first time, which was higher than in similar prisons and than at the time of the previous inspection, and suggested an increased vulnerability and need for advice (see main recommendation S52).
- 4.18** The CRC also aimed to see all prisoners around 12 weeks before release, to develop a resettlement plan. This was a substantial task as there were over 200 releases each month. In June 2017, 54% of prisoners due for release had been seen, but the average figure over the previous six months had been only 40%. This very recent improvement in performance had been achieved partly by suspending the 'Getting it Right' programme (see paragraph 4.40). Much more work was required to ensure that prisoners' needs were routinely assessed and that resettlement plans were developed for all those approaching release (see main recommendation S52).
- 4.19** The reasons for poor performance were complex. Much of the work completed by CRC staff was of reasonable quality overall, but we met prisoners and staff who did not know anything about the CRC and did not understand the importance of engaging with them. Managers were aware of this, and had developed some strategies for improving awareness, but these were not yet sufficiently effective. Managers had begun to address issues with the attendance and performance of some CRC staff.
- 4.20** Further factors preventing interviews with prisoners included a shortage of officers to unlock and escort prisoners, frequent and often unplanned regime alterations, a lack of suitable interview rooms, health and safety concerns about going onto the wings during association periods, and limited unlock time, which sometimes meant that prisoners had to make unacceptable choices between an appointment with the CRC or a shower and exercise (see also paragraph 3.2 and main recommendation S49).
- 4.21** The prison had just made an additional officer available to escort prisoners to and from the resettlement hub for interview. However, most CRC staff did not know about this new provision and during the inspection it was cancelled at least twice.

Accommodation

- 4.22** St Mungo's were subcontracted by the CRC to provide accommodation services. They received referrals from the BCST process and directly from prisoners. They provided support to maintain or find accommodation.
- 4.23** Accommodation data from a range of sources were unreliable but it was clear that many prisoners were released without settled accommodation. St Mungo's had worked with 379 men over the previous six months, 37% of whom had been released with no settled

accommodation. (However, this figure was not representative of the whole population and some prisoners had appointments which might have led to a housing offer.) Data from the CRC, likely to be slightly more reliable, suggested that 54% of prisoners were released to no settled accommodation. Other data collected by peer mentors suggested that 61% of prisoners had no settled accommodation on release.

Education, training and employment

- 4.24** The quality of the National Careers Service provided by Prospects, through their agent, the Prisoner Liaison Information Advisory Service (PLIAS), required improvement. Prisoners had good access to careers advice on arrival but too many did not receive appropriate advice towards the end of their sentence. There was no structured pre-release programme, and an over reliance on an external organisation, Strive, to develop prisoners' employability and job-seeking skills. Attendance at these sessions was poor. Links between the prison, the National Careers Service and the CRC were underdeveloped.
- 4.25** The virtual campus (internet access for prisoners to community education, training and employment opportunities) was not used well enough to provide pre-release employment information to prisoners. However, PLIAS staff provided useful paper-based information about education, training and employment opportunities.

Recommendation

- 4.26 Prisoners should have adequate support to apply for jobs and access education and training on release.**

Health care

- 4.27** Prisoners were seen by health services staff in reception before release and offered a summary of their medical notes. Those on medication were given a week's supply on a risk-assessed basis, although it was not always possible to supply medication when a prisoner was released at short notice from court. Community-style FPI0 prescriptions were not used to ease this situation. The mental health team liaised effectively with community colleagues, and pre-release planning for patients with enduring mental health problems was well managed via the care programme approach. Arrangements for patients with palliative or end-of-life needs were good, with effective links with local services.

Drugs and alcohol

- 4.28** Release planning for prisoners with drug and alcohol problems, including liaison with community services, was effective. Several community teams attended a monthly meeting chaired by The Forward Trust. A community worker from Hammersmith and Fulham, Westminster, Kensington and Chelsea was based in the prison several days a week, which supported effective throughcare. Individual harm-reduction input was provided before release for those working with the substance misuse team. However, overdose management training and naloxone (an opiate reversal agent) were not available, which could have increased the risk of overdose after release.

Recommendation

- 4.29 Before release, prisoners with substance misuse issues should be able to access training on overdose management, including the use of naloxone.**

Finance, benefit and debt

- 4.30** There was insufficient finance, benefit and debt provision. CRC staff could freeze court fines and make applications for time to be served in lieu. They could also help prisoners to open bank accounts, although demand for this service was low. A qualified debt advisor at another prison assisted by taking on some of the more complex casework. The team aspired to offer a wider range of services locally but plans were still being developed. A lone Citizens Advice worker was on-site, and could only take referrals directly from prisoners (rather than from the CRC).

Children, families and contact with the outside world

- 4.31** The timing and number of social visits appeared to meet need, and booking arrangements had improved. Unconvicted prisoners on the standard level of the incentives and earned privileges (IEP) scheme could have three visits per week, while those on the enhanced level could have five. Convicted prisoners could have two or four visits per month, depending on their IEP level.
- 4.32** Social visits were booked by telephone, the internet or e-mail through a call centre. The system seemed to be effective and visitors could quickly determine if the date of the visit they had requested was available, which made planning visits easier.
- 4.33** The visitors centre was modern and comfortable. There was a well-furnished waiting area, with a wide range of information on posters and leaflets, a children's play area and clean toilet facilities. Spurgeons staff and volunteers provided advice on family matters and signposted visitors to family support organisations in their home areas.
- 4.34** The large visits hall, located on the upper floor of the visits building, was clean but lacked softer features such as posters or paintings on the walls. There was a children's play area but it was usually closed on weekdays. There was a snack bar on the lower level of the building, where visitors could buy cold drinks and snacks for themselves and prisoners, but hot drinks were not available.
- 4.35** Social visits routinely started late, and prisoners had to wait for long periods in poorly ventilated holding rooms for their visitors to arrive. The processing of visitors took too long, and they often had to wait for long periods in cramped conditions because of delays caused by staffing issues. We were told by staff, prisoners and their visitors that it was not unusual to wait more than an hour for a visit to begin.
- 4.36** An officer worked as a dedicated family worker inside the prison. She was supported by prisoner orderlies on the wings. Although she provided individual support to prisoners for family issues, she was usually deployed to other duties owing to staff shortages on the wings.
- 4.37** There were weekly parent and child visits, where prisoners could play with their children, and these were popular. Seven themed family visits a year were held during school holidays, and these were available to all prisoners. There was a range of parenting and relationship courses and activities. Storybook Dads (in which prisoners record stories for their children)

was well established, and the Building Stronger Families course for prisoners and their partners was a promising initiative.

Recommendation

4.38 Visits should always start on time.

Attitudes, thinking and behaviour

- 4.39** A number of useful interventions were delivered by the chaplaincy (see section on faith), substance misuse services (see section on substance misuse) and the children and families service (see paragraph 4.37). Some prisoners found these useful but they were unconnected to the sentence planning process. There had been a number of other interesting interventions, such as Key 4 Life (an intensive through-the-gate mentoring and support programme) and the 3 Pillars Project rugby course (which also included post-release support) but neither was funded on an ongoing basis. Not all the CRC staff were aware of these opportunities for prisoners.
- 4.40** The CRC had employed some staff specifically to deliver the Getting it Right course (a four-session programme designed to provide support to prisoners for accommodation, debt, education, family and relationships). We met prisoners who had found this course valuable but it had been suspended to divert resources towards resettlement planning, and it was not clear when it would restart.

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 and HMPPS

- 5.1** The prison governor, staff and HMPPS should ensure that prisoners live in clean, properly equipped and respectful conditions. Prisoners must be provided with the equipment and kit as well as other requirements to live a decent life. (S47)
- 5.2** All prisoners within 12 weeks of release should have a realistic resettlement plan which ensures that they receive the support they require and which is shared with offender managers. (S52)
- 5.3** Prison and probation managers should urgently review their public protection arrangements and ensure that robust multi-agency arrangements to identify and manage risk are implemented correctly and consistently. (S51)

Main recommendations

To the governor

- 5.4** The strategic response to managing and reducing violence should be strengthened. Sufficient staff should be allocated to safer custody and other key tasks to ensure a proactive approach to keeping prisoners safe. The success of this approach should be measured by reduced levels of violence. (S45)
- 5.5** Levels of self-harm must be reduced. Prisoners who are vulnerable to self-harm should be supported effectively; staff should help them to manage their problems and improve their coping strategies. (S46)
- 5.6** Diversity and equality must be respected and promoted. Equality and diversity work should ensure outcomes and perceptions are measured and that the needs of prisoners with protected characteristics are understood and, where possible, met. (S48)
- 5.7** Maximum use should be made of the available activity places. Staff should actively encourage prisoners to attend, and the regime should ensure that men can do so consistently and punctually. (S49)
- 5.8** Managers should implement offender management arrangements which ensure that prisoners have an up-to-date and adequate assessment of their risks and needs, a sentence plan and ongoing support to achieve their sentence plan objectives. (S50)

Recommendations

To the governor

Early days in custody

- 5.9** Peer workers should be actively managed and overseen by a member of staff. (1.12)

Safeguarding

- 5.10** Comprehensive adult safeguarding procedures should be embedded across the prison, and the prison should be represented on the local safeguarding adults board. (1.27)

Security

- 5.11** Actions identified from intelligence reports should be routinely completed and monitored, and the outcomes analysed. (1.34)

Discipline

- 5.12** There should be robust management and oversight of the adjudications process, to ensure that it provides proper safeguards and an effective deterrent. (1.41)
- 5.13** There should be sufficient managerial oversight of all use of force and special accommodation, to ensure that it is used proportionately and only as a last resort. (1.46)
- 5.14** The regime on the segregation unit should include purposeful activity and at least 60 minutes in the open air daily. (1.50)

Substance misuse

- 5.15** All prisoners with substance misuse issues should have prompt access to a comprehensive range of psychosocial support which meet their identified needs throughout their stay. (1.55)

Staff-prisoner relationships

- 5.16** Wing-based staff should have enough capacity to be able to manage prisoners safely and provide them with ongoing support. (2.11)

Equality and diversity

- 5.17** The diversity and equality team should meet regularly, to provide strategic oversight of equality work and ensure that equality monitoring tool (EMT) data and other evidence suggesting the disproportionate treatment of a protected group is investigated promptly. (2.18, repeated recommendation, 2.24)

Complaints

- 5.18** Prisoners' complaints should receive respectful responses that address the issues raised, and all should be investigated thoroughly. (2.31)

Health services

- 5.19** Health care complaints should be investigated and used appropriately, to inform service development and learning. (2.47)
- 5.20** All clinical areas should meet relevant cleaning and infection control standards. (2.48, repeated recommendation 2.79)
- 5.21** Prisoners should have adequate time to attend health care appointments, including receiving their medication without having to choose between this and other necessary activities. (2.56, repeated recommendation 2.92)
- 5.22** External hospital appointments should not be cancelled and custody escort arrangements should be adequate and effective to meet the health care needs of the prison population. (2.57, repeated recommendation 2.95)
- 5.23** Prisoners should have access to targeted medicines use reviews and there should be a wider range of patient group directions. (2.67, repeated recommendation 2.105)
- 5.24** Medicines should be stored appropriately, including secure in-cell storage for prisoners, administered at required times and intervals, and with adequate supervision to ensure confidentiality and prevent diversion. (2.68)
- 5.25** The transfer of patients to hospital under the Mental Health Act should occur within agreed Department of Health timescales. (2.78, repeated recommendation 2.115)
- 5.26** All prisoners with social care and continuing care needs should be identified, referred and assessed, and receive the required support promptly, within a robust governance framework. (2.81)

