

Report on an unannounced inspection of

HMP Exeter

by HM Chief Inspector of Prisons

14–24 May 2018

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Glossary of terms

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

Introduction

HMP Exeter is a category B local and resettlement prison that holds men sentenced by the courts of Devon, Cornwall, Dorset and Somerset. There are also prisoners from further afield on transfer from other prisons. At the time of this inspection there were some 430 men in the prison.

The last inspection was carried out in August 2016. On that occasion our judgement was that outcomes for prisoners were not sufficiently good across all four of our healthy prison tests. This represented a serious decline in performance from the previous inspection in the three areas of safety, respect and resettlement. At that time the prison was facing severe staff shortages, but despite the impact this was having on the prison, we noted the determination of managers to drive improvements. Nevertheless, I felt compelled to make the following observation in our report, published in December 2016: 'The reality was that outcomes for prisoners had declined markedly since the previous inspection. Unless the regime at the establishment could be improved, violence reduced and the prevalence of drugs and other contraband addressed, further declines would be almost inevitable.'

Unfortunately, despite a significant increase in staffing levels, my fears have proved founded. A further sharp deterioration, particularly in the key area of safety, has been so severe that I have invoked the Urgent Notification protocol for only the second time since it was ratified in November 2017. As required by the protocol I wrote to the Secretary of State on 30 May 2018. My letter (see Appendix V) sets out my significant concerns about the treatment and conditions in which prisoners were being held at the time of this inspection, and my rationale for using the process. This full report details the serious and deeply concerning failures underpinning my decision. As required by the protocol, the Secretary of State has responded within the required 28 days and published an initial response action plan for improvement. A full action plan will be produced following publication of this report.

This unannounced inspection, carried out a mere 21 months after the last, found that not only did many prisoners feel unsafe but that the prison was in fact significantly less safe than at the last inspection, was less safe than similar prisons, and had reached a position where it now inevitably attracted our lowest possible assessment of 'poor'. There had been six self-inflicted deaths since the last inspection, and apparently another within weeks of this inspection. Self-harm had risen by 40%. The rate of assaults between prisoners was the highest we have seen in a local prison in recent years, and had more than doubled since the last inspection. Illicit drugs were still prevalent, with 60% of prisoners telling us it was easy to obtain drugs and around a quarter testing positive for drugs. One in seven prisoners told us they had developed a problem with drugs since entering the prison.

Living conditions for many in the prison were very poor, and my sense was that the situation had come to be regarded by many staff as normal. The report includes examples of where inspectors found a clear lack of empathy between staff and some very vulnerable prisoners. Whether they felt overwhelmed by the scale of need or had just come to accept the poor conditions endured by many prisoners as inevitable is far from clear, and it would be wrong to reach a general conclusion on this without further in-depth study. Whatever the causes, though, the results were clear to see. During the inspection I entered a cell from which a particularly strong smell of drugs was emanating. It contained two prisoners who were clearly heavily intoxicated by drugs, surrounded by obvious signs of smoking (in a supposedly 'smoke-free' jail), food waste and other detritus. Sadly, the staff on the wing did not seem to regard this as exceptional.

In light of the very high levels of vulnerability, self-harm and suicide among prisoners at Exeter, it was shocking to see that cell call bells were routinely ignored by staff. The prison's own recording system and observations by inspectors proved this to be the case. There was clearly a lack of management

oversight or intervention in this key aspect of prisoner safety. The situation was exacerbated by the poor condition of many cells, some of which were not fit to hold prisoners.

Following the 2016 inspection we made 14 recommendations about safety, including two main recommendations. Neither of the main recommendations had been achieved, and only three of the 14 recommendations had been achieved. It was of particular concern that our previous recommendation about the governance of the use of force by staff had been largely ignored. There was a large amount of missing paperwork and totally inadequate intervention by managers. The details of this are set out in the body of this report.

Despite all the challenges faced by the prison, however, it was only right to acknowledge that there had been progress since the last inspection in some areas. The prison was now much better staffed, the regime was generally more predictable, and there had been improvements in health care and resettlement activity. The latter, in particular, showed a marked improvement, and attracted an improved assessment of 'reasonably good.'

It is important to understand that the invocation of the Urgent Notification protocol was not simply a consequence of the prison's poor response to our previous recommendations. We come to our judgements based solely on the evidence gathered during the course of an inspection. The response to previous recommendations does, however, give an indication of the degree of confidence I can have that the prison is capable of a better response in the future. My judgement was that without significant intervention and support from HM Prison and Probation Service (HMPPS), the urgently needed improvements to safety in HMP Exeter were unlikely to materialise. This was directly relevant to my decision to use the Urgent Notification protocol.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

July 2018

Fact page

Task of the establishment

A category B local and resettlement prison holding male prisoners, including young adults, from the courts of Cornwall, Devon, Dorset and Somerset.

Certified normal accommodation and operational capacity

| | |
|---|-----|
| Prisoners held at the time of inspection: | 432 |
| Baseline certified normal capacity: | 326 |
| In-use certified normal capacity: | 307 |
| Operational capacity: | 561 |

Notable features from this inspection

Self-harm had risen by 40% since the previous inspection, and there had been six self-inflicted deaths.

Two-thirds of prisoners had felt unsafe at some time while detained at Exeter.

The rate of prisoner-on-prisoner assaults was the highest we have seen in local prisons in three years.

The psychosocial team was supporting 49% of the population for substance misuse problems.

Twenty-five per cent of the population were receiving support for mental health issues.

Prison status (public or private) and key providers

Public

| | |
|---|---|
| Physical health provider: | Care UK |
| Mental health provider: | Care UK, subcontracted to Devon Partnership Trust |
| Substance misuse provider: | Care UK and EDP Drug and Alcohol Services |
| Learning and skills provider: | Weston College |
| Community rehabilitation company (CRC): | Dorset, Devon and Cornwall CRC |
| Escort contractor: | GEOAmey |

Region

Devon and North Dorset

Brief history

Built in 1853, HMP Exeter is a Victorian prison of radial design, with three wings positioned around the centre. In the late 20th century, D wing was added and, more recently, education blocks were built. In recent years a refurbished reception, new visits hall and a social care unit (F wing) have been introduced.

Short description of residential units

| | |
|--------|---|
| A wing | holds 194 remand or sentenced and convicted adults and young prisoners. A4 landing holds first night and induction prisoners. |
| B wing | the vulnerable prisoner wing, which holds 87 remand or sentenced and convicted adults and young prisoners. |
| C wing | holds 189 remand or sentenced and convicted adults and young prisoners. C4 landing houses prisoners requiring integrated drug treatment (IDT) and alcohol detoxification. |

| | |
|--------|--|
| D wing | the enhanced living unit, which holds 80 remand or sentenced and convicted adults and young prisoners. |
| F wing | a social care unit holding 11 prisoners, which also contains the 'Jubilee Suite', a palliative care room for terminally ill prisoners and a constant supervision cell. |

Name of governor and date in post

Peter Elbourn since January 2015

Independent Monitoring Board chair

Penny Hart

Date of last inspection

15 – 26 August 2016

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.

Rehabilitation and release planning Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release into the community.

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 Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous 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 and conditions for men in prisons (Version 5, 2017)*.¹ 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 the appendices.

A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in the final appendix of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.²

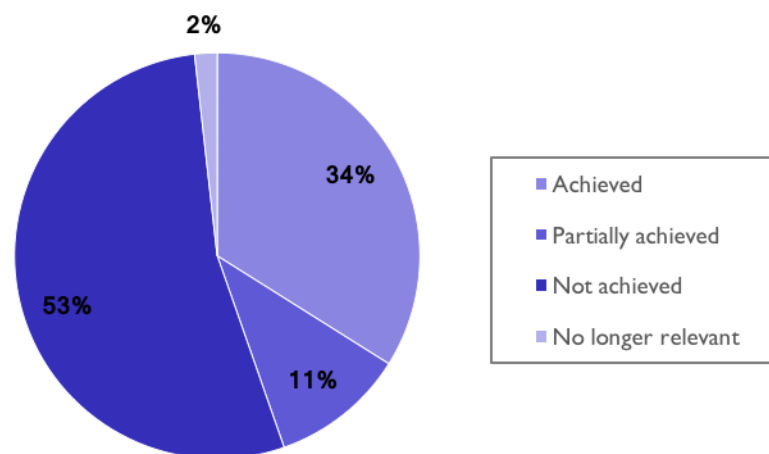
¹ <https://www.justiceinspectorates.gov.uk/hmiprison/our-expectations/prison-expectations/>

² 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

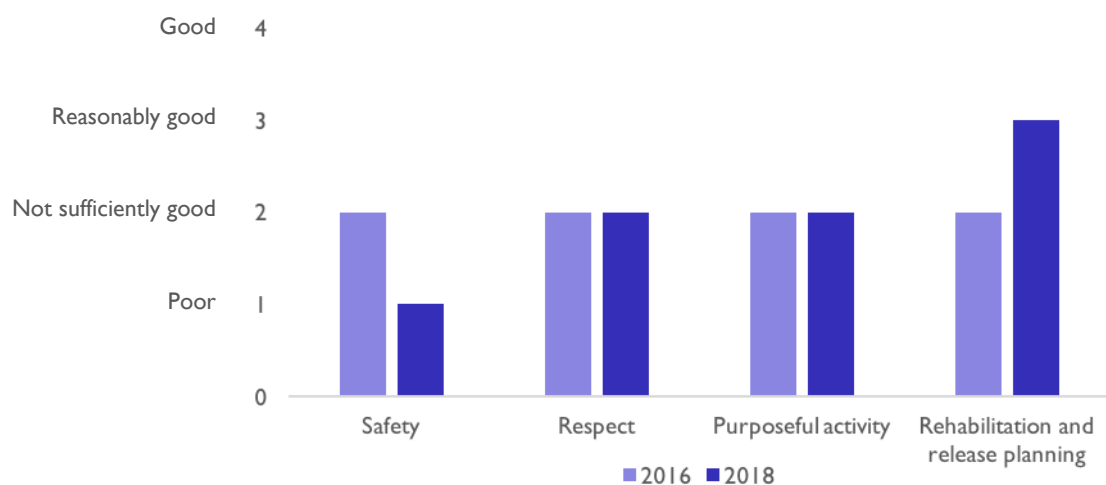
- S1 We last inspected HMP Exeter in 2016 and made 56 recommendations overall. The prison fully accepted 45 of the recommendations and partially (or subject to resources) accepted eight. It rejected three of the recommendations.
- S2 At this follow-up inspection, we found that the prison had achieved 19 of those recommendations, partially achieved six recommendations and not achieved 30 recommendations. One recommendation was no longer relevant.

Figure 1: HMP Exeter progress on recommendations from last inspection (n=56)



- S3 Since our last inspection, outcomes for prisoners stayed the same in respect and purposeful activity, improved for rehabilitation and release planning, and declined for safety. Outcomes were poor in safety, not sufficiently good in respect and purposeful activity, and reasonably good in rehabilitation and release planning.

Figure 2: HMP Exeter healthy prison outcomes 2016 and 2018³



³ Please note that the criteria assessed under each healthy prison area were amended in September 2017. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

Safety

- S4 *Reception procedures worked reasonably well but some prisoners spent their first night in poor conditions. Almost one in three prisoners felt unsafe. The violence reduction strategy had not been effective in reducing high and rising levels of violence. However, the introduction of keyworkers using a casework approach looked promising. The adjudication system was managed fairly. The use of force was high and governance was inadequate. Conditions for the prisoner held in the segregation unit were poor, and there were few safeguards for the prisoners segregated on C1 landing. The drug strategy was not effective in reducing high levels of drugs available in the prison. There had been six self-inflicted deaths since the last inspection, and levels of self-harm were high. **Outcomes for prisoners were poor against this healthy prison test.***
- S5 *At the last inspection in August 2016 we found that outcomes for prisoners in Exeter were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of safety.⁴ At this inspection we found that three of the recommendations had been achieved, and 11 had not been achieved.*
- S6 Reception staff were welcoming but new arrivals spent too long in stark holding cells. Initial interviews by staff and peer workers were carried out sensitively, and Choices Consultancy Services provided additional first night support to prisoners, including follow-up telephone calls home if requested. While most arrivals were allocated to dedicated first night cells some, including vulnerable prisoners, spent their first night in poor conditions. The induction programme met the immediate needs of mainstream prisoners but there were gaps in its delivery to vulnerable prisoners.
- S7 In our survey, more than two-thirds of respondents said they had felt unsafe in the prison, which was worse than at the previous inspection. Nearly a third said they felt unsafe at the time of our inspection. The number of violent incidents was very high; they had increased significantly since the previous inspection and were higher than many other local prisons. Many incidents were serious and involved the use of weapons. Despite this, important elements of the violence reduction strategy had not been implemented effectively. The zero-tolerance policy was overly focused on the punitive aspects of the incentives and earned privileges (IEP) scheme rather than the encouragement of positive behaviour. More positively, the prison had introduced a casework approach to manage and change poor behaviour, and keyworkers had started to develop behaviour improvement and progression plans for perpetrators. (See also paragraph S14.) Although promising, this approach had not been adopted by all keyworkers and was not yet embedded.
- S8 The number of adjudications was far higher than at the last inspection and at similar prisons, and reflected the high levels of violence and related issues. The process was generally fair and well monitored. The number of incidents involving the use of force had risen and was very high. The special accommodation cell was austere and its use was ungoverned. Governance of the use of force was inadequate and did not provide assurance that force was always used appropriately.
- S9 Most of the cells on the segregation unit were being refurbished when we inspected and staff were left with only one prisoner to supervise. Despite this, the prisoner had been placed in a dirty cell and was offered an unnecessarily poor regime. We were concerned to find prisoners segregated on C1 landing without proper authorisation or safeguards.

⁴ This included recommendations about substance misuse treatment, which in our updated *Expectations* (Version 5, 2017) now appear under the healthy prison area of respect.

- S10 Links between the security and the violence reduction teams had improved and were good, and there were also excellent links with local police. There was a good flow of intelligence and robust systems for processing and analysing data. However, broken glass in windows and damaged furniture around the site presented a significant risk, but seemed to go unnoticed by staff. We also observed some poor supervision of prisoners on wings, which created unnecessary risks to other prisoners. A new drug strategy document and supply reduction action plan was in place. Despite this, the use of new psychoactive substances (NPS)⁵ remained a significant problem with a high mandatory drug testing positive rate, including NPS, of 23%. A third of prisoners also reported that it was easy to get alcohol.
- S11 There had been six self-inflicted deaths since the previous inspection and one believed to be a self-inflicted death shortly following this inspection. The prison had implemented most of the subsequent recommendations from the Prisons and Probation Ombudsman, but more remained to be done. There was evidence that a lack of activity, poor conditions, and high levels of drug use and violence contributed to the high incidence of self-harm. The quality of case management reviews for prisoners at risk of self-harm was better than we normally see. There were some positive initiatives, including the prison's log of triggers that could affect prisoners in crisis and the weekly meetings to discuss complex cases. However, the delivery of care was inconsistent and we found examples of poor care for some prisoners in crisis. The special cell in the segregation unit was also used for prisoners on constant watch, even though the environment was potentially harmful for them.

Respect

- S12 *Staff-prisoner relationships were generally good. However, there was a lack of care for a significant minority of prisoners and widespread tolerance of poor conditions. The new keyworker scheme was promising. Too many areas of the prison were dirty and in disrepair. In-cell telephones were greatly valued. Cell bells frequently went unanswered for long periods. The quality and quantity of food were reasonable. Peer support was reasonably good. Leadership in equality work was weak, and there was little to identify and meet the needs of prisoners with protected characteristics. The chaplaincy provided an excellent service. Health services had improved and were mostly good. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***
- S13 *At the last inspection in August 2016 we found that outcomes for prisoners in Exeter were not sufficiently good against this healthy prison test. We made 26 recommendations in the area of respect. At this inspection we found that 13 of the recommendations had been achieved, two had been partially achieved and 11 had not been achieved.*

- S14 There were many examples of positive and respectful engagement between prisoners and staff across all disciplines. However, some residential staff lacked sufficient empathy or care for prisoners. There was a widespread tolerance of some poor conditions for prisoners, and poor behaviour that went unnoticed or unchallenged. The new keyworker scheme was very promising, and most of their casework demonstrated good interaction, insight and record keeping. However, contact was not frequent enough, and not all of the most complex and challenging prisoners had been prioritised for keyworker contact, despite having the greatest need.
- S15 Too many communal areas were dirty and much of the site was in disrepair. There was an extensive list of outstanding maintenance work, which hindered efforts to improve living

⁵ Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

conditions. The introduction of prisoner painting parties was helpful, but too many cells were cramped, dirty and often poorly furnished and equipped. The introduction of in-cell telephones was greatly valued by prisoners, and access to showers was better than at the last inspection. Staff blatantly ignored many cell bells for long periods of time, which was a concern.

- S16 Although in our survey only a third of prisoners said they had enough to eat at meal times, the portions and quality we saw were reasonable. Breakfast was a more substantial meal than in many prisons, and main meals were served at appropriate times. However, there was no opportunity for prisoners to dine communally, even on the enhanced wing.
- S17 Consultation with prisoners was not sufficiently frequent or effective. Peer support and mentoring opportunities were available to a small number of prisoners, and were reasonably good. Responses to applications were not tracked so we were not confident that they had been dealt with adequately. Timeliness of complaint responses had improved in the last two months, but the quality of responses varied from helpful to only superficial enquiry into the issue.
- S18 Leadership of equality and diversity work had not improved and was weak. Attendance at committee meetings was limited and prisoners did not attend. The analysis of monthly equality and diversity data was superficial and tended to be descriptive. Most discrimination complaints were investigated adequately, but the level of enquiry was limited and lacked rigour in some cases we saw. Focus groups for prisoners from minority groups were generic and only held intermittently, which limited prisoner opportunity to express their diverse needs. There had been no work to understand the continuing negative perceptions of disabled prisoners. There was a lack of formal provision to meet the needs of foreign national prisoners, particularly those who did not speak English. There was also a lack of understanding about the distinctive needs of younger prisoners. More positively, the chaplaincy had a high profile in the prison and provided excellent pastoral and spiritual support to prisoners.
- S19 Health services had improved and were mostly good. Most aspects of governance were good, but staff shortages continued to restrict service development. Systems to review and learn from deaths in custody were strong. There was a backlog of investigations into other incidents, but this was being addressed. Primary care and dental services had improved and were generally good. Social care support, including the social care unit, was impressive. The demand for mental health services was high, and the small team provided responsive services. Substance misuse service provision was good, but prisoners on B wing had inadequate access to group interventions. Pharmacy services were reasonably good. The primary care discharge planning clinics were an excellent innovation, and the pre-release and transfer health planning was good.

Purposeful activity

S20 *Although time out of cell had improved since the previous inspection, too many prisoners were locked up during the core day. Library services were good. There had been improvements in the management of learning and skills in the previous few months, but it still required further development. Although there was sufficient purposeful activity for all prisoners, too few attended their allocated sessions. The prison did not offer sufficient provision in English and mathematics. The quality of learning and skills and work required improvement in several areas. Prisoners who attended activities were motivated, well behaved and achieved well. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S21 *At the last inspection in August 2016 we found that outcomes for prisoners in Exeter were not sufficiently good against this healthy prison test. We made seven recommendations in the area of purposeful activity. At this inspection we found that two of the recommendations had been partially achieved and five had not been achieved.*

S22 We found around a third of prisoners locked in their cells during the working day which, although not good enough, was an improvement on the last inspection. Time out of cell was adequate for prisoners who worked but poor for prisoners who were unemployed, particularly those on basic. We observed regime slippage at various points during the core day, although other aspects of the regime were more predictable and included evening association during the week, which demonstrated a further improvement in this area.

S23 Most prisoners had good access to the well-run library, which was stocked with a wide range of material, and the committed staff encouraged prisoners to use the facility. There were many sources of help for prisoners who needed assistance with their literacy. Staffing levels in the gym had improved, and there was now better provision for those who would not usually have used the gym. However, only 36% of all prisoners said they attended two or more sessions a week. The sports hall floor had been repaired, but poor conditions in the showers had deteriorated further.

S24 There had been improvements in learning, skills and work provision in recent months, following a period of significant staffing issues in the prison that had curtailed the regime. Weston College offered good provision, and prison staff allocated most prisoners swiftly to courses or activities. Despite improvements, managers had not ensured that all prisoners attended their lessons and activities regularly and on time. The prison did not offer sufficient provision in English and mathematics to meet the need. Foreign national prisoners did not have suitable support to develop their speaking skills in English. The prison had enough activities for most prisoners, although too much prison work was mundane and prisoners did not develop the range of useful practical skills to help them on release. Vulnerable prisoners did not have access to a sufficient range of activities. Advice and guidance about the suitability of courses and activities were not good enough, and links with employers to help prisoners with resettlement were underdeveloped.

S25 Most tutors used a good variety of activities to motivate and interest prisoners. They checked what prisoners learned and ensured they made good progress from their low starting points. Instructors in prison contract workshops did not help prisoners to develop sufficient new vocational skills, and often failed to engage regularly with them to check their understanding and develop wider employment skills. Outside English and mathematics lessons, prisoners did not receive enough support, or effective advice and guidance, to improve their skills in these subjects.

- S26 The prisoners who attended activities regularly and on time were motivated and demonstrated a good work ethic. They behaved well and showed respect to peers and staff. Prisoners were proud of what they achieved and produced. Prisoners did not develop relevant skills in using computers to prepare them for employment and life in the community.
- S27 Most prisoners who attended education achieved their qualifications. Instructors in prison work did not record the skills that prisoners gained so they did not know if they had developed the skills they needed to help them in their resettlement.

Rehabilitation and release planning

S28 *Children and families work was good. Strategic management of rehabilitation and resettlement was reasonably good. The community rehabilitation company (CRC),⁶ Catch 22, was now well established, and integration between the key departments had improved. Contact with prisoners and the management of home detention curfew (HDC) had also improved. Category B sex offenders were now transferred promptly to an appropriate establishment. There was some good casework with high-risk prisoners, but there were weaknesses in the interdepartmental risk management team (IRMT) meeting. Release planning was reasonably good but too many prisoners were released without settled accommodation to go to. **Outcomes for prisoners were reasonably good against this healthy prison test.***

S29 *At the last inspection in August 2016 we found that outcomes for prisoners in Exeter were not sufficiently good against this healthy prison test. We made nine recommendations in the area of resettlement.⁷ At this inspection we found that three of the recommendations had been achieved, two had been partially achieved, three had not been achieved and one was no longer relevant.*

- S30 Choices Consultancy Services continued to provide excellent support to prisoners and their families. The establishment offered popular family days, and the library facilitated the Storybook Dads scheme for prisoners to record stories for their children. The visits hall was noisy but the atmosphere was reasonably relaxed. Visitors we spoke to were content about their treatment by prison staff.
- S31 There was a comprehensive policy for reducing reoffending overseen by a well-attended strategic meeting. The offender management policy needed updating to reflect the introduction of the new national offender management in custody (OMiC)⁸ system. As at the last inspection, the needs analysis used lacked objective data, but there was a project to provide better analysis. Catch 22 was now well established, and communication with the offender management unit (OMU) and other prison departments had improved. Prisoners now had better contact with offender supervisors, Catch 22 and the new keyworkers to address resettlement needs. Most prisoners stayed at Exeter for short periods before transfer to suitable prisons closer to their home areas. They were transferred without an OASys (offender assessment system) assessment, in line with new Prison Service

⁶ CRCs are responsible for rehabilitation services for medium- and low-risk offenders, both in custody and after release.

⁷ This included recommendations about reintegration planning for drugs and alcohol and reintegration issues for education, skills and work, which in our updated *Expectations* (Version 5, 2017) now appear under the healthy prison areas of respect and purposeful activity respectively.

⁸ Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core Offender Management, and the introduction of prison offender managers (POM), is being introduced during 2019.

arrangements. HDC management had improved and was good, with most eligible prisoners released on time.

- S32 The onward transfer of category B sex offenders, which had been a problem at our previous inspection, was now well managed. Offender supervisors worked hard to organise transfers for a few other category B prisoners who had been difficult to move on. Management of the small number of indeterminate sentence prisoners focused appropriately on their progression.
- S33 Assessments of risk of harm and casework with high-risk prisoners were mostly good. Referrals to the IRMT were not systematic, meetings were not sufficiently action-focused, and release arrangements for high-risk prisoners were not reviewed.
- S34 The prison offered useful individual work to help prisoners progress, and some groupwork addressing violent behaviour and resettlement skills. Too many prisoners were released without sustainable accommodation. There were specialist advice and links to ongoing support for those who would be homeless. Although prisoners could open bank accounts, there was no specialist advice on their finance problems.
- S35 All prisoners had a resettlement plan prepared with Catch 22, and for some this was supported through contact with their keyworker. There were plans for further support on the day of release to help prisoners navigate the community services they would require. Good through-the-gate services were provided through PACT (Prison Advice and Care Trust) and community chaplaincy mentors, with additional support from a local housing charity.

Main concerns and recommendations

- S36 **Concern:** One in three prisoners felt unsafe. High levels of violence had increased significantly since the previous inspection and were higher than at other local prisons. Many incidents were serious. Important elements of the violence reduction strategy had not been implemented effectively, supervision was inconsistent, and the incentives and earned privileges scheme was not focused on motivating positive behaviour.

Recommendation: All aspects of the violence reduction strategy should be implemented. Supervision, by staff and by camera, should be effective in detecting and preventing bullying and violent behaviour. Engagement with prisoners to understand safety issues should be improved through consultation and targeted key work. There should be greater incentives for prisoners to behave well, and positive visible leadership should focus on creating a culture of optimism and encouragement.

- S37 **Concern:** Governance of force remained inadequate and could not assure managers or us that all force was appropriate or recorded.

Recommendation: All records of the use of force and authorising the use of the special cell should be completed accurately and in full. Immediate measures should be taken to ensure that all cameras, fixed and body-worn, are used effectively. Documentation and camera footage should be subject to vigorous management checks to identify issues and trends. This should inform actions to address the issues and reduce the number of restraint incidents.

- S38 **Concern:** The conditions for segregated prisoners, both on the segregation unit and those unofficially segregated or self-isolating, were very poor. They were locked up for almost 24 hours a day with little exploration of the root causes leading to segregation, minimum human contact, a poor regime, and no meaningful plans for their future management.

Recommendation: Prisoners who are effectively in unregulated segregation should have adequate safeguards and managerial oversight. All prisoners segregated should have an adequate regime that safeguards their mental well-being. The underlying causes of poor or vulnerable behaviour that led to the segregation should be investigated and addressed. Reintegration plans should be thorough and not rely solely on a transfer out of the establishment.

- S39 **Concern:** A huge backlog of maintenance work had left communal areas and cells in poor condition. Too many prisoners lived in overcrowded cells that did not meet basic health, hygiene and safety requirements. Staff and managers were inured to poor conditions and did not do enough to address this. Cell call bells in occupied cells were left unanswered for too long, even when staff were doing nothing else.

Recommendation: National and local managers should take concerted action to ensure that prisoners' living conditions are improved, and that cells falling below basic standards are not occupied. All prisoners should have supervised regular access to clean bedding and clothing. Staff should be proactive in their dealings with prisoners, including their response to cell call bells.

- S40 **Concern:** Equality and diversity were not regarded as priorities, and there was insufficient attention to the distinct needs of different groups.

Recommendation: Equality and diversity should be given higher priority. Procedures and work practices covering all aspects of equality and diversity should be improved to ensure that the needs of prisoners from each of the protected characteristics are understood and dealt with fairly.

Section 1. Safety

Prisoners, particularly the most vulnerable, are held safely.

Early days in custody

Expected outcomes:

Prisoners transferring to and from the prison are safe and treated decently. On arrival prisoners are safe and treated with respect. Risks are identified and addressed at reception. Prisoners are supported on their first night. Induction is comprehensive.

- I.1 Many prisoners continued to experience long journeys to Exeter from courts across the south west of England and often arrived late. New arrivals said that escort staff treated them well, and we observed respectful interactions as prisoners disembarked from escort vehicles.
- I.2 Reception staff were welcoming to each new arrival and checked the risk information on their person escort record (PER). The reception area was clean but prisoners spent far too long in stark holding cells before they were moved to their first night accommodation. While in reception, new arrivals were given a meal and hot drink before they were interviewed in private by a reception officer, nurse, doctor, peer worker and Listener (prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners). Family support workers from Choices Consultancy Services also provided valuable support for prisoners on their first night, and could make telephone calls on their behalf.
- I.3 Most prisoners we observed did not have an opportunity to shower on their first night; although there were showers in reception, these were locked during our visit. New arrivals were given prison clothing and a bed pack containing a single sheet, pillowcase and a thin blanket. Many prisoners told us that the bed packs were insufficient to keep them warm at night during cold weather, as many cell windows were broken (see paragraph 2.7, Appendix III and main recommendation S39). New arrivals were also given a personal identification number (PIN) number to access the telephones and £2 telephone credit. In our survey, fewer prisoners than the comparator said they had access to basic provisions and amenities, including toiletries, a shower and a telephone call, before they were locked up on their first night.
- I.4 There was evidence that prisoners arriving at Exeter had very high levels of need. Since our previous inspection, three prisoners had killed themselves during their first few days. In our survey, 90% of prisoners said they had problems on arrival, including 55% who felt depressed, 24% who felt suicidal and 38% with problems with drugs or alcohol; only 31% of these prisoners said staff helped them with these problems.
- I.5 In principle, mainstream prisoners spent their first night on A4, vulnerable prisoners (those who needed protection from other prisoners) on B wing, and prisoners detoxifying from drugs or alcohol were located on C4. First night cells on A4 were relatively clean and well prepared by prisoner orderlies. However, accommodation elsewhere was not well prepared, and a lack of space meant that some prisoners spent their first few days in these other locations. Most vulnerable prisoners spent their early days on overspill wings where they received a poor regime, abuse from mainstream prisoners and a lack of support from peer workers and staff. We found a vulnerable new arrival who was assessed as being at a heightened risk of suicide and self-harm placed on C1 wing, a subterranean unit that was in effect used as a segregation unit, but without any of the usual safeguards (see paragraph I.35). He spent three days on this unit before he was moved to B wing, where we saw him

in a squalid cell without bedding, a television or glass in his window. None of this had been reported by staff who were required to check on him regularly as part of his at-risk care management plan. (See main recommendation S38.)

- I.6** We also saw poor practice for other groups of new arrivals. One prisoner was put into a cell that should have been taken out of commission because of significant amounts of rubbish and a blocked toilet. Others spent their first night in cells without a television, sufficient furniture or the means to make a hot drink. Another recent case ended up as a use of force incident when a prisoner reacted badly to being located into a cell that managers had taken out of commission because it was not fit for habitation.
- I.7** We found wing staff on both A and C wings who were unaware of the new arrivals living on their landings, and we observed that emergency cell bells went unanswered in occupied cells for long periods of time on the first night units – even though staff were close by, and in one case walking past the cell in question. (See paragraph 2.7 and main recommendation S39.)
- I.8** In our survey, only 45% of prisoners who had been on the induction course said that it had covered everything they needed to know about the prison. The programme we observed was reasonable and met immediate need. Induction for mainstream prisoners took place the day after arrival, and prisoners had access to peer workers on A4. However, induction for vulnerable prisoners was delivered less frequently; many waited too long to receive it, and some did not receive it at all. Peer workers were unable to visit C wing to offer the additional support available to other prisoners.

Recommendations

- I.9 Prisoners should spend less than two hours in reception.**
- I.10 Prisoners should be able to shower on their first night in custody, and be located in clean, well-prepared cells.**
- I.11 Induction should start the day after arrival and be completed by all prisoners.**

Managing behaviour

Expected outcomes:

Prisoners live in a safe, well ordered and motivational environment where their positive behaviour is promoted and rewarded. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner.

Encouraging positive behaviour

- I.12** Levels of violence were very high and had increased significantly since the previous inspection. Based on the data provided to us by the prison, there had been 185 assaults in the six months before the inspection, which was nearly twice the 96 we found at the last inspection. Of these, 42 were assaults on staff, an increase of 12 from last time. Assaults on prisoners had more than doubled, from 66 at the last inspection to 137. When calculated as the rate of assaults per 100 prisoners, this was higher than we have seen at all of the other local prisons we have inspected in recent years. There had also been 66 fights, compared with 45 at the previous inspection. The figures on violence provided to us by the prison for the six months before the inspection did not correlate exactly with the data recorded by the prison on the national HM Prison and Probation Service (HMPPS) performance monitoring

hub. Nevertheless, either set of data demonstrated unequivocally that Exeter was a very violent prison.