Catering

- 5.27** There should be enough food for all prisoners and it should be served hygienically. (2.86)

Learning and skills and work activities

- 5.28** Managers should collect and evaluate a wider range of data, to ensure that all prisoners' identified needs are met, including the provision of accredited qualifications. (3.9)
- 5.29** The collection and use of initial assessment results should be improved, to ensure that all prisoners are given appropriate, timely support. (3.20)
- 5.30** Prisoners' skills development in all non-accredited learning should be recorded. (3.21)
- 5.31** There should be more support for prisoners to develop their English and mathematics skills. (3.25)
- 5.32** All prisoners should have weekly access to the library. (3.34)

Physical education and healthy living

- 5.33** Prisoners should have reliable weekly access to PE. (3.39)

Reintegration planning

- 5.34** Prisoners should have adequate support to apply for jobs and access education and training on release. (4.26)
- 5.35** Before release, prisoners with substance misuse issues should be able to access training on overdose management, including the use of naloxone. (4.29)
- 5.36** Visits should always start on time. (4.38)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Sean Sullivan	Team leader
Jonathan Tickner	Inspector
Paul Rowlands	Inspector
Sandra Fieldhouse	Inspector
Jeanette Hall	Inspector
Gordon Riach	Inspector
Anna Fenton	Researcher
Patricia Taflan	Researcher
Ellis Cowling	Researcher
Catherine Shaw	Researcher
Majella Pearce	Substance misuse inspector
Maureen Jamieson	Health services inspector
Deborah Hylands	Pharmacist
Jo MacDonald	Care Quality Commission inspector
Tim Byrom	Care Quality Commission inspector
Bob Cowdrey	Ofsted inspector
Matt Benbow	Ofsted inspector
David Baber	Ofsted inspector
Martyn Griffiths	Offender management inspector
Trevor Worsfold	Offender management inspector
Wendy Martin	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 2015, reception was exceptionally busy and prisoners' experience was often poor. First night arrangements were adequate for most but when the first night unit was full, some prisoners missed out on essential support. Detoxification arrangements were unsafe. Levels of violence had risen and were high, and too many prisoners felt unsafe. Not enough was being done to make the prison safer. Self-harm and suicide arrangements were not effective. Drugs were easily available and too little was being done to disrupt supply. The incentives and earned privileges scheme was ineffective. The number of adjudications was high. Levels of use of force were high and we were not assured that its use was always justified. The regime on the segregation unit was limited. Substance misuse arrangements were mostly adequate. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

All incidents of violence should be captured and analysed, and action should be taken to reduce violence and make the prison safer. Victims should be identified and supported. (S58)

Not achieved

All prisoners at risk of self-harm should be held in decent conditions, with sufficient support and activities. ACCT procedures and documentation should be significantly improved. (S59)

Not achieved

Managerial oversight of use of force should be sufficient to ensure that force is used proportionately and only as a last resort. (S60)

Not achieved

Recommendations

Prisoners should be held in court cells for the minimum possible period and should arrive at the establishment no later than 7pm. (I.4)

Not achieved

Newly arrived prisoners should, during the first night process, undergo a comprehensive risk assessment to identify and address vulnerability. (I.18)

Achieved

Prisoners should only be strip-searched following an individual risk assessment. (I.19)

Achieved

All newly arrived prisoners should be supported by staff and peers in reception and on their first night and should have the opportunity to make a telephone call, have access to showers, and have clean and properly equipped cells. (1.20)

Partially achieved

Induction should be given sufficient time to ensure that all aspects can be covered, and all newly arrived prisoners should complete the process. (1.21)

Not achieved

All acts of self-harm should be recorded. (1.37)

Achieved

All staff should receive regular refresher training in safer custody issues, including suicide and self-harm prevention. (1.38)

Achieved

Prisoners on assessment, care in custody and teamwork (ACCT) procedures should only be held on the segregation unit in exceptional circumstances and as a last resort. (1.39)

Achieved

The safeguarding strategy should ensure good communication of safeguarding needs across the prison and that individual needs are met through multidisciplinary care planning, involving health services and wing staff alike. (1.45)

Not achieved

Intelligence data (including requests for searches and suspicion tests) should be scrutinised to identify trends and hotspots of illegal activity, and clear objectives developed and shared in order to respond to emerging threats to the security and safety of the prison. (1.53)

Achieved

The scale and nature of drug use should be analysed, and clear and measurable action taken to reduce availability and use. (1.54)

Not achieved

The incentives and earned privileges (IEP) scheme should be applied consistently to support positive behaviour. The regime for prisoners on the basic level should include periods of association, purposeful activity and daily access to showers and telephones. (1.60)

Not achieved

There should be regular oversight and monitoring of adjudications, including a system for quality assurance. (1.63)

Not achieved

All uses of special accommodation should be authorised and monitored. (1.66)

Not achieved

The regime on the segregation unit should be improved, to include the opportunity for a daily shower for prisoners on the basic level of the IEP scheme, some purposeful activity and the opportunity for at least 60 minutes in the open air. (1.69)

Not achieved

Prisoners with substance use problems should have access to group programmes, regardless of their wing location. (1.78)

Achieved

The prison and its primary health and substance use service partners should work together to introduce and oversee unambiguous, safe and effective first night clinical treatment. This should follow national guidance in taking account of prisoners' prescribing and observation needs. (1.79)

Achieved

The role of the Conibeere unit should be clarified. Its current dual role as a stabilisation unit and as a unit for prisoners with behavioural problems and other vulnerabilities should cease. (1.80)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2015, overall cleanliness had improved but too many prisoners still lived in unacceptable conditions. Access to basic necessities such as clothing and adequate furniture was problematic. Application and complaints processes were poor and many complaints, including some about staff, were not properly responded to. We witnessed some good staff–prisoner interactions but too many staff were indifferent towards prisoners' needs and we saw some inappropriate behaviour. Equality arrangements were weak. There were good outcomes for some minority groups but the needs of some were not met. Faith provision was very good. Health services were mostly reasonable and mental health provision was good. The food provided was poor. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

Cells and showers should be maintained to an acceptable and decent standard, and the central stores should provide adequate clothing, bedding and furniture. (S61)

Not achieved

Recommendations

Cells designated as single cells should not be used for more than one prisoner. (2.7)

Not achieved

The timeliness and quality of responses to prisoner applications should be monitored by prison staff. Applications orderlies should not have access to sensitive information. (2.8)

Not achieved

Prisoners' poor perceptions of staff and high levels of victimisation from staff should be explored and issues addressed. (2.14)

Not achieved

Detached duty staff should have access to electronic case notes. (2.15)

Achieved

The diversity and equality team should meet regularly, to provide strategic oversight of equality work and ensure that equality monitoring tool (EMT) data and other evidence suggesting the disproportionate treatment of a protected group is investigated promptly. (2.24)

Not achieved (recommendation repeated, 2.18)

There should be regular consultation meetings with prisoners from all minority groups, to discuss EMT data and prisoners' perceptions about equality and diversity. (2.25)

Not achieved

Members of protected groups should be identified systematically and confidentially, and individual support plans provided when needed. (2.37)

Not achieved

Discrete action plans should be developed and maintained, to promote good outcomes for Muslim prisoners, those with disabilities and young adults. (2.38)

Not achieved

Staff should use an accredited professional interpreting service whenever matters of accuracy and/or confidentiality are involved. (2.39)

Achieved

Immigration detainees should be given at least one month's notice of a decision to detain them. (2.40)

Not achieved

Prisoner complaints should be answered within seven days; responses should be polite and deal with the issue complained about. (2.55)

Partially achieved

Prisoners' complaints about staff should be investigated thoroughly and appropriate action taken. (2.56)

Not achieved

Prisoner complaints which allege discrimination should be investigated through discrimination incident report form procedures. (2.57)

Achieved

Remanded prisoners should be offered access to a bail support service. (2.63)

Achieved

Legal visitors should be provided with adequate privacy. (2.64)

Not achieved

All clinical areas should meet relevant cleaning and infection control standards. (2.79)

Not achieved (recommendation repeated, 2.48)

All staff should have easy access to recorded clinical and managerial supervision. (2.80)

Achieved

Prison staff should be trained to respond to medical emergencies and receive first-aid and resuscitation training. (2.81)

Achieved

The initial health screening of prisoners in reception should be carried out in a confidential area and at an appropriate time to ensure that immediate health needs and the safety of the prisoner are met. (2.91)

Achieved

Prisoners should have adequate time to attend health care appointments, including receiving their medication, without having to choose between this and other necessary activities. (2.92)

Not achieved (recommendation repeated, 2.56)

Prisoners with life-long conditions and complex needs should receive regular reviews which generate an evidence-based care plan. (2.93)

Partially achieved

Waiting times for primary care services, including the optician and GP, should not exceed clinically accepted waiting times in the community. (2.94)

Achieved

External hospital appointments should not be cancelled and custody escort arrangements should be adequate and effective to meet the health care needs of the prison population. (2.95)

Not achieved (recommendation repeated, 2.57)

Prisoners should have secure storage for medication, and systematic checks should be conducted on patients receiving in-possession medication. (2.103)

Not achieved

Medicines administration should be supervised adequately by custody officers to ensure confidentiality and prevent diversion. (2.104)

Not achieved

Prisoners should have access to targeted medicines use reviews and there should be a wider range of patient group directions. (2.105)

Not achieved (recommendation repeated, 2.67)

Prisoners with mild-to-moderate mental health problems should have access to a full range of support, including individual brief interventions and counselling. (2.114)

Achieved

Prisoners requiring a transfer under the Mental Health Act should be transferred within the current transfer guidelines. (2.115)

Not achieved (recommendation repeated, 2.78)

Lunch should not be served before midday and the evening meal not before 5pm. Breakfast should be served on the day it is eaten and should be of adequate quality and quantity. (2.122)

Not achieved

Catering equipment should be repaired or replaced within seven days of failure. (2.129)

Not achieved

Newly arrived prisoners should be able to buy items from the shop. (2.129)

Not achieved

Prisoners should be able to buy catalogue items without incurring an administration charge. (2.130)

Not achieved

Purposeful activity

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

At the last inspection, in 2015, for most prisoners, the amount of time out of cell was inadequate. An emergency regime was running but it was often not followed. Despite considerable effort, the overall management of learning and skills and work activities was poor. There were too few activities for the population and few prisoners attended. Almost 600 prisoners were unemployed. The quality of teaching, learning and assessment required improvement overall, although coaching in vocational training was good. Few prisoners undertook qualifications. Achievements on some courses were good but too low on level 2 English and mathematics. Library services were reasonable but access was poor. Recreational PE was reasonably good. Outcomes for prisoners were poor against this healthy prison test.