- I.13** Many incidents were serious and involved weapons. There was a concerning trend of prisoners throwing boiling water mixed with sugar at staff and other prisoners, which had occurred at least 25 times in the previous six months; there had been about eight such incidents in May 2018 alone.
- I.14** Too many prisoners said that they felt unsafe. In our survey, 67% said they had felt unsafe at some time at the prison, and almost a third (30%) said they currently felt unsafe; 60% said they had been bullied or victimised by other prisoners, and 48% that they had been bullied or victimised by staff. This was compounded by the fact that less than half of those who had experienced this bullying or victimisation said that they would report it, indicating a lack of confidence in the complaints system (see paragraph 2.18). There was often too little supervision of prisoners when they were unlocked on the wings, which increased opportunities for bullying. (See main recommendation S36.)
- I.15** There had been an improvement to the way that incident monitoring data were analysed, and evidence that this was used to inform some violence reduction measures. The violence reduction committee met monthly to review cases and update the violence reduction action plan. There were excellent links with local police, who attended meetings and pursued incidents of violent crime in the prison.
- I.16** The prison's violence reduction strategy mostly focused on the punitive aspects of the incentives and earned privileges (IEP) system rather than the encouragement of positive behaviour through individual plans that dealt with the causes of the prisoner's poor behaviour. In practice, prisoners involved in violence were punished following an adjudication then placed on the basic level of the IEP scheme until they had a period free from violent incidents. Many prisoners had been placed on formal measures several times.
- I.17** The prison was developing a casework approach to managing and changing poor behaviour but this had not been fully implemented. The use of keyworkers (see also paragraph 2.2) to develop behaviour improvement and progression plans for perpetrators was positive but not yet extensive or embedded. With a few exceptions, the quality of the plans we saw were insufficient; targets were often superficial, and there was little evidence that changes in behaviour or circumstances were monitored well enough or acted on. Too many prisoners had not seen their keyworkers at all, and the prison had not sufficiently prioritised the allocation of keyworkers to the most challenging and violent prisoners. This was a lost opportunity for them to support and encourage violent prisoners to take part in the education department's 'changing behaviour' course, which was designed to address violent behaviour. Too few prisoners took the course and instead remained on basic for at least three months.
- I.18** Support for victims often involved a change of location, usually to B wing, but we saw little formal support in operation.
- I.19** As at the last inspection, B wing was used to accommodate vulnerable prisoners, but because of the large numbers many were located on C wing while waiting for a space. While on C wing, they experienced a poor regime, abuse from mainstream prisoners and a lack of support from peer workers and staff (see also paragraph 1.5). Conditions on C1 landing were particularly poor and prisoners located there received very little activity; most were locked in their cells nearly all day (see also paragraphs 1.35 and 3.1 and main recommendation S38).
- I.20** Around 11% of the population were on the basic level of IEP and remained there for a minimum of 14 days. Although some attended an activity, many did not and had insufficient

time out of their cells to demonstrate any improvement in behaviour. Apart from about an hour for domestic tasks and exercise, and a brief period of association at the weekend, they were locked in their cells all day. We saw little evidence of any meaningful target setting. D wing was the enhanced living unit and was popular with prisoners because it offered a quieter environment than A or C wings. However, living conditions were poor compared with the enhanced units we see at other prisons, and the unit offered few incentive or goals for prisoners to aspire to.

Recommendations

- I.21 Prompt, adequate support should be provided for victims of intimidation and violence.** (Repeated recommendation I.21)
- I.22 Targets for all prisoners on the basic level of the incentives and earned privileges (IEP) scheme should be individualised and should promote improvements in behaviour.** (Repeated recommendation I.46)
- I.23 There should be a creative focus on providing enhancements that prisoners aspire to achieve through good behaviour.**

Adjudications

- I.24** There had been 2,427 adjudications in the previous six months, which was much higher than we see at other local prisons. This mostly reflected the high and rising levels of violence and related issues, although a few charges were minor and could have been dealt with less formally. The number of serious cases referred to the independent adjudicator had also increased to over 50 a month, as had the number of incidents referred to the police for investigation.
- I.25** Monthly statistics on the number and nature of adjudications were presented at segregation management meetings and used to identify trends, but there was little evidence that this had reduced the numbers. The records we examined indicated that hearings were conducted fairly.

Use of force

- I.26** The number of use of force incidents had risen sharply by 39% and was higher than at similar prisons. At least 247 incidents had been recorded in the previous six months, including 39 planned interventions. Prison data showed that around half of uses were in response to 'non-compliance', rather than to prevent violence, and nearly every incident involved the use of control and restraint techniques.
- I.27** Despite our previous main recommendation, governance of the use of force remained inadequate and could not assure managers or us that all such use was appropriate or recorded. The use of force log listed 187 incidents since the start of 2018, for which around a third of the required documentation (over 250 reports) were missing. When use of force reports were completed they were often of poor quality; we saw examples of staff submitting the same report for different incidents, and multiple members of staff submitting the same report with minor amendments. Other forms showed questionable use of force. For example, a member of staff used control and restraint techniques, including a head hold, without any other staff present, despite the requirement for three staff to instigate approved techniques; there was little evidence that this had been picked up or addressed by

management checks or the use of force committee meetings. (See main recommendation S37.)

- I.28** The prison's CCTV system was poor with many cameras ineffective because prisoners had scratched the lenses. The prison had invested in around 40 body-worn video cameras, which should have addressed this problem in part, but in practice staff rarely turned their cameras on during use of force incidents, and if they did the footage was rarely downloaded or viewed.
- I.29** Of the 39 recorded planned interventions, the prison could only provide us with video footage of three incidents. One of these incidents was not recorded on the use of force log and there were no reports completed by the staff involved. In other incidents, staff wore balaclavas needlessly, and there were examples of poor communication with prisoners during incidents. Batons had been drawn twice in the previous six months; both cases were reviewed by a member of staff involved in the incidents, which did not ensure independent scrutiny.
- I.30** The special accommodation log was incomplete and many uses were not properly authorised or recorded. (See main recommendation S38.)
- I.31** The deputy governor had commissioned three management enquiries and one formal investigation into prisoner complaints in the previous six months. Two management enquiries had been completed at the time of the inspection. Both contained deficiencies; in neither case was the prisoner who made the allegation interviewed, and in one case delays in securing CCTV footage promptly and problems with the system meant it was unavailable when requested.

Segregation

- I.32** Eight of the nine cells in the segregation unit were out of use during the inspection, with most being refurbished or repaired. Prison records for the previous period indicated that most prisoners were held in segregation for short periods and many returned to normal location.
- I.33** At the time of this inspection, there was one cell in use that was dirty. It was occupied by a young man who clearly had mental health issues and had been segregated as punishment following an adjudication. He had not been issued with a radio, had refused a shower, and the prison could not demonstrate that he had been offered exercise. Several inspectors spent some time with the young man, and he expressed sincere gratitude for the interaction. Yet the staff had made little effort to do anything more than provide the standard limited regime and interaction they would if the unit was full. The prisoner was effectively living in the middle of a building site, which was noisy and dirty due to the refurbishment work taking place. He requested to go to the library but this was not facilitated, even though there were enough staff to take him there safely. We saw little evidence that officers were seeking ways to encourage him or had much interest in his welfare; they had not even made the effort to find out his first name. The very basic record of his time in segregation indicated he had not been visited by a keyworker or personal officer during his stay. (See main recommendation S38.)
- I.34** Another prisoner had been segregated awaiting adjudication on the second landing of C wing. His cell was filthy and again his regime was impoverished, with little contact with staff or oversight of his segregation.

- I.35** We were concerned to find seven prisoners segregated on the underground landing of C wing (C1) without proper authorisation or the safeguards provided by Prison Service rules. Living conditions here were poor, cells were dirty and the landing was dark and dreary. Three of the prisoners were self-isolating and had asked to be separated from other prisoners because they were not safe; they had refused to be located on to the vulnerable prisoner unit on B wing. The other four were held there because of what was described as their disruptive behaviour. There was no regulation or managerial oversight of these prisoners, who were effectively segregated from the main population, and there were no safeguards to ensure that they had access to a safe and decent regime. Prisoners told us that on some days they were locked up all day unable to shower, walk around the exercise yard or telephone home. Poor record keeping and staff unfamiliar with the unit could not provide us with evidence to the contrary. There were no evident plans to address the reasons behind the segregation of these prisoners or to reintegrate them into the wider population. Many remained isolated for weeks at a time, and we had serious concerns about their well-being. (See main recommendation S38.)

Security

Expected outcomes:

Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence and positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse and effective drug supply reduction measures are in place.

- I.36** The general condition of the prison was old and worn, but we found no obvious weaknesses in the perimeter walls and fences. There were regular checks and routine searches of the perimeter, along with adequate searches of communal areas and activities buildings. However, there were gaps in physical security. For example, there were broken windows in cells and some communal areas with shards of heavy plastic hanging from window frames, and cell bells that were faulty. Discarded clothing was strewn over security wire (see paragraph 2.7 and Appendix III).
- I.37** Some elements of dynamic security were also weak. Relationships between staff and prisoners were sometimes distant, and there was often poor supervision of prisoners while they were unlocked on residential units (see paragraphs 1.14, 2.7 and 2.84). However, the management of intelligence was very good. The flow of information into the security department was reasonable, and it was dealt with quickly by trained full-time trained collators and analysts, and communicated effectively to other departments.
- I.38** Monthly security committee meetings were well attended. Security objectives were agreed on the basis of intelligence, but there was little attention to obvious gaps and weaknesses in physical and dynamic security. There was a weekly meeting between intelligence security analysts, the violence reduction analyst and drug workers to communicate recent intelligence and help deal with current issues.
- I.39** Security risk assessments included information about prisoners' custodial behaviour, as well as historic data, and there were effective management systems to manage the risks presented. We found no evidence that the prison was risk averse in allocating prisoners to activity spaces, and there were some rational restrictions in higher risk areas. Links with local police were very good, and there were structures to deal with staff corruption.

- I.40** Intelligence, finds, mandatory drug testing (MDT) results, reports from staff and prisoners, and our own observations confirmed that illicit drugs, particularly new psychoactive substances (NPS),⁹ remained accessible and were a significant problem in the prison. Illicit alcohol (hooch) was also a problem. The random positive MDT positive rate was high at 23%, including the positive rate of psychoactive substance. In our survey, 60% of respondents said that it was easy to get drugs in the prison and 38% that it was easy to get alcohol.
- I.41** Suspicion drug testing was consistent, with a positive rate of over 70% in the previous six months, which was better than we usually see; most tests were completed promptly. Positive MDT results and suspected NPS-related incidents resulted in prisoner referrals to substance misuse services.
- I.42** A new drug reduction strategy had been introduced and the supply reduction action plan was reviewed regularly. The security team focused on traditional supply reduction tactics and the drug team focused on treatment. However, the strategy was limited and did not recognise or include action to address demand issues. There was little evidence of active integrated work across all departments to understand the link between wider problems in the prison and drug use. As a result, the action plan was not sufficiently comprehensive to address the significant drug problem.

Recommendation

- I.43** **There should be a prison-wide approach to exploring and understanding the wider factors linked to drug taking, such as living conditions, boredom and a lack of meaningful activity. The strategy should incorporate actions to address these wider issues.**

Safeguarding

Expected outcomes:

The prison provides a safe environment which reduces the risk of self-harm and suicide. Prisoners at risk of self-harm or suicide are identified and given appropriate care and support. All vulnerable adults are identified, protected from harm and neglect and receive effective care and support.

Suicide and self-harm prevention

- I.44** There had been six self-inflicted deaths since the previous inspection, of which three were during the prisoner's first few days at Exeter. Not long after the conclusion of our inspection, we learned that another prisoner was believed to have taken their own life, a matter that was now subject to investigation. The safer custody team had a strategy and action plan, and managers had achieved or were working towards most recommendations from Prisons and Probation Ombudsman (PPO) investigations. However, several additional issues had not been addressed.
- I.45** There had been 243 incidents of self-harm involving 97 prisoners in the previous six months, a rise of 40% since the previous inspection. At the time of the inspection, this was the highest rate of self-harm in the local prison estate and among the highest we have seen in adult male prisons. We reviewed assessment, care in custody and teamwork (ACCT) case

⁹ Drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

management documents for prisoners at risk of suicide or self-harm, interviewed prisoners who had recently self-harmed and observed practice on residential units. There was evidence that a lack of activity, poor living conditions and high levels of drug use and violence contributed to the very high number of self-harm incidents. (See main recommendation S36.)

- I.46** The prison had opened 445 ACCTs in the same period, which was also an increase and far higher than elsewhere. Initial assessments of need and reviews were better attended and more comprehensive than we normally see. However, care plans remained underdeveloped and did not place sufficient emphasis on the need to offer prisoners meaningful activity. The care provided was too often poor, and there were prisoners on open ACCT documents living in squalid conditions with little to occupy them.
- I.47** Forty prisoners in the previous six months were considered to be at such risk to themselves that they required constant observation. Seventeen of these prisoners were located in the unfurnished/special cell in the segregation unit for this, generally because the constant observation cell in the social and palliative care unit was occupied. The special cell was a harmful environment; completely bare, with no toilet, bed or other furniture. There was supposedly an inflatable bed for use in this cell, but staff could not find this during the inspection, and we saw video evidence of a prisoner on constant watch located in the cell without it. Although this cell was inappropriate for such prisoners, we were told it was used because it had not been possible to install a gate or suitable observation door on a furnished cell. It was of concern that four days after the inspection, a new arrival was placed in the same special accommodation on their first night to facilitate constant observation.
- I.48** The safer custody team produced detailed reports outlining trends and hot spots, and maintained a database of triggers to highlight prisoners who might be at risk of self-harm on particular dates. Despite being highlighted on the database, the residential staff we spoke to were unaware of this critical information. Managers also held weekly meetings to discuss complex cases, but few actions were recorded in the minutes to ensure these were carried out between meetings.
- I.49** An enthusiastic team of Listeners offered valued support to prisoners in crisis, and said they were well supported by the prison.

Recommendation

- I.50 Prisoners who require constant observation should not be located in special accommodation.**

Protection of adults at risk¹⁰

- I.51** The prison had a reasonable safeguarding policy. There was a process in place for making safeguarding referrals. There had been no safeguarding referrals in the previous six months. However, several internal processes required improvement to ensure that prisoners at risk of harm were adequately safeguarded; these included first night, violence reduction, governance of use of force, and suicide and self-harm prevention processes. (See main recommendations S36, S37 and S39.)

¹⁰ Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs); and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).

Section 2. Respect

Prisoners are treated with respect for their human dignity.

Staff-prisoner relationships

Expected outcomes:

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

- 2.1 In our survey, 70% of prisoners said most staff treated them with respect, and many of the interactions we observed between prisoners and staff from all disciplines were positive and respectful. However, some residential staff lacked sufficient empathy with the prisoners in their care and were inured to the poor conditions that prisoners lived in. Some poor prisoner behaviour, such as smoking, swearing and drug taking, went unnoticed or unchallenged. Prisoners were addressed by their surname alone, which was also evident in some prisoner electronic case notes, which added to the impression of distance in some relationships.
- 2.2 There were signs that relationships were improving with the recently introduced keyworker scheme, which allocated named officers to work with individual prisoners to develop a progression plan. Under the scheme, keyworkers were supposed to be allocated 45 minutes a week to work closely with individual prisoners. In our survey, 43% of prisoners said a member of staff had talked to them in the previous week about how they were getting on, which was better than at the last inspection and at similar prisons. New keyworkers had made some informative entries on electronic case notes, but some lacked depth. Contact between keyworker and prisoner was not yet frequent enough, but the prison had introduced monitoring to address this. Not all prisoners had been seen by a keyworker, including some of the more complex and challenging prisoners who should have been prioritised. (See also paragraph 1.17.)
- 2.3 The support for keyworkers included keywork champions and a keyworker passport, which provided information on specialist services available to prisoners. Keyworker links with offender management were developing, but keyworkers and offender supervisors did not always coordinate work sufficiently (see also paragraph 4.9).

Recommendation

- 2.4 **All prisoners should have good quality weekly meetings with their keyworker, and these should be fully recorded in electronic case notes.**

Good practice

- 2.5 *The keyworker passport ensured keyworkers had an understanding of specialist areas of the prison to inform their work with prisoners.*

Daily life

Expected outcomes:

Prisoners live in a clean and decent environment and are aware of the rules and routines of the prison. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.

Living conditions

- 2.6** Living conditions for prisoners were poor, and many communal areas were dirty. There was an extensive list of repair work waiting to be completed by the maintenance contractor. There were no prisoner work parties to carry out small repairs that could have made improvements to poorly maintained cells. Twenty-five cells were out of use because of their very poor condition. Some prisoners threw rubbish out of broken windows and piles of rubbish bags were left outside (see Appendix III). Rats were visible outside the residential units. (See main recommendation S39.)
- 2.7** Many cells had broken observation panels or windows, with jagged shards of heavy plastic jutting out. Some cells had toilets that were very dirty or leaked, and missing toilet seats had only recently been replaced. Despite being an enhanced wing, D wing also had a smashed window on the stairwell. Prisoners there did not have in-cell sanitation, but were not locked into their cells and had access to recently refurbished communal facilities. The showers on A, B and C wings needed refurbishment.
- 2.8** Many cells were cramped and dirty. Prison data showed that 77% of cells held more prisoners than they were designed for. (See main recommendation S39.) Many were poorly furnished, including those on the enhanced wing. There was no lockable storage for personal items, and prisoners improvised makeshift curtains and toilet screens from the single sheet they had been issued with. There were few cell picture boards to allow prisoners to personalise their living space.
- 2.9** The prison used prisoners to paint cells and communal areas, and graffiti was less evident than at the last inspection. The introduction of in-cell telephones was a significant improvement, and prisoners valued their ability to call home outside of working and school hours. In our survey, more prisoners than at the previous inspection said they could shower every day.
- 2.10** The prison had recently bought large amounts of prison kit and clothing, and yet in our survey fewer prisoners than at the previous inspection said they received sufficient clean clothing or bedding each week. Less than a quarter of prisoners on the vulnerable prisoner wing said they had clean bedding each week, compared with 54% of the rest of the prison. Limited consultation with prisoners left the prison unaware of the continuing kit problem. We spoke to many prisoners who offered various explanations, including insufficient kit issued on arrival, little opportunity to exchange kit, and unfair issuing practices. On the main wings, prisoners managed the issue of clothing and toiletries from wing stockrooms during association or meal times, often with minimal staff supervision. (See main recommendation S39.)
- 2.11** Less than a fifth of prisoners in our survey said their cell call bells were responded to within five minutes, and we observed bells left unanswered for unacceptably long periods. One bell in an occupied cell on the induction landing was not answered for over 15 minutes (see paragraph 1.7). In another case, it took seven minutes before the cell bell was answered, even though a supervising officer walked past the cell twice and three officers were present

on the landing. In both cases the inspector checked that the prisoner in the cell was safe before standing back to assess how long it would take for the bell to be answered. The prison's own records confirmed that lengthy waits for response to bells were not uncommon. (See main recommendation S39.)

Residential services

- 2.12** In our survey, 40% of prisoners said the food was good and a third that they usually got enough to eat. The quality and quantity of food we saw were reasonable. Meals were served at appropriate times; breakfast was served on the morning it was to be eaten and was more substantial than we often see. Prisoners had a choice of meals on a four-week cycle that catered for a range of dietary needs. More specific medical or religious dietary needs were met on request from the health care department or the chaplains. Much of the food was made on site rather than just reheated, and fresh fruit was available daily. There was no opportunity for prisoners to eat communally and prisoners could not prepare their own meals. On the enhanced wing, prisoners had access to a fridge and microwave, but they were not permitted toasters and had to eat their meals in their cells. There were twice-yearly food surveys and food forums, and the catering manager responded to prisoner comments on their weekly food choices sheet.
- 2.13** Staff supervision of wing serveries was too varied, and not all prisoners serving food wore the full range of protective clothing. Some prisoners thought the lack of supervision on some serveries had led to unfair portion control. Up to 16 prisoners worked in the main kitchen. They, and servery workers, completed food hygiene training, and kitchen workers could complete a national vocational qualification (NVQ). The kitchen was in a reasonable state of repair, clean and well ordered.
- 2.14** More prisoners than at the previous inspection said the prison shop sold the things they needed. Around 600 items were available, informed by prisoner consultation when the list was reviewed. Shop order forms were issued on Friday and goods received a week later. Depending on the day they arrived, prisoners could wait up to two weeks to receive their first order. Grocery and vape packs and telephone credit were available for new arrivals and could be paid for in instalments, and prisoners could apply for additional emergency packs or telephone credit. Newspapers and magazines could be ordered with no additional charges, but there was an administration fee for catalogue orders.

Recommendation

- 2.15 Prisoners should not have to wait two weeks to receive their first shop order.**
(Repeated recommendation 2.97)

Prisoner consultation, applications and redress

- 2.16** Consultation with prisoners was underdeveloped and irregular. Some forums had been held for specific issues, such as to discuss the food or items in the prison shop, and there had been a few wing forums, mainly involving prisoner peer workers. Outcomes from consultation were not publicised, and in our survey, less than half of prisoners knew that any consultation took place. There was no formal prisoner council, and it was hard to see how prisoners' ideas and thoughts were heard at a senior level.
- 2.17** There were several peer worker roles, including 'decency orderlies' who assisted prisoners to complete applications to access services and recorded each outgoing application.

Prisoners were more positive about the applications system than at comparator prisons, but still only 60% said that applications were dealt with fairly. There was no tracking of responses to applications, which made it impossible to ensure that all were dealt with appropriately. Some responses to both applications and complaints referred prisoners to another form they needed to submit rather than taking a more helpful and reasonable approach to dealing with their request or concern.

- 2.18** There was an average of 60 complaints a month. Administrative staff collected complaint forms and replenished stocks. Steps had been taken recently to address delays in responses to complaints. In our survey, only 27% of prisoners thought complaints were dealt with fairly. Less than half of the prisoners who had experienced bullying or victimisation by other prisoners or staff said they would report it, which indicated a serious lack of confidence in the complaints system (see paragraph 1.14). The quality of the responses we sampled ranged from those that were helpful and genuine to those that lacked in-depth enquiry into the issue raised. Some quality assurance took place and individual feedback given, but there was no wider guidance to all staff involved to help them improve their responses to prisoner complaints.
- 2.19** Arrangements for legal visits continued to be good. The six legal rooms had capacity for up to 24 visits each weekday and were kept in decent condition. Video-conference facilities were available as an alternative and were also used daily for court appearances. The library had a good stock of legal texts and access to Prison Service instructions, and delivered copies of prison newspapers to each cell. Prisoners had information about 'access to justice' laptops. There was some help for prisoners seeking bail accommodation.

Recommendations

- 2.20** **Prisoners should be consulted regularly about the routines and facilities of the prison.** (Repeated recommendation 2.12)
- 2.21** **The prison should ensure that applications are dealt with promptly and helpfully.**
- 2.22** **Quality assurance procedures should be developed to improve investigation of and responses to complaints.**

Equality, diversity and faith

Expected outcomes:

There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with particular protected characteristics¹¹ and any other minority characteristics are recognised and addressed. Prisoners are able to practise their religion. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and rehabilitation.

Strategic management

- 2.23** The equality policy was comprehensive and described how all work associated with equality and diversity should be addressed, although it did not make clear the role of the recently appointed equality adviser. Quarterly equality action team (EAT) committee meetings were

¹¹ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

chaired by a senior manager, but attendance was limited and did not include prisoners or external or independent representation. The equality action plan contained a wide range of relevant action points, but many remained outstanding.

- 2.24** Data on equality and diversity were produced monthly, in an accessible format, but were not closely scrutinised at the EAT. There was no trend analysis and comments tended to be descriptive. When anomalies were identified, there was little evidence that these were considered carefully or led to action. (See main recommendation S40.)
- 2.25** No staff had been designated to take lead roles for each of the protected characteristics, which meant nobody was responsible and accountable for responding to the needs of these prisoners. Discussion groups took place intermittently but were too general and covered all of the protected characteristics. Such meetings were attended by a small number of prisoners in peer support roles rather than prisoners with protected characteristics. In practice, the issues that were raised mainly reflected the interests of mainstream prisoners. Records of the discussion groups indicated that prisoners from minority groups had few concerns and were generally content with their treatment, but this did not correspond with what prisoners told us or with some of our survey findings. We concluded that prisoners from minority groups were not given sufficient opportunities to express views about their experience. (See main recommendation S40.)
- 2.26** The number of discrimination incident reporting forms submitted remained low, at around two a month, and mainly alleged offensive language. Most cases were investigated adequately, but we found two that were dismissive and not dealt with well; the inquiries should have been deeper and wider and so contribute to lessons learned.

Protected characteristics

- 2.27** The prisoner profile was relatively homogeneous with over 90% of the population being white. None of the black and minority prisoners we spoke to reported any direct discrimination. Activities associated with Black History Month had been celebrated earlier in the year.
- 2.28** At the time of the inspection, there were 44 foreign prisoners. Most were from Eastern Europe and were located throughout the prison. Half of the foreign national prisoners did not get visits and received their entitlement to a free monthly five-minute telephone call instead. Staff regularly used a professional telephone interpreting service in formal settings, but there was little translated material. An immigration official visited the prison once a week to interview 'prisoners of interest'. Despite these arrangements, support for foreign national prisoners was not effectively coordinated. We received many reports from mainstream prisoners about the difficulties that non-English speaking prisoners experienced, and we also met foreign national prisoners who were struggling. They had problems in getting access to classes in English for speakers of other languages (ESOL), and we found at least one individual who appeared to have been exploited by another prisoner because of his poor English. Although there was a useful foreign nationals policy, no one had specific responsibility for these prisoners and it was not clear where they were expected to go to for help. Informal support was available through the prison orderlies, some of whom were multilingual, but this was ad hoc.
- 2.29** In our survey, 9% of the population identified themselves as from a Gypsy or Traveller community. However, apart from a newspaper available in the library, there was still no targeted support for this group of prisoners. (See main recommendation S40.)

- 2.30** In our survey, 45% of respondents said they had some form of disability. However, 47% of this group said they currently felt unsafe, compared with 16% of prisoners who said they did not have a disability. Despite similar adverse findings at the two previous inspections, the prison had still not investigated the causes of this. We held a discussion group with disabled prisoners to understand these responses better; most of the concerns raised related to health care provision. The prison needed to do more work to understand the continuing negative perceptions of disabled prisoners (see main recommendation S40). Personal evacuation plans were accessible to staff and contained relevant basic information, but we found that no plan had yet been completed for a recent arrival who used a wheelchair
- 2.31** For the small number of prisoners with the most chronic needs, the social care unit continued to provide a caring environment where decent work was carried out by trained prisoners, overseen by the well-established RECOOP (Resettlement and Care for Older Ex-Offenders and Prisoners) charity (see paragraph 2.65).
- 2.32** The effects of the tendency to treat all prisoners in the same way were most obvious for younger prisoners – 5% of the population were under 21. We spoke to two young prisoners who had been isolated from other prisoners because of their behaviour; it was evident that they were treated in the same way as adult prisoners with no account taken of their different levels of maturity and need. In our survey, 22% of prisoners under 25 said they had spent one night or more in the segregation unit in the previous six months, compared with only 2% of prisoners over the age of 25. The prison needed a greater understanding of the distinctive needs of younger prisoners. (See main recommendation S40.)
- 2.33** Fifteen per cent of the population were over the age of 50 and represented a significant minority. There was no longer a dedicated forum for the over-50s and, other than a dedicated gym session, there was little provision for older prisoners. (See main recommendation S40.)
- 2.34** Before our inspection began, a transgender prisoner had been released following a brief period preparing for release. Staff and prisoners told us that this prisoner had been well supported, and given help and reassurance to assist her return to the community.
- 2.35** New arrivals were now asked about their sexual orientation by prison staff, rather than by an orderly. The number of prisoners identifying as gay or bisexual was still very low and appeared to be underreported. There was still no formal support for these groups of prisoners. (See main recommendation S40.)

Faith and religion

- 2.36** Prisoners' spiritual needs were well met, and our survey results on faith provision were positive – 76% of prisoners said that their religious beliefs were respected and 92% that they could attend religious services if they wanted to.
- 2.37** There was a small but very active and enthusiastic chaplaincy. Chaplains had a high profile in the prison and were respected. A chaplain saw all new arrivals shortly after their admission, and gave them an information leaflet and advice about what the chaplaincy could provide. The chaplains' office was a busy hub that generated a lot of activity. Chaplains knew the prisoners well and were actively involved in a large amount of pastoral work. Members of the team were well integrated into the prison and were represented at the violence reduction, safer custody and complex needs meetings.
- 2.38** There were good facilities for prisoners to practise their faith. The chapel was spacious and doubled as a social area when required. The faith room provided a suitable private, neutral

venue for the small number of minority faiths who used it. The Muslim chaplain was due to increase his input by visiting weekly.

- 2.39** The chaplaincy was responsible for delivering and coordinating a wide range of services. A qualified counsellor attended the prison weekly to provide bereavement counselling. A musician in residence provided therapeutic input for prisoners using the chapel as a base. There were well-established prison visitor and volunteer chaplain schemes, as well as a mentoring project. The chaplaincy also ran a varied and interesting programme of faith-based events, and worked closely with other prison departments to promote the major religious festivals.

Health, well-being and social care

Expected outcomes:

Patients are cared for by services that assess and meet their health, social care and substance use needs and promote continuity of care on release. The standard of provision is similar to that which patients could expect to receive elsewhere in the community.

- 2.40** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹² and HM Inspectorate of Prisons under a memorandum of understanding between the agencies. The CQC found there were no breaches of the relevant regulations.

Strategy, clinical governance and partnerships

- 2.41** Care UK became the prime provider of health services in April 2017 and subcontracted several services. The 2016 health needs assessment informed service provision. Partnership working between the health providers and the prison and commissioners was good.
- 2.42** There had been 15 deaths since our last inspection - nine from natural causes - and learning from these, including Prisons and Probation Ombudsman (PPO) recommendations, was implemented promptly to improve care. Although incident reporting among Care UK staff was good, this was underdeveloped for some subcontracted services, and factors such as access and training deficits had created weaknesses in other incident reviews. During the inspection, investigation was overdue for 46 incidents, which created delays in learning lessons, but this was offset by managerial oversight and was improving. Regular clinical audits supported effective governance. Patient feedback mechanisms were reasonable and improving, including regular forums for substance misuse prisoners.
- 2.43** Clinical leadership had improved and was good. Chronic problems with recruitment and retention of health staff persisted, but was offset by using regular locum staff. Active recruitment was producing positive outcomes. Nursing staff were always on site, and GP clinics were provided from Monday to Saturday.
- 2.44** All health staff, including locum staff, received regular supervision. Health staff had access to training and performance appraisals. Systems to check registrations and criminal records were sound. Local guidance was being developed to supplement national policies. Communicable disease outbreaks were managed appropriately, and a local outbreak plan was in development. All health providers used SystmOne, the clinical IT system, which improved

¹² 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>.

continuity of care. Clinical recordkeeping was mostly good, although we identified some instances where not all care provided was recorded.

- 2.45** Health staff had access to appropriate and well-checked and maintained emergency equipment located strategically across the prison. A high number of medical emergencies related to prisoner use of new psychoactive substances (NPS, see paragraph 1.40) was putting strain on the health team.
- 2.46** In our survey, more prisoners than the comparator said the overall quality of health services was good. Most of the complaints we received from prisoners related to discontinuance of medication previously received in the community, although our documentation review indicated that prescribing was clinically appropriate. Patients were generally seen in private. We observed satisfactory interactions between health care staff and patients.
- 2.47** The number of clinical rooms was adequate but were spread across multiple locations, which created practical challenges. All clinical rooms were clean and of a good standard, even though there was no formal cleaning schedule. There was still no annual external infection prevention and control audit, but there were regular internal self-audits. B2 waiting room was stark and the floor was damaged.
- 2.48** The Care UK health complaint system was well advertised and confidential. The first response was local face-to-face resolution, which was escalated if the prisoner was unhappy with the outcome. Some responses were delayed and some did not address all the issues fully, but this was being addressed with training and more regular quality checks. The mental health provider did not advertise its complaint system effectively, although the responses we sampled were good.

Recommendation

- 2.49** **Adverse incidents should be promptly reported and investigated, and lessons learned shared with the full health team.**

Promoting health and well-being

- 2.50** Information about health services and material on current national health promotion campaigns were displayed around the establishment, but only in English. A prison-wide approach to health promotion was developing.
- 2.51** Prisoners had good access to national disease prevention and screening programmes. There were long waits for hepatitis B immunisation, due to the global vaccine shortage, but this was resolving and catch-up clinics were booked.
- 2.52** The prison was smoke-free. New arrivals who were smokers received an electronic cigarette, and nicotine replacement therapy commenced at the secondary health screen. Only six weeks of nicotine replacement treatment was now provided following significant bullying and violence related to its use in 2017. There was no psychosocial support to help prisoners with smoking cessation.
- 2.53** Staff shortage had restricted access to sexual health services, but this had been resolved. Barrier protection was only available in the sexual health clinic, which was too limited. Prisoners received health promotion advice during their discharge interview.

Recommendations

- 2.54** Information about health services and national health campaigns should be easily available in all required formats and languages.
- 2.55** Prisoners should have easy and prompt access to the full range of smoking cessation support and barrier protection throughout their stay and on discharge, if required.

Primary care and inpatient services

- 2.56** A registered nurse assessed all new arrivals in reception and made appropriate onward referrals. A health services leaflet was available, but was not routinely handed out on reception. Secondary health assessments were completed promptly.
- 2.57** There was an appropriate range of primary care services with waiting times equal to those in the community. Prisoners could request services through a confidential application system, and these were effectively triaged by a senior nurse. Non-attendance rates for primary health appointments had improved and were commendably low. The appointment system was good.
- 2.58** GP services were good and very effectively led by the lead GP. The community GP out-of-hours service included the prison. Same-day nurse and GP appointments and wing-based support were provided as needed.
- 2.59** The management of long-term conditions was good. Patients with long-term conditions and complex health needs were identified promptly. A nurse with specialist skills supported patients with respiratory problems. The GPs managed all other long-term conditions. Training was planned to support a move to nurse-led clinics. The well-attended weekly complex care meeting supported effective care for patients with complex health needs.
- 2.60** Patients were involved in creating their individual care plans, which reflected national clinical guidance. The clinical records we examined evidenced that patients received care that was responsive to their changing needs, although care plans were not always updated promptly.
- 2.61** Patients with palliative and end-of-life needs received good personalised and dignified care. Care UK had established links with community services that ensured effective coordinated care. The palliative care suite was satisfactory.
- 2.62** Referrals to external hospital appointments were prompt and the process was managed well. The prison rarely cancelled appointments. Health care staff contributed to the individual risk assessments of their patients, which helped to ensure security measures were proportionate.
- 2.63** Prisoners were seen a couple of days before their release to identify and address their needs, which was better than we usually see in local prisons. Prisoners could receive a paper summary of their medical records or access it on an app, which supported continuity of care.

Social care

- 2.64** Partnership working between the prison, Care UK and Devon County Council (DCC) was very good. DCC contracted Care UK to provide social care. Social care posters were displayed throughout the establishment, and an open referral system helped ensure prisoners' needs were identified promptly. A dedicated social worker and a dedicated

occupational therapist covering the three Devon prisons ensured that prisoners received prompt assessments and reviews.

- 2.65** The dedicated social care wing (F) also held the prison's palliative care suite and constant watch cell, but was a therapeutic environment despite this mixed function. Residents were unlocked during the core day and could access a satisfactory regime in a good environment. During the inspection, all six patients receiving packages of social care were located on F wing. Agreed comprehensive and personalised care plans were implemented by sufficiently trained, dedicated and compassionate health and social care staff. A support worker was based on the unit 24 hours a day.
- 2.66** Patients who lacked capacity to make specific decisions for themselves about their social care needs were supported in their best interests. Staff documented this well and ensured these patients were still encouraged to make daily decisions for themselves where possible. Staff ensured that dignity and respect was maintained at all times.
- 2.67** A large range of well-maintained specialist equipment helped promote inpatients' independence, and enabled safe care and treatment. Prisoner buddies provided non-personal care, and were appropriately trained, risk assessed and supported. The social worker attended discharge clinics to ensure that care packages were continued on transfer and release.

Good practice

- 2.68** *The dedicated, compassionate and skilled staff on the social care wing ensured that prisoners with social care needs had all their daily needs met, and that they received very good care and support in a therapeutic environment.*

Mental health care

- 2.69** There was no regular mental health awareness training for prison staff, but there were plans to address this. Partnership working between the prison, health staff and the mental health team was generally good.
- 2.70** Devon Partnership NHS Trust provided an integrated mental health service, using the stepped care model. Despite staffing shortages, the small team provided very responsive care on Monday to Saturday, but were stretched. The team comprised a rich skill mix, including a learning disability nurse, psychiatrist, psychologist and psychology assistant. In our survey, 59% of prisoners said they had mental health problems and they were positive on access and the help received.
- 2.71** Around 130 prisoners were referred monthly through the open referral system. All referrals were seen for an initial triage assessment within a few days, and more quickly if required. During the inspection, the team was supporting 111 patients (25% of the population). Care planning and support for the 61 patients being managed under the care programme approach was good. Guided self-help and brief interventions were provided for primary mental health issues. Anxiety management groups were due to start, except on B wing due to insufficient group rooms, even though there was likely to be a real need among its vulnerable population. There were advanced plans to introduce a nurse-led ADHD support service and a dementia pathway. Bereavement counselling was available through the chaplaincy (see paragraph 2.39). Systems to ensure mental health patients had the required physical health checks for their condition or medication were good.

- 2.72** Effective partnership working with a local medium secure unit supported prompt transfers. Eleven of the 17 patients transferred under the Mental Health Act since July 2017 had been transferred in under 14 days, which was impressively prompt. Six patients had experienced delays - the longest was around five weeks - mainly transferring to out-of-area facilities.
- 2.73** Arrangements to ensure continuity of care on transfer and release were satisfactory.

Substance misuse treatment¹³

- 2.74** In our survey, 48% of prisoners (against the comparator of 35%) said they arrived at the prison with a drug problem, and 58% of those said they had been helped by the prison. Additionally, almost a third of prisoners reported alcohol problems, of whom 69% said they had been helped with this.
- 2.75** The prison's substance misuse strategy was reasonable, and underpinned by an action plan that was reviewed at the bi-monthly drug strategy meeting.
- 2.76** EDP Drug and Alcohol Services provided psychosocial substance misuse support, and Care UK provided clinical services. The integrated substance misuse (ISMS) team was well led and provided good support, and partnership working with the prison was good.
- 2.77** New arrivals who needed clinical support for substance misuse were identified promptly and referred for first night prescribing. There was consistent daytime and night-time monitoring, regardless of location, and recording was excellent. Specialist nurses completed assessments promptly and made regular reviews. Specialist non-medical prescribers reviewed patients regularly, and prescribing was flexible in accordance with national guidance. Prescribers generally completed reviews alone, but consulted previous clinical records and liaised with the wider team. During the inspection, 66 of the 103 patients prescribed opiate substitution therapy were maintained, which was appropriate. In the previous six months, 234 service users had undertaken an alcohol detoxification.
- 2.78** Prisoners and staff understood how to refer to the ISMS. The psychosocial team was well resourced and during the inspection was supporting 214 prisoners (49% of the population). The team provided service information and harm-reduction advice to all new arrivals. An appropriate range of interventions were provided, including: one-to-one work; awareness workshops, including NPS and anxiety management; a gym-based intervention; an alcohol programme; and 'self-management and recovery training' (SMART) groups. Narcotics Anonymous (NA) and Alcoholics Anonymous (AA) provided regular sessions. Prisoners on B wing were offered individual support but could only access SMART recovery groups, due to a lack of suitable rooms. There was only one prisoner recovery champion, but more were planned.
- 2.79** We observed close working with mental health services through joint assessments for service users with more complex needs.
- 2.80** Discharge planning was good, and there was effective joint working and liaison with external agencies. Prisoners received pre-release harm reduction and overdose prevention advice, and naloxone (medication to reverse opiate overdose) was available on release.

¹³ In the previous report substance misuse treatment was included within safety, while reintegration planning for drugs and alcohol came under rehabilitation and release planning (previously resettlement).

Recommendation

- 2.81 Prisoners on all wings who have substance misuse problems should have access to all psychosocial interventions.**

Medicines optimisation and pharmacy services

- 2.82** The pharmacy at HMP Channings Wood supplied medicines promptly, with most in named-patient packs with patient information leaflets. A pharmacy technician and pharmacy assistant managed medicines. A pharmacist attended monthly to complete clinical audits and medicine use reviews, which was insufficient but was being addressed.
- 2.83** Comprehensive in-possession risk assessments were completed for new arrivals and reviewed regularly, including when new medicines were added. Around 30% of patients received medicines in possession, which was low, partly due to the lack of secure in-cell storage. Nurses could administer an adequate range of medicines without a prescription. Patients being transferred or released received adequate supplies of medicine.
- 2.84** Medicines were administered from seven locations, including two administration points on the busiest wings (A and C), at four times a day between 8am and 8pm. Although patients sometimes received medications later, these timings meant that most who were on three or four times daily medicines received doses too close together followed by a long gap, which was not clinically effective. Opiate substitution therapy (OST) was administered from a dedicated location. We observed good officer supervision of medication administration queues on A wing and for OST, but it was poor elsewhere. Patient non-attendance for medication was followed up.
- 2.85** A significant amount of medicine was given from stock, which was not best practice and had emerged as a regular theme in drug errors, although remedial action was taken. Most medicines were labelled correctly, but we found one where the instructions were not sufficiently specific, and one insulin pen not marked with the date of opening. Room and refrigerator temperatures were monitored appropriately. Stock medicines were regularly date checked and audited. Medicines were stored tidily and safely, and were transported securely through the prison. Controlled drugs were generally managed safely, but most controlled drug cupboards were not attached to the wall with the required fixings. Prescribers followed Care UK prescribing guidelines.
- 2.86** There were relevant policies and procedures, and alerts were managed appropriately. The pharmacist chaired the monthly medicines management meeting. Prescribing data, including tradable medicines, were collated and discussed.

Recommendations

- 2.87 Prisoners in shared cells should have secure storage for their medicines.**
- 2.88 Medicines should be administered at clinically appropriate times, and officers should supervise medication queues effectively to ensure privacy and reduce opportunities for diversion and bullying.**

Dental services and oral health

- 2.89** The dental provider Time For Teeth provided a good and flexible dental service. An appropriate range of NHS-equivalent treatments were offered. Advice on oral hygiene and disease prevention was routinely given.
- 2.90** Waiting times for routine appointments were just under six weeks. Prisoners with urgent needs were seen promptly, and could access interim pain medication and antibiotics from the GP if required. Follow-up appointments were completed within an appropriate time. The dental non-attendance rate was very high, at around 26%, and required further attention.
- 2.91** Separate decontamination facilities complied with best practice, and dental equipment was maintained and serviced regularly.

Section 3. Purposeful activity

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

Time out of cell

Expected outcomes:

All prisoners have sufficient time out of cell and are encouraged to engage in activities which support their rehabilitation.

- 3.1 The regime was more predictable than at the last inspection. The core day had improved and now enabled prisoners to have evening association on alternate weekdays on most wings and nightly on D wing. On the days that prisoners could access evening association, the written core day would have provided up to 10 hours out of cell for prisoners employed full time. However, most prisoners had less than this because of the slippage in the regime - we repeatedly saw prisoners locked up early at the end of activities and unlocked late after meal breaks. Unemployed prisoners, particularly those on basic regime, had significantly less time out of cell, with less than two hours a day for some. The regime for prisoners on CI was a major concern, with most locked in their cells nearly all day. (See main recommendation S38.)
- 3.2 During roll checks, we found an average of a third of prisoners locked in their cell during the core day. Although this was an improvement on the previous inspection, it was still too many, and there was still a general lack of focus and engagement in getting prisoners into purposeful activities every day on time.
- 3.3 Time outside for exercise was limited to 30 minutes on weekdays and an hour at weekends. Outdoor areas had built-in exercise equipment. Association areas had pool tables, but there was nowhere for prisoners to sit and talk together during association.
- 3.4 The library service was provided by the charity, Libraries Unlimited South West. It was run by two enthusiastic librarians and a very diligent orderly, and the facilities resembled those of a small community library. The library offered a wide range of suitable material, including audio books, foreign language books, large print and easy-read material.
- 3.5 The library was open six days a week and prisoner access was good, with evening sessions for workers and separate sessions for vulnerable prisoners. There were also efforts to promote reading for prisoners who might not normally visit the library, and staff made special arrangements to supply men in the segregation unit and young adult prisoners with material that would appeal to them. The library also coordinated several projects to assist prisoners who needed help with literacy.
- 3.6 We were informed that prisoner access to the gym had increased by approximately 10% since the previous inspection. In our survey, only 36% of prisoners said they used the facilities twice or more a week; there was scope to improve this further, and staff we spoke to were aiming to achieve this.
- 3.7 The PE staffing complement had increased and there were three full-time and two part-time instructors. Cross-deployment of gym staff had also reduced since the previous inspection, allowing them more time to provide PE. There was a full programme for all mainstream and vulnerable prisoners, and specialist provision had continued for the over-50s and for those

on drug rehabilitation programmes. In addition, classes were now provided for at-risk prisoners subject to case management, and a community session allowed prisoners to work alongside people with special needs.

- 3.8** The increase in staffing had enabled some accredited training, and in the previous year, 11 prisoners had completed YMCA certificates. PE staff were keen to promote the benefits of a healthy lifestyle, and to support keyworkers in their new role to achieve this. We were shown two plans where PE staff had encouraged keyworkers to take prisoners off the wing and use the full range of gym facilities to help them make more constructive use of their time in custody.
- 3.9** Since the previous inspection, major repairs had been completed on the gym floor, but the poor condition of the showers had deteriorated further and the walls were now crumbling.

Recommendations

- 3.10 All prisoners should be unlocked for sufficient time to access regime services, undertake domestic activities fully and have a daily period of association.**
- 3.11 All prisoners should have access to at least one hour in the open air daily.**
(Repeated recommendation, 3.5)
- 3.12 The gym showers should provide decent facilities for prisoners.**

Education, skills and work activities (Ofsted)¹⁴

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 education, skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.¹⁵

- 3.13** *Ofsted made the following assessments about the education, skills and work provision:*

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

¹⁴ This part of the inspection is conducted by Ofsted inspectors using Ofsted's common inspection framework. This ensures that prisons are held accountable to the same standard of performance as further education colleges in the community.

¹⁵ In the previous report reintegration issues for education, skills and work were included within rehabilitation and release planning (previously resettlement).

Management of education, skills and work

- 3.14** The quality of the work provision had declined and required improvement. The quality of the education provision delivered by Weston College was good. Prison managers had made some improvements to the provision of education, skills and work in recent months. Since December 2017, fewer learning sessions had been cancelled following a period of significant staffing problems when prisoners were unable to be moved from their cells to their education, skills and work sessions. Other improvement measures, including the recording of prisoners' employability skills, were still too recent or not yet fully implemented. Managers' actions to improve prisoners' attendance and punctuality had not been successful.
- 3.15** Despite an increase in the range of activities for prisoners, such as courses on horticulture, the provision was not sufficient to meet the resettlement needs of prisoners. Prison and college managers had increased the number of short-duration courses, so that more prisoners completed courses during their short stay in Exeter. However, there was insufficient provision in English and mathematics; around three-quarters of new arrivals had low skills in these critical areas. Foreign national prisoners who needed to improve their spoken English did not have access to suitable lessons. There was not enough work with employers to link to the local or regional employment opportunities. Provision to improve prisoners' skills in the use of information technology, to prepare them for life and employment in the community, did not meet their needs
- 3.16** The prison's self-assessment report on work provided by the prison identified most strengths and areas for improvement but graded the provision too generously. However, prison managers were implementing many appropriate improvement measures. Weston College's self-assessment report on their provision of education was detailed and accurate.
- 3.17** The quality of education that Weston college offered was good, although the range of courses on offer was not sufficient to help prisoners with their resettlement on release. The college's arrangements for monitoring the quality of teaching, learning and assessment were effective, and tutors were supported well to improve their practice. For example, most tutors developed good techniques to find relevant opportunities in lessons to reinforce prisoners' employability skills, such as problem solving. Targeted staff training and effective coaching had led to well-planned and competently delivered lessons.
- 3.18** Allocation to courses or activities was usually swift. The prison had sufficient activities for most prisoners, offering 227 full-time places in prison work and 90 full- and part-time places in education. However, much of it was mundane and of little benefit to some prisoners who took part. Vulnerable prisoners had access to 67 full-time places in prison work and 17 full-time education places. The range, number and quality of activities that vulnerable prisoners could access was particularly narrow and required improvement.
- 3.19** Following the cessation of the National Careers Service contract, prison and college managers had quickly set up an alternative advice and guidance service. Prisoners also used the 'virtual campus' (internet access to community education, training and employment opportunities) to improve personal skills, such as managing their finances. However, the new advice and guidance measures were not appropriately focused on guiding prisoners into the most suitable prison courses and activities to help them on release. Prisoners were not assisted to make the best use of the virtual campus to secure employment. They did not gain sufficient experience to search for jobs, prepare a curriculum vitae or complete a letter of application.

Recommendations

- 3.20** College managers should develop the provision further so that prisoners can improve their skills in using English, mathematics and the use of information and communication technology to enhance the likelihood of successful resettlement.
- 3.21** Foreign national prisoners should have access to suitable provision to improve their spoken English.
- 3.22** Prison managers should improve the evaluation of the quality of training, learning and assessments in prison work, and ensure that the self-assessment report is accurate.
- 3.23** All prison work should enable prisoners, including vulnerable prisoners, to develop useful vocational skills, improving their prospects of finding employment after release.
- 3.24** Advice and guidance about courses should be improved to increase prisoners' chances of gaining employment after release, including a better use of the virtual campus for finding jobs.

Quality of provision

- 3.25** Prison work and workshops provided around two-thirds of activity places. In these activities, instructors did not sufficiently train, extend or check prisoners' learning and development. Prisoners did not know if they were progressing or how to improve their work because instructors did not set them clear learning and developmental targets. Many instructors had low expectations of prisoners, and consequently, too many prisoners, such as those working in packaging workshops, did not develop vocational skills. Prisoners who worked in the sewing workshop developed elementary sewing skills for making curtains and towels.
- 3.26** Tutors and instructors did not initiate and facilitate discussions within activity sessions on issues of treating individuals fairly or accepting and respecting differences. Consequently, prisoners did not develop important social skills that would help them with reintegration on release.
- 3.27** Prisoners on painting and decorating courses did not have access to the appropriate facilities to develop their practical skills, although the skills that they developed met the qualification awarding organisation's requirements.
- 3.28** The quality of provision in education was good and most tutors in lessons used a variety of activities to motivate and interest prisoners. They checked regularly what prisoners had learned and coached them to make good progress. Tutors used the information from prisoners' starting points carefully to set them learning tasks and activities that helped them gain new knowledge and understanding. However, this was not the case in a minority of lessons.
- 3.29** There was effective support in lessons for prisoners with additional learning needs, and these prisoners made good progress. Tutors used peer mentors successfully to help the less able prisoners complete their learning tasks to the best of their ability.
- 3.30** Tutors' feedback, often written, was thorough, well considered and ensured that prisoners knew what they needed to do to improve their work and achieve their potential. This included feedback on prisoners' writing, for example, on how they should improve their

punctuation and grammar, so that they did not repeat mistakes. However, this was not the case in the English and mathematics lessons delivered to prisoners in workshops and other prison work areas. This affected many prisoners' development, especially those with low skills in these subjects.

Recommendations

- 3.31** Instructors should use information about prisoners' existing skills to set them appropriately demanding work and targets for their development.
- 3.32** Tutors and instructors should promote the values of fair treatment and respecting differences in their teaching and training sessions.
- 3.33** Tutors and instructors should include tasks and activities in their teaching, training, and assessment that improve prisoners' skills in English and mathematics.

Personal development and behaviour

- 3.34** In our survey, only 46% of prisoners said that wing staff encouraged them to attend their lessons and prison work activities regularly. We found that too many prisoners attended their activities irregularly and arrived late, impeding their development of employability skills to help them secure jobs after release.
- 3.35** Too many prisoners did not recognise the value of improving their English and mathematics skills because they did not receive effective advice, guidance and encouragement. For example, prison managers did not ensure that prisoners improved their English and mathematics skills before they started a prison job or even as part of their activities.
- 3.36** Most prisoners observed appropriate health and safety practices whilst at work. However, a small minority were not supervised effectively to ensure that they adopted safe working practices. For example, wing cleaners did not always use caution cones when cleaning floors.
- 3.37** The prisoners who attended activities regularly and on time were motivated and demonstrated a good work ethic. They improved their ability to work within teams and where they were given additional tasks, such as supervision work, they improved their negotiating skills. Their behaviour was good and they showed respect to their peers and staff. Many prisoners were proud of what they achieved and produced.

Recommendations

- 3.38** Wing staff should encourage and motivate prisoners to improve their attendance and punctuality to lessons and prison work activities so that they can increase their chances of gaining employment after release.
- 3.39** There should be effective measures to motivate prisoners to improve their English and mathematics skills.
- 3.40** Tutors and instructors should ensure that all prisoners always follow appropriate health and safety procedures.

Outcomes and achievements

- 3.41** Prisoners in work activities could not gain qualifications and did not have a clear understanding of the skills they had developed because instructors did not identify or record them. This lack of qualifications or records of their skills development meant that they could not demonstrate their achievements to potential employers.
- 3.42** Too many prisoners in prison work made slow progress. Most prisoners in lessons and vocational qualification sessions, including those with complex special educational needs, made good progress from their low starting points.
- 3.43** Since the previous inspection, the education curriculum had been changed so that most of the provision consisted of very short courses, and the majority of prisoners completed and achieved their qualifications. In 2016/17, most of the small number of prisoners enrolled on functional skills courses in English and mathematics at entry, level 1 and 2 completed them. In vocational training, most prisoners who stayed on their courses achieved their vocational qualifications.

Recommendation

- 3.44** Prisoners in prison work should be able to gain qualifications, and instructors should recognise and record accurately the skills that prisoners develop.

Section 4. Rehabilitation and release planning

Prisoners are supported to maintain and develop relationships with their family and friends. Prisoners are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Prisoners are prepared for their release back into the community.

Children and families and contact with the outside world

Expected outcomes:

The prison supports prisoners' contact with their families and friends. Programmes aimed at developing parenting and relationship skills are facilitated by the prison. Prisoners not receiving visits are supported in other ways to establish or maintain family support.

- 4.1 Choices Consultancy Services, a family support charity mainly staffed by volunteers, continued to play a useful role and offered excellent support to prisoners and their families. A member of the Choices team interviewed all new arrivals and provided helpful, reassuring advice. As well as information about visiting arrangements, this could also include follow-up telephone calls to family members and work on welfare issues, such as debt or housing. Choices ran the visitors' centre and a small refreshments area in the visits hall. It had recently introduced an evening drop-in support group for family members.
- 4.2 The visits hall remained drab and noisy. In the warm weather during our inspection, the air conditioning in the hall did not work properly, making the temperature uncomfortable. Despite the poor conditions, there was a relaxed atmosphere in the hall and the facilities were reasonable, including a small supervised crèche. Family members we spoke to said the visiting arrangements worked efficiently, and they were content with their treatment by staff.
- 4.3 Family days had been reinstated since the previous inspection and now took place monthly. They were popular and, subject to vetting, all prisoners were eligible to apply. There were separate sessions for vulnerable prisoners.
- 4.4 Visitors could book visits electronically. The 'email a prisoner' service was popular, with around 40 to 50 messages passed on every day. There were no parenting or relationship courses, but prisoners had access to Storybook Dads through the library, which enabled them to record a story for their children.
- 4.5 Five per cent of prisoners' mail was checked randomly; these arrangements worked satisfactorily. Telephones had recently been installed in cells, which made it much easier for prisoners to maintain contact with their family at times when they would be available. In our survey, 94% of prisoners said that they could get daily access to a telephone.

Reducing risk, rehabilitation and progression

Expected outcomes:

Planning for a prisoner's release starts on their arrival at the prison. Each prisoner has an allocated case manager and a custody plan designed to address their specific needs, manage risk of harm and reduce the risk of reoffending.

- 4.6 There was a reducing reoffending policy in place and an associated action plan with relevant targets. The prison had forged constructive links with community organisations to provide ongoing support for released prisoners. Delivery of the overall strategy was overseen by a committee that met every two months and included representatives from prison departments and community organisations.
- 4.7 The prison had still not conducted a prisoner needs analysis that considered information about prisoners' risk sufficiently well, although there were plans to address this in a new needs analysis.
- 4.8 Catch 22 delivered resettlement services in the prison and was now better established than at the last inspection. It provided basic custody screening assessments and pre-release planning for all prisoners. Its communication with the offender management unit (OMU) and residential officers had improved and was now good.
- 4.9 The first stage of new national offender management procedures, offender management in custody (OMiC)¹⁶, was being phased in at the time of inspection. Residential officers were allocated to prisoners as keyworkers and developed a progression plan for them, which could include signposting and referrals to meet resettlement needs (see also paragraph 2.2).
- 4.10 The OMU included five National Probation Service (NPS) and eight prison officer offender supervisors. There was still some redeployment of prison officer offender supervisors, but resourcing and management of the work had improved since the last inspection, with better morale among staff. Prison officer offender supervisors were not required to maintain regular contact with prisoners on their caseload, but to deal with applications from them or events that required input.
- 4.11 NPS offender supervisors were allocated to high-risk prisoners, and in most of the cases we examined they carried out good quality, detailed work. This included ensuring transfer of high-risk prisoners to appropriate specialist units, and individual sessions to engage with prisoners on risk issues.
- 4.12 Home detention curfew (HDC) procedures had improved. Prisoners who were eligible were notified of the opportunity to apply for HDC, and in the previous six months there had been 149 applications, compared with 87 at our previous inspection. Newly introduced procedures ensured that most eligible applicants were successful. Where HDC had been refused, it was for appropriate reasons of public protection.
- 4.13 There was effective work in the management of the high-risk cases that we examined. This included good risk assessments and risk management plans, achievement of appropriate transfers of prisoners who needed therapeutic interventions to reduce their risk of harm, and good liaison with community offender managers. In these cases, NPS offender

¹⁶ Following a review of offender management in 2015, HMPPS began to introduce a new offender management model from 2017. The new model is being implemented in stages, starting with new prison officer key workers. The second phase, core Offender Management, and the introduction of prison offender managers (POM), is being introduced during 2019.

supervisors ensured there were adequate risk management plans for high-risk prisoners, and contributions to multi-agency public protection arrangements (MAPPA) were good.

- 4.14** An interdepartmental risk management team (IRMT), with representation from a range of prison departments, met monthly to review the management of high-risk prisoners. The meeting should have been able to provide assurance that all high-risk cases had been identified and were being managed effectively. Its operation had improved since a senior probation officer had started to chair meetings but it was not yet considering all high-risk prisoners because there was no system for identifying these prisoners on arrival or agreed criteria for referring them to the IRMT. This meant that risk management arrangements for some high-risk prisoners due for release were not being routinely considered and validated by a multi-disciplinary team.
- 4.15** Categorisation reviews were up to date but did not involve the prisoner sufficiently. Prisoners were not offered the opportunity to make representations on their recategorisation or given feedback about the behaviour required to progress at their next review.
- 4.16** Most prisoners were moved on swiftly to training prisons closest to their home areas - of the 262 sentenced prisoners, 221 had been at the prison for less than six months. However, too many prisoners were transferred without a completed OASys (offender assessment system) assessment, which gave no guarantee that the receiving establishment would be able to meet their rehabilitative needs.
- 4.17** There were 15 indeterminate sentence prisoners, of whom eight had a life sentence. None had been at the prison longer than necessary, and offender supervisors worked with them to ensure they could progress. Reports to the Parole Board were completed on time. An offender supervisor visited prisoners remanded for charges that could attract an indeterminate sentence to advise them of possible outcomes.

Recommendations

- 4.18** The prison should develop a needs analysis drawing on information about risk and prisoner need, and use this to inform the reducing reoffending action plan.
- 4.19** Procedures to implement offender management in custody should ensure that their sentences and what will happen to newly sentenced prisoners are explained to them, that key worker contact is reliable and consistent, and that there is good liaison between offender supervisors and keyworkers based on agreed targets for progression and resettlement.
- 4.20** The interdepartmental risk management team should consider all high-risk prisoners and those subject to multi-agency public protection arrangements on their arrival and in sufficient time before their release, identifying risk factors and targets for risk management.
- 4.21** Reviews of prisoner categorisation should include the opportunity for prisoners to make representations about their risk level, and they should be informed of the decision and what they need to do to progress.
- 4.22** Transfer of prisoners should be based on an OASys assessment of their risk and should support their progression.

Interventions

Expected outcomes:

Prisoners are able to access interventions designed to promote successful rehabilitation.

- 4.23** In our survey, 43% of prisoners said they had done an offending behaviour programme in the prison and 49% that they had done one-to-one work. Apart from substance misuse work, there were few programmes for prisoners. However, the interventions available were appropriate for a local prison. They included 'Making a change', addressing achievement of resettlement goals, and the 'Change' programme, for prisoners who were violent in prison. There was also good individual work by NPS offender supervisors with prisoners to reduce their risk and likelihood of reoffending.
- 4.24** There was still no specialist advice for prisoners with financial problems, although we were told that a provider was being identified. More general financial assistance was provided: Catch 22 staff could signpost prisoners to telephone specialist advice services, Job Centre Plus provided advice and prisoners could open bank accounts.
- 4.25** In our survey, 30% of prisoners said they had housing worries when they arrived. More than 20% of prisoners were released without accommodation that would be sustained for at least three months. Julian House, a community organisation for prisoners from Devon, provided basic measures to help prisoners maintain tenancies and offered specialist advice on accommodation. It provided through-the-gate support and had links with a homeless outreach team to provide ongoing advice and support.
- 4.26** Limited counselling support was available for prisoners who disclosed abuse. The prison had also carried out some work with local police to support prisoners who had been trafficked.

Recommendation

- 4.27 Prisoners with finance, benefit and debt problems should have ready access to competent specialist support.** (Repeated recommendation 4.38)

Release planning

Expected outcomes:

The specific reintegration needs of individual prisoners are met through an individual multi-agency plan to maximise the likelihood of successful reintegration into the community.

- 4.28** Catch 22 resettlement workers saw all prisoners 12 weeks before their release, where feasible, to check their outstanding resettlement needs and make appropriate referrals. This was supported by keyworkers in some of the cases we examined. Before release, prisoners were given written information and contact details of support available in the community.
- 4.29** PACT (Prison Advice and Care Trust) provided a well-used through-the-gate service, with 272 referrals in the previous year. Referred prisoners were visited before their release to assess needs, and were met at the gate by PACT workers. Additional through-the-gate support was provided by Julian Housing and a community chaplaincy.
- 4.30** Funding had been secured to establish a 'departure lounge' where prisoners could have appointments for accommodation, benefits and other support before they left the prison,

which was a promising initiative. There was a regular exhibition of community resources, where prisoners could contact potential avenues of support on release.

- 4.31** Procedures on the day of release included an explanation of licence requirements, return of stored property and provision of fares to home areas. Prisoners could not change from prison clothing into civilian clothing in private. Instead they were required to change in view of officers, which was unnecessary. There was too little discharge clothing for prisoners who needed it, and no bags for their property.

Recommendations

- 4.32** Prisoners being released should not be required to change their clothes in view of staff.
- 4.33** There should be adequate discharge clothing for prisoners who need it, and a bag for possessions provided if required.