Main recommendation

Prisoners should be unlocked for at least 10 hours a day. The quantity and range of activity places should be adequate to meet the needs of the population, and all prisoners should be able to attend. (S62)

Not achieved

Recommendations

Established data systems should be used to evaluate the impact of quality improvement measures. (3.11)

Not achieved

Quality improvement arrangements for the non-Offender Learning and Skills Service provision should be strengthened, particularly for the observation of teaching, learning and coaching. (3.12)

Not achieved

The overall quality of teaching, learning and assessment should be improved. (3.26)

Achieved

The role of peer mentors should be developed further, so that they can support and meet the needs of other learners more ably. (3.27)

Achieved

All staff should promote the importance of English and mathematics skills and ensure that all learners improve these skills so that they are better prepared for work. (3.28)

Achieved

The progress of learners with additional support needs should be monitored and the effectiveness of additional support evaluated. (3.29)

Achieved

The quality of feedback on learners' written work and individual learning plans should be improved, so that they know how to improve further. (3.30)

Not achieved

All staff should actively promote a positive attitude to learning, skills and work, supported by effective prison-wide strategies to improve attendance, punctuality and a work ethic. (3.36)

Not achieved

Learners should be encouraged to improve the presentation of their written work, to reflect better their abilities. (3.37)

Achieved

More learners should be engaged in accredited qualifications. (3.41)

Achieved

All learners should make at least good progress. (3.42)

Achieved

Success rates in English and mathematics should be improved. (3.43)

Achieved

All prisoners should receive an induction to the library and be provided with reasonable and regular access. (3.48)

Not achieved

The use of the gym by different groups should be monitored, to ensure equity of access. (3.53)

Achieved

Resettlement

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

At the last inspection, in 2015, staff shortages had resulted in poor offender management. Many prisoners did not have an offender supervisor. Most prisoners, including some high risk of harm cases, did not have a current offender assessment system (OASys) assessment and sentence plan, which hindered their opportunity to progress. Prisoners were often released late on home detention curfew. Public protection arrangements were adequate. Transfers were rarely informed by sentence planning needs. The demand for resettlement support was high and prisoners' needs were assessed on arrival and before release, but too many did not know where to go to for help across any of the resettlement pathways. The quality of resettlement work was mixed. The number of prisoners released without accommodation over recent months had increased considerably, to an unacceptable level. Good support was provided for families and visits but more needed to be done to help prisoners to secure employment. Outcomes for prisoners were poor against this healthy prison test.

Main recommendations

There should be a coordinated, whole-prison approach to resettlement at an operational level which effectively integrates reducing reoffending and offender management, and is driven by the offender management unit. Offender supervisors should have time to manage prisoners' sentences appropriately. (S47)

Not achieved

Prisoners should be released with a suitable address and there should be effective interventions to support them into employment, training or education. (S48)

Not achieved

Recommendations

The resettlement needs analysis should be more comprehensive and robust. The specific needs of specific groups of prisoners should be explored and the reducing reoffending strategy should set out priorities for the full range of prisoners held, including foreign nationals and young adults. (4.6)

Partially achieved

The community rehabilitation company staff should record all actions taken on P-Nomis, and the resettlement plans should be easily accessible by all other prison staff, including offender supervisors. (4.7)

Not achieved

The quality of the risk of harm assessments should be improved, to ensure that all factors are analysed and planned for. (4.14)

Not achieved

Prisoners approved for home detention curfew should have a timely release which coincides with their eligibility date. (4.15)

Achieved

The multi-agency public protection arrangements (MAPPA) level should be confirmed at least six months before a prisoner's release. Review of contact restrictions and pre-release planning for high-risk and MAPPA cases should be improved by the introduction of inter-departmental consultation and information exchange. (4.19)

Not achieved

Categorisation reviews should be up to date and offending-related needs or sentence plan targets should inform the prioritisation of transfers. (4.24)

Partially achieved

Places should be available for category B sex offenders and indeterminate-sentenced prisoners to transfer to allow them to progress without undue delay. (4.25)

Not achieved

Remand prisoners facing a potential indeterminate sentence should be identified and offered information and support. (4.28)

Not achieved

The quality of resettlement assessments and plans should be improved and more should be done to ensure that prisoners know who to turn to for help. (4.34)

Not achieved

A course in financial education should be made available. (4.48)

Not achieved

Visitors and prisoners should know which sessions are available when they book visits. (4.56)

Achieved

Prisoners should be allowed to use the toilet during a visit without the session being ended. (4.57)

Achieved

Sufficient offending behaviour interventions, of an appropriate type, should be provided, informed by the findings of a needs analysis of the population. (4.62)

Partially achieved

The Getting it Right programme places should be more clearly targeted and attendance improved.

(4.63)

Not achieved

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: Care UK Health & Rehabilitation Services Limited

Location: HMP Wormwood Scrubs

Location ID: 1-3862840460

Regulated activities: Diagnostic and screening procedures; treatment of disease, disorder or injury.

Action we have told the provider to take

The table below shows the regulations that were not being met. The provider must send CQC a report that says what action it is going to take to meet these regulations.

Regulation 12 – Safe Care and Treatment	12. (1) Care and treatment must be provided in a safe way for service users.
--	--

Care and treatment must be provided in a safe way for service users

How the regulation was not being met

Medicines were not managed safely. In particular we found that:

- Stock medicines, medicines for minor ailments and named patient medicines were not well labelled or clearly separated which increased the likelihood of errors.
- All strengths of buprenorphine were seen out of their original packaging and placed on a small shelf, increasing the likelihood of administration errors.
- Medicines for men who had left the prison were stored with stock medicines in wing cabinets.
- Nurses did not always adequately check men's identity before administering medicines.
- There were no stock reconciliation procedures on the wings, except for out-of-hours medicines.
- On A and B wings, men came into the treatment room to complete their own

diabetes blood sugar test while the nurse continued to administer medicines from the same room. Cabinets containing medication were left open, presenting a risk of diversion or theft of stock from the cabinet.

- A member of staff moved medication through the prison in an unlocked trolley box, during times when men were either being escorted or unlocked on association. This presented risks around diversion and staff safety.

Appendix IV: Photographs

This servery, covered in food debris, was left uncleaned on the wing overnight.



Outside areas between the wings were strewn with litter dropped from broken windows.



Appendix V: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced	26	612	52
Recall	4	97	8.2
Convicted unsentenced	18	125	11.7
Remand	30	273	24.6
Civil prisoners	0	1	0.1
Detainees Immigration	3	32	2.9
Unknown	2	4	0.5
Total	83	1,144	100

Sentence	18–20-year-olds	21 and over	%
Unsentenced	53	450	41.0
Less than six months	6	123	10.5
6 months to less than 12 months	1	83	6.8
12 months to less than 2 years	4	85	7.3
2 years to less than 4 years	7	133	11.4
4 years to less than 10 years	10	173	14.9
10 years and over (not life)	1	65	5.4
ISPP (indeterminate sentence for public protection)	0	19	1.5
Life	1	13	1.1
Total	83	1,144	100

Age	Number of prisoners	%
Please state minimum age here: 18		
Under 21 years	83	6.8
21 years to 29 years	398	32.4
30 years to 39 years	407	33.2
40 years to 49 years	206	16.8
50 years to 59 years	103	8.4
60 years to 69 years	28	2.3
70 plus years	2	0.2
Please state maximum age here: 73		
Total	1,227	100

Nationality	18–20-year-olds	21 and over	%
British	55	750	65.6
Foreign nationals	24	373	32.4
Not stated	4	21	2
Total	83	1,144	100

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced	58	597	53.4
Uncategorised sentenced	0	2	0.2
Category A	0	0	0
Category B	0	88	7.2
Category C	0	420	34.2
Category D	0	33	2.7
YOI closed	24	4	2.3
YOI open	1	0	0.1
Total	83	1,144	100

Ethnicity	18–20-year-olds	21 and over	%
White			
British	8	303	25.3
Irish	1	41	3.4
Gypsy/Irish Traveller	2	14	1.3
Other white	12	172	15.0
Mixed			
White and black Caribbean	8	30	3.1
White and black African	1	13	1.1
White and Asian	0	3	0.2
Other mixed	5	22	2.2
Asian or Asian British			
Indian	0	85	6.9
Pakistani	0	32	2.6
Bangladeshi	5	13	1.5
Chinese	0	0	0
Other Asian	6	57	5.1
Black or black British			
Caribbean	11	147	12.9
African	18	122	11.4
Other black	3	45	3.9
Other ethnic group			
Arab	2	14	1.3
Other ethnic group	1	22	1.9
Not stated	0	0	0
Total	83	1,144	100

Religion	18–20-year-olds	21 and over	%
Baptist	0	2	0.2
Church of England	4	118	9.9
Roman Catholic	16	255	22.1
Other Christian denominations	13	163	14.3
Muslim	36	330	29.8
Sikh	0	53	4.3
Hindu	1	33	2.8
Buddhist	0	9	0.7
Jewish	0	9	0.7
Other	0	6	0.5
No religion	11	160	13.9
Not stated	2	6	0.7
Total	83	1,144	100

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

Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	9	0.7	136	11.1
1 month to 3 months	9	0.7	245	20.0
3 months to 6 months	4	0.3	123	10.0
6 months to 1 year	5	0.4	96	7.8
1 year to 2 years	3	0.2	72	5.9
2 years to 4 years	0	0	22	1.8
4 years or more	0	0	0	0
Total	30	2.4	694	56.6

Sentenced prisoners only

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

Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	17	3.4	159	31.6
1 month to 3 months	25	5.0	149	29.6
3 months to 6 months	7	1.4	99	19.7
6 months to 1 year	4	0.8	33	6.6
1 year to 2 years	0	0	8	1.6
2 years to 4 years	0	0	1	0.2
4 years or more	0	0	0	0
Other	0	0	1	0.2
Total	53	4.3	450	36.7

Main offence	18–20-year-olds	21 and over	%
Violence against the person			
Sexual offences			
Burglary			
Robbery			
Theft and handling			
Fraud and forgery			
Drugs offences			
Other offences			
Civil offences			
Offence not recorded /holding warrant			
Total			

Appendix VI: 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 establishment⁷. 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 31 July 2017 the prisoner population at HMP Wormwood Scrubs was 1,218. Using the method described above, questionnaires were distributed to a sample of 235 prisoners.

We received a total of 185 completed questionnaires, a response rate of 79%. This included one questionnaire completed via interview. Thirteen respondents refused to complete a questionnaire and 37 questionnaires were not returned.

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

Wing/Unit	Number of completed survey returns
A	41
B	23
C	49
D	34
E	25
P	3
R	6
X	2
Health care	0
Segregation unit	2

Presentation of survey results and analyses

Over the following pages we present the survey results for HMP Wormwood Scrubs.