Section 5. Summary of recommendations and good practice

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

Main recommendation

To HMPPS and the governor

- 5.1** National and local managers should take concerted action to ensure that prisoners' living conditions are improved, and that cells falling below basic standards are not occupied. All prisoners should have supervised regular access to clean bedding and clothing. Staff should be proactive in their dealings with prisoners, including their response to cell call bells. (S39)

Main recommendations

To the governor

- 5.2** All aspects of the violence reduction strategy should be implemented. Supervision, by staff and by camera, should be effective in detecting and preventing bullying and violent behaviour. Engagement with prisoners to understand safety issues should be improved through consultation and targeted key work. There should be greater incentives for prisoners to behave well, and positive visible leadership should focus on creating a culture of optimism and encouragement. (S36)
- 5.3** All records of the use of force and authorising the use of the special cell should be completed accurately and in full. Immediate measures should be taken to ensure that all cameras, fixed and body-worn, are used effectively. Documentation and camera footage should be subject to vigorous management checks to identify issues and trends. This should inform actions to address the issues and reduce the number of restraint incidents. (S37)
- 5.4** Prisoners who are effectively in unregulated segregation should have adequate safeguards and managerial oversight. All prisoners segregated should have an adequate regime that safeguards their mental well-being. The underlying causes of poor or vulnerable behaviour that led to the segregation should be investigated and addressed. Reintegration plans should be thorough and not rely solely on a transfer out of the establishment. (S38)
- 5.5** Equality and diversity should be given higher priority. Procedures and work practices covering all aspects of equality and diversity should be improved to ensure that the needs of prisoners from each of the protected characteristics are understood and dealt with fairly. (S40)

Recommendations

Early days in custody

- 5.6** Prisoners should spend less than two hours in reception. (I.9)
- 5.7** Prisoners should be able to shower on their first night in custody, and be located in clean, well-prepared cells. (I.10)

- 5.8** Induction should start the day after arrival and be completed by all prisoners. (1.11)

Managing behaviour

- 5.9** Prompt, adequate support should be provided for victims of intimidation and violence. (1.21, repeated recommendation 1.21)
- 5.10** Targets for all prisoners on the basic level of the incentives and earned privileges (IEP) scheme should be individualised and should promote improvements in behaviour. (1.22, repeated recommendation 1.46)
- 5.11** There should be a creative focus on providing enhancements that prisoners aspire to achieve through good behaviour. (1.23)

Security

- 5.12** There should be a prison-wide approach to exploring and understanding the wider factors linked to drug taking, such as living conditions, boredom and a lack of meaningful activity. The strategy should incorporate actions to address these wider issues. (1.43)

Safeguarding

- 5.13** Prisoners who require constant observation should not be located in special accommodation. (1.50)

Staff-prisoner relationships

- 5.14** All prisoners should have good quality weekly meetings with their keyworker, and these should be fully recorded in electronic case notes. (2.4)

Daily life

- 5.15** Prisoners should not have to wait two weeks to receive their first shop order. (2.15, repeated recommendation 2.97)
- 5.16** Prisoners should be consulted regularly about the routines and facilities of the prison. (2.20, repeated recommendation 2.12)
- 5.17** The prison should ensure that applications are dealt with promptly and helpfully. (2.21)
- 5.18** Quality assurance procedures should be developed to improve investigation of and responses to complaints. (2.22)

Health, well-being and social care

- 5.19** Adverse incidents should be promptly reported and investigated, and lessons learned shared with the full health team. (2.49)
- 5.20** Information about health services and national health campaigns should be easily available in all required formats and languages. (2.54)
- 5.21** Prisoners should have easy and prompt access to the full range of smoking cessation support and barrier protection throughout their stay and on discharge, if required. (2.55)

- 5.22** Prisoners on all wings who have substance misuse problems should have access to all psychosocial interventions. (2.81)
- 5.23** Prisoners in shared cells should have secure storage for their medicines. (2.87)
- 5.24** Medicines should be administered at clinically appropriate times, and officers should supervise medication queues effectively to ensure privacy and reduce opportunities for diversion and bullying. (2.88)

Time out of cell

- 5.25** All prisoners should be unlocked for sufficient time to access regime services, undertake domestic activities fully and have a daily period of association. (3.10)
- 5.26** All prisoners should have access to at least one hour in the open air daily. (3.11, repeated recommendation, 3.5)
- 5.27** The gym showers should provide decent facilities for prisoners. (3.12)

Education, skills and work activities

- 5.28** College managers should develop the provision further so that prisoners can improve their skills in using English, mathematics and the use of information and communication technology to enhance the likelihood of successful resettlement. (3.20)
- 5.29** Foreign national prisoners should have access to suitable provision to improve their spoken English. (3.21)
- 5.30** Prison managers should improve the evaluation of the quality of training, learning and assessments in prison work, and ensure that the self-assessment report is accurate. (3.22)
- 5.31** All prison work should enable prisoners, including vulnerable prisoners, to develop useful vocational skills, improving their prospects of finding employment after release. (3.23)
- 5.32** Advice and guidance about courses should be improved to increase prisoners' chances of gaining employment after release, including a better use of the virtual campus for finding jobs. (3.24)
- 5.33** Instructors should use information about prisoners' existing skills to set them appropriately demanding work and targets for their development. (3.31)
- 5.34** Tutors and instructors should promote the values of fair treatment and respecting differences in their teaching and training sessions. (3.32)
- 5.35** Tutors and instructors should include tasks and activities in their teaching, training, and assessment that improve prisoners' skills in English and mathematics. (3.33)
- 5.36** Wing staff should encourage and motivate prisoners to improve their attendance and punctuality to lessons and prison work activities so that they can increase their chances of gaining employment after release. (3.38)
- 5.37** There should be effective measures to motivate prisoners to improve their English and mathematics skills. (3.39)

- 5.38** Tutors and instructors should ensure that all prisoners always follow appropriate health and safety procedures. (3.40)
- 5.39** Prisoners in prison work should be able to gain qualifications, and instructors should recognise and record accurately the skills that prisoners develop. (3.44)

Reducing risk, rehabilitation and progression

- 5.40** The prison should develop a needs analysis drawing on information about risk and prisoner need, and use this to inform the reducing reoffending action plan. (4.18)
- 5.41** Procedures to implement offender management in custody should ensure that their sentences and what will happen to newly sentenced prisoners are explained to them, that key worker contact is reliable and consistent, and that there is good liaison between offender supervisors and keyworkers based on agreed targets for progression and resettlement. (4.19)
- 5.42** The interdepartmental risk management team should consider all high-risk prisoners and those subject to multi-agency public protection arrangements on their arrival and in sufficient time before their release, identifying risk factors and targets for risk management. (4.20)
- 5.43** Reviews of prisoner categorisation should include the opportunity for prisoners to make representations about their risk level, and they should be informed of the decision and what they need to do to progress. (4.21)
- 5.44** Transfer of prisoners should be based on an OASys assessment of their risk and should support their progression. (4.22)

Interventions

- 5.45** Prisoners with finance, benefit and debt problems should have ready access to competent specialist support. (4.27, repeated recommendation 4.38)

Release planning

- 5.46** Prisoners being released should not be required to change their clothes in view of staff. (4.32)
- 5.47** There should be adequate discharge clothing for prisoners who need it, and a bag for possessions provided if required. (4.33)

Examples of good practice

- 5.48** The keyworker passport ensured keyworkers had an understanding of specialist areas of the prison to inform their work with prisoners. (2.5)
- 5.49** The dedicated, compassionate and skilled staff on the social care wing ensured that prisoners with social care needs had all their daily needs met, and that they received very good care and support in a therapeutic environment. (2.68)

Section 6. Appendices

Appendix I: Inspection team

| | |
|----------------------|---------------------------------------|
| Peter Clarke | Chief inspector |
| Deborah Butler | Team leader |
| Angela Johnson | Inspector |
| Angus Mulready-Jones | Inspector |
| Ian MacFadyen | Inspector |
| Gordon Riach | Inspector |
| Andy Rooke | Inspector |
| Tamara al Janabi | Researcher |
| Laura Green | Researcher |
| Charli Bradley | Researcher |
| Beth Wilson | Researcher |
| Majella Pearce | Lead health and social care inspector |
| Liz Walsh | Health and social care inspector |
| Nicola Carlisle | Pharmacist |
| Gary Turney | Care Quality Commission inspector |
| Aimee Everett | Care Quality Commission inspector |
| Shahram Safavi | Ofsted inspector |
| Kate Hill | Ofsted inspector |
| Allan Shaw | Ofsted inspector |
| Paddy Doyle | Offender management inspector |

Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided. The recommendations in the main body of the report are based on the fifth edition of Expectations, but those below are based on the fourth edition. Their order may therefore differ slightly from the main report.

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2016, prisoners spent long periods in courts cells and on vans before arriving at the prison. First night interviews were very good but some prisoners were located in poorly prepared cells. Too few prisoners felt safe on their first night. Levels of violence were high and many prisoners said that they felt unsafe. The levels of self-harm were high. There had been 10 self-inflicted deaths since the previous inspection and there was one suspected self-inflicted death shortly after the current inspection. The quality of assessment, care in custody and teamwork (ACCT) documentation was variable. Security responses were generally proportionate to the risks faced by the prison. Adjudication hearings were fair. Use of force and of the special cell were not properly recorded. The segregation unit was in poor condition but staff–prisoner relationships there were reasonably good. The substance misuse service was very good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendations

Prisoners should feel and be safe from bullying and victimisation. The violence reduction committee should meet regularly and analyse all investigations into violent incidents. Lessons from this analysis should inform the violence reduction strategy. (S42)

Not achieved

All paperwork recording the use of force and authorising the use of the special cell should be completed accurately and in full, and patterns and trends should be identified and acted on to reduce the number of such incidents. (S43)

Not achieved

Recommendations

Prisoners should be provided with adequate notice of their transfer. (I.5)

Not achieved

The prison should provide appropriate, dedicated first night accommodation, with clean, well-prepared cells. Prisoners should be kept occupied during their first night. (I.12)

Not achieved

All prisoners should be fully inducted into the prison. (I.13)

Not achieved

Prompt, adequate support should be provided for victims of intimidation and violence. (I.21)

Not achieved (recommendation repeated, I.21)

The location and vulnerability of young adults should be assessed. (I.22)

Not achieved

There should be a careful, well-documented assessment of risk before closing an assessment, care in custody and teamwork (ACCT) document, particularly at the first case review. (I.30)

Achieved

All prisoners in crisis, including those located on the vulnerable prisoner wing, should have access to an appropriate Listener suite. (I.31)

Not achieved

All intelligence-led searches should be carried out when a need is indicated. (I.42)

Achieved

Targets for all prisoners on the basic level of the incentives and earned privileges (IEP) scheme should be individualised and should promote improvements in behaviour. (I.46, repeated recommendation I.61)

Not achieved (recommendation repeated, I.22)

The segregation unit should be refurbished; all cells should be available for use, fully furnished and kept free of graffiti. (I.55)

Not achieved

Staffing of the segregation unit should be consistent, to support a regime that includes access to off-unit activities and daily access to time in the open air. (I.56)

Not achieved

Segregation unit staff should be trained in mental health awareness. (I.57, repeated recommendation I.80)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2016, the standard of cleanliness and maintenance of residential units varied greatly and too many cells were in a poor condition. Relationships between staff and prisoners were good. The strategic management of equality was underdeveloped and not enough was done to meet the needs of protected groups. Faith services were good. Complaints were responded to appropriately but some were late. We were not assured that the health service was being delivered safely and met patients' needs. Services for the many prisoners with mental health problems were good. The food provided was reasonably good. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

The commissioner and health care provider should rigorously govern health services to ensure that the services are safe and confidential. (S44)

Partially achieved

Recommendations

All cell windows should be permanent, fit-for-purpose and protect prisoners from the elements. (2.6)

Not achieved

All prisoners should have access to sufficient clean clothes and bedding. (2.7, repeated recommendation 2.8)

Not achieved

Electronic case-note entries should be made at least weekly, and identify any significant events affecting prisoners. (2.11)

Not achieved

Prisoners should be consulted regularly about the routines and facilities of the prison. (2.12)

Not achieved (recommendation repeated, 2.20)

The equality strategy should provide a detailed outline of how the needs of prisoners under each protected characteristic will be met, and outcomes for them should be monitored by the equality action team. Equality action team meetings should be held often enough to address the needs of the constantly changing population. (2.17)

Not achieved

The establishment should be provided with timely and relevant equality monitoring data. (2.18)

Achieved

Prisoners should be able to declare protected characteristics confidentially on arrival. (2.19)

Achieved

The needs of each protected group should be identified through regular consultation and met with the support of external community organisations where possible. (2.29)

Not achieved

Free telephone calls for foreign national prisoners should last for a set duration and be provided without the need to make a new request each month. (2.30)

Achieved

The prison should investigate why more prisoners with disabilities than other prisoners felt unsafe, and take action accordingly. (2.31)

Not achieved

Prisoners with disabilities located in the main prison should have sufficient reasonable adjustments to allow them to cope. (2.32)

Not achieved

Complaints should be routinely monitored for timeliness and the representation of prisoners from protected groups, and any significant findings investigated. (2.41)

Not achieved

Prisoners should know how to apply to borrow an 'access to justice' laptop. (2.44)

Achieved

The health service should have a regular programme of health promotion activities, coordinated with a whole-prison approach to health and well-being. (2.57)

Achieved

Prisoners should wait no longer than 72 hours for a secondary health assessment. (2.63)

Achieved

There should be sustained management effort to drive down the non-attendance rate. (2.64)

Achieved

There should be systematic care planning for, and monitoring of, prisoners with life-long conditions. (2.65)

Achieved

Storage arrangements for medicines should conform to the manufacturers' recommendations, and medicines should be labelled appropriately at all times. (2.72)

Achieved

Medicine in-possession risk assessments should be repeated as circumstances change, and in-cell storage for in-possession medications should be subject to checks. (2.73)

Partially achieved

Cleaning schedules and safety certifications of dental equipment should be up to date and monitored. (2.77)

Achieved

Prisoners' access to dentistry should be consistent, and clinic lists should be well managed. (2.78)

Achieved

The assessment and care of prisoners on the social care unit should be delivered in a timely fashion, by sufficient staff with the right competencies. (2.88)

Achieved

Dinner should always be served after 5pm. (2.93, repeated recommendation 2.102)

Achieved

Prisoners should not have to wait two weeks to receive their first shop order. (2.97, repeated recommendation 2.109)

Not achieved (recommendation repeated, 2.15)

There should be no administration charge for catalogue orders. (2.98)

Not achieved

Purposeful activity

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

At the last inspection, in 2016, prisoners spent too much time locked in their cells and therefore were not purposefully active. The management of learning and skills was good. The prison provided enough activity places for the population but they were not fully utilised and too many sessions were cancelled. Teaching, training and achievements were good. The library provision was good. The sports facilities were in need of refurbishment and too few prisoners were engaged in physical activity. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Recommendations

All prisoners should be unlocked for a sufficient amount of time to be able to access regime services, contact families and friends, fully undertake domestic activities and have a daily period of association. (3.4)

Not achieved

All prisoners should have access to at least one hour in the open air daily. (3.5)

Not achieved (recommendation repeated, 3.11)

Accreditations suitable for shorter vocational workshop courses should be introduced. (3.12)

Partially achieved

Attendance at workplaces should be maximised and the requirement for sentenced prisoners to attend enforced. (3.13)

Not achieved

Targets should be individualised and the skills that prisoners develop should be recognised and recorded. (3.22)

Partially achieved

The induction to the gym should be mandatory for all new prisoners. (3.33)

Not achieved

The gym floor, lighting in the administration area and the showers should be in good working order and fit for purpose. (3.34)

Not 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 2016, the strategic oversight of reducing reoffending was limited. The effectiveness of offender management was poor. The offender management unit and the community rehabilitation company did not always share relevant information. Public protection arrangements were mostly sound. Categorisation work was up to date but there was too little involvement by offender supervisors. Resettlement plans were generally detailed and completed on time. There was some good resettlement pathway work but not all resettlement needs were met. Outcomes for prisoners were not sufficiently good against this healthy prison test.

Main recommendation

A comprehensive reducing reoffending strategy should be underpinned by an up-to-date needs analysis and action plan. The offender management unit and community rehabilitation company should work closely together and share all relevant information. Offender supervisors should meet prisoners regularly, to help to reduce their risks of reoffending. (S45)

Partially achieved

Recommendations

The timeliness of release on home detention curfew should be monitored and appropriate action taken to release prisoners on time. (4.11, repeated recommendation 4.19).

Achieved

Multi-agency public protection arrangements (MAPPA) management levels should be confirmed at least six months before release, to enable the offender management unit to contribute fully to release plans. (4.16)

Not achieved

Category B sex offenders should be transferred promptly to more appropriate prisons, to help them to progress and engage with their sentence and risk management plans. (4.21)

Achieved

Resettlement plans should draw on information about the risk of harm and public protection. Progress against the plan should be shared with the offender supervisor regularly. (4.28)

Achieved

The prison and National Careers Service provider (Prospects) should make better use of the skills action plans, to provide prisoners with clearer, specific targets and goals to improve their employability prospects on release. (4.33)

No longer relevant

Prisoners with finance, benefit and debt problems should have ready access to competent specialist support. (4.38)

Not achieved (recommendation repeated, 4.27)

Prisoners should be encouraged to re-establish or maintain relationships with their children and families where appropriate. (4.43)

Partially achieved

The type and amount of provision to challenge attitudes, thinking and behaviour should be based on a comprehensive needs analysis. (4.46, repeated recommendation 4.57)

Not achieved

Appendix III: Photographs

Broken window



Pile of rubbish



Clothing in wire above college entrance



Appendix IV: Prison population profile

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

Population breakdown by:

| Status | 18–20 yr olds | 21 and over | % |
|-----------------------|---------------|-------------|---------------|
| Sentenced | 15 | 204 | 49.1% |
| Recall | 0 | 55 | 12.3% |
| Convicted unsentenced | 2 | 69 | 15.9% |
| Remand | 7 | 89 | 21.5% |
| Civil prisoners | 0 | 2 | 0.4% |
| Detainees | 0 | 3 | 0.7% |
| Total | 24 | 422 | 100.0% |

| Sentence | 18–20 yr olds | 21 and over | % |
|---|---------------|-------------|---------------|
| Unsentenced | 9 | 175 | 41.3% |
| Less than six months | 3 | 65 | 15.2% |
| Six months to less than 12 months | 1 | 12 | 2.9% |
| 12 months to less than 2 years | 3 | 30 | 7.4% |
| 2 years to less than 4 years | 5 | 59 | 14.4% |
| 4 years to less than 10 years | 3 | 48 | 11.4% |
| 10 years and over (not life) | 0 | 18 | 4.0% |
| ISPP (indeterminate sentence for public protection) | 0 | 7 | 1.6% |
| Life | 0 | 8 | 1.8% |
| Total | 24 | 422 | 100.0% |

| Age | Number of prisoners | % |
|-------------------------------|---------------------|---------------|
| Under 21 years | 24 | 5.4% |
| 21 years to 29 years | 143 | 32.1% |
| 30 years to 39 years | 142 | 31.8% |
| 40 years to 49 years | 79 | 17.7% |
| 50 years to 59 years | 42 | 9.4% |
| 60 years to 69 years | 11 | 2.5% |
| 70 plus years: maximum age=85 | 5 | 1.1% |
| Total | 446 | 100.0% |

| Nationality | 18–20 yr olds | 21 and over | % |
|-------------------|---------------|-------------|---------------|
| British | 21 | 386 | 91.3% |
| Foreign nationals | 3 | 36 | 8.7% |
| Total | 24 | 422 | 100.0% |

| Security category | 18–20 yr olds | 21 and over | % |
|---------------------------|---------------|-------------|---------------|
| Uncategorised unsentenced | 9 | 173 | 40.8% |
| Uncategorised sentenced | 15 | 16 | 7.0% |
| Category B | 0 | 27 | 6.1% |
| Category C | 0 | 203 | 45.5% |
| Category D | 0 | 3 | 0.7% |
| Total | 24 | 422 | 100.0% |

| Ethnicity | 18–20 yr olds | 21 and over | % |
|---------------------------|----------------------|--------------------|---------------|
| White | | | |
| British | 17 | 329 | 77.6% |
| Irish | 0 | 2 | 0.4% |
| Gypsy/Irish Traveller | 1 | 13 | 3.1% |
| Other white | 1 | 35 | 8.1% |
| Mixed | | | |
| White and black Caribbean | 1 | 4 | 1.1% |
| White and black African | 1 | 1 | 0.4% |
| White and Asian | 0 | 1 | 0.2% |
| Other mixed | 0 | 3 | 0.7% |
| Asian or Asian British | | | |
| Indian | 0 | 3 | 0.7% |
| Bangladeshi | 0 | 1 | 0.2% |
| Other Asian | 0 | 4 | 0.9% |
| Black or black British | | | |
| Caribbean | 0 | 9 | 2.0% |
| African | 0 | 9 | 2.0% |
| Other black | 3 | 5 | 1.8% |
| Other ethnic group | | | |
| Arab | 0 | 1 | 0.2% |
| Other ethnic group | 0 | 1 | 0.2% |
| Not stated | 0 | 1 | 0.2% |
| Total | 24 | 422 | 100.0% |

| Religion | 18–20 yr olds | 21 and over | % |
|-------------------------------|----------------------|--------------------|---------------|
| Church of England | 1 | 69 | 15.7% |
| Roman Catholic | 1 | 70 | 15.9% |
| Other Christian denominations | 3 | 60 | 14.1% |
| Muslim | 0 | 26 | 5.8% |
| Sikh | 0 | 2 | 0.4% |
| Buddhist | 1 | 4 | 1.1% |
| Other | 1 | 5 | 1.3% |
| No religion | 17 | 186 | 45.5% |
| Total | 24 | 422 | 100.0% |

| Other demographics | 18–20 yr olds | 21 and over | % |
|-----------------------------|----------------------|--------------------|-------------|
| Veteran (ex-armed services) | 0 | 6 | 1.3% |
| Total | 0 | 6 | 1.3% |

Sentenced prisoners only

| Length of stay | 18–20 yr olds | | 21 and over | |
|------------------------|----------------------|-------------|--------------------|--------------|
| | Number | % | Number | % |
| Less than 1 month | 5 | 1.1% | 110 | 24.7% |
| 1 month to 3 months | 2 | 0.4% | 69 | 15.5% |
| 3 months to six months | 2 | 0.4% | 33 | 7.4% |
| six months to 1 year | 6 | 1.3% | 21 | 4.7% |
| 1 year to 2 years | 0 | 0.0% | 11 | 2.5% |
| 2 years to 4 years | 0 | 0.0% | 1 | 0.2% |
| 4 years or more | 0 | 0.0% | 2 | 0.4% |
| Total | 15 | 3.4% | 247 | 55.4% |

Unsentenced prisoners only

| Length of stay | 18–20 yr olds | | 21 and over | |
|------------------------|----------------------|-------------|--------------------|--------------|
| | Number | % | Number | % |
| Less than 1 month | 3 | 0.7% | 61 | 13.7% |
| 1 month to 3 months | 2 | 0.4% | 56 | 12.6% |
| 3 months to six months | 3 | 0.7% | 40 | 9.0% |
| six months to 1 year | 1 | 0.2% | 16 | 3.6% |
| 1 year to 2 years | 0 | 0.0% | 2 | 0.4% |
| Total | 9 | 2.0% | 175 | 39.2% |

| Main offence | 18–20 yr olds | 21 and over | % |
|---------------------------------------|----------------------|--------------------|-------------|
| Violence against the person | 3 | 96 | 22.2% |
| Sexual offences | 2 | 48 | 11.2% |
| Burglary | 3 | 55 | 13.0% |
| Robbery | 1 | 39 | 9.0% |
| Theft and handling | 2 | 49 | 11.4% |
| Fraud and forgery | 0 | 6 | 1.3% |
| Drugs offences | 2 | 78 | 17.9% |
| Other offences | 2 | 49 | 11.4% |
| Civil offences | 0 | 5 | 1.0% |
| Offence not recorded /holding warrant | 0 | 6 | 1.3% |
| Total | 15 | 431 | 100% |

Appendix V: Urgent Notification documents



HM Chief Inspector of Prisons
PETER CLARKE CVO OBE QPM

HM INSPECTORATE OF PRISONS

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Date : 30th May 2018

The Rt Hon David Gauke MP
 Justice Secretary
 Ministry of Justice
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Dear Secretary of State

Urgent Notification : HM Prison Exeter

In accordance with the Protocol between HM Chief Inspector of Prisons and the Ministry of Justice dated 30 November 2017, I am writing to you to invoke the Urgent Notification (UN) process in respect of HM Prison Exeter.

An unannounced inspection of HM Prison Exeter took place between 14 and 24 May 2018. This inspection identified a number of significant concerns with regard to the treatment and conditions of prisoners. As required by the process, I am therefore writing to give you formal notification of my decision to invoke it. At this stage I shall also set out an indication of the evidence that underpins that decision, and the rationale for why I believe it is necessary. In addition, I attach a summary note which details all the main judgements that followed this inspection, and includes the priorities addressed in this letter. The summary note is drawn from a similar document provided to the Acting Governor at the end of the inspection last week. He has been informed of my intention to invoke the UN process. I shall, as usual, publish a full inspection report in due course.

The UN process requires me to summarise in this letter the judgements that have led to significant concerns, and to identify those issues that require improvement. A decision to invoke the UN process is determined by my judgement, informed by relevant factors during the inspection that, as set out in the Protocol, may include:

- Poor healthy prison test assessments (HMI Prisons' inspection methodology is outlined in the HMI Prisons Inspection Framework);

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-exeter

- The pattern of the healthy prison test judgements;
- Repeated poor assessments;
- The type of prison and the risks presented;
- The vulnerability of those detained;
- The failure to achieve recommendations;
- The Inspectorate's confidence in the prison's capacity for change and improvement.

The Protocol sets out that this letter will be placed in the public domain, and that the Secretary of State commits to respond publicly to the concerns raised within 28 calendar days. The response will explain how outcomes for prisoners in the institution will be improved in both the immediate and longer term.

The principal reasons I have decided to invoke the UN protocol in respect of HMP Exeter following this most recent inspection are because since the last full inspection in August 2016, safety in the prison has significantly worsened in many respects, and has attracted our lowest possible grading of 'poor'. There have been six self inflicted deaths, five of which were in 2017. Despite some creditable efforts to implement recommendations from the Prisons and Probation Ombudsman following those deaths, the overall level of safety at HMP Exeter is unequivocally poor.

Self harm during the past six months is running at a higher rate than in any similar prisons. It has risen by 40% since the last inspection. Assaults against both prisoners and staff are among the highest we have seen, and the use of force by staff is inadequately governed. Meanwhile, illicit drugs are rife in the prison, nearly a quarter of prisoners are testing positive, and all this is taking place in a prison where the living conditions for too many are unacceptably poor. During the inspection we saw many examples of a lack of care for vulnerable prisoners which, given the recent tragic events in the prison, were symptomatic of a lack of empathy and understanding of the factors that contribute to suicide and self harm.

The last inspection of HMP Exeter took place in August 2016. Outcomes for prisoners were found to be not sufficiently good in all four of our healthy prison tests. In terms of safety the report noted:

'Levels of violence were high and many prisoners said that they felt unsafe. The levels of self harm were high. There had been 10 self inflicted deaths since the previous inspection.'

At that time we made 14 recommendations in respect of safety, including two main recommendations. One was intended to address the fact that too many prisoners felt unsafe, and the other focused on the poor governance of the use of force. During this latest inspection we found that neither of these main recommendations had been achieved, and in fact the situation in both respects had deteriorated. Overall only three out of the 14 safety related recommendations had been fully achieved.

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Despite some improvements in monitoring violence, assaults on both staff and prisoners have significantly increased since the last inspection. Many were serious and the use of weapons was a common feature. Assaults against prisoners have gone up by 107% since the last inspection and the rate is now the highest we have seen in local prisons in the last three years. Meanwhile, assaults on staff have risen by 60%, and the number of fights has risen by 46%. During the inspection I was told by a senior member of staff that the reason the figures were so high was because all incidents were properly recorded. I asked whether recording practices had changed since the last inspection and was told that they had not.

A key part of HMI Prisons' methodology is a survey of prisoners, carried out using fully validated research methods. These survey results are used to inform judgements made by inspectors who also speak to prisoners and staff, observe behaviours and study data and other documents. Our survey suggests that at HMP Exeter the population have high levels of need on arrival at the prison. Fifty five percent told us they felt depressed on arrival, 24% felt suicidal and 38% had problems with drugs or alcohol.

In the context of a prison with significant levels of vulnerability among prisoners, and where suicide and self harm are at such high levels, it was shocking to see the way in which cell call bells were routinely ignored by staff. Given that the prison is now much better staffed, this was inexcusable. Inspectors saw bells going unanswered even when staff were doing nothing else. Even on the first night and induction landings, where prisoners are likely to be at their most vulnerable, bells were left unanswered for long periods. The prison's own recording system showed that it was commonplace for bells not to be answered within a reasonable time. The system was either not being reviewed by managers, or what it revealed was being ignored.

Care provided to some prisoners during their first night and early days was poor. Some vulnerable prisoners spent their early days on overspill wings where they received a poor regime, abuse from mainstream prisoners and a lack of support from peer workers and staff. During the inspection we found wing staff who were completely unaware that they had new prisoners located on their wings. We also saw a new prisoner located in a filthy cell with a blocked toilet, and he was only moved after intervention by an inspector. Another vulnerable prisoner who was assessed as being at a heightened risk of suicide and self harm, who should have been located on the dedicated first night unit, was instead placed on C1 wing, a subterranean unit that was in effect being used as a segregation unit, but without any of the usual safeguards. This prisoner spent three days on this unit before moving to the first night unit where inspectors saw him in a squalid cell without bedding, a television or glass in his window. None of this had been reported by staff who were required to check on him regularly as part of his care plan.

C1 wing was a major cause of concern for inspectors. There were no proper reintegration plans and no formal reviews. The regime was extremely limited, and record keeping was very poor. I asked to see the record of when one of the men had last had access to exercise, was assured that it would have been recorded, but found that it was not. During my visit the member of staff in the unit could not tell me when the prisoners had access to even basic entitlements such as showers or exercise.

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Meanwhile, in the designated segregation unit (A1) there was a special cell which was completely bare and contained no furniture, toilet or bed. Prison and regional managers had approved the use of this cell for those judged to be so vulnerable as to be in need of constant observation, and it had been so used 17 times in the previous six months. There was supposedly an inflatable bed available for use in this cell, but it could not be found by staff during the inspection, and inspectors saw video of a prisoner on constant watch being located in the cell without it.

Many cells at HMP Exeter were in a very poor state of repair, with many broken windows and observation panels, leaking lavatories and sinks, and poorly screened toilets. I saw some cells that were clearly not fit to be used, and should have been taken out of commission. Had it not been for the improvement in healthcare in the prison since the last inspection, it is highly likely that the poor living conditions experienced by many would have resulted in a grading of 'poor' for our Respect test.

The findings around safety and poor living conditions were compounded by the prevalence of illicit drugs in the prison. In our survey, a very high 60% of prisoners told us it was easy to get hold of drugs, and 14% said they had acquired a drug habit while in the prison. These responses were to an extent confirmed by the results of mandatory drug testing. There was a strong smell of drugs on some of the wings, and I saw prisoners who were clearly under the influence of drugs. There can be little doubt that the ready availability of drugs was contributing to the violence in the prison.

Given the vulnerability of many prisoners, the rise in violence of all kinds, the lack of care in too many cases, the prevalence of drugs and poor living conditions, it is perhaps unsurprising that despite our main concern and linked recommendation at the last inspection, far too many prisoners still felt unsafe. Sixty seven percent told us they had felt unsafe at Exeter at some time, a significant increase since the last inspection, and almost a third said they felt unsafe at the time of our inspection. Sixty percent said they had been bullied or victimised by other prisoners and 48% said they had been bullied or victimised by staff.

In light of the high levels of violence at HMP Exeter, it was perhaps to be expected that the use of force should have risen since the last inspection. It had, by some 39%. However, it is extraordinary that our main recommendation on the governance of the use of force has been largely ignored. Since 1 January 2018 there had been 187 recorded incidents of force being used, yet the prison's own database showed that more than 250 reports relating to those incidents had not been completed by staff, and those that had been completed were not routinely reviewed by managers. There had also been 39 planned uses of force between November 2017 and April 2018, but despite the formal requirement to film and review such incidents the prison was only able to provide us with film from three of them. Body-worn cameras were issued to many staff but these were not used in the majority of incidents and footage was not routinely reviewed.

At the last inspection I expressly mentioned and made allowance for the chronic staff shortages that HMP Exeter was experiencing at that time. The prison is now significantly

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better staffed, and there is now a more predictable regime available to many, though not all, prisoners. There have also been distinct improvements in healthcare and resettlement activity. This latter feature led us to improve the grading for Resettlement and Release Planning from 'not sufficiently good' to 'reasonably good'. This is a real achievement.

Nevertheless, it is of great concern that the response to our recommendations made in respect of safety issues at the last inspection has been so poor. Across the full breadth of the previous inspection the number of recommendations achieved was also disappointingly small. It must be emphasised that a low achievement rate is not in itself an indicator of performance in meeting HMI Prisons' Expectations. We make our judgements solely on the basis of the evidence gathered during the course of the inspection. However, a poor response to past inspections can and does give an indication as to how much confidence we can have that the issues raised by the Inspectorate will be satisfactorily addressed in the future, which is of course a relevant factor in coming to the decision to invoke the UN protocol. The senior management team that is currently in place at HMP Exeter is largely the same as at the last inspection in 2016. The failure to address the actual and perceived lack of safety, and the issues that contribute to both, is so serious that it has led me to have significant concerns about the treatment and conditions of prisoners at HMP Exeter and to the inevitable conclusion to invoke the UN protocol.

If there is any further information that would be of help to you in considering your response to this Urgent Notification, please do not hesitate to contact me.

Yours sincerely



PETER CLARKE

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Ministry
of Justice

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons
5th Floor, Clive House
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SW1H 9EX

The Right Honourable
David Gauke MP
Lord Chancellor & Secretary of
State for Justice

27 June 2018

Dear Peter

URGENT NOTIFICATION – HMP EXETER

Thank you for your letter dated 30th May 2018, setting out your concerns following the inspection at HMP Exeter and invoking the Urgent Notification protocol. As set out in the Protocol between you and my Department, I am committed to providing you with a response within 28 days of your letter.

I take very seriously the issues you raised and I am committed to ensuring they are addressed. I set out below an overview of the immediate actions we have prioritised to address the most serious and urgent matters. I also enclose an initial action plan providing more detail on the specific actions that have been completed or are underway.

Safety

HMP Exeter has been identified as a Prison of Concern for Safety and will receive bespoke support from the National Safety and Group Safety Teams to help address their safety issues. The establishment will put in place an updated safety strategy by the end of July, which will set out their priorities and supporting actions to address the drivers of violence and self-harm. This will take account of your findings and the review conducted previously by the internal Operational Systems and Assurance Group (OSAG), along with the findings from Prisons and Probation Ombudsman reports.

While there has been some good work to date to reduce the risk of self-harm and self-inflicted deaths, more can and will be done. This will include improvements in the experience of prisoners, particularly vulnerable prisoners in their first night and early days in prison custody. The establishment is strengthening assurance processes to ensure more timely responses to cell call bells, supported by the National Safety Team. An additional constant supervision cell will be provided for prisoners assessed to be an acute suicide risk. The constant supervision cell in the Care and Separation Unit will only be used for constant supervision when no facility is available on normal location, and a risk assessment determines that its use is safer for the prisoner than moving him to another prison.

Additionally, to help in addressing violence, the new violence case management model 'Challenge, Support and Intervention Plan' (CSIP) will be implemented, alongside the new key worker model, also aimed at reducing violence as part of wider efforts to improve safety.

We will also undertake, as a matter of urgency, a vulnerability assessment to identify immediate action to reduce drug supply and a full diagnostic process to identify action on supply and demand reduction, treatment and recovery, and continuity of care. Both these reviews will be led by local leadership and supported by the National Drugs Taskforce and other partners.

National control and restraint specialists and subject matter experts from within the Security, Order and Counter Terrorism (SOCT) Directorate in Her Majesty's Prison and Probation Service (HMPPS) will undertake a targeted review of specific use of force incidents within HMP Exeter. This will focus on

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governance, reporting procedures, techniques and practice, following which local management will introduce improvements in these areas.

In addition, OSAG will be completing the following audit activity:

- A bespoke audit looking at the use of force in HMP Exeter to be completed during the week commencing 25th June, following which local management will implement actions to address its findings.
- A further full safety audit to be carried out in the prison in December.

Living conditions

Support is being provided to the prison to improve prisoners' living conditions. The Governor and Government Facility Services Limited (GFSL) are collaborating to prioritise the repairs which must be completed to keep cells at an appropriate standard to ensure decency and kept in use via reactive maintenance. A manager and two seconded trades staff from GFSL, in addition to the resource at HMP Exeter, are being deployed to address the maintenance backlog. This work includes replacing broken windows, repairing observation panels and repairing leaking toilets, sinks and toilet privacy screens.

Senior managers are particularly focussed on getting the basics right. Cellular accommodation is being prioritised for new cell furniture which includes toilet seats and guard rails for beds. Faulty cell bells at the time of the inspection have been identified and repaired. Additionally, a system of regular accommodation inspections and daily checks will ensure that any cells not fit for purpose are taken out of use pending repairs.

Finally, the initial phase of the Care and Separation Unit refurbishment project is almost complete, and the remainder of the unit's refurbishment is scheduled to take place by the end of the 2018/19 business year. Further investment will be made to upgrade showers on residential units and in the gymnasium.

Progress against recommendations

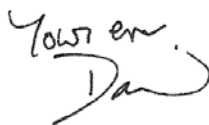
All of the above will be underpinned by robust assurance processes which will drive improvements locally.

In April 2018 changes were made to Prison Group structures, giving Prison Group Directors (PGDs) smaller commands that enable greater management grip and support to Governors.

HMP Exeter is one of the four prisons in the Devon and North Dorset Group. The PGD structure will support increased oversight in the delivery of the action plan responses to your recommendations within the full inspection report, when it is received in due course. Central oversight of this by the HMPPS Scrutiny Unit will also add an additional layer of assurance to this process.

In addition, approximately six months after your full report is published, OSAG will carry out a full and bespoke audit at HMP Exeter focusing on progress against your recommendations.

I hope that this letter reassures you that we are taking seriously the outcomes of the inspection and that appropriate action is being taken by the prison and the wider system over the coming weeks and months.



RT HON DAVID GAUKE MP



HM Prison &
Probation Service

HMP Exeter Urgent Notification: Initial Response Action Plan

Updated: 20th June 2018

| Priority Theme | No | Actions | Date Due |
|--|----|--|--|
| Safety: (Suicide and Self-harm, Violence, Drug Strategy and Use of Force) | 1 | Safety strategy The establishment will refresh their Safety Strategy, using the newly introduced National Safety Framework to address the drivers of both violence and self-harm. HMP Exeter has been identified as a Prison of Concern for Safety and will therefore receive enhanced, bespoke support from both the National and Group Prison Safety Teams in the development and implementation of the refreshed strategy. | End of July 2018 |
| | 2 | Reception and early days in custody (i) HMP Exeter will introduce and ensure adherence to a formal protocol that sets out the role and daily routines of C1 landing. The regime will be broadly equivalent to that provided to vulnerable prisoners (VPs) elsewhere in the establishment, and will include association, time in the open air, access to showers, access to the induction programme, and access to peer support. VP induction prisoners temporarily housed on C1 will be relocated to B wing as soon as space allows. (ii) The establishment will introduce improvements to its reception and early days processes, in light of advice from the national Prison Safety Team on best practice within local prisons in these areas, with particular reference to vulnerable prisoners. | End of June 2018 End of July 2018 |
| | 3 | Constant supervision (i) An additional constant supervision cell will be provided (cell A4-1), in accordance with the existing local proposal. (ii) HMP Exeter will then have two constant supervision cells on normal location. The constant supervision cell in the Care and Separation Unit will only be exceptionally considered for use if no constant supervision cell is available on normal location. In that event, a case review will consider whether the interests of the prisoner, and the effective management of suicide risk, are best served by the use of that facility or by an urgent transfer to a different prison where constant supervision can be provided on normal location. In all circumstances where it is used for this purpose, the cell will be properly furnished and these procedures will be supported by appropriate governance. | By 27 th July 2018 Immediate |



HM Prison &
Probation Service

HMP Exeter Urgent Notification: Initial Response Action Plan

| Priority Theme | No | Actions | Date Due |
|----------------|----|--|-----------------------|
| | 4 | <p>Cell call bells</p> <p>(i) HMP Exeter, with support from the National Prison Safety Team, will develop appropriate local management information to improve assurance of cell call bell response times. Local procedures will be reviewed to include the introduction of formal covert testing and a system to ensure that staff prioritise the response to cell bells for those prisoners subject to Assessment, Care in Custody and Teamwork (ACCT) procedures.</p> <p>(ii) The management of cell call bell responses will be incorporated into a new Custodial Manager performance and assurance role. Annual staff performance plans will be updated to require staff to respond to cell bells within five minutes wherever possible. Residential Supervisory Officers will each have a personal objective to ensure this is delivered and managers will have an objective to provide assurance that it is being delivered in practice.</p> | End of July 2018 |
| | 5 | <p>Violence reduction</p> <p>(i) The establishment will convene a violence summit to understand the views of prisoners and staff. Focus groups will be completed by the end of June 2018 and wider analytical work will follow to agree both short and long-term priorities to improve safety outcomes.</p> <p>(ii) The National Evidence Based Practice Team will support HMP Exeter to consider the perceived fairness of life at HMP Exeter for men and staff and identify opportunities to develop local practice to boost perceptions of procedural justice and legitimacy and thereby improve safety.</p> <p>(iii) The Challenge, Support and Intervention Plan (CSIP) case management of violent prisoners and those at raised risk of harming others will be introduced.</p> <p>(iv) The establishment, with the support of national expertise, will seek to reduce frustration and improve safety through the delivery of Prisoner Forums which will include a Prisoner Council, peer mentoring, and regular Lived Experience Surveys to provide a meaningful feedback loop.</p> | End of July 2018 |
| | | | End of August 2018 |
| | | | End of September 2018 |



HM Prison &
Probation Service

HMP Exeter Urgent Notification: Initial Response Action Plan

| Priority Theme | No | Actions | Date Due |
|----------------|----|--|---|
| | 6 | Safety audit The Operational System and Assurance Group (OSAG) will undertake a further review of safety at HMP Exeter, with a focus on identifying further actions related to violence reduction, suicide prevention, self-harm reduction and the follow up on recommendations from the Prisons and Probation Ombudsman. | End of December 2018 |
| | 7 | Drugs strategy (i) Representatives from the National Drugs Taskforce, supported by colleagues from the Security, Order and Counter Terrorism (SOCT) Directorate, will undertake a vulnerability assessment to identify and interrogate live routes of the conveyance of drugs, in order to assist the local management team to design counter measures. (ii) The National Drugs Taskforce will undertake a full, diagnostic review which will identify action on supply and demand reduction, treatment and recovery, and continuity of care. | End of July 2018 End of August 2018 |
| | 8 | Use of force (i) OSAG will conduct a bespoke audit of use of force at HMP Exeter, and local management will implement an action plan in response to its findings. (ii) National control and restraint specialists and subject experts from within SOCT will undertake a targeted review of specific use of force incidents within HMP Exeter. This will focus on governance, reporting procedures, techniques and practice, following which local management will introduce improvements in these areas. | End of June 2018 End of September 2018 |
| | | (iii) Strengthened assurance processes will be introduced locally to ensure that body worn video cameras are used to record planned and spontaneous incidents of use of force. | End of August 2018 |



HM Prison &
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HMP Exeter Urgent Notification: Initial Response Action Plan

| Priority Theme | No | Actions | Date Due |
|-------------------------------|----|---|-----------------------|
| Living Conditions and Decency | 9 | <p>General maintenance and repairs</p> <p>(i) The facilities management provider, Government Facility Services Limited (GFSL), will recruit nine additional staff to improve the delivery of general maintenance. While awaiting recruitment, additional interim staff resources will be deployed to address outstanding maintenance and ensure that reactive repairs are completed within the required timescales.</p> <p>This includes:</p> <ul style="list-style-type: none"> • Carrying out repairs on observation panels. • Undertaking repairs of broken windows. • Undertaking repairs of leaking toilets and sinks. <p>Alternative contractors will be commissioned if necessary to complete this work in a timely fashion.</p> | Immediate |
| | | (ii) In the medium term, the assurance and reporting processes within the contract will be improved. | End of December 2018 |
| | 10 | <p>Decency and cell conditions</p> <p>(i) Cell inspections and accommodation fabric checks will be used to identify rooms where there are significant safety or decency concerns, so that they can be taken out of use until remedial work has been carried out.</p> <p>(ii) The National Evidence Based Practice Team will support HMP Exeter to develop and implement an appropriate strategy to counter vandalism and encourage staff and prisoners to take pride in the areas where they live and work.</p> | Immediate |
| | | | End of September 2018 |



HM Prison &
Probation Service

HMP Exeter Urgent Notification: Initial Response Action Plan

| Priority Theme | No | Actions | Date Due |
|--|----|--|---|
| | 11 | Cell furniture and fittings (i) Local management will work with the Head of Public Sector Prison Industries to ensure the stocks of cell furniture are sufficient to address the necessary improvements. This will include: <ul style="list-style-type: none"> • Providing adequate cell furniture and fittings to replace damaged furniture. • Replacing guard rails. • Ensuring a sufficient stock of white wood furniture. | End of September 2018 End of September 2018 End of September 2018 |
| | | (ii) Local management will ensure the installation of furniture, either through the GF SL contract or, if they are unable to undertake this work in a timely fashion, through alternative contractors. | End of March 2019 |
| | 12 | Refurbishment The following projects will be undertaken: <ul style="list-style-type: none"> • Phase one of the refurbishment of the Care and Separation Unit to ensure it meets necessary standards of decency. • Phase two of the refurbishment of the Care and Separation Unit • The refurbishment of showers on C wing and the gymnasium during this financial year. • The upgrade of showers on all other living units during the next financial year. | End of June 2018 End of March 2019 End of March 2019 End of March 2020 |
| Operational Grip, Systems of Assurance | 13 | Audit and Assurance (i) HMPP are currently developing a new methodology to assess an establishment's progress against HMPP recommendations. HMPPS will engage with HMPP so that this methodology can be understood and routinely deployed by HMPPS through its own assurance processes, to improve the performance of prisons, including HMP Exeter. | End of September 2018 |



**HM Prison &
Probation Service**

HMP Exeter Urgent Notification: Initial Response Action Plan

| Priority Theme | No | Actions | Date Due |
|-----------------------|-----------|---|-----------------------|
| | | (i) A review of local assurance processes will take place. The Governor and Prison Group Director will ensure that improvements to HMP Exeter's assurance framework and governance structure are introduced. This will improve the oversight of priority systems and the delivery of the HMP action plan. | End of September 2018 |
| | | (ii) When HMIP publish their full report and recommendations, HMPPS will publish its responses to the recommendations in the form of an action plan. Following this, OSAg will undertake an assessment of progress against agreed HMIP recommendations at HMP Exeter. | End of March 2019 |

Appendix VI: Prisoner survey methodology and results

Prisoner survey methodology

A representative survey of prisoners is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HM Inspectorate of Prisons (HMI Prisons) researchers have developed a self-completion questionnaire to support HMI Prisons' *Expectations*. The questionnaire consists of structured questions covering the prisoner 'journey' from reception to release, together with demographic and background questions which enable us to compare responses from different sub-groups of the prisoner population. There are also three open questions at the end of the questionnaire which allow prisoners to express, in their own words, what they find most positive and negative about the prison.¹⁷

The questionnaire is available in 14 languages and can also be administered via a telephone translation service if necessary.

The questionnaire was revised during 2016–17, in consultation with both inspectors and prisoners. The current version has been in use since September 2017.

Sampling

On the day of the survey a stratified random sample is drawn by HMI Prisons researchers from a P-NOMIS prisoner population printout ordered by cell location. Using a robust statistical formula HMI Prisons researchers calculate the minimum sample size required to ensure that the survey findings can be generalised to the entire population of the establishment.¹⁸ In smaller establishments we may offer a questionnaire to the entire population.

Distributing and collecting questionnaires

HMI Prisons researchers distribute and collect the questionnaires in person. So that prisoners can give their informed consent to participate, the purpose of the survey is explained and assurances are given about confidentiality and anonymity.¹⁹ Prisoners are made aware that participation in the survey is voluntary; refusals are noted but not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

Survey response

At the time of the survey on 14 May, the prisoner population at HMP Exeter was 423. Using the sampling method described above, questionnaires were distributed to 130 prisoners. We received a total of 181 completed questionnaires, a response rate of 87%. This included one questionnaire completed via face-to-face interviews. Six prisoners declined to participate in the survey and 17 questionnaires were either not returned at all, or returned blank.

¹⁷ Qualitative analysis of these written comments is undertaken by HMI Prisons researchers and used by inspectors.

¹⁸ 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments).

¹⁹ For further information about the ethical principles which underpin our survey methodology, please see *Ethical principles for research activities* which can be downloaded from HMI Prisons' website <http://www.justiceinspectorates.gov.uk/hmiprison/about-our-inspections/>

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for HMP Exeter. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.²⁰ Missing responses have been excluded from all analyses.

Full survey results

A full breakdown of responses is provided for every question. Percentages have been rounded and therefore may not add up to 100%.

Responses from HMP Exeter 2018²¹ compared with those from other HMI Prisons surveys²²

- Survey responses from HMP Exeter in 2018 compared with survey responses from the most recent inspection at all other local prisons.
- Survey responses from HMP Exeter in 2018 compared with survey responses from other local prisons inspected since September 2017.
- Survey responses from HMP Exeter in 2018 compared with survey responses from HMP Exeter in 2016

Comparisons between different residential locations within HMP Exeter 2018

- Responses of prisoners on B wing compared with those from the rest of the establishment.
- Responses of prisoners on D wing compared with those from the rest of the establishment.

Comparisons between sub-populations of prisoners within HMP Exeter 2018²³

- Disabled prisoners' responses compared with those who do not have a disability.
- Responses of prisoners with mental health problems compared with those who do not have mental health problems.
- Responses of prisoners aged 50 and over compared with those under 50.
- Responses of prisoners aged 25 and under compared with those over 25.

Please note that we only carry out within-prison comparator analysis where there are sufficient responses in each sub-group.²⁴

In the comparator analyses, statistically significant differences are indicated by shading.²⁵ Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

²⁰ Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

²¹ Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

²² These analyses are carried out on summary data from all survey questions. As we have been using a new version of the questionnaire since September 2017, we do not yet have full comparator data for all questions.

²³ These analyses are carried out on summary data from selected survey questions only.

²⁴ A minimum of 10 responses which must also represent at least 10% of the total response.

²⁵ 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. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

Survey summary

Background information

| | | |
|------------|--|-----------|
| I.1 | What wing or house block are you currently living on? | |
| | A wing | 54 (34%) |
| | B wing | 29 (18%) |
| | C wing | 51 (32%) |
| | D wing | 22 (14%) |
| | Health and social care unit | 2 (1%) |
| I.2 | How old are you? | |
| | Under 21 | 7 (5%) |
| | 21 - 25 | 26 (17%) |
| | 26 - 29 | 24 (15%) |
| | 30 - 39 | 50 (32%) |
| | 40 - 49 | 25 (16%) |
| | 50 - 59 | 17 (11%) |
| | 60 - 69 | 6 (4%) |
| | 70 or over | 0 (0%) |
| I.3 | What is your ethnic group? | |
| | White - English/ Welsh/ Scottish/ Northern Irish/ British | 124 (81%) |
| | White - Irish | 3 (2%) |
| | White - Gypsy or Irish Traveller | 7 (5%) |
| | White - any other White background | 10 (7%) |
| | Mixed - White and Black Caribbean | 0 (0%) |
| | Mixed - White and Black African | 0 (0%) |
| | Mixed - White and Asian | 1 (1%) |
| | Mixed - any other Mixed ethnic background | 3 (2%) |
| | Asian/ Asian British - Indian | 0 (0%) |
| | Asian/ Asian British - Pakistani | 0 (0%) |
| | Asian/ Asian British - Bangladeshi | 0 (0%) |
| | Asian/ Asian British - Chinese | 0 (0%) |
| | Asian - any other Asian Background | 0 (0%) |
| | Black/ Black British - Caribbean | 4 (3%) |
| | Black/ Black British - African | 1 (1%) |
| | Black - any other Black/ African/ Caribbean background | 0 (0%) |
| | Arab | 0 (0%) |
| | Any other ethnic group | 0 (0%) |
| I.4 | How long have you been in this prison? | |
| | Less than 6 months | 117 (77%) |
| | 6 months or more | 35 (23%) |
| I.5 | Are you currently serving a sentence? | |
| | Yes | 76 (49%) |
| | Yes - on recall | 21 (13%) |
| | No - on remand or awaiting sentence | 57 (37%) |
| | No - immigration detainee | 2 (1%) |

1.6 How long is your sentence?

| | |
|--|----------|
| Less than 6 months | 32 (21%) |
| 6 months to less than 1 year | 8 (5%) |
| 1 year to less than 4 years | 32 (21%) |
| 4 years to less than 10 years | 12 (8%) |
| 10 years or more | 5 (3%) |
| IPP (indeterminate sentence for public protection) | 4 (3%) |
| Life | 2 (1%) |
| Not currently serving a sentence | 59 (38%) |

Arrival and reception**2.1 Were you given up-to-date information about this prison before you came here?**

| | |
|----------------|-----------|
| Yes | 33 (21%) |
| No | 114 (74%) |
| Don't remember | 8 (5%) |

2.2 When you arrived at this prison, how long did you spend in reception?

| | |
|-------------------|-----------|
| Less than 2 hours | 42 (27%) |
| 2 hours or more | 112 (72%) |
| Don't remember | 1 (1%) |

2.3 When you were searched in reception, was this done in a respectful way?

| | |
|----------------|-----------|
| Yes | 128 (83%) |
| No | 24 (15%) |
| Don't remember | 3 (2%) |

2.4 Overall, how were you treated in reception?

| | |
|----------------|----------|
| Very well | 27 (18%) |
| Quite well | 86 (57%) |
| Quite badly | 23 (15%) |
| Very badly | 13 (9%) |
| Don't remember | 3 (2%) |

2.5 When you first arrived here, did you have any of the following problems?

| | |
|---|----------|
| Problems getting phone numbers | 69 (45%) |
| Contacting family | 69 (45%) |
| Arranging care for children or other dependants | 7 (5%) |
| Contacting employers | 11 (7%) |
| Money worries | 40 (26%) |
| Housing worries | 46 (30%) |
| Feeling depressed | 84 (55%) |
| Feeling suicidal | 37 (24%) |
| Other mental health problems | 59 (38%) |
| Physical health problems | 38 (25%) |
| Drug or alcohol problems (e.g. withdrawal) | 59 (38%) |
| Problems getting medication | 62 (40%) |
| Needing protection from other prisoners | 18 (12%) |
| Lost or delayed property | 22 (14%) |
| Other problems | 26 (17%) |
| Did not have any problems | 15 (10%) |

2.6 Did staff help you to deal with these problems when you first arrived?

| | |
|--|----------|
| Yes | 39 (27%) |
| No | 89 (62%) |
| Did not have any problems when I first arrived | 15 (10%) |

First night and induction**3.1 Before you were locked up on your first night here, were you offered any of the following things?**

| | |
|---|-----------|
| Tobacco or nicotine replacement | 79 (52%) |
| Toiletries / other basic items | 67 (44%) |
| A shower | 12 (8%) |
| A free phone call | 44 (29%) |
| Something to eat | 113 (75%) |
| The chance to see someone from health care | 93 (62%) |
| The chance to talk to a Listener or Samaritans | 42 (28%) |
| Support from another prisoner (e.g. Insider or buddy) | 32 (21%) |
| Wasn't offered any of these things | 15 (10%) |

3.2 On your first night in this prison, how clean or dirty was your cell?

| | |
|----------------|----------|
| Very clean | 3 (2%) |
| Quite clean | 34 (22%) |
| Quite dirty | 44 (29%) |
| Very dirty | 68 (44%) |
| Don't remember | 4 (3%) |

3.3 Did you feel safe on your first night here?

| | |
|----------------|----------|
| Yes | 89 (58%) |
| No | 59 (38%) |
| Don't remember | 6 (4%) |

3.4 In your first few days here, did you get:

| | Yes | No | Don't remember |
|--------------------------------------|----------|-----------|----------------|
| Access to the prison shop / canteen? | 37 (25%) | 103 (71%) | 6 (4%) |
| Free PIN phone credit? | 88 (61%) | 51 (35%) | 6 (4%) |
| Numbers put on your PIN phone? | 51 (35%) | 91 (62%) | 4 (3%) |

3.5 Did your induction cover everything you needed to know about this prison?

| | |
|---------------------------|----------|
| Yes | 58 (39%) |
| No | 72 (49%) |
| Have not had an induction | 18 (12%) |

On the wing**4.1 Are you in a cell on your own?**

| | |
|---------------------------------------|-----------|
| Yes | 39 (25%) |
| No, I'm in a shared cell or dormitory | 115 (75%) |

4.2 Is your cell call bell normally answered within 5 minutes?

| | |
|-----------------------------|-----------|
| Yes | 28 (18%) |
| No | 113 (74%) |
| Don't know | 10 (7%) |
| Don't have a cell call bell | 2 (1%) |

| | | | | |
|------------|--|-----------|----------|------------|
| 4.3 | Please answer the following questions about the wing or house block you are currently living on: | | | |
| | | Yes | No | Don't know |
| | Do you normally have enough clean, suitable clothes for the week? | 61 (41%) | 84 (56%) | 5 (3%) |
| | Can you shower every day? | 124 (82%) | 28 (18%) | 0 (0%) |
| | Do you have clean sheets every week? | 72 (49%) | 71 (48%) | 5 (3%) |
| | Do you get cell cleaning materials every week? | 71 (48%) | 74 (50%) | 4 (3%) |
| | Is it normally quiet enough for you to relax or sleep at night? | 80 (56%) | 60 (42%) | 3 (2%) |
| | Can you get your stored property if you need it? | 43 (29%) | 75 (51%) | 30 (20%) |
| 4.4 | Normally, how clean or dirty are the communal / shared areas of your wing or house block (landings, stairs, wing showers etc.)? | | | |
| | Very clean | | | 8 (5%) |
| | Quite clean | | | 59 (39%) |
| | Quite dirty | | | 56 (37%) |
| | Very dirty | | | 28 (19%) |

Food and canteen

| | | | |
|------------|---|--|----------|
| 5.1 | What is the quality of food like in this prison? | | |
| | Very good | | 4 (3%) |
| | Quite good | | 56 (37%) |
| | Quite bad | | 51 (34%) |
| | Very bad | | 40 (26%) |
| 5.2 | Do you get enough to eat at mealtimes? | | |
| | Always | | 20 (13%) |
| | Most of the time | | 31 (20%) |
| | Some of the time | | 64 (42%) |
| | Never | | 38 (25%) |
| 5.3 | Does the shop / canteen sell the things that you need? | | |
| | Yes | | 93 (62%) |
| | No | | 54 (36%) |
| | Don't know | | 3 (2%) |

Relationships with staff

| | | | |
|------------|--|--|-----------|
| 6.1 | Do most staff here treat you with respect? | | |
| | Yes | | 105 (70%) |
| | No | | 45 (30%) |
| 6.2 | Are there any staff here you could turn to if you had a problem? | | |
| | Yes | | 112 (75%) |
| | No | | 37 (25%) |
| 6.3 | In the last week, has any member of staff talked to you about how you are getting on? | | |
| | Yes | | 66 (43%) |
| | No | | 87 (57%) |

| | | |
|------------|--|----------|
| 6.4 | How helpful is your personal or named officer? | |
| | Very helpful | 25 (17%) |
| | Quite helpful | 42 (29%) |
| | Not very helpful | 11 (8%) |
| | Not at all helpful | 13 (9%) |
| | Don't know | 21 (15%) |
| | Don't have a personal / named officer | 31 (22%) |
| 6.5 | How often do you see prison governors, directors or senior managers talking to prisoners? | |
| | Regularly | 16 (11%) |
| | Sometimes | 30 (20%) |
| | Hardly ever | 95 (64%) |
| | Don't know | 8 (5%) |
| 6.6 | Do you feel that you are treated as an individual in this prison? | |
| | Yes | 72 (48%) |
| | No | 78 (52%) |
| 6.7 | Are prisoners here consulted about things like food, canteen, health care or wing issues? | |
| | Yes, and things sometimes change | 26 (17%) |
| | Yes, but things don't change | 36 (24%) |
| | No | 60 (40%) |
| | Don't know | 29 (19%) |

Faith

| | | |
|------------|---|----------|
| 7.1 | What is your religion? | |
| | No religion | 63 (42%) |
| | Christian (including Church of England, Catholic, Protestant and all other Christian denominations) | 78 (52%) |
| | Buddhist | 4 (3%) |
| | Hindu | 0 (0%) |
| | Jewish | 1 (1%) |
| | Muslim | 2 (1%) |
| | Sikh | 0 (0%) |
| | Other | 3 (2%) |
| 7.2 | Are your religious beliefs respected here? | |
| | Yes | 66 (44%) |
| | No | 10 (7%) |
| | Don't know | 11 (7%) |
| | Not applicable (no religion) | 63 (42%) |
| 7.3 | Are you able to speak to a chaplain of your faith in private, if you want to? | |
| | Yes | 69 (45%) |
| | No | 6 (4%) |
| | Don't know | 17 (11%) |
| | Not applicable (no religion) | 63 (41%) |
| 7.4 | Are you able to attend religious services, if you want to? | |
| | Yes | 85 (55%) |
| | No | 5 (3%) |
| | Don't know | 2 (1%) |
| | Not applicable (no religion) | 63 (41%) |

Contact with family and friends

| | | |
|------------|---|-----------|
| 8.1 | Have staff here encouraged you to keep in touch with your family / friends? | |
| | Yes | 46 (31%) |
| | No | 104 (69%) |
| 8.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | |
| | Yes | 64 (42%) |
| | No | 89 (58%) |
| 8.3 | Are you able to use a phone every day (if you have credit)? | |
| | Yes | 145 (94%) |
| | No | 10 (6%) |
| 8.4 | How easy or difficult is it for your family and friends to get here? | |
| | Very easy | 8 (5%) |
| | Quite easy | 61 (40%) |
| | Quite difficult | 31 (20%) |
| | Very difficult | 37 (24%) |
| | Don't know | 16 (10%) |
| 8.5 | How often do you have visits from family or friends? | |
| | More than once a week | 4 (3%) |
| | About once a week | 16 (11%) |
| | Less than once a week | 62 (41%) |
| | Not applicable (don't get visits) | 69 (46%) |
| 8.6 | Do visits usually start and finish on time? | |
| | Yes | 42 (57%) |
| | No | 32 (43%) |
| 8.7 | Are your visitors usually treated respectfully by staff? | |
| | Yes | 57 (76%) |
| | No | 18 (24%) |

Time out of cell

| | | |
|------------|--|----------|
| 9.1 | Do you know what the unlock and lock-up times are supposed to be here (or roll check times if you are in an open prison)? | |
| | Yes, and these times are usually kept to | 78 (51%) |
| | Yes, but these times are not usually kept to | 45 (29%) |
| | No | 30 (20%) |
| 9.2 | How long do you usually spend out of your cell on a typical weekday (including time spent at education, work etc.)? | |
| | Less than 2 hours | 46 (30%) |
| | 2 to 6 hours | 72 (48%) |
| | 6 to 10 hours | 12 (8%) |
| | 10 hours or more | 10 (7%) |
| | Don't know | 11 (7%) |

| | | |
|------------|---|-----------|
| 9.3 | How long do you usually spend out of your cell on a typical Saturday or Sunday? | |
| | Less than 2 hours | 65 (42%) |
| | 2 to 6 hours | 62 (41%) |
| | 6 to 10 hours | 8 (5%) |
| | 10 hours or more | 8 (5%) |
| | Don't know | 10 (7%) |
| 9.4 | How many days in a typical week do you have time to do domestics (shower, clean cell, use the wing phones etc.)? | |
| | None | 6 (4%) |
| | 1 or 2 | 25 (16%) |
| | 3 to 5 | 47 (31%) |
| | More than 5 | 59 (38%) |
| | Don't know | 17 (11%) |
| 9.5 | How many days in a typical week do you get association, if you want it? | |
| | None | 6 (4%) |
| | 1 or 2 | 45 (30%) |
| | 3 to 5 | 53 (35%) |
| | More than 5 | 35 (23%) |
| | Don't know | 13 (9%) |
| 9.6 | How many days in a typical week could you go outside for exercise, if you wanted to? | |
| | None | 3 (2%) |
| | 1 or 2 | 13 (9%) |
| | 3 to 5 | 25 (17%) |
| | More than 5 | 103 (68%) |
| | Don't know | 7 (5%) |
| 9.7 | Typically, how often do you go to the gym? | |
| | Twice a week or more | 54 (36%) |
| | About once a week | 23 (15%) |
| | Less than once a week | 13 (9%) |
| | Never | 59 (40%) |
| 9.8 | Typically, how often do you go to the library? | |
| | Twice a week or more | 21 (14%) |
| | About once a week | 60 (40%) |
| | Less than once a week | 34 (23%) |
| | Never | 35 (23%) |
| 9.9 | Does the library have a wide enough range of materials to meet your needs? | |
| | Yes | 76 (54%) |
| | No | 31 (22%) |
| | Don't use the library | 35 (25%) |

Applications, complaints and legal rights

| | | |
|-------------|---|-----------|
| 10.1 | Is it easy for you to make an application? | |
| | Yes | 116 (77%) |
| | No | 28 (19%) |
| | Don't know | 7 (5%) |

| | | | | | |
|------|--|----------|-----------|---------------------------|-----------------|
| 10.2 | If you have made any applications here, please answer the questions below: | | | | |
| | | Yes | No | Not made any applications | |
| | Are applications usually dealt with fairly? | 78 (57%) | 52 (38%) | 8 (6%) | |
| | Are applications usually dealt with within 7 days? | 70 (50%) | 61 (44%) | 8 (6%) | |
| 10.3 | Is it easy for you to make a complaint? | | | | |
| | Yes | | | 79 (52%) | |
| | No | | | 41 (27%) | |
| | Don't know | | | 31 (21%) | |
| 10.4 | If you have made any complaints here, please answer the questions below: | | | | |
| | | Yes | No | Not made any complaints | |
| | Are complaints usually dealt with fairly? | 20 (14%) | 53 (38%) | 66 (47%) | |
| | Are complaints usually dealt with within 7 days? | 16 (12%) | 54 (40%) | 66 (49%) | |
| 10.5 | Have you ever been prevented from making a complaint here when you wanted to? | | | | |
| | Yes | | | 36 (25%) | |
| | No | | | 64 (44%) | |
| | Not wanted to make a complaint | | | 45 (31%) | |
| 10.6 | In this prison, is it easy or difficult for you to... | | | | |
| | | Easy | Difficult | Don't know | Don't need this |
| | Communicate with your solicitor or legal representative? | 54 (35%) | 46 (30%) | 36 (24%) | 17 (11%) |
| | Attend legal visits? | 83 (56%) | 17 (11%) | 31 (21%) | 17 (11%) |
| | Get bail information? | 21 (14%) | 44 (30%) | 49 (34%) | 31 (21%) |
| | | | | | |
| 10.7 | Have staff here ever opened letters from your solicitor or legal representative when you were not present? | | | | |
| | Yes | | | 60 (40%) | |
| | No | | | 71 (47%) | |
| | Not had any legal letters | | | 20 (13%) | |