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 differences⁸ 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 Wormwood Scrubs in 2017 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 33 local prisons since April 2014.
- The current survey responses from HMP Wormwood Scrubs in 2017 compared with the responses of prisoners surveyed at HMP Wormwood Scrubs in 2015.
- A comparison within the 2017 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2017 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2017 survey between the responses of Muslim prisoners and non-Muslim prisoners.

⁸ 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 who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2017 survey between the responses of prisoners on A and E wings and the rest of the establishment.

Survey summary

Section I: About You

Q1.1	What wing or houseblock are you currently living on? See survey methodology.	
Q1.2	How old are you?	
	Under 21	11 (6%)
	21 - 29.....	63 (34%)
	30 - 39.....	51 (28%)
	40 - 49.....	40 (22%)
	50 - 59.....	16 (9%)
	60 - 69.....	1 (1%)
	70 and over	1 (1%)
Q1.3	Are you sentenced?	
	Yes	94 (53%)
	Yes - on recall.....	16 (9%)
	No - awaiting trial.....	50 (28%)
	No - awaiting sentence	16 (9%)
	No - awaiting deportation.....	3 (2%)
Q1.4	How long is your sentence?	
	Not sentenced.....	69 (40%)
	Less than 6 months.....	19 (11%)
	6 months to less than 1 year	19 (11%)
	1 year to less than 2 years	12 (7%)
	2 years to less than 4 years	18 (10%)
	4 years to less than 10 years.....	22 (13%)
	10 years or more.....	8 (5%)
	IPP (indeterminate sentence for public protection)	4 (2%)
	Life.....	3 (2%)
Q1.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes.....	51 (28%)
	No.....	129 (72%)
Q1.6	Do you understand spoken English?	
	Yes.....	175 (97%)
	No.....	6 (3%)
Q1.7	Do you understand written English?	
	Yes.....	172 (94%)
	No.....	11 (6%)

Q1.8	What is your ethnic origin?		
	White - British (English/ Welsh/ Scottish/ Northern Irish)	41 (23%)	Asian or Asian British - Chinese..... 1 (1%)
	White - Irish.....	9 (5%)	Asian or Asian British - other 4 (2%)
	White - other.....	30 (17%)	Mixed race - white and black Caribbean 7 (4%)
	Black or black British - Caribbean.....	22 (12%)	Mixed race - white and black African... 2 (1%)
	Black or black British - African	19 (11%)	Mixed race - white and Asian..... 3 (2%)
	Black or black British - other	4 (2%)	Mixed race - other
	Asian or Asian British - Indian.....	12 (7%)	Arab..... 4 (2%)
	Asian or Asian British - Pakistani.....	4 (2%)	Other ethnic group..... 13 (7%)
	Asian or Asian British - Bangladeshi.....	3 (2%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes		6 (3%)
	No.....		166 (97%)
Q1.10	What is your religion?		
	None.....	29 (16%)	Hindu..... 9 (5%)
	Church of England	29 (16%)	Jewish..... 3 (2%)
	Catholic	41 (23%)	Muslim..... 38 (21%)
	Protestant.....	3 (2%)	Sikh
	Other Christian denomination	11 (6%)	Other
	Buddhist	4 (2%)	6 (3%)
Q1.11	How would you describe your sexual orientation?		
	Heterosexual/Straight.....		175 (99%)
	Homosexual/Gay.....		1 (1%)
	Bisexual		1 (1%)
Q1.12	Do you consider yourself to have a disability (i.e. do you need help with any long-term physical, mental or learning needs)?		
	Yes		47 (27%)
	No.....		130 (73%)
Q1.13	Are you a veteran (ex-armed services)?		
	Yes		6 (3%)
	No.....		174 (97%)
Q1.14	Is this your first time in prison?		
	Yes		78 (43%)
	No.....		104 (57%)
Q1.15	Do you have children under the age of 18?		
	Yes		89 (49%)
	No.....		94 (51%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?		
	Less than 2 hours		122 (67%)
	2 hours or longer		41 (22%)
	Don't remember		20 (11%)

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>	122 (67%)
	<i>Yes</i>	21 (12%)
	<i>No</i>	33 (18%)
	<i>Don't remember</i>	5 (3%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	122 (68%)
	<i>Yes</i>	3 (2%)
	<i>No</i>	45 (25%)
	<i>Don't remember</i>	9 (5%)
Q2.4	On your most recent journey here, was the van clean?	
	<i>Yes</i>	83 (46%)
	<i>No</i>	77 (42%)
	<i>Don't remember</i>	22 (12%)
Q2.5	On your most recent journey here, did you feel safe?	
	<i>Yes</i>	107 (58%)
	<i>No</i>	67 (37%)
	<i>Don't remember</i>	9 (5%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	32 (18%)
	<i>Well</i>	73 (40%)
	<i>Neither</i>	52 (29%)
	<i>Badly</i>	9 (5%)
	<i>Very badly</i>	12 (7%)
	<i>Don't remember</i>	4 (2%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	105 (57%)
	<i>Yes, I received written information</i>	9 (5%)
	<i>No, I was not told anything</i>	59 (32%)
	<i>Don't remember</i>	12 (7%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	<i>Yes</i>	135 (75%)
	<i>No</i>	36 (20%)
	<i>Don't remember</i>	10 (6%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	26 (14%)
	<i>2 hours or longer</i>	145 (79%)
	<i>Don't remember</i>	12 (7%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	<i>Yes</i>	119 (65%)
	<i>No</i>	51 (28%)
	<i>Don't remember</i>	13 (7%)

Q3.3	Overall, how were you treated in reception?		
	Very well.....	10 (5%)	
	Well.....	72 (39%)	
	Neither.....	51 (28%)	
	Badly.....	32 (17%)	
	Very badly.....	16 (9%)	
	Don't remember.....	2 (1%)	
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)		
	Loss of property.....	47 (26%)	Physical health.....
	Housing problems.....	49 (27%)	Mental health.....
	Contacting employers.....	14 (8%)	Needing protection from other prisoners
	Contacting family.....	77 (42%)	Getting phone numbers.....
	Childcare.....	8 (4%)	Other.....
	Money worries.....	53 (29%)	Did not have any problems.....
	Feeling depressed or suicidal.....	57 (31%)	
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?		
	Yes.....	36 (21%)	
	No.....	110 (64%)	
	Did not have any problems.....	26 (15%)	
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)		
	Tobacco.....	144 (78%)	
	A shower.....	59 (32%)	
	A free telephone call.....	123 (67%)	
	Something to eat.....	126 (68%)	
	PIN phone credit.....	72 (39%)	
	Toiletries/ basic items.....	105 (57%)	
	Did not receive anything.....	12 (7%)	
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)		
	Chaplain.....	58 (33%)	
	Someone from health services.....	102 (58%)	
	A Listener/Samaritans.....	36 (21%)	
	Prison shop/ canteen.....	28 (16%)	
	Did not have access to any of these.....	51 (29%)	
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)		
	What was going to happen to you.....	56 (32%)	
	What support was available for people feeling depressed or suicidal.....	41 (24%)	
	How to make routine requests (applications).....	57 (33%)	
	Your entitlement to visits.....	60 (34%)	
	Health services.....	67 (39%)	
	Chaplaincy.....	52 (30%)	
	Not offered any information.....	60 (34%)	
Q3.9	Did you feel safe on your first night here?		
	Yes.....	98 (54%)	
	No.....	69 (38%)	
	Don't remember.....	15 (8%)	

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	61 (34%)
	<i>Within the first week</i>	59 (33%)
	<i>More than a week</i>	41 (23%)
	<i>Don't remember</i>	17 (10%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	61 (36%)
	<i>Yes</i>	47 (28%)
	<i>No</i>	46 (27%)
	<i>Don't remember</i>	15 (9%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	64 (37%)
	<i>Within the first week</i>	33 (19%)
	<i>More than a week</i>	64 (37%)
	<i>Don't remember</i>	13 (7%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....					
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	<i>Communicate with your solicitor or legal representative?</i>	7 (4%)	34 (20%)	25 (15%)	48 (28%)	43 (25%)
	<i>Attend legal visits?</i>	8 (5%)	43 (27%)	35 (22%)	24 (15%)	25 (16%)
	<i>Get bail information?</i>	2 (1%)	13 (8%)	26 (17%)	28 (18%)	43 (28%)
						<i>N/A</i>
						14 (8%)
						25 (16%)
						42 (27%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?					
	<i>Not had any letters</i>					37 (21%)
	<i>Yes</i>					72 (40%)
	<i>No</i>					70 (39%)
Q4.3	Can you get legal books in the library?					
	<i>Yes</i>					61 (34%)
	<i>No</i>					36 (20%)
	<i>Don't know</i>					80 (45%)
Q4.4	Please answer the following questions about the wing/unit you are currently living on:					
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>		
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	59 (33%)	115 (64%)	5 (3%)		
	<i>Are you normally able to have a shower every day?</i>	112 (63%)	63 (35%)	3 (2%)		
	<i>Do you normally receive clean sheets every week?</i>	54 (31%)	116 (66%)	7 (4%)		
	<i>Do you normally get cell cleaning materials every week?</i>	45 (26%)	122 (70%)	8 (5%)		
	<i>Is your cell call bell normally answered within five minutes?</i>	21 (12%)	144 (81%)	13 (7%)		
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	72 (41%)	101 (57%)	4 (2%)		
	<i>If you need to, can you normally get your stored property?</i>	23 (13%)	105 (61%)	44 (26%)		
Q4.5	What is the food like here?					
	<i>Very good</i>					1 (1%)
	<i>Good</i>					18 (10%)
	<i>Neither</i>					35 (20%)
	<i>Bad</i>					45 (25%)
	<i>Very bad</i>					79 (44%)

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>	16 (9%)
	Yes.....	88 (50%)
	No.....	73 (41%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes.....	54 (31%)
	No.....	48 (27%)
	<i>Don't know</i>	75 (42%)
Q4.8	Are your religious beliefs respected?	
	Yes.....	100 (56%)
	No.....	37 (21%)
	<i>Don't know/ N/A</i>	41 (23%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes.....	70 (40%)
	No.....	29 (17%)
	<i>Don't know/ N/A</i>	76 (43%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	17 (10%)
	<i>Very easy</i>	26 (15%)
	<i>Easy</i>	53 (30%)
	<i>Neither</i>	25 (14%)
	<i>Difficult</i>	18 (10%)
	<i>Very difficult</i>	14 (8%)
	<i>Don't know</i>	23 (13%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?		
	Yes.....	115 (65%)	
	No.....	48 (27%)	
	<i>Don't know</i>	14 (8%)	
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)		
		<i>Not made one</i>	Yes
		No	
	Are applications dealt with fairly?	17 (10%)	49 (29%)
	Are applications dealt with quickly (within seven days)?	17 (10%)	28 (17%)
			104 (61%)
			119 (73%)
Q5.3	Is it easy to make a complaint?		
	Yes.....	71 (41%)	
	No.....	52 (30%)	
	<i>Don't know</i>	49 (28%)	
Q5.4	Please answer the following questions about complaints. (If you have not made a complaint please tick the 'not made one' option.)		
		<i>Not made one</i>	Yes
		No	
	Are complaints dealt with fairly?	69 (41%)	20 (12%)
	Are complaints dealt with quickly (within seven days)?	69 (42%)	15 (9%)
			78 (47%)
			82 (49%)

Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	36 (22%)
	No.....	129 (78%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?	
	<i>Don't know who they are</i>	72 (43%)
	Very easy.....	7 (4%)
	Easy	9 (5%)
	Neither	37 (22%)
	Difficult.....	22 (13%)
	Very difficult.....	22 (13%)

Section 6: Incentive and earned privileges scheme

Q6.1	Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)	
	<i>Don't know what the IEP scheme is</i>	29 (17%)
	Yes	66 (40%)
	No	47 (28%)
	<i>Don't know</i>	25 (15%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)	
	<i>Don't know what the IEP scheme is</i>	29 (17%)
	Yes	58 (35%)
	No.....	63 (38%)
	<i>Don't know</i>	16 (10%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	17 (10%)
	No.....	151 (90%)
Q6.4	If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?	
	<i>I have not been to segregation in the last 6 months</i>	138 (85%)
	Very well.....	3 (2%)
	Well.....	3 (2%)
	Neither	7 (4%)
	Badly.....	5 (3%)
	Very badly	6 (4%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	108 (62%)
	No.....	66 (38%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	110 (64%)
	No.....	62 (36%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	36 (21%)
	No.....	138 (79%)

Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	6 (3%)
	<i>Never</i>	39 (22%)
	<i>Rarely</i>	55 (31%)
	<i>Some of the time</i>	52 (30%)
	<i>Most of the time</i>	13 (7%)
	<i>All of the time</i>	10 (6%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	156 (90%)
	<i>In the first week</i>	3 (2%)
	<i>More than a week</i>	2 (1%)
	<i>Don't remember</i>	12 (7%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	156 (94%)
	<i>Very helpful</i>	4 (2%)
	<i>Helpful</i>	3 (2%)
	<i>Neither</i>	1 (1%)
	<i>Not very helpful</i>	1 (1%)
	<i>Not at all helpful</i>	1 (1%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?			
	<i>Yes</i>	117 (65%)		
	<i>No</i>	62 (35%)		
Q8.2	Do you feel unsafe now?			
	<i>Yes</i>	62 (36%)		
	<i>No</i>	110 (64%)		
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)			
	<i>Never felt unsafe</i>	62 (36%)	<i>At meal times</i>	31 (18%)
	<i>Everywhere</i>	42 (24%)	<i>At health services</i>	10 (6%)
	<i>Segregation unit</i>	10 (6%)	<i>Visits area</i>	33 (19%)
	<i>Association areas</i>	32 (18%)	<i>In wing showers</i>	42 (24%)
	<i>Reception area</i>	22 (13%)	<i>In gym showers</i>	10 (6%)
	<i>At the gym</i>	8 (5%)	<i>In corridors/stairwells</i>	28 (16%)
	<i>In an exercise yard</i>	27 (16%)	<i>On your landing/wing</i>	38 (22%)
	<i>At work</i>	9 (5%)	<i>In your cell</i>	24 (14%)
	<i>During movement</i>	39 (23%)	<i>At religious services</i>	14 (8%)
	<i>At education</i>	9 (5%)		
Q8.4	Have you been victimised by other prisoners here?			
	<i>Yes</i>	61 (35%)		
	<i>No</i>	113 (65%)		

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>	19 (11%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	19 (11%)
	<i>Sexual abuse</i>	3 (2%)
	<i>Feeling threatened or intimidated</i>	35 (20%)
	<i>Having your canteen/property taken</i>	16 (9%)
	<i>Medication</i>	10 (6%)
	<i>Debt</i>	7 (4%)
	<i>Drugs</i>	8 (5%)
	<i>Your race or ethnic origin</i>	10 (6%)
	<i>Your religion/religious beliefs</i>	9 (5%)
	<i>Your nationality</i>	11 (6%)
	<i>You are from a different part of the country than others</i>	6 (3%)
	<i>You are from a traveller community</i>	5 (3%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	4 (2%)
	<i>You have a disability</i>	7 (4%)
	<i>You were new here</i>	16 (9%)
	<i>Your offence/ crime</i>	8 (5%)
	<i>Gang related issues</i>	16 (9%)
Q8.6	Have you been victimised by staff here?	
	Yes	58 (34%)
	No	113 (66%)
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>	28 (16%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	11 (6%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	28 (16%)
	<i>Medication</i>	15 (9%)
	<i>Debt</i>	2 (1%)
	<i>Drugs</i>	4 (2%)
	<i>Your race or ethnic origin</i>	14 (8%)
	<i>Your religion/religious beliefs</i>	9 (5%)
	<i>Your nationality</i>	12 (7%)
	<i>You are from a different part of the country than others</i>	2 (1%)
	<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>	7 (4%)
	<i>You were new here</i>	18 (11%)
	<i>Your offence/ crime</i>	5 (3%)
	<i>Gang related issues</i>	5 (3%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	83 (54%)
	Yes	23 (15%)
	No	47 (31%)

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	21 (13%)	7 (4%)	20 (12%)	16 (10%)	49 (30%)	53 (32%)
	The nurse	11 (7%)	17 (10%)	57 (34%)	20 (12%)	33 (20%)	28 (17%)
	The dentist	29 (18%)	5 (3%)	7 (4%)	14 (8%)	32 (19%)	78 (47%)
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	40 (24%)	19 (11%)	31 (19%)	22 (13%)	22 (13%)	33 (20%)
	The nurse	16 (10%)	25 (15%)	43 (26%)	27 (16%)	21 (13%)	32 (20%)
	The dentist	67 (41%)	14 (9%)	16 (10%)	18 (11%)	21 (13%)	26 (16%)
Q9.3	What do you think of the overall quality of the health services here?						
	Not been						11 (7%)
	Very good						9 (5%)
	Good						38 (23%)
	Neither						37 (22%)
	Bad						34 (20%)
	Very bad						38 (23%)
Q9.4	Are you currently taking medication?						
	Yes						90 (51%)
	No						85 (49%)
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>						85 (49%)
	<i>Yes, all my meds</i>						20 (12%)
	<i>Yes, some of my meds</i>						24 (14%)
	<i>No</i>						44 (25%)
Q9.6	Do you have any emotional or mental health problems?						
	Yes						78 (45%)
	No						96 (55%)
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>						96 (56%)
	Yes						27 (16%)
	No						47 (28%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?	
	Yes	62 (35%)
	No	113 (65%)
Q10.2	Did you have a problem with alcohol when you came into this prison?	
	Yes	31 (18%)
	No	143 (82%)

Q10.3	Is it easy or difficult to get illegal drugs in this prison?	
	Very easy.....	51 (30%)
	Easy.....	18 (11%)
	Neither.....	10 (6%)
	Difficult.....	5 (3%)
	Very difficult.....	9 (5%)
	Don't know.....	78 (46%)
Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	19 (11%)
	Easy.....	12 (7%)
	Neither.....	18 (11%)
	Difficult.....	10 (6%)
	Very difficult.....	16 (9%)
	Don't know.....	96 (56%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes.....	24 (14%)
	No.....	143 (86%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes.....	18 (11%)
	No.....	150 (89%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	Did not / do not have a drug problem.....	100 (61%)
	Yes.....	24 (15%)
	No.....	40 (24%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	Did not / do not have an alcohol problem.....	143 (83%)
	Yes.....	9 (5%)
	No.....	20 (12%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	Did not have a problem/ did not receive help.....	137 (84%)
	Yes.....	17 (10%)
	No.....	10 (6%)

Section II: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	Prison job	25 (15%)	6 (4%)	23 (14%)	19 (11%)	50 (30%)	44 (26%)
	Vocational or skills training	44 (28%)	5 (3%)	17 (11%)	26 (16%)	40 (25%)	27 (17%)
	Education (including basic skills)	34 (21%)	12 (7%)	36 (22%)	31 (19%)	27 (16%)	24 (15%)
	Offending behaviour programmes	63 (40%)	3 (2%)	12 (8%)	18 (11%)	26 (16%)	37 (23%)

Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)				
	<i>Not involved in any of these</i>				71 (43%)
	Prison job				64 (38%)
	Vocational or skills training.....				9 (5%)
	Education (including basic skills).....				36 (22%)
	Offending behaviour programmes				7 (4%)
Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	53 (35%)	36 (24%)	42 (27%)	22 (14%)
	Vocational or skills training	63 (52%)	24 (20%)	17 (14%)	17 (14%)
	Education (including basic skills)	54 (40%)	38 (28%)	24 (18%)	19 (14%)
	Offending behaviour programmes	63 (50%)	23 (18%)	22 (18%)	17 (14%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				26 (15%)
	<i>Never</i>				76 (45%)
	<i>Less than once a week</i>				33 (20%)
	<i>About once a week</i>				26 (15%)
	<i>More than once a week</i>				8 (5%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				76 (45%)
	<i>Yes</i>				42 (25%)
	<i>No</i>				51 (30%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				33 (19%)
	<i>0</i>				85 (49%)
	<i>1 to 2</i>				41 (24%)
	<i>3 to 5</i>				10 (6%)
	<i>More than 5</i>				3 (2%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				7 (4%)
	<i>0</i>				16 (10%)
	<i>1 to 2</i>				64 (38%)
	<i>3 to 5</i>				52 (31%)
	<i>More than 5</i>				28 (17%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				3 (2%)
	<i>0</i>				4 (2%)
	<i>1 to 2</i>				13 (8%)
	<i>3 to 5</i>				46 (28%)
	<i>More than 5</i>				100 (60%)

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>	87 (52%)
<i>2 to less than 4 hours</i>	25 (15%)
<i>4 to less than 6 hours</i>	25 (15%)
<i>6 to less than 8 hours</i>	10 (6%)
<i>8 to less than 10 hours</i>	6 (4%)
<i>10 hours or more</i>	7 (4%)
<i>Don't know</i>	7 (4%)

Section 12: Contact with family and friends**Q12.1 Have staff supported you and helped you to maintain contact with your family/friends while in this prison?**

<i>Yes</i>	41 (25%)
<i>No</i>	125 (75%)

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

<i>Yes</i>	90 (53%)
<i>No</i>	79 (47%)

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

<i>Yes</i>	76 (44%)
<i>No</i>	95 (56%)

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

<i>I don't get visits</i>	38 (22%)
<i>Very easy</i>	12 (7%)
<i>Easy</i>	33 (19%)
<i>Neither</i>	29 (17%)
<i>Difficult</i>	28 (16%)
<i>Very difficult</i>	25 (15%)
<i>Don't know</i>	6 (4%)

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>	69 (41%)
<i>Yes</i>	35 (21%)
<i>No</i>	66 (39%)

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>	135 (79%)
<i>No contact</i>	19 (11%)
<i>Letter</i>	6 (4%)
<i>Phone</i>	5 (3%)
<i>Visit</i>	6 (4%)