Health care

| | | | | | | |
|-------------|---|-----------|------------|-----------------|----------------|------------|
| I1.1 | How easy or difficult is it to see the following people? | Very easy | Quite easy | Quite difficult | Very difficult | Don't know |
| | | | | | | |
| | Doctor | 8 (5%) | 42 (27%) | 53 (35%) | 39 (25%) | 11 (7%) |
| | Nurse | 16 (11%) | 68 (45%) | 33 (22%) | 24 (16%) | 9 (6%) |
| | Dentist | 4 (3%) | 20 (13%) | 35 (23%) | 59 (39%) | 32 (21%) |
| | Mental health workers | 12 (8%) | 37 (25%) | 33 (22%) | 30 (20%) | 36 (24%) |

| | | | | | | |
|--------------|--|-----------|------------|-----------|----------|------------|
| I 1.2 | What do you think of the quality of the health service from the following people? | | | | | |
| | | Very good | Quite good | Quite bad | Very bad | Don't know |
| | Doctor | 26 (17%) | 58 (38%) | 18 (12%) | 29 (19%) | 20 (13%) |
| | Nurse | 31 (21%) | 55 (37%) | 20 (13%) | 25 (17%) | 18 (12%) |
| | Dentist | 21 (14%) | 30 (20%) | 18 (12%) | 17 (12%) | 61 (41%) |
| | Mental health workers | 22 (15%) | 37 (25%) | 19 (13%) | 20 (14%) | 48 (33%) |
| I 1.3 | Do you have any mental health problems? | | | | | |
| | Yes | | | | | 89 (59%) |
| | No | | | | | 62 (41%) |
| I 1.4 | Have you been helped with your mental health problems in this prison? | | | | | |
| | Yes | | | | | 43 (28%) |
| | No | | | | | 46 (30%) |
| | Don't have any mental health problems | | | | | 62 (41%) |
| I 1.5 | What do you think of the overall quality of the health services here? | | | | | |
| | Very good | | | | | 16 (11%) |
| | Quite good | | | | | 53 (35%) |
| | Quite bad | | | | | 40 (26%) |
| | Very bad | | | | | 31 (21%) |
| | Don't know | | | | | 11 (7%) |

Other support needs

| | | | | | | |
|--------------|---|--|--|--|--|----------|
| I 2.1 | Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)? | | | | | |
| | Yes | | | | | 68 (45%) |
| | No | | | | | 83 (55%) |
| I 2.2 | If you have a disability, are you getting the support you need? | | | | | |
| | Yes | | | | | 20 (14%) |
| | No | | | | | 45 (30%) |
| | Don't have a disability | | | | | 83 (56%) |
| I 2.3 | Have you been on an ACCT in this prison? | | | | | |
| | Yes | | | | | 57 (38%) |
| | No | | | | | 93 (62%) |
| I 2.4 | If you have been on an ACCT in this prison, did you feel cared for by staff? | | | | | |
| | Yes | | | | | 30 (20%) |
| | No | | | | | 25 (17%) |
| | Have not been on an ACCT in this prison | | | | | 93 (63%) |
| I 2.5 | How easy or difficult is it for you to speak to a Listener, if you need to? | | | | | |
| | Very easy | | | | | 39 (26%) |
| | Quite easy | | | | | 48 (32%) |
| | Quite difficult | | | | | 9 (6%) |
| | Very difficult | | | | | 8 (5%) |
| | Don't know | | | | | 46 (30%) |
| | No Listeners at this prison | | | | | 2 (1%) |

Alcohol and drugs

| | | |
|-------------|---|-----------|
| 13.1 | Did you have an alcohol problem when you came into this prison? | |
| | Yes | 47 (31%) |
| | No | 104 (69%) |
| 13.2 | Have you been helped with your alcohol problem in this prison? | |
| | Yes | 29 (20%) |
| | No | 13 (9%) |
| | Did not / do not have an alcohol problem | 104 (71%) |
| 13.3 | Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)? | |
| | Yes | 73 (48%) |
| | No | 79 (52%) |
| 13.4 | Have you developed a problem with illicit drugs since you have been in this prison? | |
| | Yes | 21 (14%) |
| | No | 130 (86%) |
| 13.5 | Have you developed a problem with taking medication not prescribed to you since you have been in this prison? | |
| | Yes | 20 (13%) |
| | No | 131 (87%) |
| 13.6 | Have you been helped with your drug problem in this prison (including illicit drugs and medication not prescribed to you)? | |
| | Yes | 44 (30%) |
| | No | 32 (22%) |
| | Did not / do not have a drug problem | 72 (49%) |
| 13.7 | Is it easy or difficult to get illicit drugs in this prison? | |
| | Very easy | 65 (43%) |
| | Quite easy | 25 (17%) |
| | Quite difficult | 9 (6%) |
| | Very difficult | 3 (2%) |
| | Don't know | 49 (32%) |
| 13.8 | Is it easy or difficult to get alcohol in this prison? | |
| | Very easy | 30 (20%) |
| | Quite easy | 27 (18%) |
| | Quite difficult | 13 (9%) |
| | Very difficult | 11 (7%) |
| | Don't know | 71 (47%) |

Safety

| | | |
|-------------|--|-----------|
| 14.1 | Have you ever felt unsafe here? | |
| | Yes | 103 (67%) |
| | No | 50 (33%) |
| 14.2 | Do you feel unsafe now? | |
| | Yes | 44 (30%) |
| | No | 103 (70%) |

| | | |
|-------------|--|----------|
| I4.3 | Have you experienced any of the following types of bullying / victimisation from other prisoners here? (Please tick all that apply to you.) | |
| | Verbal abuse | 70 (49%) |
| | Threats or intimidation | 55 (38%) |
| | Physical assault | 40 (28%) |
| | Sexual assault | 6 (4%) |
| | Theft of canteen or property | 61 (42%) |
| | Other bullying / victimisation | 35 (24%) |
| | Not experienced any of these from prisoners here | 57 (40%) |
| I4.4 | If you were being bullied / victimised by other prisoners here, would you report it? | |
| | Yes | 47 (32%) |
| | No | 98 (68%) |
| I4.5 | Have you experienced any of the following types of bullying / victimisation from staff here? (Please tick all that apply to you.) | |
| | Verbal abuse | 56 (38%) |
| | Threats or intimidation | 42 (29%) |
| | Physical assault | 22 (15%) |
| | Sexual assault | 2 (1%) |
| | Theft of canteen or property | 11 (7%) |
| | Other bullying / victimisation | 34 (23%) |
| | Not experienced any of these from staff here | 77 (52%) |
| I4.6 | If you were being bullied / victimised by staff here, would you report it? | |
| | Yes | 62 (43%) |
| | No | 82 (57%) |

Behaviour management

| | | |
|-------------|---|-----------|
| I5.1 | Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? | |
| | Yes | 71 (48%) |
| | No | 53 (36%) |
| | Don't know what the incentives / rewards are | 24 (16%) |
| I5.2 | Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison? | |
| | Yes | 54 (36%) |
| | No | 50 (34%) |
| | Don't know | 28 (19%) |
| | Don't know what this is | 17 (11%) |
| I5.3 | Have you been physically restrained by staff in this prison in the last 6 months? | |
| | Yes | 25 (17%) |
| | No | 125 (83%) |
| I5.4 | If you have been restrained by staff in this prison in the last 6 months, did anyone come and talk to you about it afterwards? | |
| | Yes | 4 (3%) |
| | No | 20 (13%) |
| | Don't remember | 1 (1%) |
| | Not been restrained here in last 6 months | 125 (83%) |

| | | |
|-------------|---|-----------|
| 15.5 | Have you spent one or more nights in the segregation unit in this prison in the last 6 months? | |
| | Yes | 11 (7%) |
| | No | 136 (93%) |

15.6 If you have spent one or more nights in the segregation unit in this prison in the last 6 months please answer the questions below:

| | Yes | No |
|--|---------|---------|
| Were you treated well by segregation staff? | 5 (45%) | 6 (55%) |
| Could you shower every day? | 5 (45%) | 6 (55%) |
| Could you go outside for exercise every day? | 3 (30%) | 7 (70%) |
| Could you use the phone every day (if you had credit)? | 3 (33%) | 6 (67%) |

Education, skills and work

16.1 Is it easy or difficult to get into the following activities in this prison?

| | Easy | Difficult | Don't know | Not available here |
|--------------------------------------|----------|-----------|------------|--------------------|
| Education | 81 (57%) | 35 (24%) | 26 (18%) | 1 (1%) |
| Vocational or skills training | 46 (33%) | 42 (30%) | 47 (34%) | 3 (2%) |
| Prison job | 57 (40%) | 51 (36%) | 34 (24%) | 1 (1%) |
| Voluntary work outside of the prison | 5 (4%) | 32 (23%) | 58 (42%) | 43 (31%) |
| Paid work outside of the prison | 6 (4%) | 29 (21%) | 58 (42%) | 46 (33%) |

16.2 If you have done any of these activities while in this prison, do you think they will help you on release?

| | Yes, will help | No, won't help | Not done this |
|--------------------------------------|----------------|----------------|---------------|
| Education | 68 (49%) | 40 (29%) | 30 (22%) |
| Vocational or skills training | 41 (32%) | 40 (31%) | 46 (36%) |
| Prison job | 38 (28%) | 62 (46%) | 34 (25%) |
| Voluntary work outside of the prison | 22 (17%) | 25 (20%) | 81 (63%) |
| Paid work outside of the prison | 26 (20%) | 19 (15%) | 85 (65%) |

16.3 Do staff encourage you to attend education, training or work?

| | |
|---|----------|
| Yes | 62 (43%) |
| No | 72 (50%) |
| Not applicable (e.g. if you are retired, sick or on remand) | 9 (6%) |

Planning and progression

17.1 Do you have a custody plan? (This may be called a sentence plan or resettlement plan.)

| | |
|-----|-----------|
| Yes | 39 (27%) |
| No | 105 (73%) |

17.2 Do you understand what you need to do to achieve the objectives or targets in your custody plan?

| | |
|--|----------|
| Yes | 33 (85%) |
| No | 5 (13%) |
| Don't know what my objectives or targets are | 1 (3%) |

17.3 Are staff here supporting you to achieve your objectives or targets?

| | |
|--|----------|
| Yes | 22 (61%) |
| No | 13 (36%) |
| Don't know what my objectives or targets are | 1 (3%) |

17.4 If you have done any of the following things in this prison, did they help you to achieve your objectives or targets?

| | Yes, this helped | No, this didn't help | Not done /don't know |
|---------------------------------|------------------|----------------------|----------------------|
| Offending behaviour programmes | 12 (32%) | 4 (11%) | 21 (57%) |
| Other programmes | 16 (44%) | 2 (6%) | 18 (50%) |
| One to one work | 16 (46%) | 1 (3%) | 18 (51%) |
| Being on a specialist unit | 5 (15%) | 1 (3%) | 28 (82%) |
| ROTL - day or overnight release | 2 (6%) | 1 (3%) | 31 (91%) |

Preparation for release

18.1 Do you expect to be released in the next 3 months?

| | |
|------------|----------|
| Yes | 52 (35%) |
| No | 65 (44%) |
| Don't know | 31 (21%) |

18.2 How close is this prison to your home area or intended release address?

| | |
|------------|----------|
| Very near | 4 (8%) |
| Quite near | 25 (49%) |
| Quite far | 14 (27%) |
| Very far | 8 (16%) |

18.3 Is anybody helping you to prepare for your release (e.g. a home probation officer, responsible officer, case worker)?

| | |
|-----|----------|
| Yes | 28 (55%) |
| No | 23 (45%) |

18.4 Are you getting help to sort out the following things for when you are released?

| | Yes, I'm getting help with this | No, but I need help with this | No, and I don't need help with this |
|--|---------------------------------|-------------------------------|-------------------------------------|
| Finding accommodation | 13 (25%) | 20 (39%) | 18 (35%) |
| Getting employment | 6 (12%) | 23 (45%) | 22 (43%) |
| Setting up education or training | 5 (10%) | 24 (49%) | 20 (41%) |
| Arranging benefits | 9 (18%) | 23 (46%) | 18 (36%) |
| Sorting out finances | 5 (10%) | 23 (45%) | 23 (45%) |
| Support for drug or alcohol problems | 15 (31%) | 12 (24%) | 22 (45%) |
| Health / mental health support | 6 (12%) | 26 (52%) | 18 (36%) |
| Social care support | 4 (8%) | 20 (40%) | 26 (52%) |
| Getting back in touch with family or friends | 5 (10%) | 15 (31%) | 29 (59%) |

More about you

19.1 Do you have children under the age of 18?

| | |
|-----|----------|
| Yes | 76 (52%) |
| No | 70 (48%) |

19.2 Are you a UK / British citizen?

| | |
|-----|-----------|
| Yes | 138 (95%) |
| No | 8 (5%) |

19.3 Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?

| | |
|-----|-----------|
| Yes | 13 (9%) |
| No | 131 (91%) |

| | | |
|-------------|---|-----------|
| 19.4 | Have you ever been in the armed services (e.g. army, navy, air force)? | |
| | Yes | 12 (8%) |
| | No | 135 (92%) |
| 19.5 | What is your gender? | |
| | Male | 145 (99%) |
| | Female | 0 (0%) |
| | Non-binary | 0 (0%) |
| | Other | 2 (1%) |
| 19.6 | How would you describe your sexual orientation? | |
| | Straight / heterosexual | 139 (96%) |
| | Gay / lesbian / homosexual | 3 (2%) |
| | Bisexual | 3 (2%) |
| | Other | 0 (0%) |
| 19.7 | Do you identify as transgender or transsexual? | |
| | Yes | 1 (1%) |
| | No | 142 (99%) |

Final questions about this prison

| | | |
|-------------|--|----------|
| 20.1 | Do you think your experiences in this prison have made you more or less likely to offend in the future? | |
| | More likely to offend | 22 (16%) |
| | Less likely to offend | 60 (44%) |
| | Made no difference | 55 (40%) |

HMP Exeter 2018

Survey responses compared with those from other HMIP surveys of local prisons and with those from the previous survey

In this table summary statistics from HMP Exeter 2018 are compared with the following HMIP survey data:

- Summary statistics from the most recent surveys of all other local prisons (33 prisons). Please note that we do not have comparable data for the new questions introduced in September 2017.
- Summary statistics from surveys of local prisons conducted since the introduction of the new questionnaire in September 2017 (10 prisons). Please note that this does not include all local prisons.
- Summary statistics from HMP Exeter in 2018 are compared with those from HMP Exeter in 2016. Please note that we do not have comparable data for the new questions introduced in September 2017.

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
| | Green shading shows results that are significantly more positive than the comparator |
| | Blue shading shows results that are significantly more negative than the comparator |
| | Orange shading shows significant differences in demographics and background information |
| | No shading means that differences are not significant and may have occurred by chance |
| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

n=number of valid responses to question (HMP Exeter 2018)

| DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION | | | | | | | | |
|---|--|---------------|-----|-----|-----|-----|-----|-----|
| 1.2 | Are you under 21 years of age? | <i>n</i> =155 | 5% | 6% | 5% | 5% | 5% | 9% |
| | Are you 25 years of age or younger? | <i>n</i> =155 | 21% | | 21% | 22% | 21% | |
| | Are you 50 years of age or older? | <i>n</i> =155 | 15% | 13% | 15% | 14% | 15% | 15% |
| | Are you 70 years of age or older? | <i>n</i> =155 | 0% | 2% | 0% | 2% | 0% | 3% |
| 1.3 | Are you from a minority ethnic group? | <i>n</i> =153 | 6% | 24% | 6% | 26% | 6% | 9% |
| 1.4 | Have you been in this prison for less than 6 months? | <i>n</i> =152 | 77% | | 77% | 60% | 77% | |
| 1.5 | Are you currently serving a sentence? | <i>n</i> =156 | 62% | 72% | 62% | 72% | 62% | 62% |
| | Are you on recall? | <i>n</i> =156 | 14% | 11% | 14% | 13% | 14% | 12% |
| 1.6 | Is your sentence less than 12 months? | <i>n</i> =154 | 26% | 21% | 26% | 21% | 26% | 24% |
| | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | <i>n</i> =154 | 3% | 3% | 3% | 4% | 3% | 1% |
| 7.1 | Are you Muslim? | <i>n</i> =151 | 1% | 12% | 1% | 13% | 1% | 6% |
| 11.3 | Do you have any mental health problems? | <i>n</i> =151 | 59% | | 59% | 49% | 59% | |
| 12.1 | Do you consider yourself to have a disability? | <i>n</i> =151 | 45% | 33% | 45% | 39% | 45% | 37% |
| 19.1 | Do you have any children under the age of 18? | <i>n</i> =146 | 52% | 52% | 52% | 52% | 52% | 51% |
| 19.2 | Are you a foreign national? | <i>n</i> =146 | 6% | 11% | 6% | 10% | 6% | 9% |
| 19.3 | Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) | <i>n</i> =144 | 9% | 5% | 9% | 5% | 9% | 6% |
| 19.4 | Have you ever been in the armed services? | <i>n</i> =147 | 8% | 6% | 8% | 7% | 8% | 14% |
| 19.5 | Is your gender female or non-binary? | <i>n</i> =147 | 1% | | 1% | 1% | 1% | |
| 19.6 | Are you homosexual, bisexual or other sexual orientation? | <i>n</i> =145 | 4% | 3% | 4% | 4% | 4% | 4% |
| 19.7 | Do you identify as transgender or transsexual? | <i>n</i> =143 | 1% | | 1% | 2% | 1% | |
| ARRIVAL AND RECEPTION | | | | | | | | |
| 2.1 | Were you given up-to-date information about this prison before you came here? | <i>n</i> =155 | 21% | | 21% | 16% | 21% | |
| 2.2 | When you arrived at this prison, did you spend less than 2 hours in reception? | <i>n</i> =155 | 27% | 39% | 27% | 36% | 27% | 30% |
| 2.3 | When you were searched in reception, was this done in a respectful way? | <i>n</i> =155 | 83% | 77% | 83% | 76% | 83% | 81% |
| 2.4 | Overall, were you treated very / quite well in reception? | <i>n</i> =152 | 74% | | 74% | 73% | 74% | |

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
| | Green shading shows results that are significantly more positive than the comparator |
| | Blue shading shows results that are significantly more negative than the comparator |
| | Orange shading shows significant differences in demographics and background information |
| | No shading means that differences are not significant and may have occurred by chance |
| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

n=number of valid responses to question (HMP Exeter 2018)

| Shading is used to indicate statistical significance*, as follows: | | HMP Exeter 2018 | | All other local prisons | | HMP Exeter 2018 | | All other local prisons surveyed since September 2017 | | HMP Exeter 2018 | | HMP Exeter 2016 | |
|--|---|---|-----|-------------------------|--|-----------------|-----|---|--|-----------------|-----|-----------------|--|
| | Green shading shows results that are significantly more positive than the comparator | | | | | | | | | | | | |
| | Blue shading shows results that are significantly more negative than the comparator | | | | | | | | | | | | |
| | Orange shading shows significant differences in demographics and background information | | | | | | | | | | | | |
| | No shading means that differences are not significant and may have occurred by chance | | | | | | | | | | | | |
| | Grey shading indicates that we have no valid data for this question | | | | | | | | | | | | |
| * less than 1% probability that the difference is due to chance | | | | | | | | | | | | | |
| | | Number of completed questionnaires returned | | | | | | | | | | | |
| | | n=number of valid responses to question (HMP Exeter 2018) | | | | | | | | | | | |
| 2.5 | When you first arrived, did you have any problems? | n=154 | 90% | 83% | | | 90% | 89% | | | 90% | 82% | |
| 2.5 | Did you have problems with: | | | | | | | | | | | | |
| | - Getting phone numbers? | n=154 | 45% | 37% | | | 45% | 47% | | | 45% | 32% | |
| | - Contacting family? | n=154 | 45% | 40% | | | 45% | 50% | | | 45% | 34% | |
| | - Arranging care for children or other dependents? | n=154 | 5% | | | | 5% | 5% | | | 5% | | |
| | - Contacting employers? | n=154 | 7% | 6% | | | 7% | 8% | | | 7% | 8% | |
| | - Money worries? | n=154 | 26% | 25% | | | 26% | 28% | | | 26% | 20% | |
| | - Housing worries? | n=154 | 30% | 23% | | | 30% | 24% | | | 30% | 30% | |
| | - Feeling depressed? | n=154 | 55% | | | | 55% | 48% | | | 55% | | |
| | - Feeling suicidal? | n=154 | 24% | | | | 24% | 18% | | | 24% | | |
| | - Other mental health problems? | n=154 | 38% | | | | 38% | 27% | | | 38% | | |
| | - Physical health problems | n=154 | 25% | 20% | | | 25% | 20% | | | 25% | 20% | |
| | - Drugs or alcohol (e.g. withdrawal)? | n=154 | 38% | | | | 38% | 23% | | | 38% | | |
| | - Getting medication? | n=154 | 40% | | | | 40% | 31% | | | 40% | | |
| | - Needing protection from other prisoners? | n=154 | 12% | 10% | | | 12% | 10% | | | 12% | 8% | |
| | - Lost or delayed property? | n=154 | 14% | 19% | | | 14% | 21% | | | 14% | 18% | |
| For those who had any problems when they first arrived: | | | | | | | | | | | | | |
| 2.6 | Did staff help you to deal with these problems? | n=128 | 31% | 32% | | | 31% | 30% | | | 31% | 35% | |
| FIRST NIGHT AND INDUCTION | | | | | | | | | | | | | |
| 3.1 | Before you were locked up on your first night, were you offered: | | | | | | | | | | | | |
| | - Tobacco or nicotine replacement? | n=151 | 52% | 71% | | | 52% | 72% | | | 52% | 22% | |
| | - Toiletries / other basic items? | n=151 | 44% | 57% | | | 44% | 55% | | | 44% | 57% | |
| | - A shower? | n=151 | 8% | 30% | | | 8% | 32% | | | 8% | 17% | |
| | - A free phone call? | n=151 | 29% | 52% | | | 29% | 48% | | | 29% | 21% | |
| | - Something to eat? | n=151 | 75% | 73% | | | 75% | 77% | | | 75% | 64% | |
| | - The chance to see someone from health care? | n=151 | 62% | 65% | | | 62% | 63% | | | 62% | 65% | |
| | - The chance to talk to a Listener or Samaritans? | n=151 | 28% | 30% | | | 28% | 26% | | | 28% | 36% | |
| | - Support from another prisoner (e.g. Insider or buddy)? | n=151 | 21% | | | | 21% | 21% | | | 21% | | |
| | - None of these? | n=151 | 10% | | | | 10% | 5% | | | 10% | | |
| 3.2 | On your first night in this prison, was your cell very / quite clean? | n=153 | 24% | | | | 24% | 29% | | | 24% | | |
| 3.3 | Did you feel safe on your first night here? | n=154 | 58% | 64% | | | 58% | 61% | | | 58% | 65% | |
| 3.4 | In your first few days here, did you get? | | | | | | | | | | | | |
| | - Access to the prison shop / canteen? | n=146 | 25% | 25% | | | 25% | 32% | | | 25% | 21% | |
| | - Free PIN phone credit? | n=145 | 61% | | | | 61% | 52% | | | 61% | | |
| | - Numbers put on your PIN phone? | n=146 | 35% | | | | 35% | 32% | | | 35% | | |
| 3.5 | Have you had an induction at this prison? | n=148 | 88% | 78% | | | 88% | 82% | | | 88% | 66% | |
| For those who have had an induction: | | | | | | | | | | | | | |
| 3.5 | Did your induction cover everything you needed to know about this prison? | n=130 | 45% | | | | 45% | 48% | | | 45% | | |

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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| | Blue shading shows results that are significantly more negative than the comparator |
| | Orange shading shows significant differences in demographics and background information |
| | No shading means that differences are not significant and may have occurred by chance |
| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

n=number of valid responses to question (HMP Exeter 2018)

| | | HMP Exeter 2018 | All other local prisons | HMP Exeter 2018 | All other local prisons surveyed since September 2017 | HMP Exeter 2018 | HMP Exeter 2016 |
|---|---|-----------------|-------------------------|-----------------|---|-----------------|-----------------|
| | | 158 | 5,947 | 158 | 1,798 | 158 | 172 |
| ON THE WING | | | | | | | |
| 4.1 | Are you in a cell on your own? | n=154 | 25% | | 25% | 31% | 25% |
| 4.2 | Is your cell call bell normally answered within 5 minutes? | n=153 | 18% | 21% | 18% | 18% | 18% |
| 4.3 | On the wing or houseblock you currently live on: | | | | | | |
| | - Do you normally have enough clean, suitable clothes for the week? | n=150 | 41% | 50% | 41% | 55% | 41% |
| | - Can you shower every day? | n=152 | 82% | 75% | 82% | 72% | 82% |
| | - Do you have clean sheets every week? | n=148 | 49% | 61% | 49% | 63% | 49% |
| | - Do you get cell cleaning materials every week? | n=149 | 48% | 48% | 48% | 48% | 48% |
| | - Is it normally quiet enough for you to relax or sleep at night? | n=143 | 56% | 54% | 56% | 52% | 56% |
| | - Can you get your stored property if you need it? | n=148 | 29% | 18% | 29% | 20% | 29% |
| 4.4 | Are the communal / shared areas of your wing or houseblock normally very / quite clean? | n=151 | 44% | | 44% | 56% | 44% |
| FOOD AND CANTEEN | | | | | | | |
| 5.1 | Is the quality of the food in this prison very / quite good? | n=151 | 40% | | 40% | 35% | 40% |
| 5.2 | Do you get enough to eat at meal-times always / most of the time? | n=153 | 33% | | 33% | 28% | 33% |
| 5.3 | Does the shop / canteen sell the things that you need? | n=150 | 62% | 52% | 62% | 60% | 62% |
| RELATIONSHIPS WITH STAFF | | | | | | | |
| 6.1 | Do most staff here treat you with respect? | n=150 | 70% | 71% | 70% | 66% | 70% |
| 6.2 | Are there any staff here you could turn to if you had a problem? | n=149 | 75% | 69% | 75% | 68% | 75% |
| 6.3 | In the last week, has any member of staff talked to you about how you are getting on? | n=153 | 43% | 28% | 43% | 27% | 43% |
| 6.4 | Do you have a personal officer? | n=143 | 78% | | 78% | 56% | 78% |
| <i>For those who have a personal officer:</i> | | | | | | | |
| 6.4 | Is your personal or named officer very / quite helpful? | n=112 | 60% | | 60% | 43% | 60% |
| 6.5 | Do you regularly see prison governors, directors or senior managers talking to prisoners? | n=149 | 11% | | 11% | 7% | 11% |
| 6.6 | Do you feel that you are treated as an individual in this prison? | n=150 | 48% | | 48% | 36% | 48% |
| 6.7 | Are prisoners here consulted about things like food, canteen, health care or wing issues? | n=151 | 41% | | 41% | 40% | 41% |
| | If so, do things sometimes change? | n=62 | 42% | | 42% | 33% | 42% |
| FAITH | | | | | | | |
| 7.1 | Do you have a religion? | n=151 | 58% | 68% | 58% | 70% | 58% |
| <i>For those who have a religion:</i> | | | | | | | |
| 7.2 | Are your religious beliefs respected here? | n=87 | 76% | | 76% | 65% | 76% |
| 7.3 | Are you able to speak to a Chaplain of your faith in private, if you want to? | n=92 | 75% | | 75% | 63% | 75% |
| 7.4 | Are you able to attend religious services, if you want to? | n=92 | 92% | | 92% | 83% | 92% |

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| CONTACT WITH FAMILY AND FRIENDS | | | | HMP Exeter 2018 | All other local prisons | HMP Exeter 2018 | All other local prisons surveyed since September 2017 | HMP Exeter 2018 | HMP Exeter 2016 |
|--|--|-------|-----|-----------------|-------------------------|-----------------|---|-----------------|-----------------|
| | | | | 158 | 5,947 | 158 | 1,798 | 158 | 172 |
| 8.1 | Have staff here encouraged you to keep in touch with your family / friends? | n=150 | 31% | | | 31% | 24% | 31% | |
| 8.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | n=153 | 42% | 49% | | 42% | 57% | 42% | 48% |
| 8.3 | Are you able to use a phone every day (if you have credit)? | n=155 | 94% | | | 94% | 76% | 94% | |
| 8.4 | Is it very / quite easy for your family and friends to get here? | n=153 | 45% | | | 45% | 44% | 45% | |
| 8.5 | Do you get visits from family/friends once a week or more? | n=151 | 13% | | | 13% | 23% | 13% | |
| For those who get visits: | | | | | | | | | |
| 8.6 | Do visits usually start and finish on time? | n=74 | 57% | | | 57% | 45% | 57% | |
| 8.7 | Are your visitors usually treated respectfully by staff? | n=75 | 76% | | | 76% | 72% | 76% | |
| TIME OUT OF CELL | | | | | | | | | |
| 9.1 | Do you know what the unlock and lock-up times are supposed to be here? | n=153 | 80% | | | 80% | 82% | 80% | |
| For those who know what the unlock and lock-up times are supposed to be: | | | | | | | | | |
| 9.1 | Are these times usually kept to? | n=123 | 63% | | | 63% | 48% | 63% | |
| 9.2 | Do you usually spend less than 2 hours out of your cell on a typical weekday? | n=151 | 31% | 32% | | 31% | 37% | 31% | 44% |
| | Do you usually spend 10 hours or more out of your cell on a typical weekday? | n=151 | 7% | 7% | | 7% | 5% | 7% | 13% |
| 9.3 | Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday? | n=153 | 43% | | | 43% | 54% | 43% | |
| | Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday? | n=153 | 5% | | | 5% | 1% | 5% | |
| 9.4 | Do you have time to do domestics more than 5 days in a typical week? | n=154 | 38% | | | 38% | 40% | 38% | |
| 9.5 | Do you get association more than 5 days in a typical week, if you want it? | n=152 | 23% | | | 23% | 42% | 23% | |
| 9.6 | Could you go outside for exercise more than 5 days in a typical week, if you wanted to? | n=151 | 68% | | | 68% | 44% | 68% | |
| 9.7 | Do you typically go to the gym twice a week or more? | n=149 | 36% | | | 36% | 36% | 36% | |
| 9.8 | Do you typically go to the library twice a week or more? | n=150 | 14% | 7% | | 14% | 10% | 14% | 7% |
| For those who use the library: | | | | | | | | | |
| 9.9 | Does the library have a wide enough range of materials to meet your needs? | n=107 | 71% | 55% | | 71% | 55% | 71% | 63% |
| APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS | | | | | | | | | |
| 10.1 | Is it easy for you to make an application? | n=151 | 77% | 70% | | 77% | 67% | 77% | 74% |
| For those who have made an application: | | | | | | | | | |
| 10.2 | Are applications usually dealt with fairly? | n=130 | 60% | 46% | | 60% | 45% | 60% | 51% |
| | Are applications usually dealt with within 7 days? | n=131 | 53% | 31% | | 53% | 28% | 53% | 38% |
| 10.3 | Is it easy for you to make a complaint? | n=151 | 52% | 49% | | 52% | 54% | 52% | 47% |
| For those who have made a complaint: | | | | | | | | | |
| 10.4 | Are complaints usually dealt with fairly? | n=73 | 27% | 26% | | 27% | 27% | 27% | 20% |
| | Are complaints usually dealt with within 7 days? | n=70 | 23% | 21% | | 23% | 18% | 23% | 19% |
| 10.5 | Have you ever been prevented from making a complaint here when you wanted to? | n=100 | 36% | | | 36% | 29% | 36% | |

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|---|--|-----------------|-------------------------|-----------------|---|-----------------|-----------------|
| | | 158 | 5,947 | 158 | 1,798 | 158 | 172 |
| <i>For those who need it, is it easy to:</i> | | | | | | | |
| 10.6 | Communicate with your solicitor or legal representative? | n=136 | 40% | | 40% | 39% | 40% |
| | Attend legal visits? | n=131 | 63% | | 63% | 55% | 63% |
| | Get bail information? | n=114 | 18% | | 18% | 15% | 18% |
| <i>For those who have had legal letters:</i> | | | | | | | |
| 10.7 | Have staff here ever opened letters from your solicitor or legal representative when you were not present? | n=131 | 46% | 49% | 46% | 51% | 46% |
| HEALTH CARE | | | | | | | |
| 11.1 | Is it very / quite easy to see: | | | | | | |
| | - Doctor? | n=153 | 33% | | 33% | 24% | 33% |
| | - Nurse? | n=150 | 56% | | 56% | 48% | 56% |
| | - Dentist? | n=150 | 16% | | 16% | 10% | 16% |
| | - Mental health workers? | n=148 | 33% | | 33% | 18% | 33% |
| 11.2 | Do you think the quality of the health service is very / quite good from: | | | | | | |
| | - Doctor? | n=151 | 56% | | 56% | 39% | 56% |
| | - Nurse? | n=149 | 58% | | 58% | 50% | 58% |
| | - Dentist? | n=147 | 35% | | 35% | 24% | 35% |
| | - Mental health workers? | n=146 | 40% | | 40% | 23% | 40% |
| 11.3 | Do you have any mental health problems? | n=151 | 59% | | 59% | 49% | 59% |
| <i>For those who have mental health problems:</i> | | | | | | | |
| 11.4 | Have you been helped with your mental health problems in this prison? | n=89 | 48% | | 48% | 32% | 48% |
| 11.5 | Do you think the overall quality of the health services here is very / quite good? | n=151 | 46% | | 46% | 33% | 46% |
| OTHER SUPPORT NEEDS | | | | | | | |
| 12.1 | Do you consider yourself to have a disability? | n=151 | 45% | 33% | 45% | 39% | 45% |
| <i>For those who have a disability:</i> | | | | | | | |
| 12.2 | Are you getting the support you need? | n=65 | 31% | | 31% | 25% | 31% |
| 12.3 | Have you been on an ACCT in this prison? | n=150 | 38% | | 38% | 22% | 38% |
| <i>For those who have been on an ACCT:</i> | | | | | | | |
| 12.4 | Did you feel cared for by staff? | n=55 | 55% | | 55% | 45% | 55% |
| 12.5 | Is it very / quite easy for you to speak to a Listener if you need to? | n=152 | 57% | | 57% | 46% | 57% |
| ALCOHOL AND DRUGS | | | | | | | |
| 13.1 | Did you have an alcohol problem when you came into this prison? | n=151 | 31% | 22% | 31% | 23% | 31% |
| <i>For those who had / have an alcohol problem:</i> | | | | | | | |
| 13.2 | Have you been helped with your alcohol problem in this prison? | n=42 | 69% | 54% | 69% | 60% | 69% |
| 13.3 | Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)? | n=152 | 48% | 35% | 48% | 33% | 48% |
| 13.4 | Have you developed a problem with illicit drugs since you have been in this prison? | n=151 | 14% | 13% | 14% | 16% | 14% |
| 13.5 | Have you developed a problem with taking medication not prescribed to you since you have been in this prison? | n=151 | 13% | | 13% | 11% | 13% |
| <i>For those who had / have a drug problem:</i> | | | | | | | |
| 13.6 | Have you been helped with your drug problem in this prison? | n=76 | 58% | 54% | 58% | 48% | 58% |
| 13.7 | Is it very / quite easy to get illicit drugs in this prison? | n=151 | 60% | | 60% | 50% | 60% |

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|---|--|-------|-----|-----|
| 13.8 | Is it very / quite easy to get alcohol in this prison? | n=152 | 38% | |
| SAFETY | | | | |
| 14.1 | Have you ever felt unsafe here? | n=153 | 67% | 55% |
| 14.2 | Do you feel unsafe now? | n=147 | 30% | 26% |
| 14.3 | Have you experienced any of the following from other prisoners here: | | | |
| | - Verbal abuse? | n=144 | 49% | |
| | - Threats or intimidation? | n=144 | 38% | |
| | - Physical assault? | n=144 | 28% | |
| | - Sexual assault? | n=144 | 4% | |
| | - Theft of canteen or property? | n=144 | 42% | |
| | - Other bullying / victimisation? | n=144 | 24% | |
| | - Not experienced any of these from prisoners here | n=144 | 40% | 63% |
| 14.4 | If you were being bullied / victimised by other prisoners here, would you report it? | n=145 | 32% | |
| 14.5 | Have you experienced any of the following from staff here: | | | |
| | - Verbal abuse? | n=147 | 38% | |
| | - Threats or intimidation? | n=147 | 29% | |
| | - Physical assault? | n=147 | 15% | |
| | - Sexual assault? | n=147 | 1% | |
| | - Theft of canteen or property? | n=147 | 8% | |
| | - Other bullying / victimisation? | n=147 | 23% | |
| | - Not experienced any of these from staff here | n=147 | 52% | 64% |
| 14.6 | If you were being bullied / victimised by staff here, would you report it? | n=144 | 43% | |
| BEHAVIOUR MANAGEMENT | | | | |
| 15.1 | Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? | n=148 | 48% | |
| 15.2 | Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison? | n=149 | 36% | |
| 15.3 | Have you been physically restrained by staff in this prison, in the last 6 months? | n=150 | 17% | 13% |
| For those who have been restrained in the last 6 months: | | | | |
| 15.4 | Did anyone come and talk to you about it afterwards? | n=25 | 16% | |
| 15.5 | Have you spent one or more nights in the segregation unit in this prison in the last 6 months? | n=147 | 8% | 17% |
| For those who have spent one or more nights in the segregation unit in the last 6 months: | | | | |
| 15.6 | Were you treated well by segregation staff? | n=11 | 46% | |
| | Could you shower every day? | n=11 | 46% | |
| | Could you go outside for exercise every day? | n=10 | 30% | |
| | Could you use the phone every day (if you had credit)? | n=9 | 33% | |

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| EDUCATION, SKILLS AND WORK | | | | | | | | | |
|---|--|-------|-----|-----|-------|-----|-----|-----|-----|
| 16.1 | In this prison, is it easy to get into the following activities: | | | | | | | | |
| | - Education? | n=143 | 57% | | | 57% | 50% | 57% | |
| | - Vocational or skills training? | n=138 | 33% | | | 33% | 24% | 33% | |
| | - Prison job? | n=143 | 40% | | | 40% | 30% | 40% | |
| | - Voluntary work outside of the prison? | n=138 | 4% | | | 4% | 3% | 4% | |
| | - Paid work outside of the prison? | n=139 | 4% | | | 4% | 4% | 4% | |
| 16.2 | In this prison, have you done the following activities: | | | | | | | | |
| | - Education? | n=138 | 78% | 68% | | 78% | 71% | 78% | 54% |
| | - Vocational or skills training? | n=127 | 64% | 55% | | 64% | 54% | 64% | 52% |
| | - Prison job? | n=134 | 75% | 71% | | 75% | 70% | 75% | 63% |
| | - Voluntary work outside of the prison? | n=128 | 37% | | | 37% | 31% | 37% | |
| | - Paid work outside of the prison? | n=130 | 35% | | | 35% | 31% | 35% | |
| For those who have done the following activities, do you think they will help you on release: | | | | | | | | | |
| | - Education? | n=108 | 63% | 50% | | 63% | 56% | 63% | 47% |
| | - Vocational or skills training? | n=81 | 51% | 45% | | 51% | 56% | 51% | 46% |
| | - Prison job? | n=100 | 38% | 40% | | 38% | 42% | 38% | 38% |
| | - Voluntary work outside of the prison? | n=47 | 47% | | | 47% | 49% | 47% | |
| | - Paid work outside of the prison? | n=45 | 58% | | | 58% | 55% | 58% | |
| 16.3 | Do staff encourage you to attend education, training or work? | | | | n=134 | 46% | | 46% | |
| PLANNING AND PROGRESSION | | | | | | | | | |
| 17.1 | Do you have a custody plan? | | | | n=144 | 27% | | 27% | |
| For those who have a custody plan: | | | | | | | | | |
| 17.2 | Do you understand what you need to do to achieve your objectives or targets? | | | | n=39 | 85% | | 85% | |
| 17.3 | Are staff helping you to achieve your objectives or targets? | | | | n=36 | 61% | | 61% | |
| 17.4 | In this prison, have you done: | | | | | | | | |
| | - Offending behaviour programmes? | n=37 | 43% | | | 43% | 43% | 43% | |
| | - Other programmes? | n=36 | 50% | | | 50% | 41% | 50% | |
| | - One to one work? | n=35 | 49% | | | 49% | 35% | 49% | |
| | - Been on a specialist unit? | n=34 | 18% | | | 18% | 22% | 18% | |
| | - ROTL - day or overnight release? | n=34 | 9% | | | 9% | 17% | 9% | |
| For those who have done the following, did they help you to achieve your objectives or targets: | | | | | | | | | |
| | - Offending behaviour programmes? | n=16 | 75% | | | 75% | 67% | 75% | |
| | - Other programmes? | n=18 | 89% | | | 89% | 62% | 89% | |
| | - One to one work? | n=17 | 94% | | | 94% | 60% | 94% | |
| | - Being on a specialist unit? | n=6 | 83% | | | 83% | 44% | 83% | |
| | - ROTL - day or overnight release? | n=3 | 67% | | | 67% | 44% | 67% | |

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| | | 158 | 5,947 | 158 | 1,798 | 158 | 172 |
| PREPARATION FOR RELEASE | | | | | | | |
| 18.1 | Do you expect to be released in the next 3 months? <i>n=148</i> | 35% | | 35% | 31% | 35% | |
| <i>For those who expect to be released in the next 3 months:</i> | | | | | | | |
| 18.2 | Is this prison very / quite near to your home area or intended release address? <i>n=51</i> | 57% | | 57% | 59% | 57% | |
| 18.3 | Is anybody helping you to prepare for your release? <i>n=51</i> | 55% | | 55% | 43% | 55% | |
| 18.4 | Do you need help to sort out the following for when you are released: | | | | | | |
| | - Finding accommodation? <i>n=51</i> | 65% | | 65% | 63% | 65% | |
| | - Getting employment? <i>n=51</i> | 57% | | 57% | 61% | 57% | |
| | - Setting up education or training? <i>n=49</i> | 59% | | 59% | 47% | 59% | |
| | - Arranging benefits? <i>n=50</i> | 64% | | 64% | 66% | 64% | |
| | - Sorting out finances? <i>n=51</i> | 55% | | 55% | 55% | 55% | |
| | - Support for drug or alcohol problems? <i>n=49</i> | 55% | | 55% | 51% | 55% | |
| | - Health / mental Health support? <i>n=50</i> | 64% | | 64% | 58% | 64% | |
| | - Social care support? <i>n=50</i> | 48% | | 48% | 40% | 48% | |
| | - Getting back in touch with family or friends? <i>n=49</i> | 41% | | 41% | 41% | 41% | |
| 18.4 | Are you getting help to sort out the following for when you are released, if you need it: | | | | | | |
| | - Finding accommodation? <i>n=33</i> | 39% | | 39% | 27% | 39% | |
| | - Getting employment? <i>n=29</i> | 21% | | 21% | 19% | 21% | |
| | - Setting up education or training? <i>n=29</i> | 17% | | 17% | 14% | 17% | |
| | - Arranging benefits? <i>n=32</i> | 28% | | 28% | 22% | 28% | |
| | - Sorting out finances? <i>n=28</i> | 18% | | 18% | 17% | 18% | |
| | - Support for drug or alcohol problems? <i>n=27</i> | 56% | | 56% | 41% | 56% | |
| | - Health / mental Health support? <i>n=32</i> | 19% | | 19% | 22% | 19% | |
| | - Social care support? <i>n=24</i> | 17% | | 17% | 16% | 17% | |
| | - Getting back in touch with family or friends? <i>n=20</i> | 25% | | 25% | 24% | 25% | |
| FINAL QUESTION ABOUT THIS PRISON | | | | | | | |
| 20.1 | Do you think your experiences in this prison have made you less likely to offend in the future? <i>n=137</i> | 44% | | 44% | 48% | 44% | |

HMP Exeter 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- responses of prisoners with mental health problems are compared with those of prisoners who do not have mental health problems

- disabled prisoners' responses are compared with those of prisoners who do not have a disability

Please note that these analyses are based on summary data from selected survey questions only.

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| Mental health problems | No mental health problems |
|------------------------|---------------------------|
| 89 | 62 |

| Have a disability | Do not have a disability |
|-------------------|--------------------------|
| 68 | 83 |

| DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION | | | | | |
|---|---|-----|-----|-----|-----|
| 1.2 | Are you under 21 years of age? | 5% | 5% | 5% | 5% |
| | Are you 50 years of age or older? | 12% | 21% | 13% | 16% |
| 1.3 | Are you from a minority ethnic group? | 3% | 10% | 3% | 9% |
| 7.1 | Are you Muslim? | 1% | 2% | 0% | 2% |
| 11.3 | Do you have any mental health problems? | | | 87% | 35% |
| 12.1 | Do you consider yourself to have a disability? | 67% | 15% | | |
| 19.2 | Are you a foreign national? | 2% | 10% | 3% | 8% |
| 19.3 | Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) | 10% | 9% | 12% | 7% |
| ARRIVAL AND RECEPTION | | | | | |
| 2.3 | When you were searched in reception, was this done in a respectful way? | 82% | 85% | 78% | 89% |
| 2.4 | Overall, were you treated very / quite well in reception? | 72% | 80% | 71% | 79% |
| 2.5 | When you first arrived, did you have any problems? | 97% | 80% | 96% | 85% |
| For those who had any problems when they first arrived: | | | | | |
| 2.6 | Did staff help you to deal with these problems? | 30% | 33% | 31% | 31% |
| FIRST NIGHT AND INDUCTION | | | | | |
| 3.3 | Did you feel safe on your first night here? | 52% | 65% | 53% | 61% |
| 3.5 | Have you had an induction at this prison? | 89% | 85% | 86% | 89% |
| For those who have had an induction: | | | | | |
| 3.5 | Did your induction cover everything you needed to know about this prison? | 45% | 45% | 45% | 44% |
| ON THE WING | | | | | |
| 4.2 | Is your cell call bell normally answered within 5 minutes? | 17% | 21% | 19% | 18% |
| 4.3 | On the wing or houseblock you currently live on: | | | | |
| | - Do you normally have enough clean, suitable clothes for the week? | 34% | 53% | 29% | 51% |
| | - Can you shower every day? | 75% | 92% | 76% | 86% |
| | - Do you have clean sheets every week? | 46% | 53% | 46% | 51% |
| | - Do you get cell cleaning materials every week? | 48% | 48% | 42% | 53% |
| | - Is it normally quiet enough for you to relax or sleep at night? | 48% | 70% | 46% | 65% |
| | - Can you get your stored property if you need it? | 23% | 38% | 20% | 37% |

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| Mental health problems | No mental health problems |
|------------------------|---------------------------|
| 89 | 62 |

| Have a disability | Do not have a disability |
|-------------------|--------------------------|
| 68 | 83 |

| FOOD AND CANTEEN | | | |
|--|---|-----|-----|
| 5.2 | Do you get enough to eat at meal-times always / most of the time? | 26% | 44% |
| 5.3 | Does the shop / canteen sell the things that you need? | 66% | 58% |
| RELATIONSHIPS WITH STAFF | | | |
| 6.1 | Do most staff here treat you with respect? | 69% | 73% |
| 6.2 | Are there any staff here you could turn to if you had a problem? | 77% | 75% |
| 6.3 | In the last week, has any member of staff talked to you about how you are getting on? | 44% | 40% |
| 6.6 | Do you feel that you are treated as an individual in this prison? | 43% | 57% |
| FAITH | | | |
| <i>For those who have a religion:</i> | | | |
| 7.2 | Are your religious beliefs respected here? | 78% | 71% |
| 7.3 | Are you able to speak to a Chaplain of your faith in private, if you want to? | 76% | 76% |
| CONTACT WITH FAMILY AND FRIENDS | | | |
| 8.1 | Have staff here encouraged you to keep in touch with your family / friends? | 28% | 36% |
| 8.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | 42% | 43% |
| 8.3 | Are you able to use a phone every day (if you have credit)? | 93% | 94% |
| <i>For those who get visits:</i> | | | |
| 8.7 | Are your visitors usually treated respectfully by staff? | 77% | 77% |
| TIME OUT OF CELL | | | |
| 9.2 | Do you usually spend less than 2 hours out of your cell on a typical weekday? | 34% | 26% |
| | Do you usually spend 10 hours or more out of your cell on a typical weekday? | 2% | 13% |
| <i>For those who use the library:</i> | | | |
| 9.9 | Does the library have a wide enough range of materials to meet your needs? | 71% | 71% |
| APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS | | | |
| 10.1 | Is it easy for you to make an application? | 74% | 80% |
| <i>For those who have made an application:</i> | | | |
| 10.2 | Are applications usually dealt with fairly? | 59% | 64% |
| 10.3 | Is it easy for you to make a complaint? | 49% | 60% |
| <i>For those who have made a complaint:</i> | | | |
| 10.4 | Are complaints usually dealt with fairly? | 25% | 35% |
| 10.5 | Have you ever been prevented from making a complaint here when you wanted to? | 41% | 27% |

| | |
|-----|-----|
| | |
| 32% | 35% |
| 67% | 59% |
| | |
| 71% | 69% |
| 74% | 76% |
| 45% | 43% |
| 46% | 51% |
| | |
| | |
| 76% | 75% |
| 70% | 79% |
| | |
| | |
| 27% | 35% |
| 37% | 45% |
| 90% | 96% |
| | |
| | |
| 75% | 78% |
| | |
| | |
| 42% | 22% |
| 2% | 11% |
| | |
| | |
| 72% | 69% |
| | |
| | |
| 69% | 83% |
| | |
| | |
| 60% | 61% |
| 45% | 58% |
| | |
| | |
| 32% | 24% |
| 38% | 35% |

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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| | Orange shading shows significant differences in demographics and background information |
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| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| Mental health problems | No mental health problems |
|------------------------|---------------------------|
| 89 | 62 |

| Have a disability | Do not have a disability |
|-------------------|--------------------------|
| 68 | 83 |

| HEALTH CARE | | |
|---|--|---------|
| 11.1 | Is it very / quite easy to see: | |
| | - Doctor? | 33% 33% |
| | - Nurse? | 59% 53% |
| | - Dentist? | 14% 20% |
| | - Mental health workers? | 36% 28% |
| For those who have mental health problems: | | |
| 11.4 | Have you been helped with your mental health problems in this prison? | 48% 48% |
| 11.5 | Do you think the overall quality of the health services here is very / quite good? | 43% 49% |
| OTHER SUPPORT NEEDS | | |
| For those who have a disability: | | |
| 12.2 | Are you getting the support you need? | 29% 50% |
| SAFETY | | |
| 14.1 | Have you ever felt unsafe here? | 83% 47% |
| 14.2 | Do you feel unsafe now? | 42% 13% |
| 14.3 | Not experienced bullying / victimisation by other prisoners | 28% 55% |
| 14.4 | If you were being bullied / victimised by other prisoners here, would you report it? | 28% 39% |
| 14.5 | Not experienced bullying / victimisation by members of staff | 41% 68% |
| 14.6 | If you were being bullied / victimised by staff here, would you report it? | 35% 54% |
| BEHAVIOUR MANAGEMENT | | |
| 15.1 | Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? | 38% 63% |
| 15.2 | Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison? | 33% 42% |
| 15.3 | Have you been physically restrained by staff in this prison, in the last 6 months? | 23% 7% |
| 15.5 | Have you spent one or more nights in the segregation unit in this prison in the last 6 months? | 8% 5% |
| EDUCATION, SKILLS AND WORK | | |
| 16.3 | Do staff encourage you to attend education, training or work? | 44% 51% |
| PLANNING AND PROGRESSION | | |
| 17.1 | Do you have a custody plan? | 22% 36% |
| For those who have a custody plan: | | |
| 17.3 | Are staff helping you to achieve your objectives or targets? | 53% 68% |
| PREPARATION FOR RELEASE | | |
| For those who expect to be released in the next 3 months: | | |
| 18.3 | Is anybody helping you to prepare for your release? | 55% 58% |
| FINAL QUESTION ABOUT THIS PRISON | | |
| 20.1 | Do you think your experiences in this prison have made you less likely to offend in the future? | 36% 56% |

| | |
|-----|-----|
| | |
| 32% | 34% |
| 58% | 56% |
| 15% | 17% |
| 34% | 33% |
| | |
| 47% | 53% |
| 44% | 47% |
| | |
| 31% | |
| | |
| 81% | 57% |
| 47% | 16% |
| 28% | 49% |
| 26% | 37% |
| 44% | 59% |
| 39% | 47% |
| | |
| 43% | 52% |
| 34% | 39% |
| 22% | 12% |
| 8% | 7% |
| | |
| 43% | 48% |
| | |
| 23% | 30% |
| | |
| 64% | 59% |
| | |
| 63% | 50% |
| | |
| 39% | 49% |

HMP Exeter 2018

Comparison of survey responses between sub-populations of prisoners

In this table the following analyses are presented:

- Responses of prisoners aged 25 and under are compared with those of prisoners over 25

- Responses of prisoners aged 50 and over are compared with those of prisoners under 50

Please note that these analyses are based on summary data from selected survey questions only.

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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| | Orange shading shows significant differences in demographics and background information |
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| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| | 25 and under | Over 25 |
|--|--------------|---------|
| | 33 | 122 |

| | 50 and over | Under 50 |
|--|-------------|----------|
| | 23 | 132 |

| DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION | | |
|--|---|---------|
| 1.3 | Are you from a minority ethnic group? | 9% 5% |
| 7.1 | Are you Muslim? | 0% 1% |
| 11.3 | Do you have any mental health problems? | 58% 59% |
| 12.1 | Do you consider yourself to have a disability? | 49% 44% |
| 19.2 | Are you a foreign national? | 3% 6% |
| 19.3 | Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) | 6% 10% |
| ARRIVAL AND RECEPTION | | |
| 2.3 | When you were searched in reception, was this done in a respectful way? | 85% 82% |
| 2.4 | Overall, were you treated very / quite well in reception? | 75% 75% |
| 2.5 | When you first arrived, did you have any problems? | 94% 89% |
| <i>For those who had any problems when they first arrived:</i> | | |
| 2.6 | Did staff help you to deal with these problems? | 39% 28% |
| FIRST NIGHT AND INDUCTION | | |
| 3.3 | Did you feel safe on your first night here? | 67% 57% |
| 3.5 | Have you had an induction at this prison? | 84% 90% |
| <i>For those who have had an induction:</i> | | |
| 3.5 | Did your induction cover everything you needed to know about this prison? | 35% 48% |
| ON THE WING | | |
| 4.2 | Is your cell call bell normally answered within 5 minutes? | 18% 19% |
| 4.3 | On the wing or houseblock you currently live on: | |
| | - Do you normally have enough clean, suitable clothes for the week? | 28% 44% |
| | - Can you shower every day? | 94% 79% |
| | - Do you have clean sheets every week? | 41% 51% |
| | - Do you get cell cleaning materials every week? | 47% 48% |
| | - Is it normally quiet enough for you to relax or sleep at night? | 48% 59% |
| | - Can you get your stored property if you need it? | 25% 31% |

| |
|---------|
| 4% 6% |
| 0% 1% |
| 44% 62% |
| 41% 46% |
| 0% 7% |
| 9% 9% |
| 91% 81% |
| 91% 72% |
| 87% 91% |
| 56% 26% |
| 55% 60% |
| 82% 89% |
| 44% 46% |
| 23% 18% |
| 50% 39% |
| 86% 81% |
| 50% 49% |
| 46% 48% |
| 82% 52% |
| 33% 29% |

Shading is used to indicate statistical significance*, as follows:

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| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| | 25 and under | Over 25 |
|--|--------------|---------|
| | 33 | 122 |

| | 50 and over | Under 50 |
|--|-------------|----------|
| | 23 | 132 |

| FOOD AND CANTEEN | | |
|---|---|---------|
| 5.2 | Do you get enough to eat at meal-times always / most of the time? | 30% 35% |
| 5.3 | Does the shop / canteen sell the things that you need? | 67% 61% |
| RELATIONSHIPS WITH STAFF | | |
| 6.1 | Do most staff here treat you with respect? | 58% 73% |
| 6.2 | Are there any staff here you could turn to if you had a problem? | 68% 78% |
| 6.3 | In the last week, has any member of staff talked to you about how you are getting on? | 41% 45% |
| 6.6 | Do you feel that you are treated as an individual in this prison? | 42% 50% |
| FAITH | | |
| For those who have a religion: | | |
| 7.2 | Are your religious beliefs respected here? | 82% 75% |
| 7.3 | Are you able to speak to a Chaplain of your faith in private, if you want to? | 67% 79% |
| CONTACT WITH FAMILY AND FRIENDS | | |
| 8.1 | Have staff here encouraged you to keep in touch with your family / friends? | 19% 35% |
| 8.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | 50% 40% |
| 8.3 | Are you able to use a phone every day (if you have credit)? | 91% 95% |
| For those who get visits: | | |
| 8.7 | Are your visitors usually treated respectfully by staff? | 80% 74% |
| TIME OUT OF CELL | | |
| 9.2 | Do you usually spend less than 2 hours out of your cell on a typical weekday? | 31% 30% |
| | Do you usually spend 10 hours or more out of your cell on a typical weekday? | 0% 8% |
| For those who use the library: | | |
| 9.9 | Does the library have a wide enough range of materials to meet your needs? | 59% 75% |
| APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS | | |
| 10.1 | Is it easy for you to make an application? | 64% 81% |
| For those who have made an application: | | |
| 10.2 | Are applications usually dealt with fairly? | 48% 63% |
| 10.3 | Is it easy for you to make a complaint? | 38% 58% |
| For those who have made a complaint: | | |
| 10.4 | Are complaints usually dealt with fairly? | 19% 30% |
| 10.5 | Have you ever been prevented from making a complaint here when you wanted to? | 40% 35% |

| | |
|-----|-----|
| 55% | 31% |
| 73% | 60% |
| 83% | 68% |
| 96% | 73% |
| 48% | 43% |
| 68% | 45% |
| 73% | 77% |
| 80% | 76% |
| 36% | 30% |
| 30% | 44% |
| 96% | 94% |
| 80% | 75% |
| 30% | 30% |
| 9% | 6% |
| 71% | 72% |
| 86% | 76% |
| 79% | 57% |
| 57% | 53% |
| 44% | 25% |
| 20% | 39% |

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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| | Orange shading shows significant differences in demographics and background information |
| | No shading means that differences are not significant and may have occurred by chance |
| | Grey shading indicates that we have no valid data for this question |

* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| | 25 and under | Over 25 |
|--|--------------|---------|
| | 33 | 122 |

| | 50 and over | Under 50 |
|--|-------------|----------|
| | 23 | 132 |

| HEALTH CARE | | | |
|---|--|-----|-----|
| 11.1 | Is it very / quite easy to see: | | |
| | - Doctor? | 28% | 35% |
| | - Nurse? | 47% | 59% |
| | - Dentist? | 13% | 17% |
| | - Mental health workers? | 25% | 35% |
| For those who have mental health problems: | | | |
| 11.4 | Have you been helped with your mental health problems in this prison? | 45% | 49% |
| 11.5 | Do you think the overall quality of the health services here is very / quite good? | 42% | 47% |
| OTHER SUPPORT NEEDS | | | |
| For those who have a disability: | | | |
| 12.2 | Are you getting the support you need? | 40% | 29% |
| SAFETY | | | |
| 14.1 | Have you ever felt unsafe here? | 58% | 69% |
| 14.2 | Do you feel unsafe now? | 21% | 32% |
| 14.3 | Not experienced bullying / victimisation by other prisoners | 45% | 39% |
| 14.4 | If you were being bullied / victimised by other prisoners here, would you report it? | 30% | 33% |
| 14.5 | Not experienced bullying / victimisation by members of staff | 36% | 58% |
| 14.6 | If you were being bullied / victimised by staff here, would you report it? | 39% | 45% |
| BEHAVIOUR MANAGEMENT | | | |
| 15.1 | Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? | 42% | 50% |
| 15.2 | Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison? | 28% | 39% |
| 15.3 | Have you been physically restrained by staff in this prison, in the last 6 months? | 31% | 13% |
| 15.5 | Have you spent one or more nights in the segregation unit in this prison in the last 6 months? | 22% | 2% |
| EDUCATION, SKILLS AND WORK | | | |
| 16.3 | Do staff encourage you to attend education, training or work? | 30% | 51% |
| PLANNING AND PROGRESSION | | | |
| 17.1 | Do you have a custody plan? | 20% | 29% |
| For those who have a custody plan: | | | |
| 17.3 | Are staff helping you to achieve your objectives or targets? | 17% | 72% |
| PREPARATION FOR RELEASE | | | |
| For those who expect to be released in the next 3 months: | | | |
| 18.3 | Is anybody helping you to prepare for your release? | 39% | 62% |
| FINAL QUESTION ABOUT THIS PRISON | | | |
| 20.1 | Do you think your experiences in this prison have made you less likely to offend in the future? | 41% | 45% |

| | | | |
|--|-----|-----|--|
| | | | |
| | | | |
| | 35% | 33% | |
| | 64% | 55% | |
| | 9% | 18% | |
| | 36% | 33% | |
| | | | |
| | 67% | 46% | |
| | 59% | 44% | |
| | | | |
| | | | |
| | 56% | 27% | |
| | | | |
| | 57% | 69% | |
| | 30% | 30% | |
| | 48% | 39% | |
| | 50% | 29% | |
| | 76% | 49% | |
| | 59% | 40% | |
| | | | |
| | 64% | 46% | |
| | 50% | 34% | |
| | 0% | 20% | |
| | 0% | 7% | |
| | | | |
| | 58% | 45% | |
| | | | |
| | 38% | 25% | |
| | | | |
| | 86% | 57% | |
| | | | |
| | 38% | 60% | |
| | | | |
| | 52% | 43% | |

HMP Exeter 2018

Comparison of survey responses from different residential locations

In this table responses from B wing are compared with those from the rest of the establishment.