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

<i>Yes</i>	20 (12%)
<i>No</i>	145 (88%)

Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	69 (40%)
	<i>Yes</i>	24 (14%)
	<i>No</i>	81 (47%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	150 (88%)
	<i>Very involved</i>	1 (1%)
	<i>Involved</i>	7 (4%)
	<i>Neither</i>	4 (2%)
	<i>Not very involved</i>	2 (1%)
	<i>Not at all involved</i>	7 (4%)
Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)	
	<i>Do not have a sentence plan/ not sentenced</i>	150 (87%)
	<i>Nobody</i>	15 (9%)
	<i>Offender supervisor</i>	3 (2%)
	<i>Offender manager</i>	2 (1%)
	<i>Named/ personal officer</i>	1 (1%)
	<i>Staff from other departments</i>	1 (1%)
Q13.7	Can you achieve any of your sentence plan targets in this prison?	
	<i>Do not have a sentence plan/ not sentenced</i>	150 (88%)
	<i>Yes</i>	4 (2%)
	<i>No</i>	8 (5%)
	<i>Don't know</i>	9 (5%)
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>	150 (87%)
	<i>Yes</i>	8 (5%)
	<i>No</i>	7 (4%)
	<i>Don't know</i>	7 (4%)
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?	
	<i>Do not have a sentence plan/ not sentenced</i>	150 (88%)
	<i>Yes</i>	8 (5%)
	<i>No</i>	5 (3%)
	<i>Don't know</i>	8 (5%)
Q13.10	Do you have a needs based custody plan?	
	<i>Yes</i>	13 (8%)
	<i>No</i>	80 (48%)
	<i>Don't know</i>	73 (44%)
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?	
	<i>Yes</i>	15 (9%)
	<i>No</i>	145 (91%)

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

	<i>Do not need help</i>	Yes	No
Employment	31 (21%)	25 (17%)	91 (62%)
Accommodation	32 (21%)	27 (18%)	93 (61%)
Benefits	33 (22%)	29 (20%)	85 (58%)
Finances	33 (23%)	17 (12%)	96 (66%)
Education	36 (24%)	28 (19%)	84 (57%)
Drugs and alcohol	43 (29%)	26 (18%)	77 (53%)

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>	69 (42%)
Yes	36 (22%)
No.....	59 (36%)

Main comparator and comparator to last time



Prisoner survey responses HMP Wormwood Scrubs 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 Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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		185	6,059	185	177
SECTION 1: General information					
1.2	Are you under 21 years of age?	6%	6%	6%	6%
1.3	Are you sentenced?	62%	71%	62%	59%
1.3	Are you on recall?	9%	10%	9%	8%
1.4	Is your sentence less than 12 months?	22%	20%	22%	23%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	3%	2%	2%
1.5	Are you a foreign national?	28%	12%	28%	30%
1.6	Do you understand spoken English?	97%	98%	97%	97%
1.7	Do you understand written English?	94%	96%	94%	94%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	56%	24%	56%	59%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	5%	3%	2%
1.1	Are you Muslim?	21%	13%	21%	28%
1.11	Are you homosexual/gay or bisexual?	1%	3%	1%	4%
1.12	Do you consider yourself to have a disability?	27%	29%	27%	21%
1.13	Are you a veteran (ex-armed services)?	3%	6%	3%	4%
1.14	Is this your first time in prison?	43%	33%	43%	36%
1.15	Do you have any children under the age of 18?	49%	53%	49%	53%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	22%	24%	22%	17%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	36%	42%	36%	35%
2.3	Were you offered a toilet break?	5%	8%	5%	10%
2.4	Was the van clean?	46%	56%	46%	54%
2.5	Did you feel safe?	59%	73%	59%	69%
2.6	Were you treated well/very well by the escort staff?	58%	67%	58%	63%
2.7	Before you arrived here were you told that you were coming here?	57%	64%	57%	59%
2.7	Before you arrived here did you receive any written information about coming here?	5%	3%	5%	2%
2.8	When you first arrived here did your property arrive at the same time as you?	75%	78%	75%	74%

Main comparator and comparator to last time

Key to tables

		HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	14%	41%	14%	21%
3.2	When you were searched in reception, was this carried out in a respectful way?	65%	77%	65%	68%
3.3	Were you treated well/very well in reception?	45%	62%	45%	45%
	When you first arrived:				
3.4	Did you have any problems?	86%	79%	86%	87%
3.4	Did you have any problems with loss of property?	26%	17%	26%	21%
3.4	Did you have any housing problems?	27%	23%	27%	25%
3.4	Did you have any problems contacting employers?	8%	5%	8%	8%
3.4	Did you have any problems contacting family?	42%	35%	42%	39%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	3%	4%	2%
3.4	Did you have any money worries?	29%	24%	29%	27%
3.4	Did you have any problems with feeling depressed or suicidal?	31%	27%	31%	23%
3.4	Did you have any physical health problems?	24%	19%	24%	16%
3.4	Did you have any mental health problems?	26%	30%	26%	18%
3.4	Did you have any problems with needing protection from other prisoners?	15%	9%	15%	11%
3.4	Did you have problems accessing phone numbers?	45%	32%	45%	34%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	25%	32%	25%	23%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	78%	75%	78%	72%
3.6	A shower?	32%	30%	32%	33%
3.6	A free telephone call?	67%	53%	67%	68%
3.6	Something to eat?	69%	71%	69%	74%
3.6	PIN phone credit?	39%	50%	39%	47%
3.6	Toiletries/ basic items?	57%	59%	57%	59%

Key to tables

Main comparator and comparator to last time

	Any percentage highlighted in green is significantly better	HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	33%	45%	33%	41%
3.7	Someone from health services?	58%	65%	58%	66%
3.7	A Listener/Samaritans?	21%	30%	21%	22%
3.7	Prison shop/ canteen?	16%	22%	16%	19%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	32%	40%	32%	35%
3.8	Support was available for people feeling depressed or suicidal?	24%	35%	24%	30%
3.8	How to make routine requests?	33%	34%	33%	32%
3.8	Your entitlement to visits?	35%	32%	35%	43%
3.8	Health services?	39%	43%	39%	41%
3.8	The chaplaincy?	30%	40%	30%	35%
3.9	Did you feel safe on your first night here?	54%	67%	54%	62%
3.10	Have you been on an induction course?	66%	76%	66%	66%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	44%	49%	44%	39%
3.12	Did you receive an education (skills for life) assessment?	63%	75%	63%	68%
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?	24%	34%	24%	32%
4.1	Attend legal visits?	32%	49%	32%	37%
4.1	Get bail information?	10%	15%	10%	12%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	40%	41%	40%	46%
4.3	Can you get legal books in the library?	35%	34%	35%	34%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	33%	49%	33%	42%
4.4	Are you normally able to have a shower every day?	63%	73%	63%	74%
4.4	Do you normally receive clean sheets every week?	31%	63%	31%	67%
4.4	Do you normally get cell cleaning materials every week?	26%	50%	26%	28%
4.4	Is your cell call bell normally answered within five minutes?	12%	22%	12%	18%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	41%	54%	41%	51%
4.4	Can you normally get your stored property, if you need to?	13%	50%	13%	14%
4.5	Is the food in this prison good/very good?	11%	22%	11%	11%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	50%	47%	50%	45%
4.7	Are you able to speak to a Listener at any time, if you want to?	31%	53%	31%	43%
4.8	Are your religious beliefs respected?	56%	47%	56%	60%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	40%	50%	40%	46%
4.10	Is it easy/very easy to attend religious services?	45%	44%	45%	49%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	65%	71%	65%	65%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	32%	46%	32%	39%
5.2	Do you feel applications are dealt with quickly (within seven days)?	19%	31%	19%	23%
5.3	Is it easy to make a complaint?	41%	48%	41%	46%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	21%	25%	21%	30%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	16%	21%	16%	17%
5.5	Have you ever been prevented from making a complaint when you wanted to?	22%	22%	22%	22%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	9%	17%	9%	19%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	39%	40%	38%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	35%	39%	35%	39%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	12%	10%	9%
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?	25%	33%	25%	36%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	62%	72%	62%	63%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	64%	67%	64%	61%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	21%	27%	21%	25%
7.4	Do staff normally speak to you most of the time/all of the time during association?	13%	17%	13%	11%
7.5	Do you have a personal officer?	10%	32%	10%	16%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	70%	64%	70%	76%

Main comparator and comparator to last time

Key to tables

		HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	65%	52%	65%	55%
8.2	Do you feel unsafe now?	36%	25%	36%	24%
8.4	Have you been victimised by other prisoners here?	35%	33%	35%	29%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	11%	14%	11%	9%
8.5	Hit, kicked or assaulted you?	11%	11%	11%	11%
8.5	Sexually abused you?	2%	2%	2%	1%
8.5	Threatened or intimidated you?	20%	18%	20%	17%
8.5	Taken your canteen/property?	9%	9%	9%	8%
8.5	Victimised you because of medication?	6%	6%	6%	4%
8.5	Victimised you because of debt?	4%	5%	4%	3%
8.5	Victimised you because of drugs?	5%	5%	5%	2%
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%	4%	5%	3%
8.5	Victimised you because of your nationality?	6%	4%	6%	2%
8.5	Victimised you because you were from a different part of the country?	3%	4%	3%	3%
8.5	Victimised you because you are from a Traveller community?	3%	2%	3%	0%
8.5	Victimised you because of your sexual orientation?	1%	2%	1%	1%
8.5	Victimised you because of your age?	2%	3%	2%	2%
8.5	Victimised you because you have a disability?	4%	4%	4%	2%
8.5	Victimised you because you were new here?	9%	7%	9%	4%
8.5	Victimised you because of your offence/crime?	5%	7%	5%	4%
8.5	Victimised you because of gang related issues?	9%	6%	9%	5%

Main comparator and comparator to last time

Key to tables

		HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	34%	33%	34%	39%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	16%	13%	16%	16%
8.7	Hit, kicked or assaulted you?	6%	7%	6%	10%
8.7	Sexually abused you?	1%	1%	1%	2%
8.7	Threatened or intimidated you?	16%	14%	16%	21%
8.7	Victimised you because of medication?	9%	6%	9%	5%
8.7	Victimised you because of debt?	1%	2%	1%	1%
8.7	Victimised you because of drugs?	2%	3%	2%	2%
8.7	Victimised you because of your race or ethnic origin?	8%	4%	8%	5%
8.7	Victimised you because of your religion/religious beliefs?	5%	4%	5%	4%
8.7	Victimised you because of your nationality?	7%	4%	7%	5%
8.7	Victimised you because you were from a different part of the country?	1%	3%	1%	3%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	2%
8.7	Victimised you because of your sexual orientation?	1%	1%	1%	1%
8.7	Victimised you because of your age?	4%	2%	4%	4%
8.7	Victimised you because you have a disability?	4%	4%	4%	3%
8.7	Victimised you because you were new here?	11%	5%	11%	6%
8.7	Victimised you because of your offence/crime?	3%	5%	3%	5%
8.7	Victimised you because of gang related issues?	3%	3%	3%	6%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	33%	34%	33%	43%