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| | B wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 29 | 127 |

| DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION | | | |
|---|--|-----|-----|
| 1.2 | Are you under 21 years of age? | 7% | 4% |
| | Are you 25 years of age or younger? | 17% | 23% |
| | Are you 50 years of age or older? | 21% | 12% |
| | Are you 70 years of age or older? | 0% | 0% |
| 1.3 | Are you from a minority ethnic group? | 4% | 7% |
| 1.4 | Have you been in this prison for less than 6 months? | 69% | 79% |
| 1.5 | Are you currently serving a sentence? | 52% | 65% |
| | Are you on recall? | 10% | 14% |
| 1.6 | Is your sentence less than 12 months? | 14% | 29% |
| | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 0% | 3% |
| 7.1 | Are you Muslim? | 0% | 2% |
| 11.3 | Do you have any mental health problems? | 55% | 61% |
| 12.1 | Do you consider yourself to have a disability? | 55% | 42% |
| 19.1 | Do you have any children under the age of 18? | 46% | 53% |
| 19.2 | Are you a foreign national? | 0% | 7% |
| 19.3 | Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) | 8% | 9% |
| 19.4 | Have you ever been in the armed services? | 4% | 8% |
| 19.5 | Is your gender female or non-binary? | 0% | 2% |
| 19.6 | Are you homosexual, bisexual or other sexual orientation? | 4% | 4% |
| 19.7 | Do you identify as transgender or transsexual? | 0% | 1% |

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| | |
|--|---|
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| | B wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 29 | 127 |

| ARRIVAL AND RECEPTION | | | |
|---|--|-----|-----|
| 2.1 | Were you given up-to-date information about this prison before you came here? | 32% | 19% |
| 2.2 | When you arrived at this prison, did you spend less than 2 hours in reception? | 31% | 27% |
| 2.3 | When you were searched in reception, was this done in a respectful way? | 93% | 80% |
| 2.4 | Overall, were you treated very / quite well in reception? | 86% | 71% |
| 2.5 | When you first arrived, did you have any problems? | 86% | 91% |
| 2.5 | Did you have problems with: | | |
| | - Getting phone numbers? | 45% | 46% |
| | - Contacting family? | 45% | 45% |
| | - Arranging care for children or other dependents? | 3% | 5% |
| | - Contacting employers? | 7% | 7% |
| | - Money worries? | 28% | 26% |
| | - Housing worries? | 28% | 31% |
| | - Feeling depressed? | 55% | 55% |
| | - Feeling suicidal? | 31% | 22% |
| | - Other mental health problems? | 24% | 42% |
| | - Physical health problems? | 17% | 25% |
| | - Drugs or alcohol (e.g. withdrawal)? | 21% | 43% |
| | - Getting medication? | 24% | 45% |
| | - Needing protection from other prisoners? | 24% | 9% |
| | - Lost or delayed property? | 3% | 17% |
| For those who had any problems when they first arrived: | | | |
| 2.6 | Did staff help you to deal with these problems? | 38% | 28% |
| FIRST NIGHT AND INDUCTION | | | |
| 3.1 | Before you were locked up on your first night, were you offered: | | |
| | - Tobacco or nicotine replacement? | 31% | 58% |
| | - Toiletries / other basic items? | 41% | 44% |
| | - A shower? | 7% | 8% |
| | - A free phone call? | 14% | 32% |
| | - Something to eat? | 66% | 78% |
| | - The chance to see someone from health care? | 52% | 64% |
| | - The chance to talk to a Listener or Samaritans? | 21% | 29% |
| | - Support from another prisoner (e.g. Insider or buddy)? | 17% | 22% |
| | - None of these? | 10% | 10% |
| 3.2 | On your first night in this prison, was your cell very / quite clean? | 21% | 24% |

Shading is used to indicate statistical significance*, as follows:

| | |
|--|---|
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

| | B wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 29 | 127 |

| | | | |
|---------------------------------|---|-----|-----|
| 3.3 | Did you feel safe on your first night here? | 35% | 63% |
| 3.4 | In your first few days here, did you get? | | |
| | - Access to the prison shop / canteen? | 15% | 27% |
| | - Free PIN phone credit? | 44% | 64% |
| | - Numbers put on your PIN phone? | 23% | 36% |
| 3.5 | Have you had an induction at this prison? | 86% | 89% |
| | For those who have had an induction: | | |
| 3.5 | Did your induction cover everything you needed to know about this prison? | 38% | 46% |
| ON THE WING | | | |
| 4.1 | Are you in a cell on your own? | 24% | 24% |
| 4.2 | Is your cell call bell normally answered within 5 minutes? | 25% | 15% |
| 4.3 | On the wing or houseblock you currently live on: | | |
| | - Do you normally have enough clean, suitable clothes for the week? | 26% | 44% |
| | - Can you shower every day? | 86% | 81% |
| | - Do you have clean sheets every week? | 24% | 54% |
| | - Do you get cell cleaning materials every week? | 61% | 45% |
| | - Is it normally quiet enough for you to relax or sleep at night? | 54% | 56% |
| | - Can you get your stored property if you need it? | 19% | 31% |
| 4.4 | Are the communal / shared areas of your wing or houseblock normally very / quite clean? | 52% | 42% |
| FOOD AND CANTEEN | | | |
| 5.1 | Is the quality of the food in this prison very / quite good? | 36% | 40% |
| 5.2 | Do you get enough to eat at meal-times always / most of the time? | 32% | 33% |
| 5.3 | Does the shop / canteen sell the things that you need? | 63% | 61% |
| RELATIONSHIPS WITH STAFF | | | |
| 6.1 | Do most staff here treat you with respect? | 71% | 69% |
| 6.2 | Are there any staff here you could turn to if you had a problem? | 86% | 72% |
| 6.3 | In the last week, has any member of staff talked to you about how you are getting on? | 55% | 40% |
| 6.4 | Do you have a personal officer? | 73% | 79% |
| | For those who have a personal officer: | | |
| 6.4 | Is your personal or named officer very / quite helpful? | 68% | 57% |
| 6.5 | Do you regularly see prison governors, directors or senior managers talking to prisoners? | 24% | 7% |
| 6.6 | Do you feel that you are treated as an individual in this prison? | 59% | 45% |
| 6.7 | Are prisoners here consulted about things like food, canteen, health care or wing issues? | 48% | 40% |
| | If so, do things sometimes change? | 64% | 35% |

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Number of completed questionnaires returned

| | B wing | Rest of the establishment |
|--|--------|---------------------------|
| | 29 | 127 |

| FAITH | | | |
|--|--|-----|-----|
| 7.1 | Do you have a religion? | 59% | 58% |
| For those who have a religion: | | | |
| 7.2 | Are your religious beliefs respected here? | 88% | 73% |
| 7.3 | Are you able to speak to a Chaplain of your faith in private, if you want to? | 88% | 72% |
| 7.4 | Are you able to attend religious services, if you want to? | 94% | 92% |
| CONTACT WITH FAMILY AND FRIENDS | | | |
| 8.1 | Have staff here encouraged you to keep in touch with your family / friends? | 43% | 28% |
| 8.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | 41% | 43% |
| 8.3 | Are you able to use a phone every day (if you have credit)? | 93% | 94% |
| 8.4 | Is it very / quite easy for your family and friends to get here? | 57% | 42% |
| 8.5 | Do you get visits from family/friends once a week or more? | 17% | 13% |
| For those who get visits: | | | |
| 8.6 | Do visits usually start and finish on time? | 58% | 56% |
| 8.7 | Are your visitors usually treated respectfully by staff? | 79% | 75% |
| TIME OUT OF CELL | | | |
| 9.1 | Do you know what the unlock and lock-up times are supposed to be here? | 83% | 80% |
| For those who know what the unlock and lock-up times are supposed to be: | | | |
| 9.1 | Are these times usually kept to? | 63% | 63% |
| 9.2 | Do you usually spend less than 2 hours out of your cell on a typical weekday? | 50% | 26% |
| | Do you usually spend 10 hours or more out of your cell on a typical weekday? | 0% | 8% |
| 9.3 | Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday? | 66% | 38% |
| | Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday? | 3% | 6% |
| 9.4 | Do you have time to do domestics more than 5 days in a typical week? | 31% | 40% |
| 9.5 | Do you get association more than 5 days in a typical week, if you want it? | 10% | 26% |
| 9.6 | Could you go outside for exercise more than 5 days in a typical week, if you wanted to? | 72% | 68% |
| 9.7 | Do you typically go to the gym twice a week or more? | 31% | 38% |
| 9.8 | Do you typically go to the library twice a week or more? | 17% | 13% |
| For those who use the library: | | | |
| 9.9 | Does the library have a wide enough range of materials to meet your needs? | 76% | 69% |
| APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS | | | |
| 10.1 | Is it easy for you to make an application? | 86% | 74% |
| For those who have made an application: | | | |
| 10.2 | Are applications usually dealt with fairly? | 64% | 58% |
| | Are applications usually dealt with within 7 days? | 54% | 53% |

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Number of completed questionnaires returned

| | B wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 29 | 127 |

| | | | |
|----------------------------|--|-----|-----|
| 10.3 | Is it easy for you to make a complaint? | 57% | 51% |
| | <i>For those who have made a complaint:</i> | | |
| 10.4 | Are complaints usually dealt with fairly? | 31% | 25% |
| | Are complaints usually dealt with within 7 days? | 25% | 23% |
| 10.5 | Have you ever been prevented from making a complaint here when you wanted to? | 37% | 36% |
| | <i>For those who need it, is it easy to:</i> | | |
| 10.6 | Communicate with your solicitor or legal representative? | 39% | 40% |
| | Attend legal visits? | 77% | 60% |
| | Get bail information? | 23% | 18% |
| | <i>For those who have had legal letters:</i> | | |
| 10.7 | Have staff here ever opened letters from your solicitor or legal representative when you were not present? | 46% | 46% |
| HEALTH CARE | | | |
| 11.1 | Is it very / quite easy to see: | | |
| | - Doctor? | 24% | 34% |
| | - Nurse? | 64% | 53% |
| | - Dentist? | 17% | 16% |
| | - Mental health workers? | 21% | 36% |
| 11.2 | Do you think the quality of the health service is very / quite good from: | | |
| | - Doctor? | 50% | 57% |
| | - Nurse? | 59% | 57% |
| | - Dentist? | 38% | 35% |
| | - Mental health workers? | 44% | 39% |
| 11.3 | Do you have any mental health problems? | 55% | 61% |
| | <i>For those who have mental health problems:</i> | | |
| 11.4 | Have you been helped with your mental health problems in this prison? | 44% | 49% |
| 11.5 | Do you think the overall quality of the health services here is very / quite good? | 38% | 48% |
| OTHER SUPPORT NEEDS | | | |
| 12.1 | Do you consider yourself to have a disability? | 55% | 42% |
| | <i>For those who have a disability:</i> | | |
| 12.2 | Are you getting the support you need? | 27% | 31% |
| 12.3 | Have you been on an ACCT in this prison? | 48% | 35% |
| | <i>For those who have been on an ACCT:</i> | | |
| 12.4 | Did you feel cared for by staff? | 50% | 55% |
| 12.5 | Is it very / quite easy for you to speak to a Listener if you need to? | 76% | 54% |

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| | 29 | 127 |

| ALCOHOL AND DRUGS | | | |
|--|--|-----|-----|
| 13.1 | Did you have an alcohol problem when you came into this prison? | 21% | 34% |
| For those who had / have an alcohol problem: | | | |
| 13.2 | Have you been helped with your alcohol problem in this prison? | 50% | 72% |
| 13.3 | Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)? | 28% | 54% |
| 13.4 | Have you developed a problem with illicit drugs since you have been in this prison? | 10% | 15% |
| 13.5 | Have you developed a problem with taking medication not prescribed to you since you have been in this prison? | 10% | 14% |
| For those who had / have a drug problem: | | | |
| 13.6 | Have you been helped with your drug problem in this prison? | 75% | 56% |
| 13.7 | Is it very / quite easy to get illicit drugs in this prison? | 48% | 63% |
| 13.8 | Is it very / quite easy to get alcohol in this prison? | 31% | 40% |
| SAFETY | | | |
| 14.1 | Have you ever felt unsafe here? | 83% | 64% |
| 14.2 | Do you feel unsafe now? | 32% | 29% |
| 14.3 | Have you experienced any of the following from other prisoners here: | | |
| | - Verbal abuse? | 54% | 47% |
| | - Threats or intimidation? | 39% | 39% |
| | - Physical assault? | 29% | 27% |
| | - Sexual assault? | 4% | 4% |
| | - Theft of canteen or property? | 50% | 41% |
| | - Other bullying / victimisation? | 36% | 22% |
| | - Not experienced any of these from prisoners here | 29% | 42% |
| 14.4 | If you were being bullied / victimised by other prisoners here, would you report it? | 55% | 26% |
| 14.5 | Have you experienced any of the following from staff here: | | |
| | - Verbal abuse? | 24% | 42% |
| | - Threats or intimidation? | 31% | 28% |
| | - Physical assault? | 17% | 15% |
| | - Sexual assault? | 3% | 1% |
| | - Theft of canteen or property? | 3% | 9% |
| | - Other bullying / victimisation? | 28% | 22% |
| | - Not experienced any of these from staff here | 59% | 50% |
| 14.6 | If you were being bullied / victimised by staff here, would you report it? | 45% | 42% |

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|--------|---------------------------|
| 29 | 127 |

| BEHAVIOUR MANAGEMENT | | | |
|---|--|------|-----|
| 15.1 | Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? | 46% | 48% |
| 15.2 | Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison? | 41% | 35% |
| 15.3 | Have you been physically restrained by staff in this prison, in the last 6 months? | 17% | 17% |
| For those who have been restrained in the last 6 months: | | | |
| 15.4 | Did anyone come and talk to you about it afterwards? | 0% | 20% |
| 15.5 | Have you spent one or more nights in the segregation unit in this prison in the last 6 months? | 4% | 9% |
| For those who have spent one or more nights in the segregation unit in the last 6 months: | | | |
| 15.6 | Were you treated well by segregation staff? | 100% | 40% |
| | Could you shower every day? | 0% | 50% |
| | Could you go outside for exercise every day? | 30% | |
| | Could you use the phone every day (if you had credit)? | 33% | |
| EDUCATION, SKILLS AND WORK | | | |
| 16.1 | In this prison, is it easy to get into the following activities: | | |
| | - Education? | 45% | 59% |
| | - Vocational or skills training? | 28% | 36% |
| | - Prison job? | 41% | 40% |
| | - Voluntary work outside of the prison? | 4% | 4% |
| | - Paid work outside of the prison? | 4% | 5% |
| 16.2 | In this prison, have you done the following activities: | | |
| | - Education? | 70% | 80% |
| | - Vocational or skills training? | 50% | 67% |
| | - Prison job? | 72% | 77% |
| | - Voluntary work outside of the prison? | 21% | 40% |
| | - Paid work outside of the prison? | 21% | 39% |
| For those who have done the following activities, do you think they will help you on release: | | | |
| | - Education? | 47% | 67% |
| | - Vocational or skills training? | 33% | 54% |
| | - Prison job? | 33% | 39% |
| | - Voluntary work outside of the prison? | 40% | 49% |
| | - Paid work outside of the prison? | 40% | 60% |
| 16.3 | Do staff encourage you to attend education, training or work? | 48% | 45% |

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|--|--------|---------------------------|
| | 29 | 127 |

| PLANNING AND PROGRESSION | | | |
|---|---|-----|------|
| 17.1 | Do you have a custody plan? | 29% | 26% |
| For those who have a custody plan: | | | |
| 17.2 | Do you understand what you need to do to achieve your objectives or targets? | 88% | 83% |
| 17.3 | Are staff helping you to achieve your objectives or targets? | 63% | 59% |
| 17.4 | In this prison, have you done: | | |
| | - Offending behaviour programmes? | 50% | 43% |
| | - Other programmes? | 50% | 52% |
| | - One to one work? | 63% | 46% |
| | - Been on a specialist unit? | 25% | 12% |
| | - ROTL - day or overnight release? | 13% | 8% |
| For those who have done the following, did they help you to achieve your objectives or targets: | | | |
| | - Offending behaviour programmes? | 50% | 83% |
| | - Other programmes? | 75% | 93% |
| | - One to one work? | 80% | 100% |
| | - Being on a specialist unit? | 50% | 100% |
| | - ROTL - day or overnight release? | 0% | 100% |
| PREPARATION FOR RELEASE | | | |
| 18.1 | Do you expect to be released in the next 3 months? | 19% | 40% |
| For those who expect to be released in the next 3 months: | | | |
| 18.2 | Is this prison very / quite near to your home area or intended release address? | 75% | 55% |
| 18.3 | Is anybody helping you to prepare for your release? | 40% | 57% |
| 18.4 | Do you need help to sort out the following for when you are released: | | |
| | - Finding accommodation? | 20% | 70% |
| | - Getting employment? | 60% | 57% |
| | - Setting up education or training? | 60% | 59% |
| | - Arranging benefits? | 40% | 67% |
| | - Sorting out finances? | 40% | 57% |
| | - Support for drug or alcohol problems? | 40% | 57% |
| | - Health / mental Health support? | 60% | 64% |
| | - Social care support? | 60% | 47% |
| | - Getting back in touch with family or friends? | 40% | 41% |

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| | B wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 29 | 127 |

| | | | |
|----------------------------------|---|-----|-----|
| 18.4 | Are you getting help to sort out the following for when you are released, if you need it: | | |
| | - Finding accommodation? | 0% | 41% |
| | - Getting employment? | 0% | 23% |
| | - Setting up education or training? | 0% | 19% |
| | - Arranging benefits? | 0% | 30% |
| | - Sorting out finances? | 0% | 19% |
| | - Support for drug or alcohol problems? | 50% | 56% |
| | - Health / mental Health support? | 0% | 21% |
| | - Social care support? | 0% | 19% |
| | - Getting back in touch with family or friends? | 0% | 28% |
| FINAL QUESTION ABOUT THIS PRISON | | | |
| 20.1 | Do you think your experiences in this prison have made you less likely to offend in the future? | 48% | 43% |

HMP Exeter 2018

Comparison of survey responses from different residential locations

In this table responses from D wing are compared with those from the rest of the establishment.

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Number of completed questionnaires returned

| | D wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 22 | 134 |

| DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION | | | |
|---|--|-----|-----|
| 1.2 | Are you under 21 years of age? | 5% | 5% |
| | Are you 25 years of age or younger? | 14% | 23% |
| | Are you 50 years of age or older? | 18% | 13% |
| | Are you 70 years of age or older? | 0% | 0% |
| 1.3 | Are you from a minority ethnic group? | 5% | 6% |
| 1.4 | Have you been in this prison for less than 6 months? | 57% | 80% |
| 1.5 | Are you currently serving a sentence? | 57% | 63% |
| | Are you on recall? | 10% | 14% |
| 1.6 | Is your sentence less than 12 months? | 19% | 28% |
| | Are you here under an indeterminate sentence for public protection (IPP prisoner)? | 5% | 2% |
| 7.1 | Are you Muslim? | 0% | 2% |
| 11.3 | Do you have any mental health problems? | 40% | 63% |
| 12.1 | Do you consider yourself to have a disability? | 20% | 48% |
| 19.1 | Do you have any children under the age of 18? | 55% | 52% |
| 19.2 | Are you a foreign national? | 11% | 5% |
| 19.3 | Are you from a traveller community? (e.g. Gypsy, Roma, Irish Traveller) | 0% | 10% |
| 19.4 | Have you ever been in the armed services? | 10% | 7% |
| 19.5 | Is your gender female or non-binary? | 5% | 1% |
| 19.6 | Are you homosexual, bisexual or other sexual orientation? | 5% | 4% |
| 19.7 | Do you identify as transgender or transsexual? | 0% | 1% |

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Number of completed questionnaires returned

| | D wing | Rest of the establishment |
|--|--------|---------------------------|
| | 22 | 134 |

| ARRIVAL AND RECEPTION | | | |
|---|--|-----|-----|
| 2.1 | Were you given up-to-date information about this prison before you came here? | 32% | 20% |
| 2.2 | When you arrived at this prison, did you spend less than 2 hours in reception? | 36% | 26% |
| 2.3 | When you were searched in reception, was this done in a respectful way? | 82% | 82% |
| 2.4 | Overall, were you treated very / quite well in reception? | 77% | 73% |
| 2.5 | When you first arrived, did you have any problems? | 86% | 91% |
| 2.5 | Did you have problems with: | | |
| | - Getting phone numbers? | 43% | 46% |
| | - Contacting family? | 38% | 46% |
| | - Arranging care for children or other dependents? | 10% | 4% |
| | - Contacting employers? | 5% | 8% |
| | - Money worries? | 24% | 27% |
| | - Housing worries? | 19% | 32% |
| | - Feeling depressed? | 52% | 56% |
| | - Feeling suicidal? | 10% | 26% |
| | - Other mental health problems? | 29% | 41% |
| | - Physical health problems? | 10% | 26% |
| | - Drugs or alcohol (e.g. withdrawal)? | 33% | 40% |
| | - Getting medication? | 48% | 40% |
| | - Needing protection from other prisoners? | 10% | 12% |
| | - Lost or delayed property? | 19% | 14% |
| For those who had any problems when they first arrived: | | | |
| 2.6 | Did staff help you to deal with these problems? | 35% | 28% |
| FIRST NIGHT AND INDUCTION | | | |
| 3.1 | Before you were locked up on your first night, were you offered: | | |
| | - Tobacco or nicotine replacement? | 55% | 53% |
| | - Toiletries / other basic items? | 60% | 41% |
| | - A shower? | 10% | 8% |
| | - A free phone call? | 40% | 26% |
| | - Something to eat? | 90% | 73% |
| | - The chance to see someone from health care? | 55% | 63% |
| | - The chance to talk to a Listener or Samaritans? | 15% | 30% |
| | - Support from another prisoner (e.g. Insider or buddy)? | 25% | 20% |
| | - None of these? | 5% | 11% |
| 3.2 | On your first night in this prison, was your cell very / quite clean? | 20% | 24% |

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| | D wing | Rest of the establishment |
|---|--------|---------------------------|
| Number of completed questionnaires returned | 22 | 134 |

| | | | |
|---------------------------------|---|-----|-----|
| 3.3 | Did you feel safe on your first night here? | 67% | 57% |
| 3.4 | In your first few days here, did you get? | | |
| | - Access to the prison shop / canteen? | 26% | 25% |
| | - Free PIN phone credit? | 90% | 55% |
| | - Numbers put on your PIN phone? | 40% | 33% |
| 3.5 | Have you had an induction at this prison? | 95% | 87% |
| | For those who have had an induction: | | |
| 3.5 | Did your induction cover everything you needed to know about this prison? | 58% | 42% |
| ON THE WING | | | |
| 4.1 | Are you in a cell on your own? | 55% | 20% |
| 4.2 | Is your cell call bell normally answered within 5 minutes? | 25% | 16% |
| 4.3 | On the wing or houseblock you currently live on: | | |
| | - Do you normally have enough clean, suitable clothes for the week? | 90% | 33% |
| | - Can you shower every day? | 90% | 81% |
| | - Do you have clean sheets every week? | 85% | 42% |
| | - Do you get cell cleaning materials every week? | 63% | 45% |
| | - Is it normally quiet enough for you to relax or sleep at night? | 85% | 50% |
| | - Can you get your stored property if you need it? | 45% | 26% |
| 4.4 | Are the communal / shared areas of your wing or houseblock normally very / quite clean? | 55% | 42% |
| FOOD AND CANTEEN | | | |
| 5.1 | Is the quality of the food in this prison very / quite good? | 50% | 37% |
| 5.2 | Do you get enough to eat at meal-times always / most of the time? | 45% | 31% |
| 5.3 | Does the shop / canteen sell the things that you need? | 40% | 65% |
| RELATIONSHIPS WITH STAFF | | | |
| 6.1 | Do most staff here treat you with respect? | 81% | 68% |
| 6.2 | Are there any staff here you could turn to if you had a problem? | 91% | 72% |
| 6.3 | In the last week, has any member of staff talked to you about how you are getting on? | 38% | 44% |
| 6.4 | Do you have a personal officer? | 90% | 76% |
| | For those who have a personal officer: | | |
| 6.4 | Is your personal or named officer very / quite helpful? | 72% | 57% |
| 6.5 | Do you regularly see prison governors, directors or senior managers talking to prisoners? | 10% | 10% |
| 6.6 | Do you feel that you are treated as an individual in this prison? | 50% | 47% |
| 6.7 | Are prisoners here consulted about things like food, canteen, health care or wing issues? | 67% | 38% |
| | If so, do things sometimes change? | 36% | 44% |

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Number of completed questionnaires returned

| | D wing | Rest of the establishment |
|--|--------|---------------------------|
| | 22 | 134 |

| FAITH | | | |
|--|--|------|-----|
| 7.1 | Do you have a religion? | 76% | 56% |
| For those who have a religion: | | | |
| 7.2 | Are your religious beliefs respected here? | 88% | 73% |
| 7.3 | Are you able to speak to a Chaplain of your faith in private, if you want to? | 94% | 71% |
| 7.4 | Are you able to attend religious services, if you want to? | 100% | 91% |
| CONTACT WITH FAMILY AND FRIENDS | | | |
| 8.1 | Have staff here encouraged you to keep in touch with your family / friends? | 29% | 31% |
| 8.2 | Have you had any problems with sending or receiving mail (letters or parcels)? | 38% | 43% |
| 8.3 | Are you able to use a phone every day (if you have credit)? | 100% | 92% |
| 8.4 | Is it very / quite easy for your family and friends to get here? | 43% | 45% |
| 8.5 | Do you get visits from family/friends once a week or more? | 14% | 13% |
| For those who get visits: | | | |
| 8.6 | Do visits usually start and finish on time? | 44% | 60% |
| 8.7 | Are your visitors usually treated respectfully by staff? | 69% | 78% |
| TIME OUT OF CELL | | | |
| 9.1 | Do you know what the unlock and lock-up times are supposed to be here? | 95% | 78% |
| For those who know what the unlock and lock-up times are supposed to be: | | | |
| 9.1 | Are these times usually kept to? | 74% | 61% |
| 9.2 | Do you usually spend less than 2 hours out of your cell on a typical weekday? | 5% | 35% |
| | Do you usually spend 10 hours or more out of your cell on a typical weekday? | 40% | 2% |
| 9.3 | Do you usually spend less than 2 hours out of your cell on a typical Saturday or Sunday? | 14% | 48% |
| | Do you usually spend 10 hours or more out of your cell on a typical Saturday or Sunday? | 33% | 1% |
| 9.4 | Do you have time to do domestics more than 5 days in a typical week? | 81% | 31% |
| 9.5 | Do you get association more than 5 days in a typical week, if you want it? | 68% | 16% |
| 9.6 | Could you go outside for exercise more than 5 days in a typical week, if you wanted to? | 84% | 66% |
| 9.7 | Do you typically go to the gym twice a week or more? | 60% | 33% |
| 9.8 | Do you typically go to the library twice a week or more? | 5% | 16% |
| For those who use the library: | | | |
| 9.9 | Does the library have a wide enough range of materials to meet your needs? | 87% | 68% |
| APPLICATIONS, COMPLAINTS AND LEGAL RIGHTS | | | |
| 10.1 | Is it easy for you to make an application? | 95% | 74% |
| For those who have made an application: | | | |
| 10.2 | Are applications usually dealt with fairly? | 74% | 57% |
| | Are applications usually dealt with within 7 days? | 50% | 54% |

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| 10.3 | Is it easy for you to make a complaint? | 55% | 52% |
| | <i>For those who have made a complaint:</i> | | |
| 10.4 | Are complaints usually dealt with fairly? | 44% | 24% |
| | Are complaints usually dealt with within 7 days? | 14% | 24% |
| 10.5 | Have you ever been prevented from making a complaint here when you wanted to? | 42% | 36% |
| | <i>For those who need it, is it easy to:</i> | | |
| 10.6 | Communicate with your solicitor or legal representative? | 53% | 38% |
| | Attend legal visits? | 71% | 63% |
| | Get bail information? | 19% | 19% |
| | <i>For those who have had legal letters:</i> | | |
| 10.7 | Have staff here ever opened letters from your solicitor or legal representative when you were not present? | 22% | 50% |
| HEALTH CARE | | | |
| 11.1 | Is it very / quite easy to see: | | |
| | - Doctor? | 32% | 33% |
| | - Nurse? | 63% | 54% |
| | - Dentist? | 37% | 13% |
| | - Mental health workers? | 28% | 34% |
| 11.2 | Do you think the quality of the health service is very / quite good from: | | |
| | - Doctor? | 68% | 54% |
| | - Nurse? | 63% | 56% |
| | - Dentist? | 63% | 31% |
| | - Mental health workers? | 50% | 39% |
| 11.3 | Do you have any mental health problems? | 40% | 63% |
| | <i>For those who have mental health problems:</i> | | |
| 11.4 | Have you been helped with your mental health problems in this prison? | 38% | 49% |
| 11.5 | Do you think the overall quality of the health services here is very / quite good? | 60% | 43% |
| OTHER SUPPORT NEEDS | | | |
| 12.1 | Do you consider yourself to have a disability? | 20% | 48% |
| | <i>For those who have a disability:</i> | | |
| 12.2 | Are you getting the support you need? | 50% | 28% |
| 12.3 | Have you been on an ACCT in this prison? | 16% | 41% |
| | <i>For those who have been on an ACCT:</i> | | |
| 12.4 | Did you feel cared for by staff? | 67% | 53% |
| 12.5 | Is it very / quite easy for you to speak to a Listener if you need to? | 70% | 56% |

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| ALCOHOL AND DRUGS | | | |
|--|--|-----|-----|
| 13.1 | Did you have an alcohol problem when you came into this prison? | 30% | 32% |
| For those who had / have an alcohol problem: | | | |
| 13.2 | Have you been helped with your alcohol problem in this prison? | 80% | 68% |
| 13.3 | Did you have a drug problem when you came into this prison (including illicit drugs and medication not prescribed to you)? | 50% | 49% |
| 13.4 | Have you developed a problem with illicit drugs since you have been in this prison? | 15% | 14% |
| 13.5 | Have you developed a problem with taking medication not prescribed to you since you have been in this prison? | 5% | 15% |
| For those who had / have a drug problem: | | | |
| 13.6 | Have you been helped with your drug problem in this prison? | 80% | 55% |
| 13.7 | Is it very / quite easy to get illicit drugs in this prison? | 70% | 59% |
| 13.8 | Is it very / quite easy to get alcohol in this prison? | 40% | 38% |
| SAFETY | | | |
| 14.1 | Have you ever felt unsafe here? | 57% | 69% |
| 14.2 | Do you feel unsafe now? | 15% | 32% |
| 14.3 | Have you experienced any of the following from other prisoners here: | | |
| | - Verbal abuse? | 56% | 48% |
| | - Threats or intimidation? | 28% | 40% |
| | - Physical assault? | 22% | 28% |
| | - Sexual assault? | 6% | 4% |
| | - Theft of canteen or property? | 50% | 42% |
| | - Other bullying / victimisation? | 28% | 24% |
| | - Not experienced any of these from prisoners here | 33% | 40% |
| 14.4 | If you were being bullied / victimised by other prisoners here, would you report it? | 32% | 32% |
| 14.5 | Have you experienced any of the following from staff here: | | |
| | - Verbal abuse? | 47% | 37% |
| | - Threats or intimidation? | 26% | 29% |
| | - Physical assault? | 16% | 15% |
| | - Sexual assault? | 0% | 2% |
| | - Theft of canteen or property? | 11% | 7% |
| | - Other bullying / victimisation? | 26% | 23% |
| | - Not experienced any of these from staff here | 47% | 52% |
| 14.6 | If you were being bullied / victimised by staff here, would you report it? | 56% | 40% |

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| BEHAVIOUR MANAGEMENT | | | |
|---|--|------|-----|
| 15.1 | Do the incentives or rewards in this prison (e.g. enhanced status) encourage you to behave well? | 70% | 44% |
| 15.2 | Do you feel you have been treated fairly in the behaviour management scheme (e.g. IEP) in this prison? | 58% | 33% |
| 15.3 | Have you been physically restrained by staff in this prison, in the last 6 months? | 5% | 19% |
| For those who have been restrained in the last 6 months: | | | |
| 15.4 | Did anyone come and talk to you about it afterwards? | 0% | 17% |
| 15.5 | Have you spent one or more nights in the segregation unit in this prison in the last 6 months? | 0% | 9% |
| For those who have spent one or more nights in the segregation unit in the last 6 months: | | | |
| 15.6 | Were you treated well by segregation staff? | | 46% |
| | Could you shower every day? | | 46% |
| | Could you go outside for exercise every day? | | 30% |
| | Could you use the phone every day (if you had credit)? | | 33% |
| EDUCATION, SKILLS AND WORK | | | |
| 16.1 | In this prison, is it easy to get into the following activities: | | |
| | - Education? | 84% | 52% |
| | - Vocational or skills training? | 58% | 30% |
| | - Prison job? | 70% | 36% |
| | - Voluntary work outside of the prison? | 5% | 3% |
| | - Paid work outside of the prison? | 5% | 4% |
| 16.2 | In this prison, have you done the following activities: | | |
| | - Education? | 88% | 77% |
| | - Vocational or skills training? | 81% | 62% |
| | - Prison job? | 100% | 72% |
| | - Voluntary work outside of the prison? | 50% | 35% |
| | - Paid work outside of the prison? | 50% | 33% |
| For those who have done the following activities, do you think they will help you on release: | | | |
| | - Education? | 60% | 64% |
| | - Vocational or skills training? | 39% | 54% |
| | - Prison job? | 24% | 41% |
| | - Voluntary work outside of the prison? | 50% | 47% |
| | - Paid work outside of the prison? | 63% | 57% |
| 16.3 | Do staff encourage you to attend education, training or work? | 67% | 43% |

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| PLANNING AND PROGRESSION | | | |
|---|---|------|-----|
| 17.1 | Do you have a custody plan? | 42% | 24% |
| For those who have a custody plan: | | | |
| 17.2 | Do you understand what you need to do to achieve your objectives or targets? | 100% | 80% |
| 17.3 | Are staff helping you to achieve your objectives or targets? | 63% | 59% |
| 17.4 | In this prison, have you done: | | |
| | - Offending behaviour programmes? | 50% | 43% |
| | - Other programmes? | 63% | 48% |
| | - One to one work? | 50% | 50% |
| | - Been on a specialist unit? | 17% | 15% |
| | - ROTL - day or overnight release? | 0% | 11% |
| For those who have done the following, did they help you to achieve your objectives or targets: | | | |
| | - Offending behaviour programmes? | 75% | 75% |
| | - Other programmes? | 100% | 85% |
| | - One to one work? | 100% | 93% |
| | - Being on a specialist unit? | 100% | 75% |
| | - ROTL - day or overnight release? | 67% | 67% |
| PREPARATION FOR RELEASE | | | |
| 18.1 | Do you expect to be released in the next 3 months? | 26% | 37% |
| For those who expect to be released in the next 3 months: | | | |
| 18.2 | Is this prison very / quite near to your home area or intended release address? | 40% | 59% |
| 18.3 | Is anybody helping you to prepare for your release? | 80% | 52% |
| 18.4 | Do you need help to sort out the following for when you are released: | | |
| | - Finding accommodation? | 80% | 63% |
| | - Getting employment? | 60% | 57% |
| | - Setting up education or training? | 60% | 59% |
| | - Arranging benefits? | 60% | 64% |
| | - Sorting out finances? | 40% | 57% |
| | - Support for drug or alcohol problems? | 50% | 56% |
| | - Health / mental Health support? | 50% | 65% |
| | - Social care support? | 0% | 52% |
| | - Getting back in touch with family or friends? | 50% | 40% |

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| | | | |
|----------------------------------|---|------|-----|
| 18.4 | Are you getting help to sort out the following for when you are released, if you need it: | | |
| | - Finding accommodation? | 75% | 35% |
| | - Getting employment? | 0% | 23% |
| | - Setting up education or training? | 0% | 19% |
| | - Arranging benefits? | 67% | 24% |
| | - Sorting out finances? | 0% | 19% |
| | - Support for drug or alcohol problems? | 100% | 52% |
| | - Health / mental Health support? | 0% | 20% |
| | - Social care support? | | 17% |
| | - Getting back in touch with family or friends? | 0% | 28% |
| FINAL QUESTION ABOUT THIS PRISON | | | |
| 20.1 | Do you think your experiences in this prison have made you less likely to offend in the future? | 56% | 42% |