Main comparator and comparator to last time

Key to tables

		HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	16%	20%	16%	23%
9.1	Is it easy/very easy to see the nurse?	45%	40%	45%	51%
9.1	Is it easy/very easy to see the dentist?	7%	9%	7%	9%
	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?	39%	39%	39%	44%
9.2	The nurse?	46%	48%	46%	47%
9.2	The dentist?	32%	30%	32%	26%
9.3	The overall quality of health services?	30%	33%	30%	35%
9.4	Are you currently taking medication?	51%	54%	51%	46%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	50%	57%	50%	40%
9.6	Do you have any emotional well being or mental health problems?	45%	46%	45%	33%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	37%	40%	37%	47%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	35%	34%	35%	32%
10.2	Did you have a problem with alcohol when you came into this prison?	18%	21%	18%	15%
10.3	Is it easy/very easy to get illegal drugs in this prison?	40%	43%	40%	39%
10.4	Is it easy/very easy to get alcohol in this prison?	18%	22%	18%	20%
10.5	Have you developed a problem with drugs since you have been in this prison?	14%	11%	14%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	11%	9%	11%	11%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	38%	57%	38%	59%
10.8	Have you received any support or help with your alcohol problem while in this prison?	31%	54%	31%	46%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	63%	72%	63%	80%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 11: Activities					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	17%	34%	17%	13%
11.1	Vocational or skills training?	14%	30%	14%	12%
11.1	Education (including basic skills)?	29%	45%	29%	18%
11.1	Offending behaviour programmes?	10%	18%	10%	7%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	38%	47%	38%	37%
11.2	Vocational or skills training?	5%	8%	5%	8%
11.2	Education (including basic skills)?	22%	23%	22%	16%
11.2	Offending behaviour programmes?	4%	8%	4%	4%
11.3	Have you had a job while in this prison?	65%	72%	65%	54%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	36%	39%	36%	42%
11.3	Have you been involved in vocational or skills training while in this prison?	48%	57%	48%	40%
	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?	41%	41%	41%	42%
11.3	Have you been involved in education while in this prison?	60%	68%	60%	44%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	47%	48%	47%	45%
11.3	Have you been involved in offending behaviour programmes while in this prison?	50%	55%	50%	34%
	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?	37%	39%	37%	35%
11.4	Do you go to the library at least once a week?	20%	28%	20%	24%
11.5	Does the library have a wide enough range of materials to meet your needs?	25%	33%	25%	29%
11.6	Do you go to the gym three or more times a week?	8%	25%	8%	19%
11.7	Do you go outside for exercise three or more times a week?	48%	39%	48%	54%
11.8	Do you go on association more than five times each week?	60%	41%	60%	65%
11.9	Do you spend ten or more hours out of your cell on a weekday?	4%	9%	4%	5%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	25%	31%	25%	22%
12.2	Have you had any problems with sending or receiving mail?	53%	48%	53%	49%
12.3	Have you had any problems getting access to the telephones?	44%	36%	44%	29%
12.4	Is it easy/ very easy for your friends and family to get here?	26%	35%	26%	32%

Main comparator and comparator to last time

Key to tables

		HMP Wormwood Scrubs 2017	Local prisons comparator	HMP Wormwood Scrubs 2017	HMP Wormwood Scrubs 2015
	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?	35%	63%	35%	50%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	53%	44%	53%	58%
13.2	Contact by letter?	17%	26%	17%	19%
13.2	Contact by phone?	14%	14%	14%	17%
13.2	Contact by visit?	17%	33%	17%	19%
13.3	Do you have a named offender supervisor in this prison?	12%	33%	12%	13%
For those who are sentenced:					
13.4	Do you have a sentence plan?	23%	33%	23%	13%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	38%	55%	38%	70%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	68%	48%	68%	40%
13.6	Offender supervisor?	14%	33%	14%	30%
13.6	Offender manager?	9%	25%	9%	50%
13.6	Named/ personal officer?	5%	10%	5%	0%
13.6	Staff from other departments?	5%	18%	5%	10%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	19%	51%	19%	46%
13.8	Are there plans for you to achieve any of your targets in another prison?	37%	28%	37%	58%
13.9	Are there plans for you to achieve any of your targets in the community?	38%	33%	38%	25%
13.10	Do you have a needs based custody plan?	8%	7%	8%	10%
13.11	Do you feel that any member of staff has helped you to prepare for release?	9%	11%	9%	9%
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?	22%	26%	22%	19%
13.12	Accommodation?	23%	32%	23%	26%
13.12	Benefits?	26%	34%	26%	24%
13.12	Finances?	15%	22%	15%	16%
13.12	Education?	25%	27%	25%	24%
13.12	Drugs and alcohol?	25%	41%	25%	27%
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?	38%	44%	38%	45%

Diversity analysis



Key question responses (ethnicity, foreign national and religion) HMP Wormwood Scrubs 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		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
Any percentage highlighted in blue is significantly worse							
Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
Number of completed questionnaires returned		100	80	51	129	38	140
1.3	Are you sentenced?	58%	65%	55%	65%	49%	64%
1.5	Are you a foreign national?	30%	26%			53%	21%
1.6	Do you understand spoken English?	95%	99%	94%	98%	100%	96%
1.7	Do you understand written English?	98%	90%	88%	97%	97%	93%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			60%	54%	90%	45%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	5%	6%	3%	3%	4%
1.1	Are you Muslim?	36%	5%	41%	14%		
1.12	Do you consider yourself to have a disability?	29%	23%	27%	27%	21%	28%
1.13	Are you a veteran (ex-armed services)?	2%	5%	6%	2%	3%	3%
1.14	Is this your first time in prison?	42%	42%	66%	33%	55%	40%
2.6	Were you treated well/very well by the escort staff?	59%	57%	57%	58%	45%	62%
2.7	Before you arrived here were you told that you were coming here?	62%	54%	43%	63%	47%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	66%	67%	63%	65%	53%	67%
3.3	Were you treated well/very well in reception?	50%	41%	43%	45%	40%	46%
3.4	Did you have any problems when you first arrived?	83%	90%	86%	87%	79%	88%
3.7	Did you have access to someone from health care when you first arrived here?	56%	61%	57%	60%	59%	60%
3.9	Did you feel safe on your first night here?	54%	54%	48%	55%	41%	57%
3.10	Have you been on an induction course?	65%	64%	74%	61%	72%	64%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	21%	28%	21%	25%	17%	27%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
4.4	Are you normally offered enough clean, suitable clothes for the week?	32%	36%	50%	27%	30%	34%
4.4	Are you normally able to have a shower every day?	65%	63%	60%	65%	62%	64%
4.4	Is your cell call bell normally answered within five minutes?	9%	15%	16%	11%	5%	13%
4.5	Is the food in this prison good/very good?	12%	8%	14%	9%	8%	11%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	46%	56%	52%	48%	41%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	24%	39%	27%	33%	11%	36%
4.8	Do you feel your religious beliefs are respected?	59%	54%	59%	57%	68%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	44%	34%	32%	43%	44%	39%
5.1	Is it easy to make an application?	60%	72%	65%	67%	56%	68%
5.3	Is it easy to make a complaint?	37%	47%	41%	43%	25%	47%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	36%	46%	28%	45%	22%	44%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	33%	37%	34%	35%	31%	35%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	11%	16%	8%	12%	10%
7.1	Do most staff, in this prison, treat you with respect?	58%	67%	51%	68%	32%	69%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	63%	68%	73%	62%	54%	69%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	10%	18%	12%	14%	6%	16%
7.4	Do you have a personal officer?	10%	10%	12%	9%	9%	11%
8.1	Have you ever felt unsafe here?	69%	61%	71%	62%	77%	63%
8.2	Do you feel unsafe now?	41%	29%	40%	33%	35%	36%
8.3	Have you been victimised by other prisoners?	33%	33%	35%	34%	24%	38%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	22%	17%	20%	20%	12%	22%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	6%	4%	4%	5%	0%	7%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	3%	8%	3%	3%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	8%	4%	8%	5%	6%	7%
8.5	Have you been victimised because you have a disability? (By prisoners)	2%	4%	4%	3%	3%	4%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
8.6	Have you been victimised by a member of staff?	35%	31%	34%	33%	24%	36%
8.7	Have you ever felt threatened or intimidated by staff here?	18%	13%	19%	13%	18%	15%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	5%	11%	8%	9%	8%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	7%	1%	8%	3%	9%	5%
8.7	Have you been victimised because of your nationality? (By staff)	9%	4%	11%	5%	9%	7%
8.7	Have you been victimised because you have a disability? (By staff)	3%	3%	7%	2%	3%	3%
9.1	Is it easy/very easy to see the doctor?	15%	19%	17%	17%	10%	17%
9.1	Is it easy/ very easy to see the nurse?	36%	56%	34%	50%	18%	52%
9.4	Are you currently taking medication?	46%	58%	59%	48%	40%	53%
9.6	Do you feel you have any emotional well being/mental health issues?	39%	50%	50%	43%	37%	48%
10.3	Is it easy/very easy to get illegal drugs in this prison?	30%	53%	31%	45%	26%	46%
11.2	Are you currently working in the prison?	32%	47%	43%	37%	26%	42%
11.2	Are you currently undertaking vocational or skills training?	5%	7%	7%	5%	0%	7%
11.2	Are you currently in education (including basic skills)?	23%	20%	38%	15%	31%	18%
11.2	Are you currently taking part in an offending behaviour programme?	5%	4%	4%	4%	0%	6%
11.4	Do you go to the library at least once a week?	20%	20%	35%	14%	24%	18%
11.6	Do you go to the gym three or more times a week?	8%	8%	4%	8%	3%	9%
11.7	Do you go outside for exercise three or more times a week?	48%	47%	44%	50%	44%	49%
11.8	On average, do you go on association more than five times each week?	63%	58%	64%	60%	60%	61%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	4%	4%	4%	4%	0%	5%
12.2	Have you had any problems sending or receiving mail?	52%	55%	50%	53%	46%	56%
12.3	Have you had any problems getting access to the telephones?	43%	45%	43%	45%	43%	47%

Diversity Analysis



Key question responses (disability) HMP Wormwood Scrubs 2017

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		47	130
1.3	Are you sentenced?	55%	65%
1.5	Are you a foreign national?	28%	28%
1.6	Do you understand spoken English?	96%	97%
1.7	Do you understand written English?	96%	94%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	61%	54%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	9%	2%
1.1	Are you Muslim?	18%	24%
1.12	Do you consider yourself to have a disability?		
1.13	Are you a veteran (ex-armed services)?	7%	2%
1.14	Is this your first time in prison?	30%	47%
2.6	Were you treated well/very well by the escort staff?	68%	54%
2.7	Before you arrived here were you told that you were coming here?	70%	52%
3.2	When you were searched in reception, was this carried out in a respectful way?	68%	64%
3.3	Were you treated well/very well in reception?	45%	45%
3.4	Did you have any problems when you first arrived?	89%	86%
3.7	Did you have access to someone from health care when you first arrived here?	62%	56%
3.9	Did you feel safe on your first night here?	50%	56%
3.10	Have you been on an induction course?	55%	68%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	24%	24%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	31%	33%
4.4	Are you normally able to have a shower every day?	70%	61%
4.4	Is your cell call bell normally answered within five minutes?	9%	11%
4.5	Is the food in this prison good/very good?	7%	11%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	40%	52%
4.7	Are you able to speak to a Listener at any time, if you want to?	43%	25%
4.8	Do you feel your religious beliefs are respected?	65%	54%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	47%	37%
5.1	Is it easy to make an application?	74%	63%
5.3	Is it easy to make a complaint?	52%	38%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	44%	38%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	40%	32%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	10%	10%
7.1	Do most staff, in this prison, treat you with respect?	60%	62%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	69%	62%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	21%	10%
7.4	Do you have a personal officer?	3%	11%
8.1	Have you ever felt unsafe here?	69%	65%
8.2	Do you feel unsafe now?	40%	35%
8.3	Have you been victimised by other prisoners?	40%	33%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	22%	19%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	5%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	4%	7%
8.5	Have you been victimised because of your age? (By prisoners)	4%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	9%	1%

Diversity Analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	33%	34%
8.7	Have you ever felt threatened or intimidated by staff here?	21%	14%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	7%	9%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	5%	5%
8.7	Have you been victimised because of your nationality? (By staff)	7%	7%
8.7	Have you been victimised because of your age? (By staff)	3%	4%
8.7	Have you been victimised because you have a disability? (By staff)	9%	1%
9.1	Is it easy/very easy to see the doctor?	12%	17%
9.1	Is it easy/ very easy to see the nurse?	45%	44%
9.4	Are you currently taking medication?	72%	44%
9.6	Do you feel you have any emotional well being/mental health issues?	73%	36%
10.3	Is it easy/very easy to get illegal drugs in this prison?	38%	42%
11.2	Are you currently working in the prison?	37%	39%
11.2	Are you currently undertaking vocational or skills training?	3%	6%
11.2	Are you currently in education (including basic skills)?	16%	23%
11.2	Are you currently taking part in an offending behaviour programme?	0%	5%
11.4	Do you go to the library at least once a week?	18%	20%
11.6	Do you go to the gym three or more times a week?	5%	9%
11.7	Do you go outside for exercise three or more times a week?	31%	52%
11.8	On average, do you go on association more than five times each week?	57%	62%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	0%	5%
12.2	Have you had any problems sending or receiving mail?	51%	53%
12.3	Have you had any problems getting access to the telephones?	40%	47%



Prisoner survey responses HMP Wormwood Scrubs 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	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		66	117
SECTION 1: General information			
1.2	Are you under 21 years of age?	3%	8%
1.3	Are you sentenced?	64%	61%
1.3	Are you on recall?	5%	12%
1.4	Is your sentence less than 12 months?	21%	23%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	3%	2%
1.5	Are you a foreign national?	39%	22%
1.6	Do you understand spoken English?	97%	97%
1.7	Do you understand written English?	94%	94%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	55%	55%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	3%
1.1	Are you Muslim?	25%	20%
1.11	Are you homosexual/gay or bisexual?	0%	2%
1.12	Do you consider yourself to have a disability?	22%	29%
1.13	Are you a veteran (ex-armed services)?	3%	4%
1.14	Is this your first time in prison?	52%	38%
1.15	Do you have any children under the age of 18?	58%	43%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	24%	22%
2.5	Did you feel safe?	61%	57%
2.6	Were you treated well/very well by the escort staff?	53%	60%
2.7	Before you arrived here were you told that you were coming here?	50%	62%
2.8	When you first arrived here did your property arrive at the same time as you?	75%	75%

Key to tables

	Any percentage highlighted in green is significantly better	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	8%	17%
3.2	When you were searched in reception, was this carried out in a respectful way?	53%	71%
3.3	Were you treated well/very well in reception?	35%	50%
	When you first arrived:		
3.4	Did you have any problems?	83%	88%
3.4	Did you have any problems with loss of property?	23%	27%
3.4	Did you have any housing problems?	27%	26%
3.4	Did you have any problems contacting employers?	12%	5%
3.4	Did you have any problems contacting family?	47%	40%
3.4	Did you have any problems ensuring dependants were being looked after?	6%	4%
3.4	Did you have any money worries?	35%	26%
3.4	Did you have any problems with feeling depressed or suicidal?	38%	27%
3.4	Did you have any physical health problems?	20%	26%
3.4	Did you have any mental health problems?	21%	29%
3.4	Did you have any problems with needing protection from other prisoners?	17%	15%
3.4	Did you have problems accessing phone numbers?	47%	43%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	76%	79%
3.6	A shower?	30%	32%
3.6	A free telephone call?	64%	68%
3.6	Something to eat?	64%	71%
3.6	PIN phone credit?	35%	41%
3.6	Toiletries/ basic items?	50%	60%

Key to tables

	Any percentage highlighted in green is significantly better	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	38%	30%
3.7	Someone from health services?	57%	58%
3.7	A Listener/Samaritans?	23%	18%
3.7	Prison shop/ canteen?	16%	14%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	21%	37%
3.8	Support was available for people feeling depressed or suicidal?	24%	22%
3.8	How to make routine requests?	34%	31%
3.8	Your entitlement to visits?	34%	35%
3.8	Health services?	36%	39%
3.8	The chaplaincy?	34%	26%
3.9	Did you feel safe on your first night here?	53%	54%
3.10	Have you been on an induction course?	80%	58%
3.12	Did you receive an education (skills for life) assessment?	81%	53%
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?	14%	31%
4.1	Attend legal visits?	25%	36%
4.1	Get bail information?	2%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	43%	37%
4.3	Can you get legal books in the library?	41%	32%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	37%	30%
4.4	Are you normally able to have a shower every day?	59%	66%
4.4	Do you normally receive clean sheets every week?	33%	28%
4.4	Do you normally get cell cleaning materials every week?	19%	30%
4.4	Is your cell call bell normally answered within five minutes?	11%	13%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	43%	40%
4.4	Can you normally get your stored property, if you need to?	14%	13%
4.5	Is the food in this prison good/very good?	9%	11%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	49%	50%
4.7	Are you able to speak to a Listener at any time, if you want to?	24%	35%
4.8	Are your religious beliefs are respected?	54%	58%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	42%	39%
4.10	Is it easy/very easy to attend religious services?	53%	41%

Key to tables

	Any percentage highlighted in green is significantly better	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	78%	59%
5.3	Is it easy to make a complaint?	38%	43%
5.5	Have you ever been prevented from making a complaint when you wanted to?	19%	23%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	10%	10%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	40%	40%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	28%	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?	53%	69%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	77%	57%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	24%	18%
7.4	Do staff normally speak to you most of the time/all of the time during association?	11%	14%
7.5	Do you have a personal officer?	14%	8%

Key to tables

	Any percentage highlighted in green is significantly better	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	66%	64%
8.2	Do you feel unsafe now?	32%	39%
8.4	Have you been victimised by other prisoners here?	40%	31%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	14%	8%
8.5	Hit, kicked or assaulted you?	12%	9%
8.5	Sexually abused you?	3%	1%
8.5	Threatened or intimidated you?	25%	17%
8.5	Taken your canteen/property?	11%	8%
8.5	Victimised you because of medication?	2%	8%
8.5	Victimised you because of debt?	6%	2%
8.5	Victimised you because of drugs?	6%	3%
8.5	Victimised you because of your race or ethnic origin?	3%	7%
8.5	Victimised you because of your religion/religious beliefs?	5%	4%
8.5	Victimised you because of your nationality?	6%	5%
8.5	Victimised you because you were from a different part of the country?	5%	2%
8.5	Victimised you because you are from a traveller community?	5%	1%
8.5	Victimised you because of your sexual orientation?	0%	1%
8.5	Victimised you because of your age?	0%	3%
8.5	Victimised you because you have a disability?	0%	6%
8.5	Victimised you because you were new here?	11%	8%
8.5	Victimised you because of your offence/crime?	8%	3%
8.5	Victimised you because of gang related issues?	11%	8%

Key to tables

	Any percentage highlighted in green is significantly better	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	33%	33%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	16%	15%
8.7	Hit, kicked or assaulted you?	3%	8%
8.7	Sexually abused you?	0%	2%
8.7	Threatened or intimidated you?	18%	14%
8.7	Victimised you because of medication?	3%	11%
8.7	Victimised you because of debt?	2%	1%
8.7	Victimised you because of drugs?	2%	3%
8.7	Victimised you because of your race or ethnic origin?	7%	9%
8.7	Victimised you because of your religion/religious beliefs?	3%	5%
8.7	Victimised you because of your nationality?	5%	7%
8.7	Victimised you because you were from a different part of the country?	2%	1%
8.7	Victimised you because you are from a traveller community?	2%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	2%	5%
8.7	Victimised you because you have a disability?	2%	5%
8.7	Victimised you because you were new here?	10%	10%
8.7	Victimised you because of your offence/crime?	7%	1%
8.7	Victimised you because of gang related issues?	3%	3%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	15%	17%
9.1	Is it easy/very easy to see the nurse?	44%	45%
9.1	Is it easy/very easy to see the dentist?	7%	8%
9.4	Are you currently taking medication?	45%	55%
9.6	Do you have any emotional well being or mental health problems?	42%	45%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	35%	34%
10.2	Did you have a problem with alcohol when you came into this prison?	17%	18%
10.3	Is it easy/very easy to get illegal drugs in this prison?	38%	41%
10.4	Is it easy/very easy to get alcohol in this prison?	16%	19%
10.5	Have you developed a problem with drugs since you have been in this prison?	11%	15%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	13%	9%

Key to tables

	Any percentage highlighted in green is significantly better	A and E wings	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	24%	14%
11.1	Vocational or skills training?	17%	12%
11.1	Education (including basic skills)?	31%	29%
11.1	Offending Behaviour Programmes?	10%	9%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	58%	27%
11.2	Vocational or skills training?	11%	2%
11.2	Education (including basic skills)?	23%	21%
11.2	Offending Behaviour Programmes?	5%	4%
11.4	Do you go to the library at least once a week?	27%	17%
11.5	Does the library have a wide enough range of materials to meet your needs?	34%	20%
11.6	Do you go to the gym three or more times a week?	14%	4%
11.7	Do you go outside for exercise three or more times a week?	50%	46%
11.8	Do you go on association more than five times each week?	58%	63%
11.9	Do you spend ten or more hours out of your cell on a weekday?	6%	3%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	26%	25%
12.2	Have you had any problems with sending or receiving mail?	59%	49%
12.3	Have you had any problems getting access to the telephones?	48%	42%
12.4	Is it easy/ very easy for your friends and family to get here?	27%	26%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	16%	10%
13.10	Do you have a needs based custody plan?	9%	7%
13.11	Do you feel that any member of staff has helped you to prepare for release?	12%	8%